

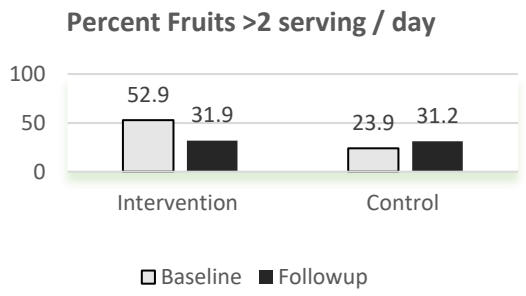
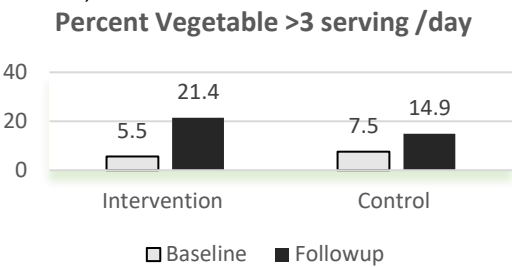
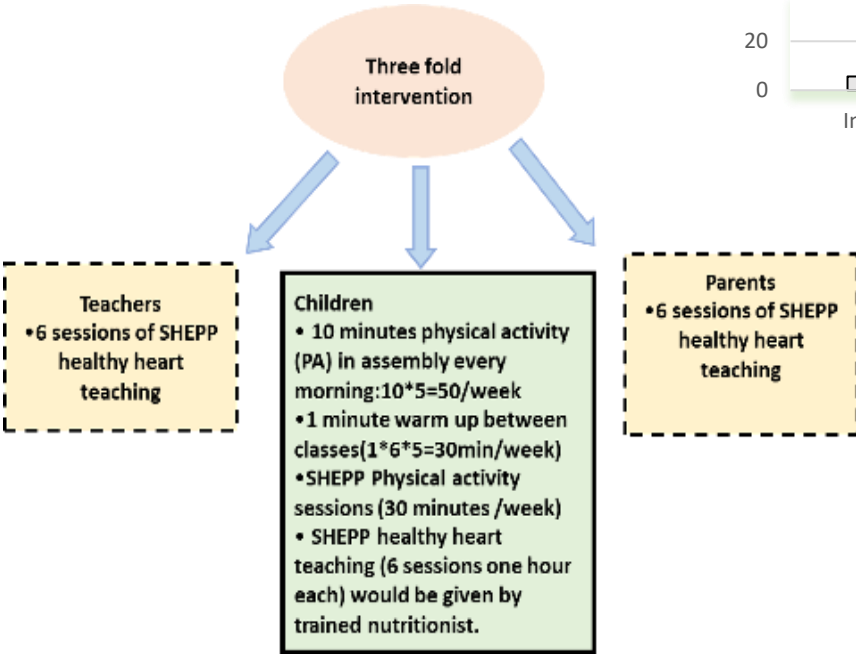
# School Health Education Program in Pakistan (SHEPP)-Findings from a feasibility trial in pre-adolescent school children from a Lower middle-income country.(Trial registration: NCT03303287

Aysha Almas<sup>1</sup>, Romaina Iqbal<sup>1</sup>, Abdul Ghani<sup>2</sup>, Zainab Samad<sup>1</sup>, Sania Sabir<sup>1</sup>, Khawar Kazmi<sup>3</sup>

1Aga Khan University, Karachi, Pakistan, 2Institute of Public health, Quetta, National Institute of Cardiovascular Diseases, Karachi, Pakistan.

**Aim:** We aim to test feasibility of threefold health education program in children and its potential efficacy on physical activity, diet and cardio metabolic risk factors by including BP, BMI, and waist circumference

**Methods :**The SHEPP was a parallel group feasibility intervention trial conducted in two schools over a 23-month period. All children aged 9-11 years enrolled from these schools were included. Primary outcome was feasibility of SHEPP in terms of recruitment, retention, and treatment fidelity. circumference (WC)).



7-day Physical activity at baseline and 10-month follow-up in adolescent school children.				
	Baseline	Follow-up N=982)	Change <sup>1</sup>	P value <sup>2</sup>
	Mean (SD)	Mean (SD)	Mean (SD)	
Total Physical activity				
Intervention	297.6(143)	430.9(161)	134(196)	<0.001
Control	362.3(131)	389.4(151)	29.8(177)	
In school Physical activity				
Intervention	45.1(24)	77.8(17)	33(27)	<0.001
Control	50.1(22)	90.5(22.5)	40.2(28.1)	
Out of school Physical activity				
Intervention	252.4(133)	353(156)	101.0(187)	<0.001
Control	312.1(126)	298(145)	-10.3(172)	
Moderate to vigorous physical activity				
Intervention	88.5(62.5)	130.6(72.5)	46.6(97.8)	0.07
Control	104.9(67)	127(73.6)	28(86)	
Sedentary activity				
Intervention	6292(372)	6494(501)	200(583)	<0.001
Control	6032(457)	6509(501)	482(628)	

**Results :**A total of 1280 preadolescent children were assessed for eligibility.The overall recruitment n (%) was 982/1191(82.5 %),overall retention rate n (%) at 10 month follow up was 912/982(92.8) and treatment fidelity was 132/144(92) %)

**Conclusion:** We found that intervention using SHEPP is feasible in schools and may help children to adopt a healthy lifestyle as they age by increasing physical activity. However, the potentially beneficial effect on BMI and BP needs a longer follow-up.(correspondence :Email:aysha.almas@aku.edu) Funding: Higher Education Commission, Pakistan