The “Saúde na Boa” project in promoting a healthy lifestyle among high school students

O projeto “Saúde na Boa” na promoção de um estilo de vida saudável em escolares do ensino médio

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The “Saúde na Boa” project was a school-based randomized trial that was performed in Brazil to promote positive changes in physical activity practices and nutritional behaviors among high school students between 15 and 24 years of age, who were attending night classes and public schools in two Brazilian cities¹. Recife, a municipality in northeastern Brazil, and Florianópolis, a municipality in southern Brazil, were selected because of their environmental and socio-cultural distinctions. This choice allowed for an analysis of the intervention effectiveness in different contexts. A review of international and national literature revealed that there had been no intervention studies aimed at promoting health behavior changes among night shift students. The lack of school-based health interventions focusing on this specific population and their psychosocial characteristics guided our choice to target this group. Additionally, since the structuring phase of the project we recognized that this was a challenging population group because high school students generally have established lifestyle behaviors. School and life obligations, such as working and preparing for college entrance exams; along with a lack of opportunities to eat healthy and be physically active at school, were all barriers to behavior change in night shift students.

The intervention strategies and the theoretical model of the “Saúde na Boa” project¹ were developed considering night shift student characteristics, and based on the logical models of the World Health Organization (Health Promoting School’s Philosophy)² and the Center for Disease Control and Prevention (Guidelines for School and Community Programs)³. Three primary intervention areas were defined: 1) education on physical activity practice and healthy eating habits, 2) environmental and organizational changes, and 3) personnel engagement and training.

In this supplement of the Brazilian Journal of Kinanthropometry and Human Performance, new researchers in the field of Physical Education and Nutrition partnered with the “Saúde na Boa” researchers to disclose data relevant to “Saúde na Boa” that had not yet been published.

This particular supplement is an important repository that centralizes several key points about the “Saúde na Boa” project. Silva et al. detailed the

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“Saúde na Boa” evaluation process and described the differences between participants and dropout students, a relevant yet underexplored topic in school-based interventions. The intervention effectiveness on proximal outcomes of the project was also highlighted, including physical activity practices (exercise for muscular strength/endurance and active commuting to school) reported by Duca et al.; screen time indicators (TV watching and video games/computer using) presented by Hardman et al.; and assessments of the effectiveness of the intervention on increasing the consumption of fruits, vegetables, and other healthy foods (beans and milk); and reducing the consumption of unhealthy foods (snacks, sweets, and soft drinks) by Costa et al.. Intervention effectiveness on distal outcomes was also presented including anthropometric indicators of general and abdominal obesity evaluated by Sousa et al. Barbosa Filho et al. analyzed the associations between lifestyle changes (physical activity, TV watching, eating habits, alcohol and tobacco use, and sleep duration) and self-rated health. Hoefelmann et al. used cross-sectional and prospective evidences to test the relationship between behavioral variables and self-reported sleep quality and duration. Finally, Silva et al. evaluated whether health behavior changes influence body weight dissatisfaction.

Positives health outcomes were documented in this supplement and the lessons learned during the “Saúde na Boa” project supersede the limitations imposed by the “real world”, such as school strikes and sample loss due to dropout. In the future, interventions should focus on both efficacy and effectiveness. Effectiveness concerns the evaluation of the intervention in the structuring phase of the project, i.e., its development under “ideal” conditions, whereas efficacy refers to the assessment after the intervention, i.e., how the intervention works under “real world” circumstances^{4,5}.

The information published in this supplement and the lessons learned from the “Saúde na Boa” project can guide the structuring of future school-based interventions concerning health lifestyle and behaviors in high school students. Additionally, we emphasize the importance of interventions similar to the “Saúde na Boa” project in contributing to debates and discussions on public health policies in Brazil. Examples of national programs include the School Health Program (*Programa Saúde na Escola*); the National Program for School Food Security (*Programa Nacional de Alimentação Escolar*)⁶, which was recently expanded to the high school system; and Strategic Actions for Non-communicable Chronic Diseases Combat (*Plano de Ações Estratégicas para o Enfrentamento das Doenças Crônicas não Transmissíveis*)⁷, which performs interventions aimed to encourage fruit and vegetable consumption and physical activity, while reducing the consumption of salt, sugar, and fats.

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