ABSTRACT

Introduction: High rates of overweight and obesity among children in Canada have created the need for new and innovative strategies to treat the condition and address its underlying causes. Telehealth is an attractive option to reach children and families with barriers to accessing in-person treatment programs. The HealthLink BC Eating and Activity Program for Kids (the Program), a provincial telehealth program staffed by registered dietitians and a qualified exercise professional, was launched in Spring 2015 in British Columbia, Canada. A comprehensive program evaluation was implemented to assess its first 24-months of operation.

Purpose: The purpose of this program evaluation was to assess the effectiveness of a telephone-based childhood obesity treatment program in its initial implementation phase.

Methods: Participant data was obtained from physician referrals to the Program and/or information obtained at intake and upon follow-up (3 and 6 mo). Data includes the scores from a battery of questionnaires measuring: diet quality, quantity, and patterns, eating behaviours, sleep, physical activity and inactivity, self-perception, and personal strengths and difficulties. Other data includes height, weight, body mass index (BMI), waist circumference, blood pressure, and the extent of contact with the Program. Baseline measurements were compared with follow-up data obtained after Program completion at 3 and 6 mo.

Results: A total of 55 participants consented to participating in the Program evaluation (25.5% of all referrals). Children in the evaluation generally adhered to the Program, with 56.4% of participants completing at least 70% (5 weekly calls) of the Program. At the 3-month follow-up: participants reduced their consumption of processed grain and meat products, boys increased their fruit and vegetable consumption, both boys and girls increased total and moderate-to-vigorous physical activity, and reduced their time spent in sedentary pursuits. There were no changes observed in BMI. At 6-months post-intervention, some improvements in diet and physical activity had diminished. Results were impacted by small sample sizes and high variability across the sample.

Conclusion: The Program succeeded at attracting and retaining children and teens referred to its telehealth services. Like many other intervention programs, participants reported modest improvements immediately post-intervention, but generally did not report maintaining positive changes.

BIOGRAPHICAL NOTES

Place of Birth: Johnstown, United States

Academic Studies: B.S., The University of Pittsburgh, 2007
M.A., The University of Connecticut, 2009
M.S., The University of Pennsylvania, 2011

GRADUATE STUDIES

Field of Study: Physical Activity and Pediatric Health

Courses (500 level and above):
SPPH 542 Canadian Health Policy

Instructors
Dr. Steve Morgan

AWARDS

Killam Graduate Assistant Teaching Award
4 Year Fellowship
Faculty of Education Graduate Award

PRESENTATIONS


Lasinsky, A., Dickson, D., Bredin, S. Early feasibility of a novel, provincial, telehealth program for pediatric overweight and obesity. World Congress on Obesity, Vancouver, 2016.


PROGRAMME
The Final Oral Examination
For the Degree of
DOCTOR OF PHILOSOPHY
Kinesiology

ANNE MARICE LASINSKY

B.S., The University of Pittsburgh, 2007
M.A., The University of Connecticut, 2009
M.S., The University of Pennsylvania, 2011

Thursday, December 7, 2017, 12:30 pm
Room 203 Osborne Centre Unit I
Latecomers will not be admitted

“A Novel Telehealth Program for the Treatment of Pediatric Overweight and Obesity: A Program Evaluation”

EXAMINING COMMITTEE

Chair:
Dr. Linda Li (Rehabilitation Sciences)

Supervisory Committee:
Dr. Shannon Bredin, Research Supervisor (Kinesiology)
Dr. Tanis Mihalynuk (HealthLink BC)
Dr. Darren Warburton (Kinesiology)

University Examiners:
Dr. Don McKenzie (Kinesiology)
Dr. Kristin Campbell (Rehabilitation Sciences)

External Examiner:
Dr. Nicholas Holt
Physical Education and Recreation
University of Alberta
Edmonton, Alberta