

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

Module 2 - Grünau Moves: a Best Practice to promote health and prevent obesity in children

Session 2.2 - Grünau Moves: Planning the Intervention

Unit 2.2.1 - "Selection of the Intervention Area: a contribution from Portugal"

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Slide 1

Hello, my name is Leonor Quelhas Pinto and I am in the focal point of the Directorate-General of Health, Portugal, in the Health4EUKids Joint Action.

Slide 2

Welcome to Unit 2.2.1 "Grünau Moves: Planning the Intervention. Selection of the Intervention Area: a contribution from Portugal"

Slide 3 - Where we live shapes how we live!

Where we live shapes how we live — especially for children. A child's neighborhood can nurture health... or limit it. That's why choosing the right area for intervention is not just the first step in a health promotion project — it's a strategic and ethical decision.

This choice must be grounded in a participatory and structured local diagnosis, one that identifies barriers and opportunities to promote healthy lifestyles — not only for children, but for the whole community.

Slide 4 - The Context: Why This Matters

In Europe — and across the world — children from low-income communities are more likely to grow up overweight or obese. But obesity is only the surface.

It reflects a deeper imbalance: a mismatch between the environments children live in, and what they need to grow healthy.

Obesity increases the risk of chronic diseases in adulthood — like type 2 diabetes, cardiovascular disease, and even cancer. It also impacts children's mental health: social isolation, bullying, and low self-esteem are common among overweight children.

But this isn't just about food and exercise. It's about the commercial, political, and social determinants of health — a web of conditions related to income, education, employment, housing, and access to services. These factors can determine health outcomes.

That's why promoting healthy lifestyles requires integrated, long-term strategies — combining education, urban planning, public policy, and strong community engagement.

Frameworks like the one proposed in Portugal guide these efforts through a four-stage cycle: diagnosis, planning, implementation, and evaluation — ensuring interventions are grounded, flexible, and community-centred.

Slide 5 - Understanding Obesogenic Environments

Many of the environments' children grow up in today are considered “obesogenic” — settings that promote excessive calorie intake and discourage regular physical activity, ultimately increasing the risk of overweight and obesity.

Imagine a neighbourhood with no fresh produce stores, but several fast-food outlets. Where sidewalks are broken, parks are far, and streets are unsafe. These conditions shape daily habits—not by choice, but by design.

In schools, the food landscape also matters what's offered in canteens, vending machines, or nearby shops influences eating behaviour. Meanwhile, the design of schoolyards, the availability of playgrounds, and the culture around movement influence physical activity levels.

That's why tackling obesity isn't just about changing behaviour—it's about changing the conditions that shape behaviour.

Slide 6 - Criteria for Selecting the Intervention Area

So, how do we choose the right area for the intervention?

We look at three layers of indicators:

1. Socioeconomic indicators:

- Low education levels;
- High unemployment or precarious jobs;
- Low household income;
- Poor housing conditions;
- Composite deprivation indices.

2. Health indicators:

- Prevalence of child overweight and obesity;
- Sedentary behaviour and physical inactivity rates;
- Incidence of nutrition-related diseases.

Quantitative data should always be complemented by participatory diagnosis: bringing in schools, families, local leaders, and health professionals to capture lived experiences and contextual insights.

3. Opportunity indicators:

- Political will and support;
- Existing community or health projects;
- Civic engagement and participation forums;
- Social cohesion and history of collaboration.

We also need to assess whether there is a minimum level of readiness to support an intervention: school openness, active local authorities, and institutional partners like public health units.

The diagnostic process should map existing resources, current practices, community assets, and key stakeholders — allowing for tailored, community-driven strategies that promote healthy lifestyles.

Slide 7 - Working with What We Have

In some areas, especially rural or highly deprived ones, data might be limited. But this should never be an excuse not to act.

Systematic studies consistently show a social gradient in obesity and inactivity: the more deprived the setting, the worse the health outcomes. So, if we know a community shares those structural conditions, we can reasonably extrapolate the data—and move forward.

Nevertheless, it is essential to carry out a local diagnosis to ensure that the planned actions are appropriately tailored to the specific needs and context of the area.

Slide 8 - A Case Study from Portugal

In Portugal, we applied this process to two municipalities: Alter do Chão and Portalegre. Different in setting—rural and urban—but united by shared sociodemographic and cultural factors.

We started by meeting local leaders—municipal councillors, health authorities, and school coordinators. Their involvement wasn't just symbolic—it laid the groundwork for community ownership of the intervention.

This multi-level engagement ensured that interventions weren't just top-down — they were built with the community, for the community.

Slide 9 - A Case Study from Portugal

Although one is rural and the other more urban, both face similar challenges:

- Health not always seen as a top priority;
- Time constraints in schools;
- Limited access to healthcare resources.

But there were powerful opportunities too:

- Cultural proximity made collaboration easier;
- The scale of the towns allowed for agile coordination;
- Strong local networks helped build trust.

From a strategic standpoint, Portugal's involvement in this initiative carries broader national significance. These pilot projects serve as testing grounds for an integrated, community-based methodology that could be scaled up and adapted across the country. By generating evidence, building local capacity, and fine-tuning tools and processes, Portugal is investing in a replicable model of promoting healthy lifestyles — rooted in equity, participation, and local leadership.

Furthermore, this participation creates a valuable opportunity for international exchange: sharing insights, learning from other countries facing similar challenges, and strengthening cross-border cooperation in tackling childhood obesity. In a globalized world, building healthier communities requires both local action and international dialogue — and Portugal is positioning itself to contribute to, and benefit from, both.

Slide 10 - From Selection to Action

Selecting the intervention area isn't just about identifying problems—it's about spotting potential. We recommend:

- Starting with available data—but not being paralyzed by its gaps;
- Prioritizing areas with both need and local buy-in;
- Valuing community readiness just as much as epidemiological need;
- Aligning with political momentum and existing efforts;
- Building partnerships from day one;

- Use a participatory process to map local strengths and barriers;
- Make the case clearly to local decision-makers: this is a shared investment in community well-being.

And above all, framing the intervention as an opportunity for the entire community — not just for the children.

Following a continuous improvement model is crucial:

- Set clear, shared goals;
- Track progress with practical indicators;
- Adjust based on what works;
- And celebrate small wins — they build long-term motivation.

Promoting healthy lifestyles, success depends on both, strategic and flexible structure, and local engagement from different stakeholders.

Slide 11 - Places shape people

Places shape people. And when we choose to invest in the right places, we create ripple effects—across generations.

Let's choose wisely. Let's choose equitably. Let's build environments where children — and communities — can thrive through healthy, active, and meaningful lives.

Slide 12 - Thank you all for your participation!