What is proposed to overweight and obese youth in a sample of fitness centres?

Characteristics of the fitness centres?

- According to the current Belgian legal context, managers are not compulsory graduated in PE (graduation: 4 PE, 2 PE + physiotherapy, 1 physiotherapy, 1 nutritionist, 2 higher education in other fields, 4 secondary level); almost all of them followed specific fitness instructors and/or sport coaches courses.
- All centres proposed similar activities but only 3 had personal coaching and 3 well-being collective courses (table 1).
- Customers are ‘diversified’ (M2, 7, 8, 9, 11, 12). ‘Oldest’ clients attend on the morning while students arrive at the end of the afternoon and during the evening: athletes and beginners participate at the evening. Above 30, people chose health-based activities while younger are focused on ‘body shape’ (males work on muscular training, females are interested by weight control). One centre is reserved for women (i.e. Muslims).
- Youths are accepted on a case-by-case basis (height, autonomy); girls earlier than boys.

And for overweight people?

- Two categories of clients: those who are there to lose weight/maintain a ‘normal’ weight and those who are clearly overweight or obese.
- 90% of the programs are focused on weight control but obese people are a minority (M1, 2, 3, 7, 9, 10) except in two centers (M4,8) that were opened to work with overweight (young) persons, but they gave up.
- ‘I had many, as the centre was specialized, and I still have some. But last year, I did another test. It was with a young 14 year-old boy who became in danger (obesity). He came only 4 times. He was here to follow his physician’s recommendations.’
- Overweight adolescents require specific care ‘We had some problems with overweight youths. Their parents were there and wanted to push them…. But, if he has no friend, he will not enjoy. He should come with one friend. The youth must be at the start! If he doesn’t decide, it will not work.’

What actions for overweight youths?

- Overweight youths participating in the centres’ activities are welcomed as other customers.
- Recommended activities would be ‘working in the fitness room’ (with specific machines equipped with modern softwares – n=4), ‘small group’ (n=2), ‘individualized follow up’ (n=7), ‘collective course’ (n=7). It is noteworthy that several managers underlined that a combination of activities would be appropriate.
- Several examples of new activities to be implemented have been provided (‘providing an appointment to a group of overweight youths who will be coached by one trained instructor’; ‘adding a fitness instructor who will take care of the overweight youths’; ‘adapting some collective courses for the overweight youths’; ‘proposing playful activities for youths under 16’; ‘organizing group activities in the fitness room’).
- With the exception of M4 and M8 who already (unsuccessfully) implemented such activities, the managers were ready to experiment one activity if there was a demand from enough customers. 5 managers did not insist on cost-effectiveness as such initiative would be well accepted like a good promotion for the centre.
- R4 pointed out that her initial project was well considered but it was too expensive (no financial support from the social security) and suffers from a lack of persistence of the youths (they have short-term objectives). R8 added that parents are not always able to provide the needed support.

In conclusion: fitness centres might be interesting partners, but a real coordination with other structures should be necessary to increase the success rate.