# Volunite

Holistic programme fostering the integration of overweight and adipose youth healthy into the labour market

### INSTRUCTIONS FOR TRAINERS EMPLOYMENT MODULE



Co-funded by the European Union













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#### **1. INTRODUCTION**

The first three chapters of this Module contain essential instructions and guidelines that are consistent across all six Modules developed within the YOUnite Programme. If you have already reviewed these sections in another Module, you may proceed directly to the Module-specific content. However, we recommend revisiting these chapters if you need a refresher or are new to the YOUnite training materials.

The Instructions for Trainers is a supporting document for the Training Modules developed as part of the YOUnite project, designed to assist trainers, youth workers, and counsellors in working with young people with overweight and obesity, and those at risk of becoming so. The Module activities can be downloaded from the **YOUnite website**.

YOUnite is a project aimed at helping adolescents with overweight and obesity to overcome challenges and improve their employability. Supported bv the Erasmus+ programme, the YOUnite project has developed an engaging Training Programme that builds up self-confidence and helps young people cope with socio-economic difficulties and potential sources of discrimination. The objective of the Modules is to provide young people with little prior knowledge in this field the first steps towards a healthier lifestyle, both physically and mentally.



The specific target group for the Training Modules includes young people aged 15 to 24, in particular those who are marginalised or disadvantaged such as NEETs in (those not employment, education, or training) with overweight or obesity. However, the materials can also be used as a preventive tool for young people at risk of overweight or obesity, or to raise awareness about the potential challenges associated with these conditions.

The YOUnite project partners have developed six Training Modules covering Health/Medicine, Nutrition, Sport, Stress, Awareness, and Employability. These are based on non-formal Modules education practices, designed to boost the self-confidence of young people as they prepare to enter the labour market. The Modules can be implemented as a complete programme (all six Modules) or selected individually to suit different needs and circumstances, offering flexibility and adaptability

The Training Programme was first piloted in the summer of 2024 in Austria, Finland, Hungary, and Poland, where youth coaches, trainers, and young participants tested the various Modules. Based on their feedback and evaluations, the materials were refined to enhance their practical application.

Each Module includes detailed activity descriptions necessary for planning and execution, while the **Instructions for Trainers** provides additional, complementary resources.

These instructions are designed to support trainers and teachers who work with youth on a daily basis, equipping them with the tools and knowledge they need to effectively lead the training programme. They are user-friendly and accessible, meaning no prior expertise on the topic is required. Whether new to the subject or looking to deepen your understanding, these guidelines will help you confidently deliver the Modules and engage with youth in a meaningful way.

The Instructions for Trainers also aim to equip youth workers and trainers with insights into the specific challenges faced by young people with overweight and obesity. Additionally, it seeks to combat weight stigma by promoting weight-inclusive language that fosters a more empathetic and effective approach to health, nutrition, and wellness.



The instructions provide an overview of key considerations for trainers, including how to empower and interact with vulnerable adolescents, particularly those who have not previously engaged with the topic, and how to ensure a supportive and inclusive environment.

#### 2. OBESITY AS A SIGNIFICANT GLOBAL ISSUE

In the European Union (EU), weight problems and obesity are increasing at a rapid rate. In 2019 52.7% of the adult (over 18 years old) EU's population was overweight according to the Eurostat data [1]. Obesity is a serious health problem, it is considered as one of the key risk factors for many non-communicable diseases (NCDs) such as diabetes, hypertension, stroke and cardiovascular diseases [2]. Overweight and obesity are linked to more deaths worldwide than underweight. According to the WHO European Regional Obesity Report in 2022, obesity and overweight problems affected almost 60% of adults and nearly one in three children (29% of boys and 27% of girls) in the WHO European Region [3].

Obesity as a medical condition has direct and indirect effects as well. This medical problem has an undeniable effect on health conditions. Obesity in children and adults increases the risk of several health related problems, such as high blood pressure and high cholesterol which are risk factors for heart disease, type 2 diabetes, breathing problems (asthma, sleep apnea), joint problems such as osteoarthritis and musculoskeletal discomfort. The previously mentioned problems are associated with psychological also problems (anxiety, depression), low self-esteem and lower self-reported quality of life, social problems (bullying, stigma), and for children with obesity there is a high risk for being obese as adults [4].

Besides obesity's effects on health conditions it also has an economic impact. Obesity is responsible for direct medical costs and non-medical costs.

## birect medical costs may include preventive, diagnostic, and treatment services. Indirect costs relate to

In the EU, the trend is that annual obesity-related medical care costs account for between 1.9% and 4.7% of the total annual health care costs and 2.8% of the annual hospital costs. Health care expenditures for individuals with overweight and obesity were 9.9% and 42.7% higher, respectively, when compared to adults with healthy weight [5].

and

include lost productivity.

death

and

sickness

Furthermore, there is substantial evidence that people with obesity are less likely to be employed and, when employed, earn lower wages. Overweight and obesity are barriers in the labour market and for professional success (World of Labour, Susan L. Averett) [6].

#### 3. GENERAL GUIDANCE AND UNDERLYING METHODOLOGY TO CONDUCT THE TRAINING: BI-CYCLE MODEL, WAYS TO ENGAGE WITH THE TARGET GROUP, RECOMMENDATIONS TO LEAD THE ACTIVITIES

The purpose of the Training Programme is to introduce young people to the topic and make them more adaptable and better able to join the labour market, and not to 'cure obesity', which is a long-term undertaking. The main focus is on labour market integration rather than health training.

The methods used by trainers may vary, as they come from different backgrounds, have different experiences, and professional profiles. The most important aspect is that the training itself is supposed to be entry-level training to encourage participants to pursue further self-improvement.

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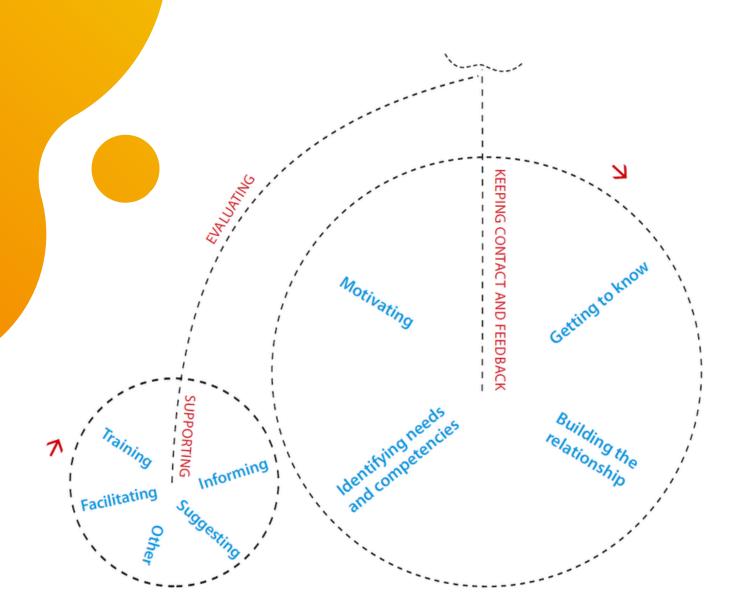
The Bi-cycle Model can be thought of like a bicycle, two wheels moving at the same time and influencing each other in their movement. The big wheel motivational represents the and relational aspect of the training while the process, small wheel represents the various ways trainers can provide support to the group, such by giving information, making as suggestions, or facilitating activities. Both wheels are essential to keep the training moving forward smoothly.



A model that served as the basis for the Training Modules methodology is the Bi-cycle Model, presented by SALTO Youth Initiatives Resource Centre [7]. However, the model was modified to better suit the specific needs and purposes of the Training Programme. The methodology aims to provide guidance for the main training phases and will assist in managing the training process during the implementation of the Training Modules.

### The Bi-cycle Model has the following phases:

- motivating;
- getting to know;
- building the relationship;
- ♀ identifying needs and competences;
- supporting;
- evaluating;
- ↓ keeping contact and feedback.



#### Figure 1. Bi-cycle model. Source: SALTO Youth Initiatives Resource Centre (2006)

Trainers play a pivotal role in achieving the objectives of the Training Module as they are the ones who undertake the crucial work represented by the bigger wheel. The expertise and guidance provided by trainers are essential. Trainers act as the driving force behind the implementation of the Module, guiding participants towards successful integration into the labour market.

In simple terms, the small wheel represents what occurs during the training, while the larger wheel illustrates how it is happening, with a focus on group dynamics.

To understand the model, we have to go through each phase that is in the bigger, front wheel.

#### Motivating

Trainers are instrumental in inspiring and maintaining the focus of participants throughout the implementation of the Training Module. To effectively motivate young people, put yourself in their position: *what would inspire and energise you if you were part of the group?* Consider these elements to enhance motivation:

- A safe, healthy environment (physical). Ensure that the training space is comfortable and conducive to learning.
- A nurturing environment (emotional). Foster a supportive atmosphere where participants feel valued and understood.
- Positive, respectful, and supportive relationships. Build trust with the group by showing genuine care and respect as their trainer.
- Setting realistic and achievable goals. Help participants set attainable objectives that they can work towards, which will provide a sense of accomplishment.



#### Getting to know

Trainers facilitate the process of getting to know the group of participants who take part in the training. In this stage, the trainer focuses on understanding the participants' backgrounds and experiences.

This involves creating a welcoming and safe space where young people feel comfortable sharing their personal stories, challenges, and aspirations, ensuring a deeper understanding of individual needs. Try to get as much information as possible at the beginning of your training process to have a clear picture of the young people you will work with and the tasks to be undertaken accordingly.

To help young people reflect on their self-image and for you to get to know what their deepest wishes, dreams and fears are, it is suggested to use the method 'Personal Mind Map'. Please refer to the further readings [13, 14] in the final chapter for more detailed information on this method.

The Personal Mind Map is a powerful tool for self-reflection, getting to know each other and resource oriented youth work. Getting to know each other stage is an important foundation to а strong hopefullv relationship that will be productive and fruitful to both the trainer and the group. This is the trainer's aet to know the chance to kev characters and players in the group: who is leading, who has the ideas, who is most passionate about the training, who is the most committed, who is the joker, who is more sceptical, and many others.

Besides, please remember that getting to know each other means giving the opportunity to young people to get to know you as well. What experiences brought you there, what kind of person you are, what type of activities you did as a young person, what are the values you would stand for.

#### **Building the relationship**

It means essentially managing group which is dynamics, managing the interactions between participants as well as between the group and you. In practice, your aim is to create a positive environment by developing your skills as an observer and communicator. You need to be able to understand both verbal and non-verbal signals to know what is happening with each participant. This understanding will help you get the most out of the group and adapt to different communication styles. It is important to avoid negative attitudes that can prevent group members from expressing themselves naturally.

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To achieve this, it is essential to apply socio-psychological skills like empathy, patience, adaptability that are essential for human interaction. These skills will help you understand group dynamics and, when combined with strong communication skills, will allow you to support young people in managing their aspirations, coping with change, and developing skills for the labour market.

Your effectiveness in building a good relationship with the group will often depend on your experience, your ability to listen, observe, and establish dialogue, as well as maintaining an open-minded attitude and the ability to work with different personalities.



## Identifying needs and competences

It is very important that you find out what competences and abilities the members of the group have already and which ones they need to develop in order to reach the targets of the training. Do not worry if you find out that the group is missing some essential capabilities to do a given task related to the training. Through a Training Module they will have the chance to develop them and your task as a trainer will be to help the group to identify their own learning objectives to be reached.

#### Supporting

It is about providing ongoing guidance encouragement throughout the and Module training. The trainer acts as a mentor and coach, offering personalised advice and resources to help participants achieve their goals. This involves helping participants set realistic goals, and being available to address any challenges they may face. The trainer should create a supportive network around the participants, making them feel continuously encouraged and guided throughout their journey.



#### **Evaluating**

this involves measuring the progress and outcomes of the training. The trainer should use various methods like feedback forms, self-assessment exercises, or group discussions to gather insights on the effectiveness of the training. Providing constructive feedback and encouraging participants to reflect on their progress helps identify what has been achieved and what areas need improvement. The trainer's role is to ensure that evaluation is a continuous process, allowing for adjustments that enhance the training's impact.

## Keeping contact and feedback

maintaining contact involves continuous communication and the exchange of information between the trainer and the young people. It is important for the trainer to be responsive to any questions that arise during the training. Make sure the young people know when and how they can reach you if they need help.

Regarding feedback, it is essential to create an environment where both you and the young people can give and receive feedback. To ensure feedback is productive and beneficial, keep in mind the following:

- Feedback should be clear, concrete and understandable to the person or group receiving it.
- The person or group should be able to accept the feedback and see it as constructive.

Feedback should provide actionable information that the person or group can use to improve.

Make sure the feedback you give is focused on the needs of the person or group receiving it, not on your own needs. This helps avoid defensive reactions and encourages positive changes.

At the same time, use feedback from the young people to reflect on and improve your own training practice.

#### The do's and don'ts when talking about obesity and overweight

There are several different ways in which obesity is commonly described in the media and throughout society which can contribute to weight stigma. These can include:

- Language that does not put the person first.
- The use of derogatory and pejorative labels.
- Inaccurate or misplaced use of medical jargon.
- Failure to acknowledge the wider context regarding causal aspects of obesity.

This type of language risks simplifying obesity and its causes, fails to capture the wider drivers and determinants of obesity, and creates a negative image of people affected by obesity. This in turn can reinforce misconceptions about obesity and contribute to weight stigma.

People First Language refers to putting before medical individual the an condition that is being discussed. For instance, it is preferable to say 'a person with obesity' as opposed to 'an obese person' or any other critical labels. The use of people first language is really important as it helps to avoid dehumanising individuals livina with chronic diseases.



The use of people-first language ensures that we are not labelling an individual with their disease. This is something that can be applied in a number of different scenarios, and we encourage its use when talking about obesity.

Examples of words and phrases to avoid	Alternative language and considerations
X Obese person X Obese subject/participant X Obese children	<ul> <li>Person/individual with obesity</li> <li>Subject/participant with obesity</li> <li>Children with obesity</li> </ul>

Despite increasing evidence that obesity is caused by multiple factors, many people still see obesity as the result of individual behaviours and choices. When talking about obesity, it is not uncommon for individuals to use certain words for dramatic effect. While these are often not meant to be targeting a person directly, their use should still be avoided.

Examples of words and phrases to avoid	Alternative language and considerations
X "Curse" X "Strain" X "Plague"	<ul> <li>Use accurate facts and figures</li> <li>Be clear on what the problem is rather leaving it open to interpretation</li> <li>Avoid ambiguous language</li> <li>Be explicit on the health consequence. For example, "Obesity can affect our health in x, y and z ways."</li> </ul>

Obesity should be referred to as a disease rather than a condition. In contrast, overweight is typically defined as a medical condition based on body mass index (BMI). When using the term "overweight," it should be employed either as a noun or an adjective in person-first language [8]. For example, both "people with overweight" and "people who are overweight" are acceptable; however, "overweight people" is not.

Outside of a scientific, clinical, or public health context, more neutral and inclusive terms can be used, such as "individuals with a higher weight" or "persons with a larger body."

## Practical tips for trainers and educators working with youth with overweight and obesity

Engaging with the target group of youth people with overweight and obesity as a group requires a thoughtful and sensitive approach. Here are some dos and don'ts to consider when leading activities.

#### Dos:

Establish a non-judgmental and supportive environment where participants feel comfortable sharing their thoughts and experiences.

Example: Begin sessions with ice-breaker activities that encourage everyone to speak, ensuring all voices are heard without criticism or interruption. Use phrases like "Thank you for sharing" to validate contributions.

Employ respectful and inclusive terminology that promotes positivity and acceptance.

Example: Use people-first language and always frame discussions in a positive light, focusing on well-being rather than weight alone.

Recognise that each participant's journey with obesity is unique, and validate their feelings and perspectives.

Example: During discussions, acknowledge individual experiences by saying things like, "I understand that everyone's journey is different, and it is important to respect each person's story."



Encourage open dialogues where participants can express their thoughts, questions, and concerns freely.

Example: Create an anonymous question box where participants can submit questions or concerns they may feel uncomfortable voicing aloud. Address these questions in a group setting to foster open communication.



## Provide evidence-based infor-mation about obesity and healthy lifestyle choices to empower informed decision-making.

Example: Share resources such as pamphlets or videos from reputable health organisations and explain the science behind nutrition and exercise in an accessible way. Host a Q&A session to clarify any doubts.

#### Help participants reflect on their experiences and challenges, connecting the information to their lives.

Example: After a lesson on healthy eating, ask participants to reflect on their current eating habits and discuss what changes they might want to make. Encourage sharing by prompting with questions like, "How do you think this could apply to your daily life?"

#### Foster a sense of belonging among participants through peer support activities and opportunities for connection.

Example: Organise group activities that require teamwork, like a group walk or cooking class, to encourage bonding. Encourage participants to share what they learned or enjoyed about the activity.

#### Don'ts:

Refrain from making assumptions or judgments based on appearance or experiences, treating all participants with respect.

Example: Avoid comments like "You look like you need more exercise." Instead, focus on general statements that apply to everyone, such as "It is great to find activities we all enjoy." Steer clear of language that reinforces stereotypes or negative beliefs about obesity, and avoid hurtful or stigmatising terms.

Example: Instead of saying, "People with obesity are lazy," focus on the complexities of weight management, like "There are many factors that affect a person's weight."



Do not pressure participants into sharing personal information or use tactics that may shame or embarrass them.

Example: Avoid forcing anyone to share their weight or personal struggles. Instead, encourage voluntary sharing by creating a safe space and saying, "Share only what you feel comfortable discussing."

Encourage participants to seek guidance from healthcare professionals for personalised advice, rather than providing medical recommendations.

Example: Instead of giving medical advice, guide participants to consult a doctor for personal health concerns. You might say, "It is best to talk to your healthcare provider about this to get advice that is tailored to you."

 Discourage comparisons among participants and emphasise individual progress and growth.

Example: Avoid statements like "Look how much weight he lost!" Focus instead on personal achievements by saying, "You have made great progress in your journey, and that is what matters most." Emphasise shared experiences and common goals, avoiding actions that may inadvertently isolate participants.

Example: Use inclusive language such as "We are all here to support each other," rather than singling anyone out. Activities should be designed to include everyone, regardless of fitness level or ability.



Acknowledge the multifaceted nature of obesity, avoiding oversimplified explanations or solutions.

Example: Instead of saying, "Just eat less and exercise more," discuss the complex factors that contribute to obesity, such as genetics, environment, and emotional health, and validate these complexities.

#### 4. GOALS OF THE EMPLOYMENT MODULE, EMPLOYMENT CHALLENGES IN CONNECTION TO OVERWEIGHT AND OBESITY, SCIENTIFIC INSIGHTS ON EMPLOYMENT AND OBESITY

The Employment Module aims to reduce the rate of unemployment among young people while fostering inclusive environments that promote equity, equality, and responsiveness to the wider community's needs. Participants will be equipped with essential tools to easily secure sustainable employment opportunities through diverse activities. They will receive guidance from trainers on effective job interview techniques and strategies for job searching.

#### Specific objectives include:

- To provide essential skills training, including writing, communication, interview techniques, and problem-solving abilities.
- To address barriers hindering young people with overweight and obesity from accessing employment opportunities.



To raise awareness and provide strategies for handling discrimination in the labour market.

## Employment challenges in connection to overweight and obesity

Young people with overweight and obesity may encounter a range of employment challenges, which can have a significant impact on their job prospects and overall well-being. These challenges include:

#### **Stigma and discrimination [9]**

Individuals with overweight and obesity often face social stigma and bias, which are extended to the workplace. They are often a subject to negative stereotypes, leading to discrimination in hiring, promotions, or job assignments.

## Low self-esteem and confidence

Young people with overweight and obesity usually experience lower selfesteem and confidence [10], which can affect their ability to perform well in job interviews and advocate for themselves in the workplace.

#### **Health-related limitations**

Obesity leads to health complications that may limit job opportunities. Conditions such as joint problems, sleep apnea, or obesity-related illnesses can affect one's ability to perform certain tasks.

#### **Educational attainment**

A study shows that people with obesity have lower educational attainment relative to those without obesity [11], which can limit the types of jobs available to young people. Limited access to higher education can further restrict career choices.

#### **Body image concerns**

Negative body image can impact social interactions and confidence in the workplace, potentially leading to difficulties in networking and building professional relationships.

#### Stereotyping

Individuals with overweight or obesity often face negative stereotypes, such as being perceived as lazy, gluttonous, lacking willpower and self-discipline [9], which can negatively affect how they are perceived by employers.

#### Job market competition

In regions with high youth unemployment, young people with overweight and obesity may face even more significant competition for limited job opportunities, making it harder to secure employment.

## Scientific insights on employment and obesity

There is growing evidence that people with overweight and obesity often receive lower wages and are less likely to be than people employed with healthy weight, and that these adverse outcomes are likelv caused by obesity. Obesity threatens to become an increasing burden all on taxpayers as a result of the associated higher medical costs, lower productivity and wages, and reduced probability of finding employment. The medical costs of obesity have been rising [6].

As reported in the reviews of Averett (2019) and Cawley (2015), many studies examining the effects on labour market performance of being overweight or obese found that obesity significantly reduced earnings and employment, particularly among women. The higher unemployment rates found to be associated with overweight and obesity may be due to more frequent turnover in iobs and/or duration longer of unemployment spells between jobs [12].

Despite the strong correlations found between obesity and adverse labour market outcomes. demonstrating causalitv is challenging. There is growing evidence, however, that obesity itself is a cause of the adverse labour market outcomes experienced by people with overweight and obesity. The health conditions associated with obesity can contribute to these outcomes, even limiting the type of work that individuals with overweight and obesity can do. Obesity may also impair the acquisition of human capital - whether through a poor diet or because of teacher discrimination. Research also indicates that obesity may cause physiological brain changes that could impair cognitive function or performance.

Another possibility is that people with overweight and obesity are just as productive as other workers but face discrimination in the labour market, either taste-based or statistical discrimination. That employers or customers might have a subjective distaste for people with overweight and obesity (tastebased discrimination) is consistent with the considerable evidence that they are stigmatised. Statistical discrimination stems not from subjective dislike but imperfect information from about potential employees, which leads employers to make individual hiring decisions based on the assumed (statistical) characteristics of the group to which a person belongs.

Finally, people with overweight and obesity might earn lower wages because of their higher health care costs. Employers who hire such people might have to pay higher premiums for health insurance. They might therefore compensate employees with overweight and obesity with lower wages to maintain the same overall costs for combined wages and benefits needed to stay profitable.

Causality may also run from lower wages to obesity (reversed causality). People who are paid less might become affected by obesity in part because they cannot afford healthful food and must rely instead on low-cost, low-nutrition, calorie-dense foods. In most countries, there is an income-education-obesity gradient: poor and less-educated people are more likely to be affected by obesity. Adverse labour market outcomes may lead to depression and low self-esteem, which in turn lead to weight gain.

#### **5. RELEVANT TERMINOLOGY**

**Employability** is the set of skills, abilities, and attributes that make an individual suitable for employment. For young people with overweight and obesity, it involves not only job-specific skills but also confidence, self-presentation, and overcoming potential biases.

**CV (Curriculum Vitae)** is a comprehensive document summarising an individual's education, work experience, skills, and qualifications, used when applying for jobs.

**Soft skills** are personal qualities and attributes that enhance an individual's job performance, such as communication, teamwork, adaptability, and problem-solving.

**Networking** is the practice of building relationships with professionals in one's field to gain information, advice, and potential job opportunities. It is important to encourage young people to engage in networking to expand their job prospects.

**Job search** is the process of seeking and applying for employment opportunities, including online job boards, company websites, and networking.

**Cover letter** is a letter that accompanies a job application, providing a brief overview of the applicant's qualifications and interest in the position.

**Job market** is the current demand for specific job positions within a particular industry or geographic area, which can impact the employability of people.

**Interview bias** are prejudices and stereotypes that interviewers may hold, affecting their judgement of candidates.

**Disability accommodations** are adjustments made by employers to provide equal opportunities for individuals with disabilities, including accommodations related to obesity or another health issues.

**Inclusive workplace** is a work environment that values diversity and promotes equal opportunities for all employees.

**Diversity and Inclusion (D&I)** are organisational efforts to create a diverse workforce and an inclusive workplace.

**Mentorship** is a professional relationship in which an experienced individual (mentor) provides guidance and support to a less experienced person (mentee) in the career development.

**Unconscious biases** are biases or prejudices that people hold without being aware of them. Unconscious biases can influence decision-making in hiring and employment.

**Employment gap** is a period in which an individual is not engaged in paid employment.

**Self-presentation** is the way individuals present themselves in professional settings, including grooming, clothing, and behaviour. Trainers should focus on building self-confidence and promoting positive self-presentation.

**Transferable skills** are skills that are applicable across different job roles and industries.



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#### Acknowledgments:

YOUnite is a project aimed to help adolescents with overweight and obesity in overcoming challenges and improving their employability on the labour market. YOUnite project, supported by the ERASMUS+ programme is seeking to develop a new engaging and self-confidence building training programme to support young obese people to cope with socio-economic difficulties and any other potential source of discrimination.

The partnership is led by ÖSB Consulting (Austria) with organisations from Finland (ACR), Hungary partner (EMINA), Poland (Zdrowy Ksztalt), and Austria (ÖSB Social Innovation).

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Co-funded by the European Union











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