

Queensland Child and Youth Clinical Network

Raising the topic of a child's weight

The monitoring of children's growth (and weight in particular) is an important role of all health professionals. At every consultation (or at least yearly¹), health professionals need to have a conversation with families and carers around children achieving a healthy weight. Please refer to '[An integrated approach for tackling childhood overweight and obesity in Queensland - Model Of Care](#)' (p13) for more information on growth monitoring.

Talking about weight with a family should be a **positive** experience and be approached in an empathetic, non-judgemental and supportive way.

Steps for discussing weight with families or carers:

1. Make the family feel welcome and at ease.
"Can you tell me how your child is doing...?"
2. Ask permission to discuss growth and development with the family.
"Would you feel comfortable if...?"
3. Normalise the discussion of growth and development
Reassure the child and family that it is standard practice in primary care.
"We always check..."
4. Explain what is measured and why? (Weight, Height, BMI)
5. Encourage involvement of parents/carers when measuring weight and height.
"Can you help me take their height and weight...?"
6. Explain how the child's growth tracks against the growth of all children. Engage the family in plotting and interpreting the growth chart, using the growth charts as a tool.
7. Advise parents or carers of child's growth status. Be sensitive and non-judgmental but don't sugar-coat it. For example:
"Tom's BMI is... which places him above the healthy weight range"



8. Use positive terminology to reinforce key concepts and advice:
 - Use “healthy eating”, “eating” or “eating plan” rather than “diet” or “dieting”.
 - Do not use ‘good’ or ‘bad’ to describe food or drinks – these terms reinforce a dieting mentality and create blame and guilt.
 - Let the family do most of the talking rather than you.
 - Be realistic - make sure everyone in the room understands that long term changes have to be made if the child is above the healthy weight range and it will take time.
 - Avoid inappropriate words, such as “*Tom is obese*”
9. For adolescents, if appropriate, consider speaking to them without parent or carer present.
10. Agree on and develop an action plan including [SMART goals](#).

Tips for talking to children about their weight

- At consultations take every opportunity to discuss healthy growth and development (including mental health) e.g. struggling to play at school and bullying.
- Get an idea on what is happening from the child’s perspective:
 - How does the child feel? How is school? Do they have friends?
- When discussing the behaviours that have led to the child’s weight being above the healthy range be empathetic and non-judgemental. Make sure the child knows that they can stop/slow further weight gain and in time return to the healthy range.
 - “You know what; it is so brave of you to talk about this. I am so glad you’re here today. We can help you get on track for healthy growth and get back to playing without being short of breath/puffed...”
- Let the child know why having healthy growth and development can benefit them and make them feel better, physically and mentally. Be sure to individualise.

Ways to start the discussion

- With a parent:
 - “When looking at the growth charts (BMI for age), Tom’s weight is outside the healthy range. This may influence Tom’s physical health and could also affect his emotions and friendships, including at school. Would you like me to help Tom achieve a healthier growth?”
- With a child:
 - “I noticed you said you get really puffed and tired in physical education. How does this make you feel? Why do you think you get so puffed and feel like that? Would you like my help with that?”



- “Do you think you could tell me what you usually do each day? Let’s start with the first thing you do when you wake up...”

What to do if a parent or carer does not want to talk about unhealthy weight

- Talk about how parents or carers have a much harder job helping their families maintain a healthy lifestyle than 20-30 years ago.
- Explore why this is a difficult topic to discuss.
- Consider discussing a healthy weight/growth at the next consultation.
- Consider talking about what small steps could be made.

If a family or child is not ready to change (yet), then it is not useful to give any resources on the topic. However, you have now made them aware of the health risks so give them time to consider these and revisit at the next consultation. Your duty of care and clinical judgement may require you to pursue the discussion of unhealthy growth depending on the degree of obesity and the comorbidity risks.

Points to remember

- Assess the family readiness to make and sustain behavioural changes.
- Assess the ability of the family to make changes.
- Involve the whole family.
- Emphasise lifestyle changes that are beneficial to the whole family unit.

1. Styne DM, et al. Pediatric Obesity—Assessment, Treatment, and Prevention: An Endocrine Society Clinical Practice Guideline. J Clin Endocrinol Metab 2017; 102(3):709–757. Available from: <https://academic.oup.com/icem/article-lookup/doi/10.1210/ic.2016-2573>

Developed by the Queensland Child and Youth Clinical Network. Updated: May 2018

