# The Salut Child-Health Intervention Programme

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## Associated documentation

3-årsenkät\_v3.pdf (498.9 KB) 3-year questionnaire\_2020\_version 3.pdf (1.01 MB) Elevhälsoformulär\_åk 4.pdf (324.7 KB) Elevhälsoformulär\_åk7.pdf (331.45 KB) Elevhälsoformulär\_år 1gy.pdf (314.69 KB) Elevhälsoformulär\_FSK.pdf (291.61 KB) Gravid\_hälsoformulär\_2019\_version\_7.pdf (773.13 KB) Icke-gravid\_hälsoformulär\_2019\_version\_7.pdf (653.11 KB) Not pregnant\_health quest\_2020\_version\_7.pdf (734.29 KB) Pregnant\_health quest\_2020\_version\_7.pdf (924.19 KB)

## Creator/Principal investigator(s)

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## **Research principal**

Umeå University - Department of Epidemiology and Global Health

### Description

In 2005, the health authorities of Region Västerbotten initiated the Salut Programme. The initiative got its name from the word "salutogenic" as the basic idea is to promote processes that give children and their parents an opportunity to increase control over their health and ability to improve it. Since 2009/2010 it is a countywide ongoing universal health promotion intervention in a variety of sectors for parents and children 0-18 years, starting already during pregnancy. The Programme has been implemented since 2006 onwards, prompted by alarming reports of child overweight/obesity and trends of increased dental caries, already during preschool age. The programme has been developed and implemented in close collaboration with antenatal care, child health care, dental services, open preschools and schools.

The Programme aims to support and strengthen initiated and ongoing health promotion interventions, and universal preventive interventions to improve health and lifestyle among expectant parents and children. The main focus areas are: to promote healthy eating habits, physical activity and good psychosocial health, and to prevent obesity and caries. In other words, the Programme combines both health promotion and universal prevention interventions in order to improve health and well-being, as well as to avoid ill health and disease for the whole population. To achieve the aforementioned aims, the Salut Programme includes a package of interventions using a family-centred approach. The interventions are integrated within ordinary public services. Programme development, implementation and dissemination have been carried out stepwise, with respect to geography, which facilitates evaluation efforts. The Programme has stepwise become a quite unique infrastructure to research on children, their parents and their living conditions. The Programme is followed and

evaluated using registers, surveys, interviews, observations and records, and has generated 3 doctoral thesis and 26 international peer-reviewed articles.

Purpose:

One of the aims is to evaluate the short and long-term results of the Salut Programme in relation to the public health policy goals: maximizing public health and improving health equity while obtaining value for the money. Another aim is to pave the way for children's right to good and equal health by increasing the knowledge regarding preschool children's social-emotional problems.

#### Data contains personal data

No

Language

Swedish

### Unit of analysis

**Individual** 

### Population

The population in the Salut Programme includes all children and adolescents 0-18 years in Västerbotten county and all parents-to-be during pregnancy.

### **Time Method**

<u>Cross-section</u> Longitudinal: Trend/Repeated cross-section

### Sampling procedure

The Salut Programme's specific interventions were developed in four pilot areas, selected to represent different geographic areas of the county and that characterize different population structures in Västerbotten. Quantitative studies are conducted either with a total survey of the population or the four pilot areas as the intervention area in comparison with the whole study population. In qualitative studies the sample are hand-picked to be as wide as possible with the aim to get as much variety as possible.

### Time period(s) investigated

2010 - Ongoing

### **Response rate/participation rate**

Health questionnaire to expectant parents Antal individer/objekt: 10 000 Svarsfrekvens: ca 65-70 %

3 year survey Antal individer/objekt: 15 000 Svarsfrekvens: 70 %

Student health survey

Antal individer/objekt: 12 000 Svarsfrekvens: 85 %

## Data format / data structure

Numeric

## Data collection 1

- Mode of collection: Self-administered questionnaire
- Description of the mode of collection:
  - Health questionnaire to expectant parents

Expectant parents, early in pregnancy (around gestational week 11), answer a questionnaire each on self-rated health, BMI, lifestyle and life condition. It was countywide implemented in mid-2010 and onwards. Recently, the Salut Programme data have been linked, on an individual level, to data from national registers with annual data when relevant. This includes: Medical Birth Register (pregnancy, delivery and immediate postpartum), National Patient Register (inpatient and specialist outpatient care and diagnoses), Register for Pharmaceutical Prescriptions (dispensed drugs) and Statistics Sweden (e.g. parents' income and education, family characteristics, place of birth and place of residence).

• Time period(s) for data collection: 2010-ongoing

# Data collection 2

- Mode of collection: Self-administered questionnaire
- Description of the mode of collection:
  3 year survey

The Ages and Stages Questionnaires: Social-Emotional (ASQ:SE) have been used for three-year-olds since 2014 and onwards. In addition, there are questions on health, lifestyle and life condition included in the survey.

• Time period(s) for data collection: 2014-ongoing

# Data collection 3

- Mode of collection: Self-administered questionnaire
- Description of the mode of collection:

### Student health survey

All children attending compulsory school and upper secondary school (grades F, 4, 7 and 1 corresponding to age 6, 10, 13 and 16) in Västerbotten County are invited to participate in an ongoing school-based online survey. Since 2016/2017 the municipalities Umeå and then Skellefteå introduced the surveys incrementally. The survey includes questions about self-reported health, BMI, lifestyle and well-being at school.

The questionnaires are available in Swedish only:

https://www.regionvasterbotten.se/folkhalsa/salut-satsningen-for-barn-och-ungas-halsa/salut-i-skola n

• Time period(s) for data collection: 2016-ongoing

# **Geographic spread**

Geographic location: Västerbotten County

# **Responsible department/unit**

Department of Epidemiology and Global Health

# Funding 1

• Funding agency: Umeå University

## Funding 2

• Funding agency: Swedish Research Council for Heath, Workning Life and Walfare

# Funding 3

• Funding agency: Region Västerbotten

# Funding 4

• Funding agency: Public Health Agency of Sweden

## **Research area**

<u>Medical and health sciences</u> (Standard för svensk indelning av forskningsämnen 2011)

Health sciences (Standard för svensk indelning av forskningsämnen 2011)

<u>Public health, global health, social medicine and epidemiology</u> (Standard för svensk indelning av forskningsämnen 2011)

Health (CESSDA Topic Classification)

General health and well-being (CESSDA Topic Classification)

Public health (CESSDA Topic Classification)

## Keywords

Dental health, Education, Life style, Exercise, Diet, Alcohol drinking, Pregnancy, Health, Oral health, Education, Occupations, Dental care, Midwives, Social networks, Feeding behavior, Delivery, obstetric, Diet, healthy, Healthy lifestyle, Child health, Lifestyle factors, Social living conditions

# Publications

Kristina Edvardsson, Anneli Ivarsson, Rickard Garvare, Eva Eurenius, Marie Lindkvist, Ingrid Mogren, Rhonda Small, Monica E Nyström. Improving child health promotion practices in multiple sectors outcomes of the Swedish Salut Programme. BMC Public Health 2012, 12:920. <u>Read full text</u>

Masoud Vaezghasemi, Marie Lindkvist, Anneli Ivarsson, Eva Eurenius. Overweight and lifestyle among 13 to 15 year olds: A cross-sectional study in northern Sweden. Scand J Public Health 2012;40:221–228. Read full text

Kristina Edvardsson, Rickard Garvare, Eva Eurenius, Anneli Ivarsson, Ingrid Mogren och Monica Nyström. Sustainable practice change: Professionals' experiences with a multisectoral child health promotion programme in Sweden. BMC Health Services Research 2011;11:61. <u>Read full text</u>

Eva Eurenius, Marie Lindkvist, Magdalena Sundkvist, Anneli Ivarsson, Ingrid Mogren. Maternal and paternal self-rated health and BMI in relation to lifestyle in early pregnancy - the Salut Programme in Sweden. Scand J Public Health 2011;39:730-41. <u>Read full text</u>

Kristina Edvardsson, Anneli Ivarsson, Eva Eurenius, Rickard Garvare, Monica E Nyström, Rhonda Small

and Ingrid Mogren. Giving offspring a healthy start: parents' experiences of health promotion and lifestyle change during pregnancy and early parenthood. BMC Public Health 2011;11:936 <u>Read full text</u>

Kristina Edvardsson, Marie Lindkvist, Eva Eurenius, Ingrid Mogren, Rhonda Small, Anneli Ivarsson. A poulation-based study of overweight and obesity in expectant parents: socio-demographic patterns and within-couple associations. BMC Public Health 2013:13(1):923. Read full text

Lindqvist M, Lindkvist M, Eurenius E, Persson M, Ivarsson A, Mogren I. Leisure time physical activity among pregnant women and its associations with maternal characteristics and pregnancy outcomes. Sexual & Reproductive Healthcare 2016;9:14-20. Doi: 10.1016/j.srhc.2016.03.006. <u>Read full text</u>

Wilson I, Eurenius E, Lindkvist M, Edin K, Edvardsson K. Is there an association between pregnant women's experience of violence and their partner's drinking? A Swedish population-based study. Midwifery 2018;69:84-91.

DOI: https://doi.org/10.1016/j.midw.2018.10.019

Eurenius E, Richter Sundberg L, Vaezghasemi M, Silfverdal SA, Ivarsson A, Lindkvist M. Socialemotional problems among three-year-olds differ based on the child's gender and custody arrangement. Acta Pediatrica 2018;108:1087-95. **DOI:** <u>https://doi.org/10.1111/apa.14668</u>

Vaezghasemi M, Eurenius E, Ivarsson A, Richter Sundberg L, Silfverdal SA, Lindkvist M. Socialemotional problems among Swedish three-year-olds: an Item Response Theory analysis of the Ages and Stages Questionnaires: Social-Emotional BMC Pediatrics 2020;20:149. **DOI:** <u>https://doi.org/10.1186/s12887-020-2000-y</u>

Feldman I, Eurenius E, Häggström J, Lindkvist M, Pulkki Brännström AM, Sampaio F, Ivarsson A. Effectiveness and cost-effectiveness of the Salut Programme: a universal health promotion intervention for parents and children - protocol of a register-based retrospective observational study. BMJ Open 2016;6:e011202.

DOI: https://doi.org/10.1136/bmjopen-2016-011202

Häggström J, Sampaio F, Eurenius E, Pulkki Brännström AM, Ivarsson A, Lindkvist M, Feldman I. Is the Salut Programme an effective and cost-effective universal health promotion intervention for parents and their children? A register-based retrospective observational study. BMJ Open 2017;7:e016732. **DOI:** <u>https://doi.org/10.1136/bmjopen-2016-011202</u>

Pulkki Brännström AM, Lindkvist M, Eurenius E, Häggström J, Ivarsson A, Sampaio F, Feldman I. The equity impact of a universal child health promotion programme. Journal of Epidemiology & Community Health 2020;0:1-7.

DOI: https://doi.org/10.1136/jech-2019-213503

### Accessibility level

Access to data through an external actor Access to data is restricted

### Homepage

<u>Can the health-promoting Salut Programme for children and parents contribute to the health of the population? (English)</u>

The study homepage (only in Swedish)

<u>Can the health-promoting Salut Programme for children and parents contribute to the health of the population? (Swedish)</u>

Factors contributing to beneficial development of social emotional ability in early childhood (English) Factors contributing to beneficial development of social emotional ability in early childhood (Swedish)

## Download metadata

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