**Evidence Table 3. Description of the interventions used in school only settings**

| **Author, year** | **Arm** | **Description** | **Psychosocial dietary intervention** | **Physical/ environmental dietary intervention** | **Psychosocial physical activity/ exercise intervention** | **Physical/ environmental physical activity/ exercise intervention** | **Decrease sedentary behavior intervention** | **Other interventions** | **General Comments** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Amaro,  20061 | 2 | Kaledo educational board-game Length of intervention, weeks: 24  Setting:  School :Classroom based | Kaledo, an educational board-game that is designed to transfer knowledge about the healthy Mediterranean diet, in agreement with modern nutrition notions. A play session represents a journey through daily meals of the Mediterranean diet.  Target:Child  Delivery: Teacher  Duration: 15-30 minutes per session.  Frequency: One session per week for the subjects. Extra-play sessions for children that were absent during a session.  Other: Requires 2-4 players. |  | Target: Child  Delivery: Teacher  Duration: 15-30 minutes per session.  Frequency: One session per week for the subjects. Extra-play sessions for children that were absent during a session.  Other: Requires 2-4 players. |  |  | Other:Parent notification of BMI screening (policy)  Target: Child  Delivery: District  Duration: Each spring for 364 weeks (7 years).  Comment: Mandatory school-based BMI screening with optional parent notification. |  |
| Barbeau, 20072 | 2 | Physical Activity (PA)  Length of intervention, weeks: 43  Setting: School |  | Homework time during which the subjects were provided with a healthy snack free of charge. All of the snacks were individually packaged, and every day the subjects had a choice of something salty (e.g., crackers and cheese), something sweet (e.g., low-fat cookies), or a fruit or vegetable. Subjects chose one snack, and were allowed to get another snack if they were still hungry after the first one. This intervention was administered for 30 minutes every day that school was in session.  Target: Child  Delivery: Teacher  Other: Teaching assistant, research staff person on-site |  | A PA component that included 25 minutes of skills development (e.g., how to dribble a basketball), 35 minutes of moderate vigorous PA (MVPA), and 20 minutes of toning and stretching.  Activities during the MVPA included games such as basketball, tag, softball, relay races, etc., all of which were modified to keep all of the subjects active throughout the 35-minute period. Participants wore Polar Accurex HR Monitors to help them maintain their HR above 150 bpm during the MVPA portion. HR was also monitored to help provide feedback to subject struggling to maintain this goal. Prizes were awarded for good behavior as a way of rewarding good behavior, participation, and effort. Attendance was kept and parents of students who had two unexcused absences in a row were encouraged to send their daughter back to the program.  Target: Child  Delivery: Teacher  Other: Teaching assistant, research staff person on-site  Duration: 80 minutes every day that school was in session, including 25 mins of skills development, 35 mins of MVPA, and 20 mins of toning and stretching. |  |  |  |
| Bruss, 20104 | 2 | PFGM, cognitive behavioral lifestyle intervention  Length of intervention, weeks: 36  Setting: School | The curriculum was divided into eight different 90-min sessions focused on the following topics: (i) promoting physical activity, (ii) recognizing and reducing sedentary activities, (iii) preserving self-esteem, (iv) weight normalcy and energy balance, (v) healthy eating environment, (vi) maintaining motivation, (vii) reading labels, and (viii) portion sizes. The intervention was delivered by school personnel (facilitators) in the elementary schools to primary caregivers of 3rd grade students.  Target: Parent/Caregiver  Delivery: School personnel  Duration: Duration (e.g., length of educational or counseling sessions): 90 mins  Other: 8 lessons  Comment: Children in the “enrolled population” were placed in three groups based on number of lessons attended by their caregivers (0, 1–4, 5–8) and compared (Table 2). Children of caregivers who completed 5–8 lessons were referred to as “completers” and were categorized into Fall and Spring groups based on when the caregiver participated in the intervention sessions. Crossover analysis was performed on the “completers” who had complete BMI data at all three data collection points (n = 122, Figure 1) focusing on intervention effects for the “completers” and the primary outcome measure of change from baseline in BMI z-score (26). |  | The curriculum was divided into eight different 90-min sessions focused on the following topics: (i) promoting physical activity, (ii) recognizing and reducing sedentary activities, (iii) preserving self-esteem, (iv) weight normalcy and energy balance, (v) healthy eating environment, (vi) maintaining motivation, (vii) reading labels, and (viii) portion sizes. The intervention was delivered by school personnel (facilitators) in the elementary schools to primary caregivers of 3rd grade students.  Target: Parent/Caregiver.  Delivery: School personnel  Duration: (Length of educational or counseling sessions): 90 mins  Other: 8 lessons  Comment: Children in the “enrolled population” were placed in three groups based on number of lessons attended by their caregivers (0, 1–4, 5–8) and compared (Table 2). Children of caregivers who completed 5–8 lessons were referred to as “completers” and were categorized into Fall and Spring groups based on when the caregiver participated in the intervention sessions. Crossover analysis was performed on the “completers” who had complete BMI data at all three data collection points (n = 122, Figure 1) focusing on intervention effects for the “completers” and the primary outcome measure of change from baseline in BMI z-score (26). |  |  | Pedometer Target: Child  Delivery: Researcher  Duration: Participants received the accelerometer on a Tuesday afternoon during school hours, with actual registration starting Tuesday at midnight. After 5 full days of registration, on the subsequent Monday, the accelerometers were reassembled, data were downloaded to a personal computer, and accelerometers were reinitialized for renewed distribution on Tuesday. | The study states, ‘JUMP-in is a school-based strategy combining environmental policy, neighborhood, parents- and personal components.’  Not sure if this is what we mean by policy. |
| Bush, 19896 | 2 | Full/part- intervention group  Length of intervention, weeks: 104  Setting: School  school heart disease prevention curriculum. | Children received curriculum on nutrition, exercise and smoking from teachers, and received a personalized health screening in the fall of each school year, with each student given results to place on a “Health Passport (full-intervention.  The second or part-intervention group of students received the curriculum and the health screening, but only their parents received the results of their cholesterol tests the students were not provided with the results to enter on their Health Passports with other screening results. Teachers received training from researchers on how to deliver the program (curriculum). Parents were mailed copies of a quarterly “Know Your Body” health newsletter and two copies of their child’s screening results—one copy to keep and one for the child’s physician—with an explanation of each value.  Target: Child Parent/Caregiver, Educator  Delivery: Researcher  Teacher  Duration: 45 mins/session for children. 3 hrs/session for teachers.  Frequency: 2 sessions/week for children 4 sessions/school year for teachers  Other: quarterly newsletter for parents |  | Children received curriculum on nutrition, exercise and smoking from teachers, and received a personalized health screening in the fall of each school year, with each student given results to place on a “Health Passport (full-intervention.  The second or part-intervention group of students received the curriculum and the health screening, but only their parents received the results of their cholesterol tests. The students were not provided with the results to enter on their Health Passports with other screening results. Teachers received training from researchers on how to deliver the program (curriculum). Parents were mailed copies of a quarterly “Know Your Body” health newsletter and two copies of their child’s screening results—one copy to keep and one for the child’s physician—with an explanation of each value.  Target: Child Parent/Caregiver Educator.  Delivery: Researcher Teacher.  Duration: 45 mins/session for children. 3 hrs/session for teachers for curriculum 0.08 per week newsletter  Frequency (e.g., number of sessions per week): 2 sessions/week for children. 4 sessions/school year for teachers.  Other: quarterly newsletter for parents. |  | Goal setting |  |  |
| Chiodera, 20087 | 1 | No control/all arms were active |  |  |  |  |  |  |  |
| Chiodera, 20087 | 2 | Professionally guided physical exercise.  Length of intervention, weeks: 34  Setting: School |  |  |  | This program aimed to professionally qualify the teaching of physical education in primary schools without changing the total amount of hours dedicated per week. Each teacher followed a specific program of physical education. The lessons focused on the development of the following motor abilities (both conditional and coordinative): (i) speed (ii) trunk flexibility (iii) long jumping (iv) somersault (first and second grades) and (v) Harre circuit test (third, fourth and fifth grades).  Target: Child  Delivery: Professional trainer (instead of the regular teacher)  Duration: 99 lessons in the study period  Frequency: 3 lessons/week |  |  |  |
| Damon, 20059 | 2 | Length of intervention, weeks: 10 months  Setting:  School: Nutrition and PE | Nutrition knowledge  Target: Child  Delivery: Researcher  Clinician  Teacher  Duration: 1 hour  Frequency:1 session per week |  |  | PE activity  Target: Child  Delivery: Teacher |  |  |  |
| Donnelly, 200911 | 2 | PAAC  Length of intervention, weeks: fall 2003-spring 2006  Setting: School moderate to vigorous physically active academic lessons. |  |  | Classroom teacher training for implementation of PAAC.  Target: Educator  Duration: included in a 6-hr in-service/school year | 90 min/wk of moderate to vigorous physically active academic lessons  Target: Child  Delivery:  Teacher  Duration: 90 mins/week.  Comment: Ninety minutes was chosen as the target since children were receiving 60 min of physical education per week and combined with PAAC lessons and this would total 150 min of PA per week which was consistent with recommendations from Healthy People 2010 |  |  | The purpose of this WSB intervention was to evaluate its effectiveness for increasing the frequency of walking to and from school among elementary school children.  The WSB was only cancelled when temperatures were below 25°F or if it was raining or snowing at the scheduled walk time |
| Foster, 201012 | 2 | The intervention consisted of four integrated components: nutrition; physical  activity; behavioral knowledge and skills; and communications and social marketing. The  rationale, techniques, and pilot testing of each component are briefly summarized below.  All intervention components lasted for 5 semesters (second semester of 6th grade, both  semesters of 7th grade, and both semesters of 8th grade). |  | The nutrition component targeted the quantity and nutritional quality of foods and  beverages served throughout the school environment (cafeteria, vending, a la carte  options, snack bars, school stores, fundraisers, and classroom celebrations). |  | The physical education (PE) component was designed to increase the amount of  time students spent in moderate-to-vigorous physical activity (MVPA), defined as a heart  rate ≥ 130 beats per minute. Intervention schools were required to schedule ≥ 225  minutes of PE over a 10-day period throughout the entire school year in order to achieve  the target of ≥ 150 minutes of MVPA per 10 days. |  | Behavioral knowledge and skills were delivered through a classroom-based  program, FLASH (Fun Learning Activities for Student Health) which targeted  awareness, knowledge, behavioral skills (e.g., self-monitoring, goal setting), and peer  influence for behavior change. Each semester students received a series of 8-10 FLASH  interactive sessions, 30 minutes each, with multiple activities per session delivered by  teachers. |  |
| Gortmaker, 199915 | 2 | Planet health intervention  Length of intervention, weeks: 68 weeks  Setting: School Classroom and physical education inter-disciplinary curriculum | Classroom interdisciplinary curriculum focused on behavioral changes to decreasing consumption of high-fat foods and increasing consumption of fruits and vegetables to 5 a day or more.  Target: Child  Delivery: Teacher  Duration: one to two 45 minutes  Frequency: 32 sessions in 2 school years. |  | Classroom interdisciplinary curriculum focused on behavioral changes to increasing moderate and vigorous physical activity. Physical education materials focused on activity and inactivity themes and included student self-assessments of activity and inactivity levels and goal setting and evaluations for reducing inactivity, replacing inactive time with moderate and vigorous physical activities of their choosing.  Target: Child  Delivery: Teacher  Duration: thirty 5-minute micro units  Other: the first 5 micro units focused on Fit-Check self-assessments and goal setting. |  | Target: Teacher  Delivery: An additional lesson developed a 2-week campaign to reduce television viewing in households (“Power Down”)  Other :incentives |  | Children in the “enrolled population” were placed in three groups based on number of lessons attended by their caregivers (0, 1–4, 5–8) and compared (Table 2). Children of caregivers who completed 5–8 lessons were referred to as “completers” and were categorized into Fall and Spring groups based on when the caregiver participated in the intervention sessions. Crossover analysis was performed on the “completers” who had complete BMI data at all three data collection points (n = 122, Figure 1) focusing on intervention effects for the “completers” and the primary outcome measure of change from baseline in BMI z-score (26). |
| Graf, 200816 | 2 | Health education and PA  Length of intervention,  weeks: ~208  Setting: School | Promotion of health through extra health education lessons. These lessons mainly dealt with biological background, nutrition, and self-management  Target: Child  Delivery: Teacher  Duration: 20-30 min/lesson  Frequency: One lesson/week. |  | Promotion of health through extra health education lessons. These lessons mainly dealt with biological background, nutrition, and self-management  .  Target: Child  Delivery: Teacher  Duration: 20-30 min/lesson  Frequency: One lesson/week | Promotion of physical activity through: Providing physical activity breaks once a morning. Providing physical activity opportunities during breaks and optimized PE classes.  Target: Child  Delivery: Teacher  Duration: Physical activity breaks were 5 minutes each morning  Frequency: ~5 breaks/week (assume)  Comment: physical activity breaks (5 min each) should be allowed during lessons once a morning. Furthermore, pupils were given PA opportunities during breaks and their physical education lessons | Other :health education lessons also dealt with self-management. | Goal setting Pedometer  Other :Videos, internet or CD-ROM  Target: Child  Delivery: Teacher  Duration: Supportive  Material for the Educational Program include Individually computer-tailored advice via Internet or CD-ROM (TEST it) Pocket-sized diary (CHECK it) Pedometer and Supportive video material. | Behavior Change Methods Used: Self-monitoring, Self-evaluation, Reward increasing skills, Goal setting, Environmental changes, Social encouragement, Social support, Information regarding behavior, Personalized messages. |
| Gutin, 200817 Yin, 200563 | 1 | Other: regular health screening diet/PA information |  |  |  |  |  |  |  |
| Gutin, 200817 Yin, 200563 | 2 | "fitogenic group" [Yin 2005a]  Length of intervention, weeks: ~138  Setting: School An after-school program (PA healthy snacks plus academic enrichment/homework assistance) [Yin 2005a] |  | As part of the PA sessions, youths were provided with a healthy snack in the initial 40-minute period of each session. The authors consider this to be a modest dietary intervention as these snacks might have been different from the after-school snacks the children would have ordinarily eaten in after-school hours. Important to note that no attempt was made to limit energy intake. This modest nutritional intervention was the USDA after-school snacks program. [Yin 2005a] According to the USDA program guidelines, qualifying snacks must include at least two different items from the following four groups: (a) a serving of fluid milk, (b) a serving of meat or meat alternative (cheese or peanut butter), (c) a serving of vegetables or fruits or full-strength vegetable or fruit juice, and (d) a serving of whole grain bread, enriched bread, or cereal. [Yin 2005a]  Target: Child  Delivery: Teacher  Other: Richmond  County Board of Education (RCBE) school nutrition service staff.  Other: Provide healthy snacks using the USDA after-school snacks program in each after-school session.  Comment: 5 days/week\*3 school years |  | After-school PA sessions. Sessions included an initial 40-min period during which the youths were provided with healthy snack, academic enrichment and homework assistance. The remaining 80 minutes were devoted to PA. These 80 minutes included a variety of activities designed to improve sport skills, aerobic fitness, strength, and flexibility. Around 20 minutes of warm-up and skills instruction. [Yin 2005b]. About 40 mins of continuous moderate-vigorous PA (MVPA) which involved modified tag games and ball games [Yin 2005b]. The aim of MVPA was top achieve a heart rate of 140bpm. [ Yin 2005 c] About 10 minutes of calisthenics and cool-down [Yin 2005b] The activities were designed to be mastery-oriented rather than competitive. Furthermore, each month had a different theme to keep students interested in the activities. [Yin 2005b]  Target: Child  Delivery: Teacher  Other: Certified schoolteachers and paraprofessionals, most employed at participating school [Yin 2005a].  Duration: 80 mins/session  Frequency: 5 sessions/week on school days, for 3 school years.  Other: Participants were offered flexibility in that they did not have to attend every day to continue in the program. |  |  | Note: the intervention educated parents, and changed children's behaviors via teachers' daily activities and fruits provided. Overall, the intervention focused on improving health behavior on a daily basis in the day care setting, aimed at establishing a health promoting behavior program that might also be maintained outside of the daycare setting, e.g. at home |
| Haerens, 200618 | 2 | Intervention only  Length of intervention, weeks: 91  Setting: School :school-based environmental modifications, activities to promote healthy eating and physical activity | Children received additional information through folders and posters about the improved health consequences of eating fruit as opposed to snacks and drinking water rather than soft drinks. Over the 2 school years, a total of 2 class hours was spent on the promotion of healthy eating at the personal level.  Every school year, children got the computer-tailored intervention for fat intake and fruit intake during 1 class hour. Questionnaires concerning demographics, fat intake, fruit intake, and psychosocial determinants of food choices lead to tailored fat and fruit advice. After completing the questionnaire, tailored feedback was displayed immediately on the screen. Both the fat and the fruit advice started with a general introduction, followed by normative feedback, which related their intakes to the recommended intakes. The fat advice indicated the sources of fat in the diet and tips were given on how to replace fatty foods. Teachers were encouraged to organize extra supportive activities like healthy breakfasts, an educational game concerning the food pyramid, and a poster design competition as suggested in the intervention manual.  Target: Child Educator  Delivery: Researcher, Teacher  Duration: NR  Other: child targeted sessions: 2 class hours over 2 years. | The food intervention focused on three behavioral changes that were supported by environmental changes: increasing fruit consumption to at least two pieces a day, reducing soft drink consumption and increasing water consumption to 1.5 L/d, and reducing fat intake. To facilitate fruit consumption, schools were asked to sell fruit at school at very low prices or for free at least once a week. It was also suggested to offer fruit as a dessert during lunch break. Schools tried to promote drinking water by offering it for free or at a lower price than soft drinks. All children received a free water can to make it possible to bring water to school.  Target: Child  Delivery: Researcher  Other: School. Focus on fruits and water | The computer-tailored intervention for physical activity was completed once each school year, during 1 class hour. First, Children had to fill out questions on the computer screen. After completing all questions, tailored feedback was displayed immediately on the screen. First, a general introduction and normative feedback were presented. The normative feedback related the children’s activity levels to the current physical activity recommendations. Based on the theory of planned behavior, children got tailored feedback about their intentions, attitudes, self-efficacy, social support, knowledge, benefits, and barriers related to physical activity. The Trans theoretical Model was used to match content and approach of this feedback to the stages of changes. Pre-contemplators and contemplators received general information. Children in the preparation stage received more specific information on physical activity and health and were motivated to become more active. In the action stage, children were motivated to stay active, and in the maintenance stage, children were told that they were doing fine and should carry on with their healthy behavior. Overall, an active lifestyle and participation in sports activities were promoted in an advice sheet of approximately five to six pages.  Target: Child  Delivery: Researcher  Other: Over 2 school years a total of 4 class hours was spent on the promotion of physical activity at the personal level. | Schools were encouraged to create more opportunities to be physically active during breaks, at noon, or after school hours. This resulted in a weekly organization of an average 4.7 hours of extra physical activities. Schools were encouraged to vary the content of the physical activities offered to reach all pupils. The organization of non-competitive activities was encouraged to increase the engagement of less skilled children. Additionally, extra sports materials were made available. Every school received an intervention box with sports materials such as ropes, Frisbees, balls, beach ball sets, etc. Sports materials were made available during breaks (1 of 10 schools), at noon (6 of 10 schools), and during after school hours (3 of 10 schools). During classes, all children had to cycle for 10 minutes on a computerized cycle ergometer.  Target: Child  Delivery: Teacher  Duration: 60 minutes  Frequency: one session per day |  | Other: Steps taken to increase awareness of the intervention. A STOPP newsletter distributed to parents and school staff. Also, research staff had meetings with the school personnel. School nurses received education in obesity-related problems. Target: Parent/Caregiver Educator Other: School nurses Delivery: Researcher Duration: STOPP newsletter distributed twice annually. The meetings were once every term. |  |
| Haerens, 200618 | 3 | Intervention: Parent involvement.  Length of intervention, weeks: 91  Setting: School :school-based environmental modifications activities to promote healthy food and physical activity Home :focus was on involving and informing parents via newsletters, parent-targeted computerized intervention. | Children received additional information through folders and posters about the improved health consequences of eating fruit as opposed to snacks and drinking water rather than soft drinks. Over the 2 school years, a total of 2 class hours was spent on the promotion of healthy eating at the personal level. Every school year, children got the computer-tailored intervention for fat intake and fruit intake during 1 class hour. Questionnaires concerning demographics, fat intake, fruit intake, and psychosocial determinants of food choices lead to tailored fat and fruit advice. After completing the questionnaire, tailored feedback was displayed immediately on the screen. Both the fat and the fruit advice started with a general introduction, followed by normative feedback, which related their intakes to the recommended intakes. The fat advice indicated the sources of fat in the diet and tips were given on how to replace fatty foods. In the same way as in the physical activity advice, feedback was based on the Theory of Planned Behavior and the Trans theoretical Model. Teachers were encouraged to organize extra supportive activities like healthy breakfasts, an educational game concerning the food pyramid, and a poster design competition as suggested in the intervention manual. Parents were involved and educated to promote healthy diet. Schools were asked to set up an interactive meeting on healthy food, physical activity, and the relationship with overweight and health. Three times a year, information on healthy food and physical activity was published in the school paper and newsletters for the parents. In addition, all parents received a free CD-ROM with the adult computer tailored intervention for fat intake and physical activity to complete at home. Through an information folder, parents were informed that their child accomplished the same computer-tailored program at school.  Target: Child  Parent/Caregiver, Educator  Delivery:  Researcher,  Teacher  Duration: 2 class hours over 2 years | The food intervention focused on three behavioral changes that were supported by environmental changes: increasing fruit consumption to at least two pieces a day, reducing soft drink consumption and increasing water consumption to 1.5 L/d, and reducing fat intake. To facilitate fruit consumption, schools were asked to sell fruit at school at very low prices or for free at least once a week. On average, 69% (11% to 100%) of the pupils subscribed to the school fruit program. It was also suggested to offer fruit as a dessert during lunch break. Schools tried to promote drinking water by offering it for free or at a lower price than soft drinks. All children received a free water can to make it possible to bring water to school. Target: Child Delivery: Researcher Other: School Duration: Change in intake (e.g., increased fruit and vegetable intake decrease fat intake): focus on fruits and water | The computer-tailored intervention for physical activity was completed once each school year, during 1 class hour. First, Children had to fill out questions on the computer screen. After completing all questions, tailored feedback was displayed immediately on the screen. First, a general introduction and normative feedback were presented. The normative feedback related the children’s activity levels to the current physical activity recommendations. Based on the theory of planned behavior, children got tailored feedback about their intentions, attitudes, self-efficacy, social support, knowledge, benefits, and barriers related to physical activity. The Trans theoretical Model was used to match content and approach of this feedback to the stages of changes. Pre-contemplators and contemplators received general information. Children in the preparation stage received more specific information on physical activity and health and were motivated to become more active. In the action stage, children were motivated to stay active, and in the maintenance stage, children were told that they were doing fine and should carry on with their healthy behavior. Overall, an active lifestyle and participation in sports activities were promoted in an advice sheet of approximately five to six pages. Parents were involved and educated to promote healthy diet. Schools were asked to set up an interactive meeting on healthy food, physical activity, and the relationship with overweight and health. Three times a year, information on healthy food and physical activity was published in the school paper and newsletters for the parents. In addition, all parents received a free CD-ROM with the adult computer tailored intervention for fat intake and physical activity to complete at home. Through an information folder, parents were informed that their child accomplished the same computer-tailored program at school.  Target: Child,  Parent/Caregiver  Delivery: Researcher  Duration: 2 session in 2 years | Schools were encouraged to create more opportunities to be physically active during breaks, at noon, or after school hours. This resulted in a weekly organization of an average 4.7 hours of extra physical activities. Schools were encouraged to vary the content of the physical activities offered to reach all pupils. The organization of non-competitive activities was encouraged to increase the engagement of less skilled children. Additionally, extra sports materials were made available. Every school received an intervention box with sports materials such as ropes, Frisbees, balls, beach ball sets, etc. Sports materials were made available during breaks (1 of 10 schools), at noon (6 of 10 schools), and during after school hours (3 of 10 schools). Over the 2 school years, a total of 4 class hours was spent on the promotion of physical activity at the personal level. Children received a physical fitness test and a computer tailored intervention for physical activity. During classes, all children had to cycle for 10 minutes on a computerized cycle ergometer.    Target: Child  Delivery: Teacher  Duration: 60  Frequency: one session per day |  |  |  |
| Heelan, 200919 | 2 | Walking School Bus (WSB) program  Length of intervention, weeks: 78  Setting: School A walk-to-school program. |  |  | Walking School Bus (WSB) program  A WSB program relies on the concept that children walk to school in groups along a set route (and with set stops along the way), with adults essentially serving as the bus driver for supervision. For the WSB intervention in this study, neighborhood walk-stops were designated within a 1-mile radius of the two schools that were assigned the WSB intervention. An adult WSB leader (a paid college student) met the neighborhood children at these designated walk-stops at specified times each morning and walked the group of children to their school and back to the walk stop in the afternoon. Eight routes were created for the 2 WSB schools. On average, participants walked 0.65 miles each way to and from school.  Duration: Entire academic year for 2 "school years" - 9 months/year  Frequency: Twice a day (Once in the morning and once in the afternoon). |  |  |  |  |
| James, 200421 | 2 | Intervention  Length of intervention, weeks: NR  Setting: School classroom-based delivery of intervention. | One investigator delivered the program to all intervention classes. The program's main objective was to discourage consumption of fizzy drinks (sweetened and unsweetened) alongside positive affirmation of a balanced healthy diet. The program was designed to have one simple, uncomplicated message to maximize response in children. Children were told that by decreasing sugar consumption they would improve overall wellbeing and by reducing the consumption of diet carbonated drinks they would benefit dental health.  Target: Child  Delivery: Researcher  Other: with teacher assistance encouraged  Duration:1 hour/session  Frequency: 4 sessions total  Comment: each session had a different activity and focus related to the same message. The initial session was focused on the balance of good health and promotion of drinking water. Children tasted fruit and learned about the sweetness of natural products. Each child was also given a tooth immersed in a sweetened carbonated cola to assess its effect on dentition. The second and third sessions focused on a music competition where each class was given a copy of a song (Ditch the Fizz) and challenged to produce a song or rap with a healthy message. The final session involved art presentations and a classroom quiz based on a popular TV game show. Children were also encouraged to access more info through the project's website (www.b-dec.com). |  |  |  | Food diary |  |  |
| James, 200722 | 2 | Intervention group  Length of intervention, weeks: 39  Setting: School Education promoting a healthy diet and discouraging the consumption of carbonated drinks. | To discourage the consumption of “fizzy” drinks (sweetened and unsweetened) with positive affirmation of a balanced healthy diet.  Target: Child  Delivery: Researcher  Duration: 4 one hour sessions total  Comment: Children  were told that by decreasing sugar consumption they would improve overall wellbeing and that by reducing the consumption of diet carbonated drinks they would benefit dental health. The initial session focused on the balance of good health and promotion of drinking water. The children tasted fruit to learn about the sweetness of natural products. In addition, each class was given a tooth immersed in a sweetened carbonated cola to assess its effect on dentition. The second and third sessions comprised a music competition each class was given a copy of a song (Ditch the Fizz) and challenged to produce a song or a rap with a healthy message. The final session involved presentations of art and a classroom quiz based on a popular television game show. The children were also encouraged to access further information through the project’s website (www.b-dec.com). |  |  |  |  |  |  |
| Kafatos, 200523 | 2 | Cretan health and Nutrition Education Program  Length of intervention, weeks: 312  Setting: School focus on classrooms, PE, and playground. | Health and nutrition component  Target: Child Delivery: Teacher  Duration: 13-17 hours of classroom material annually  Comment: Classroom modules were designed to develop behavioral capability, expectations and self-efficacy for healthful eating. Learning activities were designed to influence expectancies that placed an important value on achieving this behavior. Methods included modeling (through stories, role playing and demonstrations), self-monitoring of behavior, contracting to try new behaviors, skill development and verbal praise. Cues, posters and displays were also provided in the classroom. |  | Theoretical component delivered by physical education instructors  Target: Child  Delivery: Teacher  Duration: 4-6 h for classroom material per year  Comment: Theory comprised of two parts: 1) that which follows screening and explains the tests and results, and 2) that which concentrates on intervention to improve fitness results through behavioral changes. Regarding the first part, explanations were offered in a simple, friendly way about the importance of the fitness and anthropometric tests in relation to being strong. Regarding the second part, self-improvement was emphasized to allow for success on a regular basis, and progression of skills and fitness scores identified for each grade to help ensure continual fitness development from year to year. | Practical component delivered by physical education instructors  Target: Child  Delivery: Teacher  Duration: 45 min/session Frequency: two sessions per week  Comment: Practical aspects were delivered in the playground. Fitness-oriented exercise sessions were enjoyable, of moderate intensity and involved total classroom participation. All sessions, at the beginning, consisted of a short warm up period and stretching exercises. In the remainder of the time pupils were engaged in activities such as skipping, fitness stations and several aerobic group games. Less emphasis was placed on competition and winning and rewards were given for all levels of effort and ability. |  | Food diary  Target: Child  Duration: Participants were to complete daily diaries at Weeks 1, 4, 8, 12, and 24  Comment: Diaries recorded the following: the total time of the 10 activities they spent the most time doing that day, not including school or sleeping pedometer totals food intake specifying servings per day by food group and number of fast-food meals and number of best choice lunches. Participants were reminded during the KLF exercise programs to complete the diaries themselves in the upcoming week. The intent of study diaries was to build awareness about healthy food choices and activity patterns. | KLF group met once weekly for 12 consecutive weeks. The KLF program sessions were held immediately after school at the elementary school. |
| Kain, 200924 | 2 | A school-based intervention that included a diet/nutrition component and enhanced physical activity.  Length of intervention, weeks: 102  Setting: School focused on class and PE, school kiosks, and recess | Teachers (4th–7th grades): Training by nutritionist, 10 h in total. Children: Contents on healthy eating from trained teachers (4th–6th grades: 8–11 h 7th grade: 5–6 h). Parental involvement: Two educational lessons by the nutritionist to parents of 4th–7th grade children.Supervised by nutritionist  Target: Child  Parent/Caregiver  Educator  Other: Teacher  Delivery: Teacher  Other: Nutritionist  Comment: Duration and frequency varied according to different intervention components. In 2004, some components of the intervention were discontinued or modified. |  | Teachers (4th–7th grades): Trained in the CALC program. Children: 90 min of additional weekly PE classes. Four sessions to 1st–4th grade teachers (n=28) on correct application of PE curriculum Active recess during 4 months. Supervised by PE teacher  Target: Child  Educator Other, Teacher  Delivery: Teacher  Other: PE teacher  Comment: Duration and frequency varied according to different intervention components. In 2004, some components of the intervention were discontinued or modified. |  |  | Other :a novel interactive card game  Target: Child  Delivery: Researcher  Duration: A novel interactive card game, “GoTri,” was developed. GoTri simulated completing a triathlon, and students were provided with a starter set of cards. They then had to complete specific physical activities, often with friends or a family member, or to follow particular dietary guidelines to earn 10 “missing” cards. Once students had obtained a complete set,they were able to play the game against each other. |  |
| Lazaar, 200726 | 2 | Group GC(ob)  Length of intervention, weeks: NR |  |  |  |  |  |  |  |
| Lazaar, 200726 | 3 | Group GI (No)  Length of intervention, weeks: 26  Setting: School PA after school |  |  |  | After-school exercise program (a playful physical practice+ dynamic exercise )  Target: Child  Delivery: Teacher  Duration: 1 hour/session  Frequency: twice/week  Comment: Children from GIno and GIob were required to follow PA after class, twice a week for 1 h. The exercise program was designed to enhance the joy of movement, body awareness and team spirit in order to bring about long-term changes in behavioral patterns. Moreover, all the sessions aimed at meeting the same double objective: a playful physical practice and 45 min of dynamic exercise within 1 hour of PA. |  |  |  |
| Lazaar, 200726 | 4 | Group GI (ob)  Length of intervention, weeks: 26  Setting: School PA after school |  |  |  | After-school exercise program (a playful physical practice+ dynamic exercise )  Target: Child  Delivery: Teacher  Duration: 1 hour/session  Frequency: twice/week  Comment: Children from GINo and GIOb were required to follow PA after class, twice a week for 1 h. The exercise program was designed to enhance the joy of movement, body awareness and team spirit in order to bring about long-term changes in behavioral patterns. Moreover, all the sessions aimed at meeting the same double objective: a playful physical practice and 45 min of dynamic exercise within 1 h of PA. |  | Other :Parental involvement  Target: Parent/Caregiver  Delivery: Teacher  Duration: Parents in the Weight control intervention schools received weekly newsletters with information that mirrored the children’s curriculum. Each newsletter had a section on healthy eating and sections on healthy exercise. Parents also were asked to write down specific ways they might increase their family’s fruit and vegetable intake. Parents received a $5.00 grocery store coupon for each homework assignment they completed and turned in. |  |
| Madsen, 199330 | 1 | No control/all arms were active |  |  |  |  |  |  | Abstracted from refid 32,60Parents were also involved in the study. Meetings were organized whereby parents in the intervention group were given a file containing their child's screening results. Presentation on the importance of topics relevant to dietary and exercise habits of the children were issued. Parents were encouraged to modify their dietary habits as well as those of their children and support them in increasing their physical activity. |
| Madsen, 199330 | 2 | Health behavior change  Length of intervention, weeks: 52 weeks  Setting: School  Training families on self-monitoring and dietary and physical activity behavior change. | Training in self-monitoring. Reduce sodium to 3 g per day and fat intake to 30% of total daily kilocalories. A heart healthy potluck dinner to celebrate ‘graduation’ from the intensive intervention. Maintenance sessions covered breaking habit chains, making healthy choices in restaurants, grocery shopping, friend and family peer pressure and planned and unplanned breaks in dietary routines.  Target: Child, Family  Delivery: Facilitators  Duration: weekly for 12 weeks of intensive intervention followed by 6 maintenance sessions over 9 months. |  | Self monitoring focused on physical activity. Starts with aerobic exercise session with warm-up and cool-down, there was a gradual increase in intensity and enjoyable, family-oriented activities were emphasized. Then, separate adult and child education segments provided new information and skills at each session. Active participation was stressed and learning games were developed for children  Target: Child, Family  Delivery: Facilitators  Duration: weekly for 12 weeks of intensive intervention followed by 6 maintenance sessions over 9 months. |  | Goal setting |  |  |
| Madsen, 200964 | 1 | No control/all arms were active |  |  |  |  |  |  | There was a parent intervention intended to help parents encourage behavior change attempts through praise, active support, and positive role-modeling. (No further information is provided.) |
| Madsen, 200964 | 2 | SCORES  Length of intervention, weeks: 18 (8 weeks in the fall, 10 in the spring)  Setting: School  After-school physical activity and literacy program. |  |  |  | Children in the program play soccer three days a week (two practice days with up to two hours of moderate-to- vigorous physical activity and one inter-school game day with a warm-up period followed by a one-hour game)    Target: Child  Delivery: Teacher  Duration: 3 | Other Literacy improvement: participants perform community service or undertake creative writing the remaining two days a week. |  |  |
| Madsen, 201165 | 2 | Parent notification of BMI screening  Setting: School school-based BMI screening with optional parent notification  Policy: Yes |  |  |  |  | Other: Parent notification of BMI screening (policy) |  |  |
| Manios, 199932 | 1 | Other:  Usual care for children (play freely without a structured program, supervised by class teachers), and parents received mailed envelopes with all medical screening results with brief comments. |  |  |  |  |  | Other: Home Team component (described in detail elsewhere)  Target: Child Parent/Caregiver, family | The program and its adoption in the El Paso community have been described in detail elsewhere. (References are listed in Study Characteristics form).  "Although the training sessions presented national cat materials and procedures, there was a distinct emphasis on adaptation rather than fidelity (using materials exactly as they were designed). How the program was adapted to a low-income US Mexico border region has been detailed elsewhere(37) and included ethnic variations on curricula, particular school- and district-based criteria variations, and variations due to regional and statewide educational and health mandates. One of the most noticeable differences from the national CATCH implementation was that schools were allowed to implement each component of El Paso CATCH in a way that suited the school environment. For instance, some schools did not use the classroom curriculum for anything but a general reference and had classroom teachers participate in school-wide CATCH events each year instead."  "Control schools did not receive any of the El Paso CATCH program materials and did not attend any of the training for the program. However, they received $1000 at the beginning of each school year as an incentive for participation." |
| Manios, 199932 | 2 | Health education  Length of intervention, weeks: 156  Setting: School health education plus PA components. | School-based intervention with health and nutritional components were delivered in the classroom for a total of 13 to 17 hrs over the academic period targeting students. Parents also attended educational sessions on dietary habits in children and received their child's medical screening.  Target: Child, parent/ Caregiver  Delivery: Teacher  Duration: meeting held annually for parents.  Other: 13-17h annually for children  Comment:  Provide children with workbooks and design teacher aids. Provide parents screening results and presentations on the importance of topics relevant to children's dietary and exercise habits. |  | Physical fitness and activity component included 4-6 hrs of educational sessions each year delivered by PE teachers to target students. Students were to complete workbook exercises at home with parents.  Target: Child, parent/  Caregiver  Delivery: PE instructors  Duration: meeting held annually for parent.  Other: 4-6 h of classroom material per year for children.  Comment: Theory comprised of two parts: 1) that which follows screening and explains the tests and results, and 2) that which concentrates on intervention to improve fitness results through behavioral changes. Regarding the first part, explanations were offered in a simple, friendly way about the importance of the fitness and anthropometric tests in relation to being strong. Regarding the second part, self-improvement was emphasized to allow for success on a regular basis, and progression of skills and fitness scores identified for each grade to help ensure continual fitness development from year to year. Three to five workbook exercises per year were completed at home by pupils together with their parents. For parents, they were provided with screening results and presentations on the importance of topics relevant to children's dietary and exercise habits | Practical PE sessions were delivered in two PE sessions per week delivered by PE instructors targeting children. Activities included stretching exercises, skipping, fitness stations and aerobic games.  Target: Child  Delivery, PE instructors  Duration: 45 min/session  Frequency: 2 sessions/week  Other: about 60 sessions per year  Comment: Practical aspects were delivered in the playground. Fitness-oriented exercise sessions were enjoyable, of moderate intensity and involved total classroom participation. All sessions, at the beginning, consisted of a short warm up period and stretching exercises. In the remainder of the time pupils were engaged in activities such as skipping, fitness stations and several aerobic group games. Less emphasis was placed on competition and winning and rewards were given for all levels of effort and ability. |  |  |  |
| Manios, 200233 | 2 | Creten health and nutrition education program  Length of intervention, weeks: 312  Setting: School focus on classrooms, PE, and playground. | Multi-component workbooks covering dietary issues were produced for grades 1-6 each year in addition to teaching aids given by teachers. The nutrition component was delivered in class by the teacher for 13-17 hours each year.  Target: Child  Delivery: Teacher  Other: 13-17 hr of classroom material annually.  Comment: Classroom modules were designed to develop behavioral capability, expectations and self-efficacy for healthful eating. Learning activities were designed to influence expectancies that placed an important value on achieving this behavior. Methods included modeling (through stories, role playing and demonstrations), self-monitoring of behavior, contracting to try new behaviors, skill development and verbal praise. Cues, posters and displays were also provided in the classroom. |  | The theoretical part of the physical fitness and activity component was delivered by PE teachers in two-45-min sessions per week.  Target: Child  Delivery:Teacher  Duration: 45 min/session  Frequency :2 session/week  Other: 4-6 h of classroom material per year  Comment: Theory comprised of two parts: 1) that which follows screening and explains the tests and results, and 2) that which concentrates on intervention to improve fitness results through behavioral changes. Regarding the first part, explanations were offered in a simple, friendly way about the importance of the fitness and anthropometric tests in relation to being strong. Regarding the second part, self-improvement was emphasized to allow for success on a regular basis, and progression of skills and fitness scores identified for each grade to help ensure continual fitness development from year to year. | Practical part of the physical fitness and activity component delivered by physical education instructors in 4-6 hrs of classroom material per year.  Target: Child  Delivery: Teacher  Duration: 45  min/session  Frequency: 2 session/week  Other: 4-6 h of classroom material per year  Comment: Practical aspects were delivered in the playground. Fitness-oriented exercise sessions were enjoyable, of moderate intensity and involved total classroom participation. All sessions, at the beginning, consisted of a short warm up period and stretching exercises. In the remainder of the time pupils were engaged in activities such as skipping, fitness stations and several aerobic group games. Less emphasis was placed on competition and winning and rewards were given for all levels of effort and ability. |  |  |  |
| Manios, 200634 | 2 | Health and nutrition education  Length of intervention, weeks: 156  Abstracted from 32 ,60  Setting: School school health promotion program. | Health and Nutrition Education program based on the health profile component of the ‘Know Your Body’ school health-promotion program of the American Health. Foundation.  Target: Child Parent/Caregiver  Delivery: Teacher  Duration:  Abstracted from Manios, 199932 and Manios,199860.Twice a year for parents, 13-17 hours of classroom material annually for children. |  | Abstracted from Manios, 199932 and Manios,199860.  Theoretical component of physical fitness and activity.  Target: Child,  Parent/Caregiver  Delivery: PE instructors  Duration: twice a year for parents, 4-6 h of classroom material per year | Abstracted from Manios,199932 and Manios,199860.  Practical component of physical fitness and activity.  Target: Child  Delivery: PE instructors  Duration: 45 min/session, two sessions per week. |  |  |  |
| Muckel-bauer, 200935 | 2 | IG  Length of intervention, weeks: 47  Setting: School focused on classroom instruction on water needs of the body and the water circuit in nature installation of water fountain in schools. | To promote behavior change and health education  Target: Child  Delivery: Teacher  Duration: 45 min  Frequency: 4 sessions total  Comment: Classroom lessons dealing with the water needs of the body and the water circuit in nature were taught. At the beginning of the study, teachers received a booklet with the prepared curriculum and necessary materials to implement the lessons in the formal school curriculum. The lessons were developed by using the results of empirical teaching research and were intended to improve the constructs of intention, attitudes, and perceived behavioral control, on the basis of the theory of planned behavior. | To promote behavior change  Target: Child  Delivery: Researcher, Teacher  Comment: In each IG school, 1 water fountain or 2 for schools with >150 participants, was installed. The fountains provided cooled, filtered, plain or optionally carbonated water. In addition, each child received a plastic water bottle (500 mL), and teachers were encouraged to organize filling of the water bottles each morning for all children in the corresponding classes. |  |  | Goal setting |  |  |
| Neumark-Sztainer, 201036 | 2 | New moves  Length of intervention, weeks:  16 weeks  Setting: School All girls’ physical education class. | Be fueled nutritional class to increase fruit and vegetable intake, limit sugar-sweetened beverages, eat breakfast every day, pay attention to portion sizes and your body’s signs of hunger and satiety.  Target: Child  Delivery: Teacher,  Other: New moves coaches  Duration: 1day/week | Girls were served healthy foods during lunch get together (lunch bunches) held at school during maintenance phase.  Target: Child  Delivery: New moves staff  Other: healthy food. | Be fit physical activity to expose girls to be more physically active and take part in fun activities available in the community e.g. dance, hip hop, kickboxing.  Target: Child  Delivery: Teacher,  Other: New moves coaches  Duration: 4days/ week. |  | Other :weight control behaviors | Other :home activities and reinforcements  Target: Child  Delivery: parents  Duration: Child workbooks included five main sections: introduction to weight control and prevention, the Traffic-Light Diet, developing a healthy eating and activity environment for children, behavior change techniques, and maintenance of behavior change. Children were reinforced for completing their program-related activities at home by having a sticker placed on a tracking sheet. | Weight-control treatment was provided to the parents for eight weekly meetings, followed by four biweekly and two monthly meetings during the 6-month intensive treatment. Participating parents and children attended the first meeting, at which they received the first modules in their parent and child workbooks.  Note: interventions mostly provided to parents, but parents can influence children through modeling and home activities. |
| Newton, 201037 | 1 | No control/all arms were active |  |  |  |  |  |  |  |
| Newton, 201037 | 2 | Healthy Eating and Exercise (HEE) program  Length of intervention, weeks:  78 weeks  Setting: School A school-based environmental approach  Policy: Yes | To facilitate the dietary component's goals, school cafeteria menus were modified consistent with the stated dietary goals, they were hung in the classrooms, and healthy choices were announced via loudspeaker Materials were provided to the teachers through twelve, two-month long campaigns that could be used to increase children's knowledge of healthy eating and exercise habits. Teachers were provided with healthy nutrition tips  Target: Child, Educator  Duration: NR  Duration (e.g., length of educational or counseling sessions): NR  Materials provided to the teacher were through twelve, two month-long campaigns | The dietary component was intended to increase the (children's) consumption of fruits, vegetables, and grains and to decrease consumption of dietary fat.  Target: Child  Change in intake (e.g., increased fruit and vegetable intake, decreased fat intake): increase consumption of fruit, vegetables, and grains.  Goals compatible with conventional nutrition recommendations: 5 fruits and vegetables per day [Williamson et al 2007]  Change in calorie intake :NR  Goals compatible with conventional nutrition recommendations: <30% of dietary energy from total fat, <10% energy from saturated fat, & 20-30 g fiber/d.[Williamson et al 2007] | Teachers were encouraged to model daily physical activity tips which engage students in short bouts of physical activity, and to discuss ways to promote physical activity outside of school.  Target: Child  Delivery: Teacher | The physical activity component was intended to increase physical activity to 60 minutes per day. Each classroom was provided with physical activity equipment that could be used indoors and outdoors. Teachers were encouraged to provide 5 minutes of physical activity after every 30 minutes of instruction  Target: Child  Delivery: Teacher  Duration: 60 minutes/day | Other :Parental component aimed at encouraging families to make changes to the home environment that promote physical activity and healthy food options |  |  |
| Reed, 200838 | 1 | Other :usual practice group teachers were asked to continue their regular program of physical education and school-based PA. |  |  |  |  |  |  |  |
| Reed, 200838 | 2 | INT (AS! BC model)  Length of intervention, weeks: 47 weeks (11 months)  Setting: School 11 out of 20 schools that volunteered to participate and were not already engaged in PA programs - 7 were randomized to INT, 3 to usual practice (control) 4 of these were "liaison" and 3 were "champion" which distinguished between level of facilitation provided to teachers (liaison group had weekly contact with the School Facilitator who would come to the classroom and provide mentorship and demonstrations of activities in the champion situation, the School Facilitator provided initial training and then provided support to a designated teacher "champion" (vs. every classroom) each room also had a Classroom Action Bin containing basic resources to support the teacher's Action Plan Home.  The intervention (INT group) targeted 6 action zones, 1 of which was "family and community Community or environment-level :same as above - the intervention targeted 6 action zones, 1 of which was "family and community. |  |  | Possibly through the model's targeting of 6 "Action Zones" in the school: i) school environment, ii) scheduled physical education, iii) extra-curricular, iv) school spirit, v) family and community, and vi) classroom action towards the goal of delivering 15 min of moderate to intense PA daily for 75 extra minutes of PA weekly in the INT groups (for 150 minutes per week in total)- but this component was not explicitly elaborated on in this article nor the related ones mentioned earlier. A school Action Team made up of the school principal and/or teachers was convened at each school and this group worked with the AS! BC facilitator to design a program with activities for each of the 6 zones. The facilitator also conducted a 1-day training of intervention group teachers.  Target: Child  Delivery: Teacher  Comment: BC INT schools were asked to deliver 15 min of moderate to intense physical activity daily to achieve 75 min of extra physical activity per week (in addition to 2X40 min PE classes. | Again, possibly through the model's targeting of 6 "Action Zones" in the school: i) school environment, ii) scheduled physical education, iii) extra-curricular, iv) school spirit, v) family and community, and vi) classroom action towards the goal of delivering 15 min of moderate to intense PA daily for 75 extra minutes of PA weekly in the INT groups (for 150 minutes per week total) -teachers would provide opportunities in the classroom for students to "snack on physical activities", such as skipping, dancing, and resistance exercises throughout the school day  Target: Child  Delivery: Teacher  Comment: BC INT schools were asked to deliver 15 min of moderate to intense physical activity daily to achieve 75 min of extra physical activity per week (in addition to 2X40 min PE classes. |  |  |  |
| Sahota, 200141 | 2 | Length of intervention, weeks: 52  Setting: School | Knowledge and attitudes towards healthy living  Target: Child  Delivery: Researcher, Teacher | Modifications of school meal  Target: Child  Delivery: Researcher |  | PE  Target: Child  Delivery: Researcher | Target: Researcher |  |  |
| Sallis, 199342 | 2 | Teacher-led  Length of intervention, weeks: 104  Setting: School PE class+ self-management curriculum+ teachers' in-service training. |  |  | Self-management curriculum to promote PA outside school for children.  Target: Child  Delivery: Teacher  Duration: 30 minutes/class  Frequency: 1 class/week  Comment: Each lesson taught a skill or concept believed to be relevant to generalizing physical activity outside of the school and maintaining activity habits after the end of the formal intervention. | PE classes  Target: Child  Delivery: Teacher  Duration: 30 minutes/class  Frequency: 3 classes /week. | Goal setting |  |  |
| Sallis, 199342 | 3 | Specialist-led  Length of intervention: 2 school years  Setting: School :PE class +self-management curriculum. |  |  | Self-management curriculum to promote PA outside school for children  Target: Child  Delivery: certified PE specialists  Duration: 30mins/class  Frequency: 1 class/week  Comment: Each lesson taught a skill or concept believed to be relevant to generalizing physical activity outside of the school and maintaining activity habits after the end of the formal intervention. | PE classes  Target: Child  Delivery: certified PE specialists  Duration: 30 mins/class  Frequency: 3 classes/week. | Goal setting |  | The nutrition intervention curriculum also involved an initial session from Nov 1983 to Dec 1983 where teachers participated in half-day seminars on: (i) basic concepts on the physiology of nutrition, (ii) the role of diet in the prevention of chronic diseases, (iii) the 'prudent diet'--theoretical and practical aspects methodologies for nutrition behavior modification.  School year is not explicitly defined in regards to number of months or weeks. However, it appears that one school year is equivalent to 7 months. |
| Salmon, 200843 | 2 | BM  Length of intervention, weeks: 39  Setting: School (described): focused on PE classes, Home  Intelligent TV viewing and reducing viewing time |  |  |  |  | Target: Teacher  Duration: 40-50 min sessions. 18 sessions total  Delivery: The aim of lessons 1, 2 and 4 was to increase children’s awareness of time-use, including time spent watching TV, playing electronic games, using the computer and being physically active. Health benefits of physical activity were also covered. Lessons 3 and 5 involved the children self-monitoring the time they spent in sedentary behaviors (TV viewing, electronic games and computer use) and physical activity, respectively. Lessons 6 and 7 raised children’s awareness of the home and community environments in relation to their sedentary and physical activity choices and opportunities, through map drawing and photographic techniques. Lesson 8 involved teaching the children decision-making skills, such as weighing up the positives and negatives of choosing between being active or sedentary in a variety of different scenarios. In lessons 9 and 10, the children developed their own physical activities and games in which they could participate as an alternative to being sedentary. Lesson 11 involved teaching children about ‘intelligent viewing’, where the child selects the TV programs that he/she wants to watch and limits viewing to those programs. This is to encourage children to engage in selective, rather than ‘vegetative’ viewing or channel surfing. Children were given their first ‘Switch-off Challenge’ that involved completing and signing a contract pledging to switch off one TV program per week over the next 4 weeks. Children were to return the contract signed by parents each week. In lesson 12, the focus was on increasing children’s awareness of the purpose of advertisements on TV. Lessons 13 to 16 focused on advocacy, with children writing their own scripts, performing plays and designing posters about choices to be active or sedentary based on real life situations. The children participated in physical activities that they could easily perform at home on their own, or with friends or siblings. |  | Teachers are trained by research staff in three half-day teacher workshops to implement the curriculum. Adherence to the teaching protocols is ascertained through a system of teacher monitoring, which includes documentation of attendance at training workshops and number of lessons taught, as well as periodic classroom visits by the research staff. |
| Salmon, 200843 | 3 | FMS  Length of intervention, weeks: 39  Setting: School indoor or outdoor physical activity facilities at each school. |  |  | To promote physical activity through mastery of fundamental movement skills  Target: Child  Delivery: Teacher  Duration: 40-50 min/session. 19 sessions total  Comment: The FMS intervention focused on six skills, including three object control skills (overhand throw, kick and strike) and three locomotors skills (run, dodge and vertical jump). The locomotors skills were selected based on evidence that children who are overweight or obese are less likely to demonstrate mastery of these skills compared with non-overweight children. The skills were taught with an emphasis on fun through games and maximum involvement for all the children. Most lessons focused on at least two skills, and each skill was a focus lesson in at least six or more sessions. |  |  |  |  |
| Salmon, 200843 | 4 | BM/FMS  Length of intervention, weeks: 39  Setting: School focused on PE classes indoor or outdoor physical activity facilities at each school  Home intelligent TV viewing and reducing viewing time. |  |  |  | To promote physical activity through mastery of fundamental movement skills  Target: Child  Delivery: Teacher  Duration: 40-50  min/session  Frequency: 19 sessions total  Comment: The FMS intervention focused on six skills, including three object control skills (overhand throw, kick and strike) and three locomotors skills (run, dodge and vertical jump). The locomotors skills were selected based on evidence that children who are overweight or obese are less likely to demonstrate mastery of these skills compared with non-overweight children. The skills were taught with an emphasis on fun through games and maximum involvement for all the children. Most lessons focused on at least two skills, and each skill was a focus lesson in at least six or more sessions. | Target: Teacher  Duration: 40-50 min sessions. 18 sessions total.  Delivery: The aim of lessons 1, 2 and 4 was to increase children’s awareness of time-use, including time spent watching TV, playing electronic games, using the computer and being physically active. Health benefits of physical activity were also covered. Lessons 3 and 5 involved the children self-monitoring the time they spent in sedentary behaviors (TV viewing, electronic games and computer use) and physical activity, respectively. Lessons 6 and 7 raised children’s awareness of the home and community environments in relation to their sedentary and physical activity choices and opportunities, through map drawing and photographic techniques. Lesson 8 involved teaching the children decision-making skills, such as weighing up the positives and negatives of choosing between being active or sedentary in a variety of different scenarios. In lessons 9 and 10, the children developed their own physical activities and games in which they could participate as an alternative to being sedentary. Lesson 11 involved teaching children about ‘intelligent viewing’, where the child selects the TV programs that he/she wants to watch and limits viewing to those programs. This is to encourage children to engage in selective, rather than ‘vegetative’ viewing or channel surfing. Children were given their first ‘Switch-off Challenge’ that involved completing and signing a contract pledging to switch off one TV program per week over the next 4 weeks. Children were to return the contract signed by parents each week. In lesson 12, the focus was on increasing children’s awareness of the purpose of advertisements on TV. Lessons 13 to 16 focused on advocacy, with children writing their own scripts, performing plays and designing posters about choices to be active or sedentary based on real life situations. The children participated in physical activities that they could easily perform at home on their own, or with friends or siblings. | Other :Additional components included: administration of the Eurofit test, provision of scorecards, and the offer of individual counseling if needed health promotion gathering for parents and local sports clubs.  Target: Child  Delivery: Teacher  Other: Local sports clubs. Local sports clubs were involved in providing some of the PE classes and PA activities outside of school hours. | Description of Parent Involvement: Parents are important agents in shaping children's eating and physical activity behaviors. Besides the homework assignments and fitness score card, parents are involved by providing them with written information on the intervention and inviting them for a gathering at the beginning of the school year. During this gathering information is provided by the school nurse or a dietician about a healthy lifestyle, focusing on reducing sedentary activities (watching TV and playing on the computer), promotion of outdoor play, and reduction of sugar-sweetened beverage intake and promotion of having breakfast daily. |
| Skybo, 200244 | 2 | American Heart Association Heart Power!  Length of intervention, weeks: 39  Setting: School Classroom education program to encourage heart healthy lifestyles including nutrition and physical activity and being smoke-free physical activity sessions. | Emphasize the importance of nutrition. Class discussions about the influence of external factors on nutrition. Instruction on the food pyramid. Group activity focusing on meal planning.  Target: Child  Delivery: Pediatric nursing students  Duration: 30 minutes  Frequency: once a week. |  | Discuss importance of exercise. Class discussions about fitness. Children were encouraged to jump rope during recess  Target: Child  Delivery: Pediatric nursing students  Duration: 30 minutes  Frequency: once a week | Children engaged in physical activities such as jumping jacks or running in place.  Target: Child  Delivery: pediatric nursing students  Duration: 30 minutes  Frequency: once per week. | Other :Education on heart function and living tobacco-free |  |  |
| Smolak, 200145 | 1 | Other :No curriculum different schools |  |  |  |  |  | Other :parental involvement and training of teachers  Target: Parent/Caregiver, educator, delivery skilled nutritionist  Duration: Parents were informed during a parental school meeting. Teachers were trained within a half-day structured nutrition education program. |  |
| Smolak, 200145 | 2 | No curriculum same schools  Length of intervention, weeks: NR  Setting: School |  |  |  |  |  |  |  |
| Smolak, 200145 | 3 | Eating Smart, Eating for Me (ESEM)  Length of intervention, weeks: NR  Setting: School |  |  | Eating Smart, Eating for Me (ESEM Levine, Schermer, Smolak, & Etling,1995), is a universal prevention program aimed, not at high risk or symptomatic children, but at elementary school children in general, as they are less likely than adolescents or adults to have actually developed problematic eating attitudes and behaviors. |  |  |  | Parents were also involved in the study.  Meetings were organized whereby parents in the intervention group were given a file containing their child's screening results. Presentation on the importance of topics relevant to dietary and exercise habits of the children were issued. Parents were encouraged to modify their dietary habits as well as those of their children and support them in increasing their physical activity. |
| Sollerhed, 200846 | 2 | I (Intervention) School  Length of intervention, weeks: 156  Setting: School The focus is on PE lessons | Target: Child |  |  | The intervention included an increase of allocated time for physical education in the I-school. The time was expanded from one or two lessons a week (one lesson=40 min, including change and shower) to four lessons, with every lesson being guaranteed to last for 40 min. Time for change and shower was not included in the 40 min. The four lessons were scheduled on 4 days. On the 5th day, classes had outdoor physical activities with their classroom teacher for about 1 h. One physical education lesson a week was performed with boys and girls separated, and the other lessons with both sexes. The quality of the lessons was emphasized when the project started, with attention on the variety of activities. Obese children had the possibility to have one extra voluntary lesson a week, with special attention paid to motor skills and self-esteem. The increase in physical education lessons was carried out by slight changes in allotment for diﬀerent school subjects and within the national curriculum. Physical education in the I-school was taught partly by a physical education teacher (half-time) and partly by ordinary classroom teachers who were not specially trained for physical education teaching. On the 5th day of the week, classes had outdoor physical activities with their classroom teacher for about 1 h.  Target: Child  Delivery: Teacher, PE teacher  Duration:5  Frequency: 40 sessions  Comment: PE classes were 4 lessons a week for 40 mins. And one class of outdoor physical activity on the 5th day for about 1 hours with the classroom teacher. |  |  |  |
| Stenevi-Lundgren, 200947 | 2 | Intervention School  Length of intervention, weeks: 52  Setting: School  Focus was on Exercise intervention. | NA |  |  | The exercise intervention consisted of the ordinary PA used within the Swedish school physical education (PE) curriculum, supervised by school teachers (PE and classroom teachers), but increased to 40 min per day (total 200 min per week). This duration was chosen in order to maximize a range of health-related benefits beyond just bone mass which has been shown to respond to shorter bouts of weight-bearing exercise.PE classes did not consist of any programs specially designed to enhance muscle and bone mass or strength. Instead, the classes included both indoor and outdoor general physical activities, such as a variety of ball games (e.g., basketball, handball, and soccer), running, jumping, and climbing activities (e.g., tag, rope climbing, and gymnastics related activities on various apparatus).  Target: Child  Delivery: Teacher  Duration: 200  Frequency: 5 |  |  |  |
| Stock, 200748 | 1 | Other :control, grades K-3 |  |  |  |  |  | Goal setting  Target: Child  Delivery: Teacher  Self-evaluation was addressed by weekly goal setting and discussions of progress and problems with meeting activity goals. It is included in the self-management curriculum. | Arm 3 intervention (PE classes+ self-management curriculum) +in-service training program for classroom teachers (not described above). The in-service program (teachers taught by PE specialists) included the four components shown to be related to the successful adoption of a new curriculum: teacher appreciation of the benefits of the new program, skill specific training, administrative support, and group support with feedback. During the first year, eleven sessions were conducted, for a total of 23 hours. During the second year, five sessions were conducted, for a total of 15 hours. |
| Stock, 200748 | 2 | Control: Grades 4-7  Length of intervention, weeks: N/A |  |  |  |  |  | Goal setting  Target: Child  Delivery: certified PE specialists  Duration: Self-evaluation was addressed by weekly goal setting and discussions of progress and problems with meeting activity goals. It is included in the self-management curriculum. | The difference between arm2 and arm 3 is that arm2 was teacher-led and thus had a teacher in-service training program while arm 3 was specialist-led without training. |
| Stock, 200748 | 3 | Intervention, gGades K-3  Length of intervention, weeks: 43  Setting: School focus on peer-based teaching about healthy living. | One of the three themes of the program: "go fuel!" centered on exposure and learning about nutritious and no nutritious foods and beverages, as well as learning about why we eat, energy balance and how the body uses fuel. Activities included memory card games, visual art projects and other exercises.  Target: Child  Delivery: older kids (4-7 grade) peer educated their K-3rd grade buddies  Duration: 30 min  Comment: During the first half of the year, the buddy pairs learned about how to be positive buddies and learned the 3 themes or components of a healthy life. The second half, they learned about the challenges to living a healthy life (e.g. the media) and how to overcome these obstacles. |  |  | The second of three themes of the program: "go move!" centered on structured PA/aerobic fitness sessions called "fitness loops" where students were encouraged to exercise vigorously, using self-measured parameters of physical exertion. The buddy pairs would spend these sessions in the gym, which allowed the pairs to participate simultaneously. There was also a school wide healthy-living theme day, midway through the year had each classroom prepare an activity and the buddy pairs rotate through them.  Delivery: classrooms (children and teachers)  Duration: 30  Frequency: 2  Other: school wide healthy-theme day occurred once midway through the year. | Other within the "healthy living" focus of the program, theme 3: "Go feel good" was focused on healthy body image, self-esteem, and social responsibility. Students learned about valuing themselves and others based on who they and others are on the inside - addressed body-image, disordered eating issues (via teaching about healthy growth and development and media literacy). Fitness loops were designed for all levels of fitness for healthy body image development. |  |  |
| Stock, 200748 | 4 | Intervention, grades 4-7  Length of intervention, weeks: 43  Setting: School Focus on peer-based teaching about healthy living | One of the three themes of the program: "go fuel!" centered on exposure and learning about nutritious and no nutritious foods and beverages, as well as learning about why we eat, energy balance and how the body uses fuel. Activities included memory card games, visual art projects and other exercises.  Target: Child  Delivery: Teacher  Duration: 45 min  Frequency: 1  Comment: During the first half of the year, the buddy pairs learned about how to be positive buddies and learned the 3 themes or components of a healthy life. The second half, they learned about the challenges to living a healthy life (e.g. the media) and how to overcome these obstacles. |  |  | The second of three themes of the program: "go move!" centered on structured PA/aerobic fitness sessions called "fitness loops" where students were encouraged to exercise vigorously, using self-measured parameters of physical exertion. The buddy pairs would spend these sessions in the gym, which allowed the pairs to participate simultaneously.  There was also a school wide healthy-living theme day, midway through the year had each classroom prepare an activity and the buddy pairs rotate through them.  Delivery: classrooms (children and teachers)  Duration: 30 minutes  Frequency: 2  Other: school wide healthy-theme day occurred once midway through the year. | Other within the "healthy living" focus of the program, theme 3: "Go feel good" was focused on healthy body image, self-esteem, and social responsibility. Students learned about valuing themselves and others based on who they and others are on the inside - addressed body-image, disordered eating issues (via teaching about healthy growth and development and media literacy). Fitness loops were designed for all levels of fitness for healthy body image development. | Goal setting  Duration: families attended evening meeting for 90 minutes for training in self-monitoring, setting realistic goals, problem-solving, self-rewarding goal achievement and supporting family and group members. | All intervention sessions lasted a total of 90 minutes. |
| Taylor, 200749 | 2 | APPLE intervention  Length of intervention, weeks: 104 weeks  Setting: School  Community-based demonstration project for schools. | Encouraging healthy eating, nutrition based and focused on reducing the intake of sugary drinks and on increasing fruit and vegetable consumption. Science lessons highlighting the adverse health effects of sugary drinks, a community-based healthy eating resource, a novel interactive card game, and the provision of free fruit for 6 months.  Target: Child  Delivery: Community Activity Coordinators  Duration: 8 hours a week. | Nutrition-based initiatives were particularly emphasized in the second year of the intervention and included the provision of cooled water filters in each school.  Target: Child  Delivery: Researcher  Other: water filters in schools. | Initiatives that encourage all children to be a little more physically active every day by increasing the variety and opportunities for physical activity beyond that which was currently provided in each school. They were used to increase non-curricular activity at recess, lunchtimes, and after school, with a particular focus on less traditional sports and more lifestyle-based activities such as outdoor games, household chores, gardening, beach hikes, and children’s games from different countries.  Target: Child  Delivery: Other:  Community Activity Coordinators  Duration: 8 hours per week. | Availability of a variety of sport and play equipment at school breaks to enhance the level of “free” play in intervention children.  Target: Child  Delivery: Researcher | Other :a novel interactive card game |  |  |
| Thivel, 201150 | 2 | Intervention group- Physical exercise  Length of intervention, weeks: 26  Setting: School focus on physical exercise. |  |  |  | In the intervention schools, a physical activity program was organized for 6 months (January to June 2003). It consisted of 120 min (two times for 60 min) of supervised physical exercise in addition to 2 h of Physical Education classes per week. The additional 2 h per week of exercise were managed and taught by sports science students as part of their training they were themselves supervised by a member of the investigation staff. The sessions consisted of a 10-min warm-up followed by psychometric activities and exercises to improve coordination, flexibility, strength, speed, and endurance. The content of the program was designed to enhance pleasure and enjoyment during exercise, in order to encourage children's participation in PA during the intervention but also to motivate them to maintain an active lifestyle on a long-term basis. The main objective of the sessions was to increase the time spent in PA and minimize inactivity.  Target: Child  Delivery: sports science students  Duration: 120 minutes  Frequency: 2 sessions per week |  |  |  |
| Trevino, 200551 | 2 | Bienestar Health Program  Length of intervention, weeks: 34 weeks  Setting: School A parent education and involvement program, a classroom health and physical education curriculum, a student after-school health club, and a school cafeteria program. | To decrease dietary fat, increase dietary fiber, increase physical activity and increase diabetic Knowledge Through bienestar parent fun activities(includes an instructor’s manual and a parent’s workbook), Bienestar health class (includes a teacher’s physical & health education manual, a student’s workbook, test, keys, transparencies, extensions, and other support material) and Bienestar school food service (includes an instructor’s manual and a cafeteria staff workbook)  Target: Child Parent/Caregiver  Other: Cafeteria Staff  Delivery: Teacher  Duration: 20 min-2 hours  Frequency: 5-6  Comment: Parent fun activities: 6 days a week (10am-12pm on Saturdays and weekdays between 5:30-6:30pm)  Health class: 45 min per day/5 days a week  School food service: 20min /5 days per week. 12 weeks in duration. |  | The purpose of the curriculum is to develop knowledge and skills necessary to engage in moderate and vigorous Physical activities. The Bienestar Health and Physical Education Program is classroom based and is made up of 16 complete ready-to-use lessons with sections on physical activity, nutrition, wellness, and diabetes. Curriculum materials include a teacher’s manual, children’s workbook, transparencies, extensions for integrated thematic instruction, support materials, and test instruments with answer keys.  Target: Child Parent/Caregiver  Delivery: Teacher  Other: San Antonio City Parks and Recreation department staff  Duration: 45 min-2 hours  Frequency: 1-5  Comment: Parent fun activities: 6 days a week (10am-12pm on Saturdays and weekdays between 5:30-6:30pm)  Health class: 45 min per day/5 days a week  Health club: 1 day a week for 1 hour | Bienestar health club (includes instructor’s manual and student’s workbook)- club is held after school and includes activities such games, dancing, singing, art crafts, puppet shows, and plays.  Target: Child  Delivery: San Antonio City Parks and Recreation department staff  Duration: 60 min.  Frequency: 1  Comment: Health club: 1 day a week for 1 hour |  |  |  |
| Tucker, 201152 | 1 | Other :Let’s Go 5-2-1-0  Program curriculum ONLY |  |  |  |  |  |  | Additional details on how Kaledo is played are available in the paper.  To give an idea of what the authors hoped to achieve from this board game intervention, a questionnaire evaluated the impact of Kaledo on nutrition knowledge, dietary intake and physical activity.  The authors also note that Kaledo could affect dietary behavior by a knowledge-based and/or behaviorally focused nutrition education. |
| Tucker, 201152 | 2 | Let’s Go 5-2-1-0  Program curriculum and student nurse coaching, parent evening offerings, and reinforcement incentives  Length of intervention, weeks: 34  Setting: School Focus was on student nurse coaching after school hours. | All children (control and intervention) received classroom delivery of the Let’s Go 5-2-1-0 Program curriculum by the PHN. Intervention children also received 1:1 student nurse coaching, parent evening offerings, and reinforcement incentives. Nursing students were trained in the 5-2-1-0 curriculum and in motivational interviewing principles and skills. Coaching sessions were designed to occur after school hours at the location preferred by parent, or by telephone. EBS. The total number of sessions ranged from 1 to 12.5 sessions (15–75 min).  HBS: Weekly sessions (range, 10–14) were held at the school (with the nursing faculty member present) during the lunch hour. 2 parent evening offerings were held during this project period.  Target: Child, Parent/Caregiver  Delivery: Nurses  Duration: 15-75 mins  Other: 1-12.5 sessions or 10-14 sessions |  | All children (control and intervention) received classroom delivery of the Let’s Go 5-2-1-0 Program curriculum by the PHN Intervention children also received 1:1 student nurse coaching, parent evening offerings, and reinforcement incentives.  Target: Child,  Parent/Caregiver  Delivery: Nurses  Duration: 15-75 mins  Other: 1-12.5 sessions |  |  |  |  |
| Valdimarsson, 200653 | 2 | POP study  Length of intervention: 43 weeks  Setting: School Increased physical activity within the Swedish school curriculum |  |  |  | Increase of ordinary physical activity used within the Swedish School curriculum (increase from 60 min/week to 200 min/week)  Target: Child  Delivery: Teacher  Duration: 40 minutes  Frequency: 5 |  |  |  |
| Vandongen, 199554 | 2 | Physical fitness  Length of intervention, weeks: 39  Setting: School classroom-based sessions and fitness program including physical activity sessions |  |  | Classroom sessions Aimed at providing rational basis for activity programs and exercise in general. The classroom session replaced the usual curriculum weekly health education. Resource package for teachers included daily lessons for entire year, strategies for teaching and monitoring intensity of exercises and methods of fitness testing. Teachers completed questionnaires at the end of 4th term.  Target: Child, Educator  Delivery: Researcher, Teacher  Duration: 30 minutes for classroom fitness education sessions  Other: 6 classroom fitness education sessions | Fitness program included relays, skipping and health hustles. Heart rates of 150-170 beats/sec were to be achieved in 15 minutes of exercises and improvement of physical fitness as measured by leger test and the 1.6 km run.  Target: Child  Delivery: Teacher  Duration: 15 minutes  Other: every school day throughout the year |  |  |  |
| Vandongen, 199554 | 3 | Physical fitness+ School nutrition  Length of intervention, weeks: 39  Setting: School classroom-based physical activity and nutrition educational lessons, fitness program and teacher training. | Goals of nutrition program: 1) increase consumption of fruits/vegetables, whole grain breads and cereals relative to other foods 2) decrease consumption of fatty, sugary and salty foods relative to other foods 3) achieve an intake of not more than 33% of energy as fat and 12% as sugar while increasing fiber intake to at least 25grams per day. Nutrition education lessons aimed to improve knowledge, attitudes and eating habits. Teachers attended in-service training session and were provided teaching resources including videos.  Target: Child, Educator  Delivery: Researcher,  Teacher  Duration: nutrition lessons: 10 lessons lasting one hour each. |  | Classroom sessions Aimed at providing rational basis for activity programs and exercise in general. The classroom session replaced the usual curriculum weekly health education. Resource package for teachers included daily lessons for entire year, strategies for teaching and monitoring intensity of exercises and methods of fitness testing. Teachers completed questionnaires at the end of 4th term.  Target: Child, Educator  Delivery: Researcher, Teacher  Duration: 30 minutes per classroom-based fitness education session  Other: 6 classroom-based fitness education sessions delivered. | Fitness program included relays, skipping and health hustles. Heart rates of 150-170 bt/sec were to be achieved in 15 minutes of exercises and improvement of physical fitness as measured by leger test and 1.6-km run.  Target: Child  Delivery: Teacher  Duration: 15 minutes  Other: fitness program offered for 15 minutes every school day throughout the year. |  | Other :avoiding smoking initiation  Target: Child | The details of the CATCH intervention are described elsewhere: Perry CL, Stone EJ, Parcel GS, et al. (1990) School-based cardiovascular health promotion: the child and adolescent trial for cardiovascular health (CATCH). J Sch Health 60:406-13. |
| Vandongen, 199554 | 4 | School nutrition  Length of intervention, weeks: 39  Setting: School nutrition education lessons for students, teacher training. | Goals of nutrition program: 1) increase consumption of fruits/vegetables, whole grain breads and cereals relative to other foods 2) decrease consumption of fatty, sugary and salty foods relative to other foods 3) achieve an intake of not more than 33% of energy as fat and 12% as sugar while increasing fiber intake to at least 25grams per day. Nutrition education lessons aimed to improve knowledge, attitudes and eating habits. Teachers attended in-service training session and were provided teaching resources including videos.  Target: Child, Educator  Delivery: Researcher, Teacher  Duration: Duration (e.g., length of educational or counseling sessions): 10 one hour long nutrition lessons offered. |  |  |  |  |  |  |
| Vandongen, 199554 | 5 | School nutrition + Home nutrition  Length of intervention, weeks: 39  Setting: School nutrition education lessons for students teacher training Home  Nutrition education messages for children and parents. | Goals of nutrition program: 1) increase consumption of fruits/vegetables, whole grain breads and cereals relative to other foods 2) decrease consumption of fatty, sugary and salty foods relative to other foods 3) achieve an intake of not more than 33% of energy as fat and 12% as sugar while increasing fiber intake to at least 25grams per day. Nutrition education lessons aimed to improve knowledge, attitudes and eating habits. Teachers attended in-service training session and were provided teaching resources including videos. Home intervention: 5 nutritional messages presented using comic books delivered through schools. Comics had information for children and parents. Homework assignments where given to children and parents were asked to participate. It involved helping prepare healthy recipes etc.  Target: Child, Parent/Caregiver, Educator  Delivery: Researcher, Teacher  Other: Parents  Duration: (e.g., length of educational or counseling sessions): 10 one hour long nutrition lessons offered. |  |  |  |  |  | The intervention group parents were invited to attend meetings, where they were lectured on the prevention of chronic diseases, especially ischemic heart disease and cancer. |
| Vandongen, 199554 | 6 | Home nutrition  Length of intervention, weeks: 39  Setting: Home nutrition education messages for children and parents. | Home intervention: 5 nutritional messages presented using comic books delivered through schools. Comics had information for children and parents. Homework assignments where given to children and parents were asked to participate. It involved helping prepare healthy recipes etc.  Target: Child, Parent/Caregiver  Delivery: Researcher  Other: Parents |  |  |  |  |  |  |
| Viskic-Stalec, 200755 | 2 | Experimental Group  Length of intervention, weeks: 34  Setting: School Focus was on rhythmic gymnastics, dance structures and aerobics. |  |  |  | Aerobics including Hi, Hi-lo, step, new body aerobics. Dance structures including folk dance staro sito, ducee and drmez, Social dances and Jazz dance. Rhythmic gymnastics including hops, jumps, turns etc.  Target:Child  Duration: 58 periods over the year. |  |  |  |
| Vizcaino, 200856 | 2 | Movi non-competitive physical activity program  Length of intervention: 24 weeks  Setting: School School's athletic facilities. |  |  |  | Physical activity sessions included sports with alternative equipment (pogo sticks, frisbees, jumping balls, parachutes, and so on), cooperative games, dance and recreational athletics. Each 90-min session included 15 min of stretching, 60 min of aerobic resistance and 15 min of muscular strength/resistance exercises. On average, these exercises required physical activity of moderate intensity throughout the 90 min of each session.  Target: Child  Delivery: Teacher  Duration: 90minutes  Frequency: 3 sessions/ week. |  |  | Primary care providers were encouraged to focus on the 5-2-1-0 behavioral targets for all patients during annual preventive care visits to assess patient readiness to change by asking questions related to the importance of and confidence in making change to promote self-management skills with patients and to assist patients with setting self-management goals for behavior change. Practice teams were encouraged to develop clinical information systems to track outcomes and improve care they were provided an Excel- or Access- based overweight population registry developed by the MYOC and NICHQ. |
| Walter, 198557 | 2 | "Know Your Body" group  Length of intervention: 34 weeks  Setting: School Focus is on nutrition, physical fitness, and cigarette smoking prevention. | Each activity is designed to incorporate five social learning strategies to encourage behavior change: namely, modeling of desired behaviors, behavioral rehearsal, goal specification, feedback of results, and reinforcement for favorable behavior change. The nutrition component of the curriculum focuses on the adoption of the American Heart Association "prudent diet" (30) Specifically, on maintenance of ideal body weight, decreased consumption of total and saturated fat, cholesterol, sodium, and refined sugar, and increased consumption of complex carbohydrates and fiber.  Target: Child  Delivery: Teacher  Duration: 2 hours/week  Comment: duration and number of individual session is not mentioned. |  | The physical fitness component of the curriculum focuses on the adoption of a regular program of endurance exercise designed to improve cardiovascular fitness.  Target: Child  Delivery: Teacher  Duration: 2 hours/week  Comment: The total of both the parts of intervention should be 2 hours in a week. |  |  |  |  |
| Walther, 200958 | 2 | Intervention group (daily school exercise lessons)  Length of intervention, weeks: 52  Setting: School daily PE lessons. |  |  |  | 1 unit of physical exercise (45 minutes)with at least 15 minutes of endurance training per school day  Target: Child  Duration: 45 minutes/session  Frequency: 5 sessions/week (assume school day is 5 days/week). |  |  |  |
| Walther, 200958 | 3 | Reference group  Length of intervention, weeks: 52  Setting: School competitive sports and Physical education. |  |  |  | The nonrandomized sport students (reference group) received 12 units (45 minutes per unit) of high-level endurance exercise training per week and frequently participated in competitive sporting events, thus representing a maximum of physical fitness attainable under reasonable conditions in school-age children  Target: Child  Duration: 45 minutes/session  Frequency: 12 sessions /week. |  |  |  |
| Warren, 200359 | 1 | Other: Be smart educational program about food in non-nutrition sense. |  |  |  |  |  |  |  |
| Warren, 200359 | 2 | Eat smart  Length of intervention, weeks:  20 weeks  Setting: School Classroom sessions  Home Homework and parental involvement. | Eat smart Educational intervention emphasizing food contributing to health, promoting fruits and vegetables, high starch foods concentrating on breakfast and snacking and tooth friendly foods.  Target: Child  Delivery: Researcher  Duration: weekly in term 1 and fortnightly in terms 2–4. |  |  |  |  |  |  |
| Warren, 200359 | 3 | Play smart  Length of intervention, weeks:  20 weeks  Setting: School classroom sessions  Home Homework and parental involvement. |  |  | Play smart physical activity educational program was designed to promote activity in daily life, promotion of activity in the playground and a reduction in television viewing.  Target:Child  Delivery: Researcher  Duration: weekly in term 1 and fortnightly in terms 2–4 |  |  |  |  |
| Warren, 200359 | 4 | Eat smart play smart  Length of intervention, weeks:  20 weeks  Setting: School Classroom sessions Home home work and parental involvement. | Eat Smart Play smart  Children in this group received half of the nutritional education and half of the physical activity program each term.  Target: Child  Delivery: Researcher  Duration: weekly in term 1 and fortnightly in terms 2–4 |  | Eat Smart Play smart Children in this group received half of the nutritional education and half of the physical activity program each term.  Target: Child  Delivery: Researcher  Duration: weekly in term 1 and fortnightly in terms 2–4 |  |  |  | Participants receive “Bienestar coupons” for purchase of merchandise (donated clothes, household appliances, school supplies, toys, and gift certificates) at a school store. |
| Lubans, 201228 | 2 | PALs multi-component school based intervention  Length of Intervention (weeks): 24    Setting: School: six, low SES secondary schools in New South Wales, Australia | Nutritional handbooks and seminars  Target: Child  Delivery: Teacher, handbooks  Duration: 30 minutes  Frequency: 3 times per 24 weeks  Comments: 3 interactive sessions during intervention period of 24 weeks |  | handbooks and seminars  Target: Child  Delivery: Teacher handbooks  Duration: 30 minutes  Frequency: 3 times per 24 weeks  Comments: 3 interactive sessions during intervention period of 24 weeks | Sport sessions and lunchtime activities  Target: Child  Delivery: Teacher  Duration: 90 min for sport sessions and 30 minutes for lunchtime activity sessions  Frequency: 10x and 3x  Comments: School sport sessions were conducted 10 times during intervention at 90 min per session. Lunch time activities were conducted 8 times at 30min each. |  | Intervention: Pedometer, leadership sessions  Target: Child  Delivery: Teacher  Comments: Pedometers were used 5 days a week for duration of intervention (6 months. Physical activity leadership sessions were done 6 times during intervention at 30 min each, Physical activity leadership: participants were required to recruit and instruct grade 7 students on how to safely use exercise/training devices. | Multi-component school based intervention that included: sport sessions, physical activity and nutrition handbooks, interactive seminars, lunch-time activities, leadership sessions and pedometers. |
| Llargues, 201227 | 2 | IVAC educational pedagogy  Length of Intervention (weeks):  80 weeks | Program to help students develop activities related to health food habits Developing posters, food tables, games, crafts, cooking workshops and educational information was given.  Target: Child  Delivery: Teacher  Frequency: a total of 3hrs/week were used for intervention |  | Program to help students develop activities related to physical activity: Developing posters, games, craft and promotion of playground games. Also, educational information was given.  Target: Child  Delivery: Teacher  Frequency: a total of 3hrs/week were used for intervention  Comments: |  |  |  |  |
| Rosario, 201239 | 2 | Nutrition program  Length of Intervention (weeks):  24 weeks    Setting: School: Nutrition education program delivered by teachers in the classroom | Teachers addressed various nutrition topics via classroom activities. Topics included key concepts in food and nutrition, dietary guidelines, healthy eating advice, food groups, meal planning, healthy beverage and food choices, and healthy cooking.  Target: Child  Delivery: Teacher  Frequency: Intervention lasted 6 months, but not clear regarding frequency or duration of each classroom activity.  Comments: Teachers of the intervention group had 12 3-hour sessions during the 6 months, led by researchers, which provided in-service training regarding nutrition and physical activity topics that the teachers would then teach the children in the classroom. |  | Teachers addressed various physical activity/lifestyle topics via classroom activities. The topics included appropriate physical activity levels and reducing screen exposure time.  Target: Child  Delivery: Teacher  Frequency: Intervention lasted 6 months, but not clear regarding frequency or duration of each classroom activity.  Comments: Teachers of the intervention group had 12 3-hour sessions during the 6 months, led by researchers, which provided in-service training regarding nutrition and physical activity topics that the teachers would then teach the children in the classroom. |  |  |  |  |
| Fung, 201214 | 2 | APPLE School  Length of Intervention (weeks): 104  Setting: School: Instructional and non-instructional time, professional development, parent nutrition nights, after school activity, weekend events, newsletters |  | School Health Facilitators promoted community and parent involvement that led to community gardens, support for breakfast and lunch programs. School Health Facilitators contributed to the schools' health curriculum, both during instructional and none-instructional school time, engaged in developing cross curriculum links and taught across the curriculum. They facilitated professional development days for teachers and school staff, organized parent information nights, nutrition programs such as cooking clubs. 8 of the 10 APPLE Schools implemented a nutrition policy.  Target: Child Parent/Caregiver |  | School Health Facilitators promoted after school physical activity programs and walk-to-school days and facilitated professional development for teachers. All 10 APPLE Schools adopted policies ensuring all their students receive a minimum of 30 minutes of physical activity per school day. |  |  | Weekend events and celebrations, and circulated newsletters, and parent led extramural programs also took place, but it wasn't clear if they were dietary or activity-related. It is unclear how much of each of these interventions was actually done--the major intervention seems to be the presence of the School Health Facilitator in the APPLE schools. |
| Klish, 201225 | 2 | Length of Intervention (weeks): NR  Setting: School |  | Target: NR  Delivery: NR | Target: NR  Delivery: NR  Duration: NR  Frequency: NR |  |  |  |  |
| Coleman, 20118 | 2 | Healthy ONES  Length of Intervention (weeks): 104 Setting: School: Changes take place in the classroom, before/after school, at recess and in the cafeteria Aim at policy change: Yes | Unhealthy snacks brought from home discouraged by teachers, Staff proactively discouraging students from consuming unhealthy snacks during recess, Cafeteria monitors proactively discouraging unhealthy food/beverages from home, Encouraged parents to try meals to demonstrate they were healthful and flavorful, Teachers promoting HE messages in classroom, Teachers proactively discouraging students from bringing unhealthy  snacks to school, Teachers informing parents of school healthy celebration and snack  policy, Staff not consuming unhealthy food and beverages in front of students, Staff participating in parent nutrition meetings, Staff participating in student chef clubs/cooking classes, Staff participates with students in the fruit at recess program, Staff choosing to eat the school lunch, Staff encouraging their students to eat/try fruits and vegetables, Staff supporting nutrition services changes by encouraging children to eat school meals  Target: Child Parent/Caregiver  Delivery: Teacher | Treasure chests filled with nonfood rewards for 4th and 5th grades, Healthy food/beverages and nonfood items for classroom celebrations, Nutrition Services catered meals for classroom parties, Created healthier menu for after school snack, Changed PTA fundraising to include nonfood events i.e. Jog-A-Thons, Traditional carnival activities became healthy i.e. cake walk to prize walk, Removed unhealthy foods from PTA sponsored event menus i.e. nachos, candy, Added fruits, vegetables and complete meal options to PTA event menus, Partnered PTA with Nutrition Services to cater healthy foods for events. Recess, implemented daily fruit at recess program, “Healthy & Unhealthy” snack poster displayed, Removed perceived unhealthy items from menu i.e., nachos, cinnamon bun, chocolate milk, Exclusive use of nonfood rewards by custodian and cafeteria staff for student helpers, Added healthier, in-house prepared entrées to menus, Catered healthy meals for classroom celebrations, Include nonfood item as part of meal for extra celebration, Before/After School, Created healthier menu for after school snacks, Catered healthy menu items for after school events and celebration, Supported student chef clubs/student cooking classes, Recess, Provide cut fresh fruit at recess, Increased student ability to consume fresh fruits and vegetables, Advertising/marketing of approved healthy snack and beverages only, Student taste tests of new menu items, Free meal for staff who eat school lunches with students, Staff provided with thermal mugs to conceal caffeinated beverage consumption  Target: Child  Parent/Caregiver  Delivery: Teacher |  |  |  |  |  |
| Burguera, 20115 | 2 | ACTYBOSS  Length of Intervention (weeks):  24 weeks  Setting: School: public school | Participants were offered 2 nutritional and 2 behavioral modification workshops during the intervention period. The topics were: i) How to eat healthy?  ii) Influence of the mass media on what we eat. iii) Impact of physical activity on body and brain development. iv) Build up our self-esteem. Children received 100 points for each session they attended to.  Parents/tutors offered 2 nutritional conferences. i) How to cook a healthy meal? ii) Benefits of the Mediterranean diet.  Target: Child Parent/Caregiver  Frequency: 6 workshops in total |  | Put a special emphasis on motivating and informing the children about the benefits of a healthy lifestyle, highlighting the fact that they needed to be responsible for their own health  Target: Child  Delivery: Teacher  Duration: <3 hours  Frequency: 4/week  Comments: Did not state how often there was a psychosocial intervention during the after-school program. | Opportunity to participate in enjoyable, noncompetitive sports and physical activities (team sports, racket games as well as dancing and music games).  Target: Child  Delivery: Teacher  Duration: <3 hours  Frequency: 4/week |  |  | Did not state if the after-school physical activity component was required. Motivated students to attend with the opportunity to win prizes: "the gifts included entrance tickets for sport events, sport equipment, trips, entrance tickets for leisure parks, cinema and bowling tickets, and others." |
| Burguera, 20115 | 3 | Usual Care School #2 Length of Intervention (weeks): NR  Setting: School: | Participants were offered 2 nutritional and 2 behavioral modification workshops during the intervention period. The topics were: i) How to eat healthy? ii) Influence of the mass media on what we eat. iii) Impact of physical activity on body and brain development. iv) Build up our self-esteem. Children received 100 points for each session they attended to.  Parents/tutors offered 2 nutritional conferences. i) How to cook a healthy meal? ii) Benefits of the Mediterranean diet.  Target: Child Parent/Caregiver  Frequency: max of 6 sessions |  | Put a special emphasis on motivating and informing the children about the benefits of a healthy lifestyle, highlighting the fact that they needed to be responsible for their own health  Target: Child, Teacher    Duration: <3 hours per week  Frequency: 4 | Opportunity to participate in enjoyable, noncompetitive sports and physical activities (team sports, racket games as well as dancing and music games).  Target: Child, Teacher  Duration: <3 hours per week  Frequency: 4 |  |  | This group was defined as "children who took part in the intervention but their level of attendance was less than 3 h per week.” |
| DeBar, 201110 | 2 | Public Committment to HEALTHY Intervention  Length of Intervention (weeks): 104  Setting: School | 1 hour initial training that outlined the required tasks, skills, and procedures (nutrition, PA, behavior and communications). Included the voluntary recitation of the following pledge:  “I promise to be a HEALTHY leader in my school. I will learn about being HEALTHY and share what I  learn with my friends, my school, my family and my community. I will be positive and encouraging. I will set an example to the best of my ability by living well in every way. I am HEALTHY!"  plus supplemental 30-minute trainings specific to each  intervention activity in which each SPC participated  Target: Child  Delivery: Researcher |  | 1 hour initial training that outlined the required tasks, skills, and procedures (nutrition, PA, behavior and communications). Included the voluntary recitation of the following pledge:  “I promise to be a HEALTHY leader in my school. I will learn about being HEALTHY and share what I  learn with my friends, my school, my family and my community. I will be positive and encouraging. I will set an example to the best of my ability by living well in every way. I am HEALTHY!"  plus supplemental 30-minute trainings specific to each  intervention activity in which each SPC participated  Target: Child  Delivery: Researcher |  |  | Communications intervention strategies, including public commitment opportunities for students, were intended to strengthen  the impact of all HEALTHY intervention components. | Participation was voluntary and the number of SPCs at each school depended on school size and other local considerations. SPCs were selected through a combination of self- and peer-nomination. The SPC was seen as a potential “influencer” or one who was able to promote key study messages in a meaningful way  to peers. |
| Rush, E, 201240 | 2 | Interventions were designed to help reduce excess weight gain and risk of chronic disease, through ‘team Energize’ staff who ‘modelled’ classes and support the usual class teacher through fundamental movement skill training, ideas for ‘huff and puff’ fitness activities, modified games, and ball activities and sport-related games, where keeping children moving as much as possible throughout each session was the focus.  Length of Intervention (weeks): 104  Setting: School  Classes were modeled through fundamental movement skill training, ideas for ‘huff and puff’ fitness activities, modified games, and ball activities and sport-related games, where keeping children moving as much as possible throughout each session was focused on nutrition education  Home: There was also a home–school link  Community: Activities also targeted the local community through events such as gala open days and edible gardens | Energizer educated through provision of information on the benefits of replacing of sugary drinks with water and milk, the importance of eating breakfast, and modeling the preparation of healthy lunches and snacks on a budget.  Target: Child  Comments: parents were encouraged to attend three information-based sessions, which included a 45 min practical nutrition class | Energizers assisted each school with a range of healthy-eating initiatives. These included canteen makeovers to remove pastry-based pies and ‘big cookies’ and add filled rolls, fruit and low-fat yogurt. Healthy fund raising was promoted with sales of water, milk, soup, bread rolls, fruit and non-food items instead of chocolate, sweets, sausages and sugary drinks.  Target: Schools  Delivery: Team Energizer staff | Education through ideas for ‘huff and puff’ fitness activities, modified games, and ball activities and sport-related games, where keeping children moving as much as possible throughout each session was the focus. Energizers also promoted active transport, lunchtime games, bike days and leadership training for students to be leaders of physical activities before and after school.  Target:Child  Delivery: Team Energizer staff | Activities targeted the local community through events such as gala open days and edible gardens  Target: Child  Community  Delivery: Team Energizer staff |  |  |  |
| Magnusson, 201231 | 2 | Physical activity and healthy diet intervention  Length of Intervention (weeks):  104 weeks  Setting: School | The dietary intervention was designed to target dietary knowledge, awareness, preferences/taste, self-efficacy and parental influence. Nutrition education material was developed for the intervention and implemented during the latter intervention year in collaboration with teachers of the intervention schools.  Target: Child  Delivery: Teacher  Comments: As part of the intervention, there was a nutritional teaching kit which comprised books, Digital Versatile Discs (DVDs). |  |  | Teachers integrated physical activity into the diverse subjects of the curriculum. This included more frequent outdoor teaching, organized fieldtrips, promotion of active commute to and from school, one extra physical education (PE) lesson per week (three 40-min sessions per week instead of two compulsory 40-min sessions at the control schools) and more.  Target: Child  Delivery: Teacher  Comments: The three intervention schools received a physical activity teaching kit which comprised books, Digital Versatile Discs (DVDs) and equipment to use both inside the classroom and for outdoor play at their will. The teachers held a log-book which they used to keep track of all the different activities they performed with the children during each week of the 2-year intervention period. |  |  | The intervention was a teacher-led daily implementation of various intervention tactics, which were introduced and discussed during bimonthly meetings (for about 2-3 hours) led by the research team. During these meetings, the researchers, the teachers and principals of the participating intervention schools exchanged on ideas and updates of the intervention progression. |
| Resaland, 201162 | 2 | Daily 60 min PA session  Length of Intervention (weeks): 104  Setting: School: PA sessions conducted during school hours |  |  |  | Intervention consisted of 60min of physical activity conducted by a specialist PE teacher with 15 min of rigorous physical activity per session.  Target: Child  Delivery: Teacher  Duration: 60min per session  Frequency: one session per day |  |  |  |
| 50731 | 2 | Hellison's Teaching Responsibility through Physical Activity model (TRPA)  Length of Intervention (weeks):  65 weeks  (15 months)  Setting: School: Physical education teachers provided assistance for students in planning their out-of-school leisure time physical activity.  Home: Students performed out-of-school leisure time physical activity. Community: Students performed out-of-school leisure time physical activity. |  |  | Physical education teachers provided social support and reinforcement for students and their self-programmed out-of-school physical activity plan.  Target: Child  Delivery: Teacher  Frequency: Evaluation sessions every 2 weeks for 15 months, but not clear how long/how often social support/reinforcement was provided. |  |  | Intervention: Goal setting  Target: Child  Delivery: Teacher  Comments: The experimental group pupils were given the responsibility for the accuracy of the plans and its accomplishments as a part of Hellison’s model of TRPA. Those pupils who fulfilled the PA obligations in the way they had committed themselves earlier in the planner, received a reward – an extra top grade once every two weeks. | "A specially self-designed, personalized planner‘ ‘Planning Form of Leisure time Physical Activity’ ’was used for self-programming of the out-of-school PA activity schedule. In this planner, every pupil planned the amount of time and forms of weekly PA hours they voluntarily committed to undertake during their out-of-school leisure time for each two week period." Does this meet the criteria for a school-home study? |
| Howe, 201120 | 2 | PA Intervention-Attended  Length of Intervention (weeks): 40  Setting: School: After-school program |  |  |  | After school program which included 25 minutes of skills development (e.g., how to dribble a basketball), 35 minutes of VPA, and 20 minutes of toning and stretching with 5 minutes rest between each component. Activities during the VPA component included games such as, basketball, tag, softball, and relay races, all of which were modified to keep all the boys sufficiently active (≥150 bpm) throughout the 35-minute period  Target: Child  Delivery: Teacher  Duration: 80  Frequency: 5 |  |  | Intervention is more fully described here: P. Barbeau, M. H. Johnson, C. A. Howe et al., “Ten months of exercise improves general and visceral adiposity, bone, and fitness in black girls,” Obesity, vol. 15, no. 8, pp. 2077–2085, 2007. This group attended >60% of the activities |
| Howe, 201120 | 3 | PA Intervention-Did not attended  Length of Intervention (weeks): 40  Setting: School: After school program |  |  |  | After school program which included 25 minutes of skills development (e.g., how to dribble a basketball), 35 minutes of VPA, and 20 minutes of toning and stretching with 5 minutes rest between each component. Activities during the VPA component included games such as, basketball, tag, softball, and relay races, all of which were modified to keep all the boys sufficiently active (≥150 bpm) throughout the 35-minute period  Target: Child, Teacher  Duration: 80  Frequency: 5  Comments: Attended less than 60% of the activities listed here. |  |  | This group attended less than 60% of the activities |
| Lubans, 201229 | 2 | Length of Intervention (weeks): 52  Setting: School  Focus on PA, nutrition, classroom workshops, environmental ints. to promote PA, home: parent newsletter.  Community: Health Informatics: text messaging for social support | Nutrition workshops, interactive sessions on healthy eating benefits parents were sent newsletters that included encouragement to support their child's dietary behaviors child also got supportive text messages re: diet  Target: Child Parent/Caregiver  Delivery: Researcher Clinician  Frequency: 3; Each consisting of nutrition workshops with dietitians, interactive sessions with research staff newsletters were sent out 4x during the 12 months texts were sent weekly during terms 2&3, bi-weekly during term 4.  Comments: interactive sessions were for healthy eating and PA |  | Enhanced sport sessions included an informational component for the first school term. Parent newsletters also promoted PA child also got supportive text messages re: PA  Target: Parent/Caregiver Child  Delivery: Teacher  Duration: 10-15 minutes of the larger 60-80 minute session  Frequency: newsletters were sent out 4 times during the 12 months text messages were sent weekly during term 2 and 3, biweekly during term 4. | Enhanced sport sessions, lunchtime PA sessions  Target: Child  Delivery: Teacher  Duration: 60-80 minutes  Frequency: NR  Comments: range of PA activities organized into 4 week units, for the first school term, included 10-15 minutes of an informational session delivered by teachers | Target: Child  Delivery: Researcher  Comments: text messages were sent weekly in term 2 and 3, biweekly during term 4, text messages were mixed or simultaneously addressed multiple components of the intervention (PA, Nutr, sedentary activity) | Intervention: Pedometer, teacher professional development  Target: Child  Delivery: Researcher  Comments: pedometers & handbooks were given out for self-recording teachers that served as school champions for the program (e.g. responsible for the program's delivery)participated in a 1-day training workshop. | Control group was provided with equipment packs and a condensed version of the intervention following the completion of 24-month assessments. |
| Llargues, 201266 | 2 | Promoting healthy dietary habits and increasing physical activity through the educational pedagogy Investigation, Vision, Action and Change (IVAC)  Length of Intervention (weeks): 104  Setting: School  Focus on classroom teaching children health strategies who then used their perception and knowledge to make changes with moderations from teachers to help them develop skills needed to make changes. | The IVAC method is used in health strategies because the perception and knowledge elaborated by school children are directed towards change, so that they make their own decisions based on their concepts of health, determination of priorities, and change. School children investigate and reflect on how lifestyle, environment, and society affect their health. Teachers act as moderators in conversations between school children and help them develop the skills they need to be able to change these conditions.  Target: Child  Delivery: Teacher  Comments: No mention was made on the frequency of intervention. |  |  |  |  |  |  |

APPLE = Alberta Project Promoting active Living and healthy Eating; BMI = Body mass index; CATCH = Child and Adolescent trial for cardiovascular health.; EHS = Elton Hills Elementary School; FMS = Fundamental Motor Skills; GI = Intervention Group; GINo = Non obese intervention group; GIOb = Obese children intervention group; HBS = Harriet Bishop Elementary School; INT = Intervention; IVAC = Investigation; Vision; Action and Change; MVPA = Moderate vigorous Physical activity; MYOC = Maine Youth Overweight Collaborative; NICHQ = National Initiative for Children’s Healthcare Quality; NR = Not reported; PA = Physical activity; PAAC = Physical Activity Across the Curriculum ;PE = Physical Education; PFGM = Project Familia Giya Marianas; PHN = Public Health Nurse; SPC = Student Peer Communicators; WSB = Walking School Bus