

Your Kids' Health, Our Priority

Best Practices in action: how to transfer, implement, and sustain effective health promotion interventions for children (0-12)

Module

"Grunau Moves: a Best Practice to promote health and prevent obesity in children"







Best Practices in action: how to transfer, implement, and sustain effective health promotion interventions for children (0-12)

HEALTH 4 EU kids

Your Kids' Health, Our Priority

Unit 2.1.2 Grünau Moves: General Overview "How Grunau Moves has been transferred in Health4EUkids"

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Joint Action

Implementation Approach:

- Pilot projects in both urban and rural settings
- Involve municipalities, districts, and neighborhoods

Key Features:

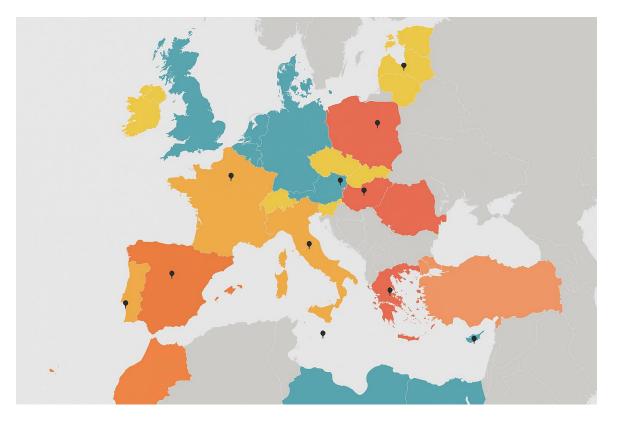
- Establish local health networks
- Actively involve schools, families, children, local authorities, community centers, and healthcare services

Focus Areas:

- Empowerment of local communities
- Community capacity-building
- Shifting public health policy to a bottom-up approach







LEAVE THIS SQUARE
EMPTY FOR THE
SPEAKER'S VIDEO



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Activities:

- Needs assessment
- Health asset mapping
- Co-designing local action plans tailored to community needs
- Implement local actions
- 5. Process, outcomes, and impact evaluation









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- Materials at your disposal:
 - Implementation Plan Guide
 - "Living Healthy Tool" for structured conversation in a discussion group
 - Community Action For Health (CAFH) Resources
 - BP-owners Training Pills
 - E-Learning Course

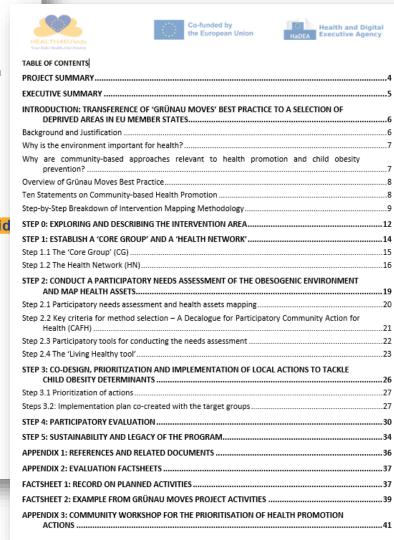


Organisation [FISABIO – FUNDACION PARA EL FOMENTO DE LA INVESTIGACION SANITARIA Y BIOMEDICA DE LA COMUNITAT VALENCIANA]

D5.1 Implementation plan guide in disadvantaged areas

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- STEP 1: ESTABLISH A 'CORE GROUP' AND A **'HEALTH NETWORK':**
 - Form a Core Group (CG): A compact, long-term team (6–8 members) of key local stakeholders and community leaders responsible for mobilizing the community and supporting sustainable health initiatives
 - Build a Health Network (HN): A broader, inclusive, interdisciplinary forum of local actors to co-create and implement health-promotion actions targeting child obesity
 - Secure political & institutional buy-in: Engage city hall, map local stakeholders, and use community interviews to identify natural leaders and key organizations
 - Develop a stakeholder engagement plan: Guided by CG input, focus on leveraging local assets and ensuring long-term community ownership







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STEP 2: CONDUCT A PARTICIPATORY NEEDS **ASSESSMENT AND MAP HEALTH ASSETS:**

- Conduct Participatory Needs Assessment: Involve residents, community groups, and stakeholders using interviews, focus groups, and discussions to explore health concerns, needs, and local resources related to children's health and the living environment
- Map Health Assets: Identify and categorize local health assets (resources, institutions, and community strengths) and understand how these can be mobilized to address health needs and reduce obesity risks in the community
- Use Participatory Tools: Use appropriate participatory tools to gather input from residents and stakeholders, ensuring that the needs assessment and health asset mapping are community-driven and context-specific
- Analyze Determinants: Categorize health determinants at individual, organizational, and environmental levels, and create a logic model to visualize the connections between environmental/social conditions and children's health behaviors





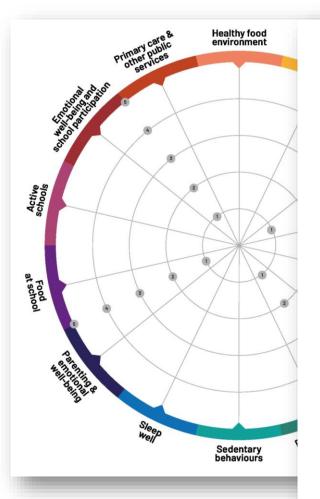


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• The "Living Healthy Tool":

- It includes 14 dimensions. Easy to use!
- It allows a structured **conversation** in a discussion group around the main factors influencing child obesity
- It assists in considering the physical, emotional and social **aspects** of key settings
- Several versions and languages: adults, kids (6-12) y), brief, protocol for vulnerable (and illiterate) populations









Healthy food environment

Let's talk about the food you find around you every day. Think about the stores you visit when you go food shopping or the shops you see on the street when you're out

How healthy is the food I see when I'm out in my place?

You might want to think about things like:

- What type of stores I go when I go food shopping?
- Can I walk to the store where I go food shopping?
- Is it easy to find fresh fruits and vegetables in the store where I buy the groceries?
- Is it easy to find other healthy foods in the store where I buy the groceries?
- Do most packaged foods have a label to see their healthiness?
- Do you see signs or ads in the store that encourage you to take the healthy foods instead

municipal market greengrocers butcher fishmonger grocery store supermarket I walk to the food store store signs and ads help us choose the healthy foods

What score would you give to this question?















What is good now?

What could be better?



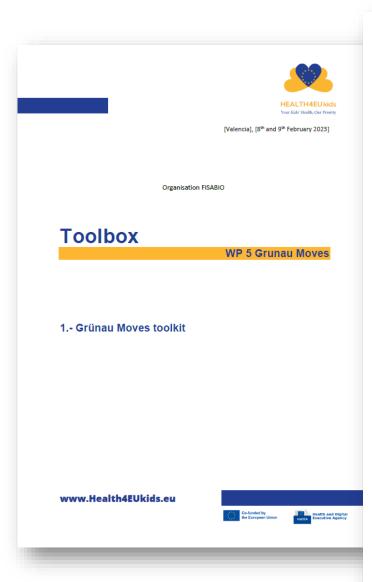




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- Community Action For Health (CAFH) Resources:
 - Socio-spatial methods, such as subjective map, PhotoVoice...
 - Empirical research tools to assess the physical environment, like EAPRS Direct Observation Tool, SOPARC...
 - Other resources









1. GETTING TO KNOW THE COMMUNITY

Getting to know the community (<u>Padlet link</u>)
(All resources are available in the project's shared folder, here.)

2.1.1. Social-spatial methods:

- Subjective map. Subjective maps are drawn or painted by children or young themselves and show their habitats. (Access <u>here.</u>)
- Social room inspection (Access <u>here</u>.)
- · Photovoice (Access here.)
- Needle method. To map with different coloured needles or sticky dots the places, spots, routes, its community use, relevance, safeness,... (Access here.)

2.1.2. Classical empirical research methods:

- Parents survey (Access <u>here</u>.)
- EAPRS Direct Observation Tool. This tool is designed to allow for evaluation of the physical environment of parks and playgrounds. (Access guidebook, tool scoring, and picture guide.)
- Observation tools park use SOPARC (Access here.)
- Observational Instruments Park Audit Tool (OPAT) (Access here.)
- · Burgoine's Food classification (Access here.)
- Guided Interview Day-Care (Access <u>here</u>.)

2.1.3. Secondary data:

- . Health data (children) ->school entrance examination provided by the health department
- Socioeconomic data -> Office for Statistics and Elections
- Spatial data (GIS of the city of Leipzig and the EU)

2.1.4. Other resources:

- Excel file "Needs Assessment" (Access here.)
- Study design of Grünau moves (paper)
- Needs Assessment Grünau moves: Results Obesogenic Environments and PRECEDE-PROCEED (document)
- Evaluation design Grünau moves (document)





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STEP 3: CO-DESIGN, PRIORITIZATION AND **IMPLEMENTATION OF LOCAL ACTIONS:**

- Co-design Local Health Actions: Collaborate with residents, children, and stakeholders to develop tailored actions addressing the specific determinants of child obesity identified in the needs assessment
- **Prioritize Through Community Workshops:** Use participatory tools to assess the feasibility and relevance of proposed actions in various settings (e.g., schools, daycares), ensuring inclusivity and local ownership
- **Develop and Implement Action Plans:** Co-create detailed implementation plans with communities, setting clear goals, timelines, roles, and evaluation criteria
- **Ensure Ongoing Monitoring & Evaluation:** Establish community-driven indicators and feedback mechanisms to track progress, adjust strategies, and sustain long-term health improvements





Thank you all for your participation!











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