

HEALTH 4 EU kids

Your Kids' Health, Our Priority

MODULE 1

Session 1.3: The perspectives of stakeholders and experts on transferability, sustainability and scalability of Joint Actions and best practices





1.3.1 Stakeholder Consultation report: transferability, sustainability, and scalability of best practices

Introduction

On October 25, 2024, an online Stakeholder Consultation was held as part of the European project Health4EUkids, with the aim of discussing strategies for the transferability, sustainability, and scalability of the best practices **Grünau Moves** and **Smart Family**.

Participating Stakeholder groups

A total of 40 people with expertise at various levels and in various professional fields participated in the Stakeholder Consultation. The group included seven members of the project's Scientific Advisory Board, 19 people with expertise in the two Best Practices and/or involved in their implementation, and 14 representatives of interest groups from various organisations and institutional levels, such as professional associations and scientific societies, local associations active in municipalities, child development and obesity prevention, local and regional health authorities, universities, policy departments, public health bodies and research institutes. Overall, participants came from eight European countries: Spain, Finland, Italy, Malta, Croatia, Greece, Slovenia and Poland.

Summary of best practices

Grünau Moves is a multilevel practice based on health promotion within communities. It aims to create health-promoting environments, increase physical activity, and improve nutrition among families and children, also by building local networks. Implemented in vulnerable neighborhoods in various European countries, *Grünau Moves* involves the local adaptation of a model originally developed in Leipzig, Germany. The project includes the creation of health networks, participatory assessment of contexts, identification of obesogenic environmental determinants, and the development of community actions. The methodology has been simplified compared to the original model to better fit available resources and time constraints. Participatory monitoring tools and co-creation methodologies for action planning have been introduced.

Smart Family targets healthcare professionals and policymakers. Its goal is to change attitudes and support families in creating healthier lifestyles. The methodology includes co-creation of action plans with target groups, staff training to motivate and support families, and the establishment of a three-phase evaluation framework (pre-implementation, implementation, maintenance). The approach aims at the systemic integration of good practices within existing services, emphasizing the need for dynamic, adaptive processes based on local contexts.

Discussion on the SWOT analysis results

During the meeting, the SWOT analysis conducted by the Italian National Institute of Health (ISS) was presented, focusing on transferability, sustainability, and scalability of the two best practices.

Regarding **transferability**, challenges emerged in aligning goals and priorities among various stakeholders involved. The lack of a shared vision and the adoption of top-down approaches often hindered the adaptation of practices in different contexts. Additionally, insufficient funding and unclear definition of roles were identified as major barriers.

The **sustainability** of practices faced similar challenges. The main difficulty was the absence of longterm funding and the discontinuity of key staff and stakeholders. Moreover, without strong political support and real cross-sectoral integration, the maintenance of initiatives is compromised.

In terms of **scalability**, the shortage of adequate human resources and the lack of up-to-date epidemiological data—essential for expanding interventions to a broader audience—were highlighted. Bureaucratic difficulties and limited community interest also posed significant obstacles.

The interactive discussion with the participants highlighted key elements for the future success of the initiatives. It was reiterated that sharing a common vision is an essential starting point, as is the importance of ongoing co-creation among all individuals who are, directly or indirectly, involved. Another strong recommendation was the need to integrate practices within existing strategies and policies to ensure their long-term continuity. In this context, the key role of political advocacy—both at national and European levels—was underlined to promote regulations that support health-promoting environments. Continuous staff training, systematic documentation of experiences, and ongoing monitoring of interventions were identified as fundamental pillars. Finally, the need to counteract the stigma related to childhood obesity through empathetic and inclusive communication involving the entire community—not just individuals or single families—was considered equally crucial.

Conclusion

The insights that emerged were used to further refine the strategies through the Delphi process, which subsequently involved groups of experts in a series of iterative consultations. Moreover, they are valuable for strengthening European regulations in support of health promotion and for widely disseminating the results and materials collected during the workshop, thus promoting ongoing dialogue among stakeholders.