Context

Overweight is on the rise among urban children attending private schools in Ghana

Private primary schools-more pupils take food to school and more consume school canteen food- most at risk of obesity (Ghana)

Public primary schools- fewer children take food into schools, fewer consumed school canteen food (Ghana)

A greater percentage of the children in the private schools (15.0%) were more likely to be overweight when compared to their counterparts from the public schools (4.5%; p= 0.0006). Likewise, more children from the private schools (12.5%) happened to be obese compared to their counterparts from the public school (2.5%; p= 0.0002) (Ghana)

Cultural disposition to view obesity as sign of wealth, wellbeing and beauty and is encouraged by parents

The number of meals eaten outside the home and school positively associated with unhealthy diet

Poor implementation of school policies

School food environment may be associated with children's diets or obesity-related outcomes

Schools play an important role in facilitating NCD-related behavioural change in children

School Feeding Programmes target socially disadvantaged and nutritionally vulnerable children especially girls

Government implements policies to promote healthy foods in schools

Adherence and implementation of school policies

Inclusion of stakeholders required for effective implementation Mechanisms

Private food vendors adjacent to schools sell unhealthy foods

Whole school approach targeting individual behaviours and environmental barriers needed to support individual change

School food environment: regulation of the types of products sold in school canteen and by neighbourhood vendors

School feeding/lunch programme: micronutrient fortification of commonly eaten foods/ supplementation e.g. Micronutrient-fortified soya cornmeal

Educational component delivered in schools to increase knowledge of healthy dietary behaviours

Teachers, children and parents learn about healthy living

Consumption of unhealthy foods in and around the school setting

Outcomes

= unhealthy diets leading to increased rates of obesity and noncommunicable diseases

Attendance

at schools

Meals eaten

at

school/home

Reduced access to unhealthy food

Enhanced access to healthy foodmore nutritionally diverse meals

Increased knowledge of healthy and unhealthy foods.

Increased understanding of links between diet and health, including the needs to change dietary behavior to avoid disease

Reduced consumption of less healthy foods

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Increased consumption of healthier foods

=Improved diet leading to reduce rates of obesity and noncommunicable diseases