

T5:PO.10

Clinician perspectives on health behaviour change in families of overweight youthMatteson CL¹, SSrikameswaran S^{2,3}, Zelichowska J^{2,3}, Chanoine JP³, Finegood DT¹ and Geller J^{2,3}¹Simon Fraser University, Burnaby, Canada; ²St. Paul's Hospital Eating Disorder Clinic, Vancouver, Canada; ³University of British Columbia, Vancouver, Canada

Introduction: Preventive and therapeutic interventions for obesity are largely unsuccessful in children and youth, reflected in high rates of treatment refusal, dropout and relapse. Overweight individuals commonly report negative treatment experiences. This study seeks to gain a greater understanding of clinicians' perceptions of health behaviour change in families referred to a clinical pediatric weight loss program.

Methods: A focus group comprised of dietitians, psychologists, and administrative staff from a multidisciplinary team at a clinical weight loss centre was conducted. Perceptions of barriers and solutions to improving healthy eating, physical activity, and reducing sedentary time were recorded and transcribed. NVivo qualitative data analysis software (QSR International Pty Ltd. Version 8, 2008) was used to track coding themes for node and case assignments using key concepts as an analytic framework, and to record researcher field notes and debriefing observations.

Results: Unique and global barriers and solutions to improving diet, physical activity and reducing sedentary behaviours were identified. The data were categorized as practical or psychological in nature, and revealed substantial crossover in these contributing factors. Focus group participants noted that it was common for both health care providers and families to measure success exclusively based upon weight changes, suggesting a limited view of health.

Conclusion: Participants emphasized the importance of recognizing the complexity of psychological and environmental factors in assisting overweight youth and their families. This work will foster productive dialogue with families of overweight youth engaging in health behaviour change.

Conflict of interest: None disclosed.

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T5:PO.11

Nutrition knowledge in adolescents: perception of parents and peers behavior and stimulusFerro LV^{1,2}, Ribeiro JC¹, Moreira P³, Gonçalves da Silva G¹ and Aires L¹¹Centro de Investigação em Actividade Física e Saúde, Faculdade de Desporto, Universidade do Porto, Portugal; ²Escola Superior de Saúde, Instituto Politécnico de Bragança; ³Faculdade de Ciências da Nutrição e Alimentação, Universidade do Porto

Introduction: It is well known the influence that parents and peers have in children and adolescent choices and behaviors, including eating habits and physical activity practice. No work has been done yet about parents and peers influence in nutrition knowledge.

This work aims to study the relation between adolescents' perception of parents and peers food habits, physical activity practice, stimulus to the adolescent to follow a healthy diet and be physically active and adolescents Nutritional Knowledge.

Methods: A translated and validated version of the Nutritional Knowledge Questionnaire (Parmenter and Wardle, 1999) was used with another questionnaire about adolescents' perception of parents and peers behavior and stimulus.

Results: Data from a 659 male and female sample, mean age 15.9 years (SD = 2.10) show that Nutrition Knowledge is related to the perception adolescents have of their fathers' physical activity level ($P < 0.05$), and of their mothers ($P < 0.05$) and peers ($P < 0.01$) healthy eating habits.

No statistical significance was found to the relation between nutrition knowledge and all other adolescent perceptions.

Conclusions: These results suggest that beside there is a relation of Nutrition Knowledge and parents and peers perceived habits, the major role must be in schools. Showing that school based and adolescent focused interventions must be planned to improve nutrition knowledge.

Conflict of interest: None disclosed.

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T5:PO.12

Childhood obesity: implications for market segmentationMackreth K¹, Griffiths C¹, Gately P¹, Radley D¹, Mackreth P¹, Wilson A² and Cooke C¹¹Leeds Metropolitan University, Leeds, UK; ²Leeds City Council, Leeds, UK

Introduction: Childhood Obesity is a UK government priority with one in three children affected. Stakeholders from public and private sectors have implemented programmes and social marketing campaigns in an attempt to combat the rising prevalence. This task is made extremely difficult without valid baseline data to begin to segment the market and target those most in need. This study explores the childhood obesity market in Leeds, potentially informing decision making on future market coverage strategies.

Methods: Over a 3 year period, 14,697 children (aged 11.5 ± 0.3 years) gave consent to be assessed for anthropometric measurements during their first term at secondary school. In addition geodemographic variables thought to influence energy balance were obtained at the individual level.

Results: This study findings act as a useful front-end market segmentation tool providing a unique portrait of the local patterning of childhood obesity. The findings are contrary to the 'deprivation theory' which would predict that the most affluent areas have the lowest prevalence of obesity. The results demonstrate that the potential market does not form a homogenous group and adds to the body of evidence that childhood obesity is spreading across the socio-economic and ethnic groups.

Conclusion: Whilst segmentation does not guarantee a positive outcome for stakeholders, the lack of appropriate segmentation is likely to result in programmes and campaigns that have little impact on the prevalence of childhood obesity. The findings provide baseline data for back-end segmentation to be conducted, to ensure a 'consumer orientation' focus to inform specific marketing decisions.

Conflict of interest: None.

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T5:PO.13

Socioeconomic differences in weight-control behaviors among a population-representative group of mid-aged adults

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Introduction: It has been well documented that socioeconomically-disadvantaged groups are more likely to be overweight/obese than