

**ENHANCING HEALTHFUL EATING AND PHYSICAL ACTIVITY
AMONG INTERNATIONAL SCHOOL STUDENTS
THROUGH SCHOOL HEALTH PROMOTION PROGRAM
BANGKOK, THAILAND**



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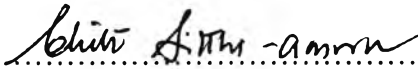
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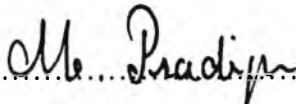
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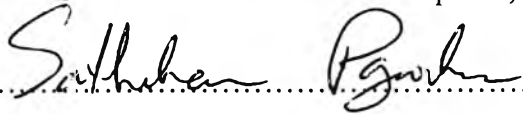
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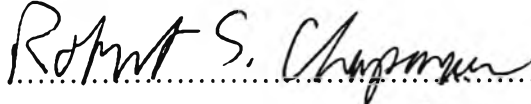
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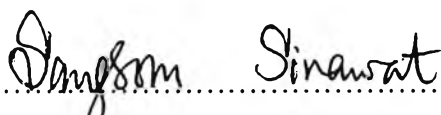
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Objectives: 1) To determine eating and physical activity behaviors among students enrolled at The American School of Bangkok; 2) To identify factors associated with eating and physical activity patterns; 3) To develop a coordinated school health promotion program; and 4) To determine the effectiveness of the school health promotion program in enhancing healthful eating and physical activity among the students.

Methods: A one-group pre-test/post test quasi-experimental study was conducted at the American School of Bangkok. A nutrition screening was carried out to determine students' BMI status. Socio-demographic, psychosocial, behavioral and environmental data among 72 students from 4th – 6th grades were collected through a survey.

Results: Findings reveal that overweight is a health problem among the students at the American School of Bangkok. A high proportion of students had poor diet. The majority of the students had low physical activity and high inactivity levels. Results indicated that factors associated with eating behavior include number of meals eaten at home, type of meals eaten at home, knowledge, attitudes/beliefs, eating self-efficacy, parental influence, parental knowledge, and parental attitudes/beliefs. Factors associated with physical activity include exercise self-efficacy, parental influence, and use of exercise/recreation center. Exercise/recreation facility use was the only important factor in inactivity among the students. Both eating and physical activity behaviors were positively associated with weight status among the participants.

A school health-promotion program was identified as a strategy in improving eating and physical activity behaviors among the students. Findings from the situation analysis facilitated the development and implementation of the school health program. The school health promotion program was instrumental to improvements made in eating and physical activity behaviors among the subjects. The mobilization of all school constituents including school authorities, personnel, staff, teachers, students and parents and their participation in the program were important ingredients to the success of the school health promotion program.

Conclusion: Whilst the relationship between childhood nutrition and adult disease is not yet fully understood, there is some evidence that diet and physical activity patterns affect nutritional status. The results from this study suggest that diet, physical activity and inactivity patterns are likely contributors to an increased prevalence of overweight among students in the study. The findings also imply that restaurant food consumption and non-utilization of exercise/recreation facility are important contributors to higher BMI among the students.

The development and implementation of a School Health Promotion program was found to be successful in enhancing healthful eating and physical activity among the students.

Recommendations: A comprehensive school health promotion program was proven to be successful in enhancing healthful eating and physical activity among the students at the American School of Bangkok. Future programs should search for ways to include caregivers in nutrition education because most modifiable behaviors of children and adolescents can [only] be facilitated by their caregivers. In addition, positive behaviors of healthful eating and physical activity that were learned at school can only be sustained through family involvement so that such behaviors are reinforced outside of school. Students and caregivers should learn how to make healthier choices when ordering from fast food restaurants. For physical activity, the use of recreation/exercise center is dependent upon the creation of fun activities for children and adolescents.

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ACRONYMS

ASB	: American School of Bangkok
Bt	: Baht (Thai currency)
BMI	: Body mass index
CDC	: Center for Disease Control
CSHP	: Comprehensive School Health Program
FFQ	: Food frequency questionnaire
FGD	: Focus group discussion
FGP	: Food Guide Pyramid
HEI	: Healthy Eating Index
ID	: In-depth [interview]
MET	: Metabolic equivalent
MSCHS	: Missouri School-Age Children Health Services
PTO	: Parent-Teacher Organization
SD	: Standard deviation
SES	: Socio-economic status
USDA	: United States Department of Agriculture
WHO	: World Health Organization