



Chapter 11

VIASANO, Belgium



Mireille Roillet, Brigitte Aubert, Sophie Baelen, Virginie Ooge, Xavier Lepoivre

Viasano website: viasano.be

1. VIASANO programme overview

Viasano is an EPODE-like programme that was created in Belgium in 2007 for the prevention of childhood obesity. The programme was implemented in the pilot cities of Hasselt (Flemish region) and Mouscron (Walloon region).

A chart is signed between the Viasano coordination team and the council of towns' representatives. The towns collaborate on a no-charge basis and commit to the programme for at least 4 years.

In January 2015, Viasano reached 20 towns in each region (Flanders, Wallonia, Brussels), mobilising a total of 815,000 inhabitants.



1.1. The organisation of the programme

Viasano functions according to the EPODE model.

1.1.1. *Central level: the coordination team*

A bilingual team of 3 people is in charge of the general management of the programme:

- Mireille Roillet is the French speaking coordinator in charge of the general management, coaching the French-speaking towns and their recruitment together with partner relations;
- Valerie Bruyninckx is responsible for coaching the Flemish towns, communication and PR;
- Nathalie Ryckaert plays an administrative role and manages the hot line with the towns.

At local level, the Viasano national coordination team supports the communities by providing them with training, methodological support, campaign tools for the local stakeholders, the sharing of experiences with other towns, and communication coaching at local level.

At national level, the Viasano team is responsible for the information, involvement and motivation of the different partners. Viasano creates for the towns the social marketing campaigns with all the deliverables, and organises the evaluation of the

programme at 2 levels: past activities and evolution of the prevalence of overweight in children living in the Viasano towns.

1.1.2. Local level

The mayor decides if his/her municipality will participate in the programme. Each of the Viasano cities appoints a project manager, who is in charge of setting up the programme locally. The project manager selects a team of local experts to safeguard the scientific validity of the programme (a local GP, a dietician and a sports coach, for example). Furthermore, the project manager and the local expert team supervise the collaboration between all the stakeholders (teachers, shops, restaurants, doctors, etc.) in the creation of concrete on-site actions.

The cities are responsible for editing, printing and distributing the tools (guides, brochures, leaflets...) prepared by the national coordination team, as well as for the organisation of activities (different for each city and depending on the time of the year – inspired or not by national campaigns).

1.1.3. Scientific level: the scientific committee

A bilingual and independent expert committee was created to certify the programme, its messages and the local initiatives. Furthermore, its members are ambassadors to the programme with the media. The work process is the following: 2 plenary meetings per year for the covenant of the programme's general strategy, and dedicated workshops in small groups on specific topics (campaigns, articles, symposia, trainings of the local project managers, etc.).

From Flanders

Prof. Dr. Em. J. Vinck, Professor in de Psychologie, Universiteit Hasselt

Dr. Nele Jacobs, Doctor in de Biomedische Wetenschappen, Universiteit

Wouter Goris, Motivatiepsycholoog, Manager Ready2improve

From Brussels

Prof. Dr. J. Nève, Professeur à la Faculté de Pharmacie, ULB

N. Guggenbühl, Diététicien Nutritionniste, Professeur à l'Institut Paul Lambin à Bruxelles

Dr. C. De Laet, Pédiatre, Hôpital Universitaire des Enfants Reine Fabiola

From Wallonia

Prof. Dr. Em. C. Brohet, Professeur en Cardiologie, UCL

M.-C. Hames, Enseignante, Robert-Schuman-Institut, Eupen

Dr. A. Boucquiau, médecin nutritionniste, Présidente de la Société Belge des Médecins Nutritionnistes

1.1.4. Partners and collaborations

One of the pillars of the programme is the public/private partnership (PPP).

The private/financial partners support Viasano as part of their CSR engagements. They have signed a charter in which they pledge to:

- never associate the programme with their products;
- never influence the content of the programme;
- only communicate on the programme in internal or corporate communications.

This commitment reflects the private partners' willingness to participate in a series of practical activities that match their beliefs and values, and to disseminate messages that they wish to communicate to their customers. The public health issue of childhood obesity concerns the private partners. For this reason, they have decided to commit funds to this project without receiving any commercial or publicity benefit.

The partners realise that they are often considered part of the problem and wish to demonstrate –through Viasano– their willingness to be part of the solution.

The private partner involved in the Viasano programme is Ferrero.

"We are proud to support Viasano from the beginning. It is a collaborative and positive approach to prevent childhood overweight and obesity. Viasano is in line with our social responsibility".

[Véronique Squelart, Communication Manager, Ferrero.](#)

The Viasano programme is also supported by a number of institutional and scientific organisations that share the same values, provide moral support, invite the programme to advocate in symposia, quote the programme in their publications, etc.

Institutions	The Flemish Government
Scientific Associations	The Belgian Society of Paediatrics The Belgian Cardiology League The Belgian Associations of Dieticians (UPDLF and VBVD) The BASO (Belgian Association for the Study of Obesity) The Belgian Association for Doctors and Nutritionists (SBMN)
Association	EPODE International Network
Patients associations	The Belgian Associations of Diabetes

1.2. Activities

Several types of activities are organised throughout the year. Once a year, each city highlights a theme related to nutrition and physical activity.

Teachers of all levels receive pedagogical material that help them create interactive and playful workshops with their pupils.

Leaflets that are designed to provide families with advice and tips on how to eat better and move more are displayed in public areas (shops, local associations, etc.). Posters are displayed in strategic areas of the city carrying the primary message of that specific campaign.

Health professionals receive a newsletter keeping them informed of the programme and reminding them of the official recommendations related to the specific campaign.

Each participating city organises an annual Viasano week. The objective of this event is to encourage physical activity and to promote a healthy and balanced diet. Each city and their stakeholders organise several activities for the population.

Apart from those centrally coordinated actions, the cities organise several actions per year on physical activity or healthy eating: a breakfast in the schools, sports events, child congresses, vegetable gardens (Figure 1), etc.



Figure 1. Vegetable gardens

1.3. Evaluation of the programme

Viasano is not a scientific research programme.

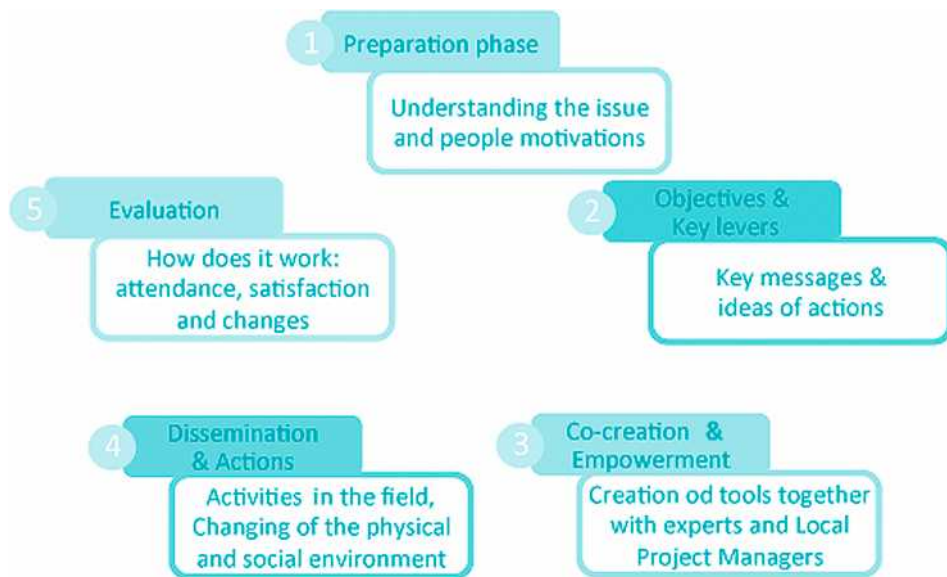
Nevertheless, a number of indicators have been identified to evaluate the programme:

- the involvement of local stakeholders based on the frequency of meetings, the level of participation, the number and quality of activities;
- the communication material;
- the (local) media coverage;
- the evolution of childhood obesity and overweight in Viasano cities compared to reference cities, using BMI data recorded by school doctors in the respective school health systems.

→ First encouraging results have been described in the French speaking pilot towns Mouscron and Marche-en-Famenne over the period of 2007/2008 and 2009/2010: the prevalence of overweight (-2.1%) and overweight & obesity (-2.4%) decreased in the pilot towns but remained stable in the rest of the population (+0.1% and +0.2%, respectively).

These results have been published in *Pediatric Obesity* (Jan 2015)(¹).

2. Social Marketing Activities



The Viasano intervention campaigns are the product of a 5-step process.

2.1. Step 1: Preparation

The national coordination team and the Expert Committee perform this activity. The local project managers are also involved because they are both the actors and the target group of the campaign.

The first aim is to understand the cultural and psychosocial representations of the target group, including its needs and expectations.

For example, during the preparation of the last Viasano campaign on the lunch box, the local project managers filled out a questionnaire on their lunch habits:

- How many meals does the lunch box contain?
- Who completes the purchases? Who prepares the meals? For whom (children and/or parents)? When?
- What do you eat for lunch? Which bread-type?
- Did your children finish their lunch box?

The results were presented and discussed during a knowledge-sharing workshop. One of our experts presented the nutritional recommendations for lunch boxes, including snacks.

The national coordination team outlined the Belgian food habits and behaviours based on the Belgian HBSC Study 2010, and reminded the local project managers of the existing tools and the messages from previous campaigns on similar topics.

2.2. Step 2: Objectives and key levers

Objectives, main messages and tools are defined with the local project managers during a training session.

In the framework of the Lunch Box Campaign, once the different presentations were given, the local project managers were split in 4 groups to brainstorm, and then gathered in a group discussion.

The ideas and messages that came out of the different sessions are the baseline for the new campaign, after formal validation by the Expert Committee.

2.3. Step 3. Co-creation of tools and empowerment

The tools are created by the national coordination team and validated by the Expert Committee.

They are presented to the local managers and discussed. Optimisations can be completed before they are put online on the extranet.

2.4. Step 4. Dissemination of tools and actions

All tools are available on the extranet. It is the responsibility of the cities to print them with their respective logos and contact details.

2.5. Step 5. Evaluation

The evaluation of the tools, such as their effectiveness and use, is carried out during the yearly individual meeting in each town.

[Material available on the Viasano extranet](#)

The extranet assembles all the campaign material:

- information tools, such as a brochure, folders or a toolkit for activities and workshops for different target groups (children, families, employees...);
- activation tools, such as recipes, placemat, bookmark games, etc.

These documents exist in French and Dutch. The documents are customizable (add logo and contact details of the town) and ready to go to print (high definition files).

	Topic	Objective
Campaign 1	Physical activity (PA): 30' per day	Promotion of PA on a regular basis for the entire family
Campaign 2	Dairy products	Promote the variety of dairy products
Campaign 3	Move to work or school	Promotion of active commute
Campaign 4	Move in all weather	Promotion of PA in all circumstances
Campaign 5	Indulgence	Help to manage treats
Campaign 6	Meals	Promotion of family meals
Campaign 7	Screen time	Help to manage the amount of time the children spend watching screens
Campaign 8	Fats	Pay attention on hidden fats in food
Campaign 9	Sleep	Promotion of sleep quality for children
Campaign 10	Beverages	Promote water as a first choice beverage and help parents manage other beverages such as fruit juices and soft drinks
Campaign 11	PA: active play	Promotion of active play for children as a natural way to move
Campaign 12	Snacks	Promotion of good snacks at 10am
Campaign 13	Vegetables	Advice parents on how to get children to eat vegetables
Campaign 14	PA	Promote PA by play
Campaign 15	Lunch box	Promote a balanced and enjoyable lunch
Documents	PPP commitment charter, application to become a Viasano town	
Logos	Viasano logo, partners logo	
Viasano presentation	Regularly updated general presentation	
Tool kit press	Press kit, latest press release	
Q&A	Viasano in 8 questions & answers	

Innovative tools developed by the towns are also available for the network on the extranet.

Finally, the extranet provides supporting documents for the management of the campaign at local level: presentation of the programme, press kit, Q&A, etc.

3. EPHE Community

3.1. Choice of the city

In 2012, the town of Mouscron was chosen for three reasons. First, it is a large urban town with 56,000 inhabitants (the 8th town in the French-speaking region of Belgium in terms of density). Secondly, it is located in the poorer area, with more health inequalities due to socio-economic factors, as compared to the national wide average. Finally, Hainaut Province (in which belongs Mouscron) is where the prevalence of overweight children in the 6th grade is the highest.

	Hainaut province	French speaking region (Wallonia)	Belgium
Men's life expectancy (y.)	74	75,1	77,1
Women's life expectancy (y.)	81	81,5	82,6
Mortality (Walloon region = 100)	105	100	88,4
Premature mortality < 65 y (Walloon region = 100)	111,5	100	80,4
Unemployment rate total 2013 (%)	18,8	15,9	10,4
Subjective health % Good & very good (2008) (1)	69,7	73,7	76,8
Adult women % Sedentarity	48,7	38,8	30,1
Adult men % Sedentarity	22,5	29,3	22,5
Fruit consumption % (1)	58,8	60,4	64,3
Higher education % of the global population	25	28,4	30,7

Observatoire de la santé du Hainaut, (2013). Santé en Hainaut n° 8, Tableau de bord de la santé 2013. (1)Scientific Institute of Public Health, Belgian Health Interview Survey 2008.

Beyond those reasons, Mouscron is also the French speaking pilot town, which has always been very motivated by Viasano and interventions that aim at improving inhabitants' health. A team including dieticians is very active and dedicated to the programme.

Brigitte Aubert "it is an honour to be part of the EPHE project! The fact that this project is international is very rewarding; this is a plus for the Viasano programme."

3.2. Population of the study

In line with the EPHE recommendations and evaluation framework, the EPHE project was implemented in 10 classes from 4 Belgian primary schools, totalling 195 children. The selection of the schools was based on the social diversity in its children constituents.

The age group –6 to 8 years old in the 1st grade– was selected in accordance with the scientific partners. The aim was to limit the amount of loss due to follow up when the classes were reorganised at the beginning of each year.

	Nb children 1st gr. 6/7 y. o.	Type	SES	Health promotion at school
Primary school 1	61	Public	Low	Viasano in 5th grade
Primary school 2	48	Catholic	Medium/High	Viasano in 5th grade + Sodexo food workshops
Primary school 3	68	Public	Medium	Viasano in 5th grade
Primary school 4	18	Public	Low	Viasano in 5th grade + school policy for snacks at 10 am + only water at lunch
Total	195			

Infrastructures at school

	Medical service for school	Canteen	Type of canteen	Dietician's approval of the menu	Water fountain
Primary school 1	yes	yes	private	yes	no
Primary school 2	yes	yes	private	yes	no
Primary school 3	yes	yes	private	yes	yes
Primary school 4	yes	yes	private	yes	yes

Infrastructures in school	Playground	Sports field	Sport hall	Compulsory physical activity	Possibility extra school PA
Primary school 1	yes	yes	no	yes	yes
Primary school 2	yes	no	yes	yes	no
Primary school 3	yes	yes	yes	yes	yes
Primary school 4	yes	no	no	yes	no

3.3. Local partners

Besides the schools, Viasano collaborated with a wide range of stakeholders, and worked with existing associations. The school staff (director, professors, canteen) were very collaborative, especially in public schools.

The EPHE team included other partners for specific activities or events, including associations, the police, local shopkeepers, etc. For example, the parental workshops, including a session on parenting skills, were organised with family planning. A neighbourhood party included participation of many associations and town services (sports, nurseries, youth, social affairs).

4. Interventions

4.1. The preparation step: from the end of 2012 to june 2013

In this first period, the focus was on preparing the community for the project implementation.

4.1.1. *Recruitment of Mouscron*

In December 2012, the national team chose the town and asked the Health deputy to represent Belgium in the EPHE project. The council of town representatives completed the approval at the end of January 2013.

4.1.2. *Briefing of the town*

In February 2013, the briefing was provided to the Health deputy and the Viasano local project managers: scientific background on health social inequities, objectives, population reached, methods, results expected, and resources.

4.1.3. *Recruitment of schools and information for parents*

From March to May 2013, the focus was on recruiting the schools and gaining support from the school directors, teachers, and parents. Three meetings per school were organised; one meeting per group.

The national coordination team helped the local team by making draft presentations, writing letters, and attending several of the meetings.

4.1.4. *Baseline questionnaire*

At the end of May 2013, the baseline questionnaire was distributed to the children together with motivational tools both for parents and the children. When children returned their completed questionnaire, they received a frisbee. On the directors' suggestion, parents received vouchers to buy fruit or school canteen free entrance.

4.2. The intervention step: september 2013 to june 2014

Three periods composed the intervention step:

4.2.1. *The schools' remobilisation after the summer break in September 2013*

At the beginning of the school year, a meeting with all the teachers from the 1st and 2nd grades was organised in the town hall in order to thank them for their collaboration and motivate the new teachers. The mayor invited the directors and teachers to a working lunch in the town hall's wedding room. The teachers could subscribe to workshops in their classes.

4.2.2. *The interventions before the results between October and December 2013*

Each EPHE class received 2 X 2 hours of workshops at school. After each workshop, parents received a letter explaining the activities, and informative Viasano folders.

1st workshop

- **Vegetables:** The aim was to help children go beyond the "I like/I dislike" habit. The pedagogical material was a funny video about a child who first thought that he did not like vegetables but finally discovered that he did. The local team chose the pedagogical tool.
- **Fruit:** The aim was to discover fruit in their variety: colour, texture, odour, taste. Pedagogical material: Viasano pedagogical tool around the discovering of 4 seasonal fruits.
- **Water & beverages consumption:** The aim was to discover the taste of water through different kinds of water: tap water, mineral water (still and sparkling). Pedagogical material: Viasano pedagogical tool with different waters.

2nd workshop

- **Physical activity:** The aim was to link moving and playing. Games were organised on the schoolyards. Pedagogical material: a Viasano folder with several simple collective games, distributed to every child.
- **Sleep:** The aim was to explain the role of sleep in a good environment. Pedagogical material: A Viasano game of snacks and ladders.

The interventions undertaken in the 10 EPHE classes, other Viasano interventions took place in some other classes of equal grade. The town also organised its Viasano Week, on which more than 50 activities were offered to everyone (children, employees, families, elderly, etc.) in various settings (schools, canteens, libraries, restaurants, companies, the town hall, shops, sports clubs, etc.).

Sophie Baelen

“The EPHE project allowed us to maintain a privileged contact with selected schools, and with the schools’ leadership teams especially. We also had the opportunity to meet parents through the parenting workshops and the event “Healthy Tuquet”. This neighborhood party raised so much enthusiasm amongst the population that a second edition was organised. We can confidently say that the EPHE project helped enhancing and valorising the Viasano programme at school as well as with parents.”

4.2.3. The interventions after the results from January to June 2014

After the baseline results, new types of interventions were undertaken during the second period.

Baseline results:

Respondent	Income position	Labour status	Education
Behaviours to address	Fruit Soft drink Diet soft drink	Sleep hours week days	Water/Fruit juice Screen time
Determinants to address	Home availability/Parental allowance/Nagging behaviour		

New interventions:

A new 2-hour intervention was organised for each class on the following topics:

- **Beverages** (fruit juices, soft drinks and water):
The aim was to evaluate the amount of lumps of sugar in different kinds of beverages in order to show that water is the only beverage to drink on an “ad libitum/limitless” basis.
A link could be done with a physical activity (energy intake/energy expenditure). Viasano provided pedagogical material. The class received glasses and jars with the claim “Water ad libitum” as well as items such as a fruit cutter to facilitate the consumption of fruit in class.
- **Physical activity:**
The aim was to experiment the effects of physical activity on the body. Children were asked to move: jump, run... in order to speak about what they felt: “I am hot, I get red, my legs hurt...” Then the sports instructor explained what changes occur in the heart, the lungs, the muscles... and the role of physical activity. Viasano provided a pedagogical tool: each EPHE class received a box of games for the playground (a soccer- or basketball, a skipping rope...), and each child received a security jacket (Figure 2).
Currently, an equipment project with sports structures for an underprivileged neighbourhood adjacent to an EPHE school is on-going.



Figure 2. Box “Playing is already moving” with physical activity games for each class in EPHE project

- Parenting workshops:

They were organised in 3 schools out of 4, which means 7 classes out of 10. EPHE results have shown that parental attitude is a key determinant in child behaviours related to food, beverages, screen time and sleep habits. In the low socio-economic group, we could notice less parental control, less ability to negotiate with their child, difficulties to set a good example...

The town was asked to organise parental workshops in all 4 schools involved. The aim was to help parents improve their parenting skills by organising discussions. A game was created; the town’s family planning was the moderator.

Virginie Doge: “Being able to study the same children for two years was very rewarding. Indeed, the systematic evaluation of our actions allowed us to identify the activities and methods that had the greatest impact on their behaviour. A true added value for our future Viasano actions.”

4.3. The observation step from september 2014 to june 2015

In September 2014, the town organised a new meeting with all the directors and teachers (from grades 1, 2 and 3) in order to explain the last stage of the project: the involvement of the EPHE classes during the next 3 months in all Viasano activities, e.g. workshops on snacks, with new Viasano material.

On 22 May, 200 children involved in the EPHE project took part in sports activities all day long, and were offered a healthy lunch.

5. Remarkable Activities

Xavier Lepoivre: “In partnership with the EPHE project, we have remodelled the playground of a working-class neighborhood with new swings, ping-pong tables, and picnic tables, thus creating a user-friendly and intergenerational space.»

The EPHE project has represented a great opportunity of creating new ways of collaborating with the town through various actions, events, and new experiences such as parenting workshops.

5.1. Parenting workshops

The steps from “idea” to “action” were the following:

Inform the school directors and teachers

First, the project was presented to the EPHE school staffs in order to ensure their collaboration in mobilising parents. It was also decided to organise a parental workshop in each school, to invite parents to a lunch or breakfast, and to organise a raffle to heighten their participation. The parents had the opportunity to come with their children. The sports instructors took care of the children.

Benchmark the tools, identify the moderators

The Viasano national coordination team provided existing tools on the topic, and experience on this kind of activity. In addition, the local team identified family planning members with good moderating skills and an experience in group discussions. Both the local team and family planning created a game.

Organise the workshops

Local teams and schools conducted the workshops. The mayor and the Health deputy invited parents involved in the project. Depending on the school, a buffet or a breakfast was offered before or after the group discussion.

The group discussion was based on a game. One parent turned a wheel, which stopped on a colour. The colour determined the topic of the question. There were 4 topics:

- Food & Beverages;
- Screens;
- Communication & Respect;
- Violence and Authority.

Each question gave the opportunity to explain one’s behaviour, to share experience without stigmatisation. The moderators and local teams could add information and recommendations.

Example of question (Food & Beverages): “*Elliot, 8 years old, does not want to eat vegetables. What would you do?:*”

1. *I ask him to taste before saying no.*
2. *I force him to finish his plate.*
3. *I prepare pasta instead, because he likes it.*
4. *I explain that it is important to eat all kind of food to grow.*
5. *I remove his plate and I will give it again at the next meal.”*

Example of question (Violence & Authority): *“As soon as my child comes back from school, he watches TV. It can last for hours. What can I do?:*

- 1. I let him do what he wants. It is a way to avoid conflicts.*
- 2. TV is forbidden during the week.*
- 3. I plan with him his time: snack after school, then homework and then TV or another activity.”*

5.2. Results

Even if it was a time consuming action and only parents from 7 classes out of 10 attended the workshops, the groups were very useful for parents. People were very interested and active in the discussions.

The motivation tools such as the buffet and the raffle were key elements to heighten their participation.

The Viasano national coordination team provided methodology, documents and support at each step of the project:

- knowledge on social inequities to the local teams and the school staffs. Each stage of the project was presented and discussed (with results on the baseline and following questionnaires);
- attendance to key meetings with school staffs, or to key events such as the neighbourhood party in Le Tuquet;
- presentation writing for the local teams;
- an assistance with contacting people: writing invitation letters, thank-you letters, information letters, etc.;
- advice in organising a working meeting with a healthy buffet, etc.

Beyond the knowledge-brokerage process, the project was also a co-creation process. Each step was discussed between the local and national teams. The school staffs and other local actors were also associated. For example, the motivational tools were discussed with the directors.

For all these reasons, the teams’ and project partners’ motivation remained elevated throughout the whole project.

Reference

J.VINCK ET AL, (MARCH 2015). Downward trends in the prevalence of childhood overweight in two pilot towns taking part in the VIASANO community-based programme in Belgium: Data from a national school health monitoring system. *Pediatric Obesity*.