

**BaltCityPrevention** 

# Fact sheet (Liepaja City Council; Latvia)

**Intervention theme:** Overweight

**User group:** Adolescents (11 to 17 – year – old)

**Used methods:** Motivational Interviewing, different focus methods,

group therapy, health examination, follow-up

appointments, healthy nutrition groups, physical

activity groups, educational meetings

**Used eTools:** Life and Activity Tracker - smartwatch (only an existing

eTool is used)

## **Further information on the pilot:**

Our partner PHA from Latvia is the "Liepaja City Council". The user group at our Latvian partner is seen holistically and therefore includes not only children and adolescents between the ages of 11 and 17 years but also their parents.

The aim of the pilot intervention is to minimize and prevent obesity in children and adolescents. For this approach, the partners will conduct tutorials with families on two different topics. On the one hand, the children and their families learn how to handle food properly. The focus is on learning what it means to eat healthily, what is the food and products which are preferable to lose or maintain a healthy weight.

The other topic of movement is taken up. Families are taught the important role of exercise and sport in weight loss. In this collaboration, the partners work with fitness trackers from Garmin. The users should test them and evaluate their behavioral changes in relation to the testing. Mentors support the user groups throughout the pilot process. They are there to answer questions and note successes, give motivation and find hook points in terms of participation of the



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program. For the latter, the "motivational interviewing" method is used. Nevertheless, with this intervention a large part lies in the personal responsibility of the user group itself. The high level of self-responsibility throughout the pilot phase ensures that the participants can implement the knowledge they have learnt in a sustainable manner and reduce their weight in the long term.

The methods used and the intervention model applied will be evaluated and adapted during and after the pilot phase in order to increase user-friendliness and implementability.

## **Results from the pilot:**

- 1. The overall motivation of the family and the awareness of the whole family about the topic is very important for the results because the child needs support in family;
- 2. Six out of eight children will continue physical activity in some kind of sports (also parental initiative) pilot developed awareness of the importance of physical activity in everyday life; parents (mostly mothers) also started physical activity classes outside the Project;
- 3. As the questionnaire showed smartwatch was not the biggest motivator for doing sports;
- 4. The program succeeded in reducing the weight and circumference of children (average waist 8 cm; average hips 29.5 cm (record 70 cm)); Lost weight average 3.8 kg (record 12 kg).
- 5. Improved self-esteem, ability to complete the task till the end;
- 7. The second phase of the pilot participants, especially children, liked better, which can be explained by feeling safer in the new environment, improvement of skills and abilities, the bound between team and children has been raised.



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- 8. After the second phase of the Pilot, questionnaire showed that children like program more that parents, after first phase parents liked program better. It can be explained that children were in smaller groups (because of the huge drop out after first phase) and they had used to new conditions and support team.
- 9. Children and parents physical activity classes liked the most, nutrition and couching classes less than physical activity classes.
- 10. Eating and physical activity habits for parents changed more yes than no, but for children both yes.
- 11. Most of the families would love to continue the program, especially children after the second phase.

## Tips /lessons learned:

- 1. Co-financing of the program from the family to raise responsibility and prevent huge drop-out;
- 2. Physical activity classes organise three times a week; pshycological classes once a week;
- 3. Children which has finished first pilot can be motivators and mentors to new participants involved in the new program. Experience sharing.
- 4. It would be necessary to involve both parents to ensure more holistic approach for the whole family to change habits (in first pilot mothers were more involved themselves than fathers).