

Sahtak bi sahnak. Your health on your plate

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Summary

Sahtak bi Sahnak is the first Lebanese school-based nutrition programme targeting 15-18-year-old adolescents enrolled in public and private secondary schools, located in urban and rural regions. It aimed at improving the dietary knowledge and adherence levels of Lebanese adolescents, and to consequently prevent paediatric obesity. The programme was administered by a research dietitian in 16 secondary schools in the Lebanese regions Beirut, Baalbeck, and Rayak. Overall, the results of the effect evaluation were promising, suggesting a future larger dissemination across the country.

Chapter 2 described the development process of the dietary knowledge and adherence questionnaires for Lebanese adolescents and their parents. It also examined the feasibility and internal reliability of the questionnaires in the target population. As a result, we obtained brief and relatively inexpensive assessment questionnaires that may be administered in Lebanese school settings. In addition, the internal reliability for all scores, except for the healthy items score of the parents, was acceptable.

Chapter 3 presented the baseline characteristics of the participating adolescents and their parents, in addition to the correlation of dietary knowledge and adherence with the BMI z-score of the adolescents, their parents' levels of dietary knowledge and adherence, and with clustered behaviours. This study indicated that the prevalence of overweight and obesity has reached serious rates among Lebanese adolescents. In addition, it seems that the dietary knowledge of the adolescents directly influenced their dietary adherence, whereas the dietary knowledge level of their parents influenced their children's dietary adherence indirectly, mediated through the children's dietary knowledge.

Chapter 4 described the application of the Intervention Mapping (IM) to develop Sahtak bi Sahnak. The protocol of the intervention was described following all the six steps of IM, in details. The resulting intervention was a theory-based and culturally appropriate intervention, needing little resources, and which can be integrated in the educational curriculum of both public and private Lebanese secondary schools, located in urban and rural regions. This study provided an elaborate example of the application of the IM approach in the Lebanese secondary school context. Although a time-consuming process, IM serves as a valuable tool in the health promotion field and provides a high level of transparency to improve and replicate the process in the future.

Chapter 5 presented the effect evaluation of Sahtak bi Sahnak, assessing the effectiveness of the intervention in improving the levels of dietary knowledge and adherence of the participating adolescents. A cluster randomised controlled trial was conducted in public and private secondary schools. The results showed significant improvements in both dietary knowledge and adherence levels in the intervention schools, compared to the

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control schools. These positive outcomes were found among all participants of both genders, locations, types of school, and different BMI z-score categories.

The final chapter summarised the main findings of the studies, and then reviewed the strengths and limitations of the used methods. The chapter also reviewed the possible implications and suggested some recommendations for future research. We concluded that the current intervention is a promising nutrition programme targeting Lebanese adolescents in secondary schools.