

DESIGNING AN INTERDISCIPLINARY CURRICULUM FOR OBESITY PREVENTION: INSIGHTS FROM THE EDU-FIT PROJECT

SILVIA ADAMCOVÁ, JOZEF ŠTEFČÍK

Bratislava University of Economics and Business, Faculty of Applied Languages,
Bratislava, Slovakia
silvia.adamcova@euba.sk, jozef.stefcik@euba.sk

This chapter outlines the outcomes of the EDU-FIT: Inclusive Social Education Fit for Healthy Lifestyle project, which aims to prevent obesity among young adults through education on healthy lifestyles. The outcome is the development of a curriculum for university education targeting a specific target group. The curriculum consists of four modules: understanding obesity, nutrition, movement in your environment, and communication with stress management. Each module includes theoretical knowledge, practical activities, discussions, reflection, and assessment. Students learn key concepts, analyse their own habits, plan meals, engage in physical activity, manage stress, and communicate about health. The curriculum emphasises an interdisciplinary approach, practical skills, and critical thinking. This chapter documents the curriculum development process and students' involvement in creating the modules and learning activities. The educational outcome supports the development of a personal health plan focused on long-term maintenance of a healthy lifestyle.

DOI
[https://doi.org/
10.18690/um.ff.6.2026.4](https://doi.org/10.18690/um.ff.6.2026.4)

ISBN
978-961-299-141-8

Keywords:
healthy diet,
FIT curriculum,
nutrition,
stress management,
fitness



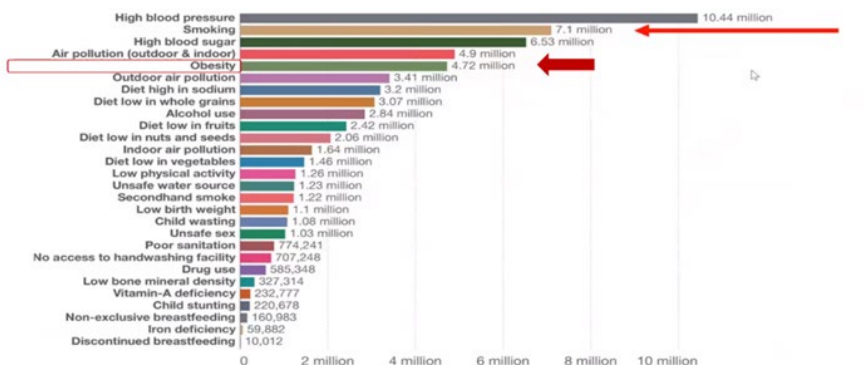
University of Maribor Press

1 Introduction

Obesity is a growing global issue that affects individuals across all age groups, educational backgrounds, and nationalities, in both developed and developing countries. According to the World Health Organisation (2025), the prevalence of adult obesity has doubled since 1990, while adolescent obesity has quadrupled. The EDU-FIT project titled "Inclusive Social Education Fit for a Healthy Lifestyle: Preventing Obesity in Young Adults" responds to this challenge by developing an interdisciplinary educational curriculum designed for university students. The curriculum is designed to promote awareness, encourage healthy habits, and empower young adults to make informed decisions about their lifestyle.

A central component of the EDU-FIT project is its emphasis on respectful and effective communication, particularly when addressing sensitive topics such as obesity. Research conducted within the project framework, including a survey of over 1,100 students from Croatia, Norway, Portugal, Slovakia, and Slovenia, highlights the importance of language in shaping perceptions and outcomes in both healthcare and everyday settings. The curriculum incorporates these findings to foster a supportive learning environment and to equip students with the tools to navigate health-related conversations with empathy and accuracy.

Number of deaths by risk factors, World, 2017



Global Burden of Disease Collaborative Network. Global Burden of Disease Study 2017 (GBD 2017) Results. Seattle, United States: Institute for Health Metrics and Evaluation (IHME), 2018

<https://ourworldindata>

Figure 1: Webinar EUBA (14.04.2025)

This outlines the development process, structure, and pedagogical foundations of the EDU-FIT curriculum. It provides an overview of the modules, learning objectives, teaching materials, and assessment strategies, offering a comprehensive guide for educators and institutions committed to promoting lifelong health and well-being among young adults.

1.1 Preparation of the Curriculum

The EDU-FIT curriculum was developed through a collaborative, research-driven process that integrated academic research with direct input from students and medical and fitness professionals in the field of health and wellness. The preparation phase included several key activities designed to ensure the curriculum would be relevant, inclusive, and engaging for its target audience: university students.

Research and Consultations

The curriculum was grounded in a review of existing materials and guidelines on obesity prevention, nutrition, physical activity, and mental health. This was complemented by consultations with experts in nutrition, fitness, and wellness, as well as educators and psychologists. Dedicated webinars organised by the EDU-FIT project members focused on developing guidelines for a healthy menu and provided additional insights into practical applications of dietary education. Building on the theoretical foundations of obesity and nutrition, the curriculum outlines the procedures from desktop research, expert consultations, and interviews that culminate in the final curriculum setting. It has been conducted to inform the curriculum on healthy lifestyle practices for young adults from the perspectives of academics, practitioners, physiologists, sports nutritionists, sports scientists, and strength and conditioning coaches.

Furthermore, the concepts were elaborated to enhance awareness and knowledge of obesity, thereby promoting the sustained development of physical habits among young adults (primarily higher-education students). The exercises were designed to leave room for the creative approach of the teacher and course participants.

The keyword for the EDU-FIT team has been defined as Obesity— which is abnormal or excessive fat accumulation—and represents a significant public health

crisis affecting children, adolescents, and adults worldwide. It increases the risk of multiple noncommunicable diseases, mortality, and substantial reductions in quality of life¹.

Another issue to consider is the health consequences of obesity, as defined by the WHO:

Obesity is linked to a wide range of physical and mental health problems, such as:

1. Cardiovascular Disease: Elevated risk of heart disease, hypertension, coronary artery disease, heart failure, and stroke.
2. Type 2 Diabetes: Obesity impairs insulin function, significantly increasing the risk of diabetes.
3. Several Cancers: The risk of various cancers, such as breast, ovarian, colorectal, pancreatic, liver, kidney, prostate, and endometrial cancer, is elevated by obesity.
4. Respiratory Disorders: Increased prevalence of sleep apnea and asthma.
5. Digestive and Liver Diseases: Higher rates of heartburn, fatty liver disease, gallbladder disease, and liver cirrhosis.
6. Musculoskeletal Conditions: Obesity increases stress on weight-bearing joints, resulting in osteoarthritis and chronic back pain.

Waist circumference- risk of CVS disease, diabetes- DM2



Figure 2: Webinar EUBA (14.04.2025)

¹ Djalalinia S, Qorbani M, Peykari N, Kelishadi R. Health impacts of Obesity. Pak J Med Sci. 2015 Jan-Feb;31(1):239-42. doi: 10.12669/pjms.311.7033. PMID: 25878654; PMCID: PMC4386197.

Moreover, according to the WHO, obesity in childhood and adolescence increases the risk of early-onset chronic diseases and earlier mortality in adulthood.

Student Interviews and Surveys

To ensure the curriculum reflected the real needs and interests of students, the EDU-FIT team in Slovakia conducted video interviews with 22 students of various ages and genders. These interviews, conducted initially in Slovak and later translated into English, explored students' attitudes toward healthy eating, stress management, and lifestyle habits. Questions addressed topics such as food label literacy, dieting experiences, coping mechanisms for stress, and preferences for learning formats.

The interviews, individual consultations and the study of relevant literature summarised the ideas to develop a basic scheme of the exercises, which should

- encourage daily activity (60 minutes or more) that includes aerobic, muscle-strengthening, and bone-strengthening activities,
- focus also on balance-training, flexibility, and activities. While physical activity alone has modest effects on weight loss, its health benefits, when combined with dietary management, are profound and well-supported.

Sustainable solutions require multi-layered approaches, including supportive environments, access to resources, and behaviour change support.

Table 1: Summary of expert interviews

Effect of Obesity	Increased Risk	Physical Exercise Benefit
Cardiovascular diseases	Yes (heart disease, stroke, etc.)	Reduces risk, improves heart health
Type 2 Diabetes	Yes	Improves insulin sensitivity, lowers risk
Certain cancers	Higher (breast, colon, pancreatic)	Reduces some cancer risks
Respiratory disorders	Yes (sleep apnea, asthma)	Some improvements in symptoms
Musculoskeletal disorders	Osteoarthritis, chronic pain	Improves strength, reduces symptoms
Mental health and quality of life	Stigma, depression, and social issues	Improved mood, mental health
All-cause and cardiovascular mortality	Higher	Reduces overall mortality risk

2 The Role of Physical Activity

Physical activity is a vital element in the prevention and management of obesity and its complications. Scientific and professional guidelines universally recommend regular exercise for all age groups, with intensity adjusted according to individual fitness and age.

According to a study by Rippe JM and Hess (1998)², physical activity directly contributes to maintaining energy balance, which is crucial for effective weight management. Therefore, increased activity reduces body fat and supports healthy weight loss and maintenance.

On the other hand, several studies have shown that aerobic exercise of at least 150-300 minutes per week at moderate to vigorous intensity is associated with significant reductions in body weight, waist circumference, and body fat percentage, as shown in large meta-analyses³. Additionally, nearly all studies confirm that exercise helps preserve or increase lean muscle mass during weight loss.

All in all, the curriculum has been designed through motivation hints, claiming that regular exercise reduces the risk of heart disease, type 2 diabetes, stroke, improves insulin sensitivity, lipid profiles, and reduces chronic inflammation—all risk factors for metabolic and cardiovascular disease, enhances mental health, self-esteem, and cognitive function, necessary for long-term weight management and quality of life⁴.

Additional health benefits of physical activity include improved bone health, balance, and musculoskeletal strength, as well as better sleep and reduced symptoms of depression and anxiety—benefits that extend throughout the lifespan, with impacts on health, productivity, and healthcare costs.

The findings from structured interviews revealed that students:

² Rippe JM, Hess S. The Role of Physical Activity in the Prevention and Management of Obesity. *J Am Diet Assoc.* 1998 Oct;98(10 Suppl 2):S31-8. doi: 10.1016/s0002-8223(98)00708-1. PMID: 9787734.

³ Jayedi A, Soltani S, Emadi A, Zargar M, Najafi A. Aerobic Exercise and Weight Loss in Adults: A Systematic Review and Dose-Response Meta-Analysis. *JAMA Netw Open.* 2024;7(12):e2452185. doi:10.1001/jamanetworkopen.2024.52185.

⁴ <https://www.cdc.gov/physical-activity-basics/benefits/index.html>

- are curious about how food is produced and its environmental impact.
- desire more diverse food options, including vegetarian and gluten-free meals.
- struggle with stress management during university studies.
- prefer interactive learning formats such as discussions, case studies, and group projects.

These insights were important in shaping the curriculum's structure, content, and teaching methods.

3 Long-term weight management

The EDU-FIT curriculum also includes personalised exercise plans to improve long-term weight-management outcomes. Personalised workout plans can significantly improve long-term weight management outcomes by aligning exercise routines with an individual's unique characteristics, goals, and circumstances. Here's how personalisation makes a difference:

Tailored to Individual Needs and Goals: Personalised plans consider factors such as current fitness level, medical history, preferred activities, body composition, and weight-loss or health goals. This increases the relevance and effectiveness of each workout, making it more likely to efficiently target fat loss, muscle gain, or other specific outcomes.

Increased Motivation and Adherence: When workouts align with personal interests, capabilities, and schedules, individuals are more likely to enjoy exercising and stick with the program. Higher enjoyment and lower boredom help young people maintain their routines, which is critical for long-term success.

Holistic Support for Lifestyle: Personalisation extends beyond exercise to encompass nutrition, sleep, stress management, and behaviour change, thereby targeting the root causes of weight gain and fostering healthy habits for life.

Flexibility and Adaptability: As an individual loses weight or improves fitness, a personalised plan can be recalibrated—adding new challenges, switching routines, or adjusting intensity to prevent stagnation and continually encourage progress⁵.

Additionally, scientific research confirms that individualising physical activity programs leads to greater improvements in cardiorespiratory fitness, muscular strength, and overall cardiometabolic health, all of which are vital for weight management and long-term health. It has been claimed that people are more likely to maintain a physically active lifestyle when their exercise regimen is personally meaningful and accessible, reducing the likelihood of relapse or abandonment⁶.

In summary, personalised workout plans are powerful tools for sustainable weight loss because they optimise effectiveness, boost motivation, prevent injury, and encourage long-term adherence.

4 The Role of Student's Motivation

The curriculum primarily focuses on intrinsic and extrinsic motivation, which should be maintained throughout the course. For any personalised workout plan to truly succeed, particularly with long-term goals such as weight management or overall fitness improvement, commitment and motivation are crucial. Commitment to a trainer, workout partner, digital app, or fitness community increases the likelihood of adhering to a workout plan. Regular check-ins or scheduled reports foster a sense of responsibility and help individuals overcome periods of low enthusiasm or external distractions. These mechanisms (apps, journals, and coaching sessions) enable participants to monitor their progress and quickly identify setbacks, allowing timely adjustments to the workout plan and facilitating continuous improvement. External support, such as that from personal trainers, group classes, or friends, provides encouragement and gentle pressure. This can be vital for maintaining motivation when willpower is low or progress stalls.

⁵ <https://www.miamilivingmagazine.com/post/tailed-to-you-personalized-workout-and-meal-plans-for-maximum-results> (27 July 2025).

<https://www.hitonefitness.com/how-personalized-workouts-can-maximize-your-results/> (27 July 2025).

⁶ <https://transperitymedicalproviders.com/personalized-weight-management-plans-why-they-work/> (28 July 2025).

Moreover, motivation—whether intrinsic (driven by personal satisfaction) or extrinsic (driven by rewards, social recognition, or goals)—is a significant factor in how consistently someone adheres to their workout plan. Personalised approaches that tap into what motivates an individual (improving health, reducing stress, achieving specific goals) are especially effective. Incorporating activities that individuals enjoy increases the likelihood of regular participation and long-term adherence. Enjoyable, meaningful workouts turn exercise from a chore into a rewarding experience. Achieving small, personalised milestones can boost confidence and motivation, reinforcing the belief that long-term success is possible and sustainable.

When these aspects are built into a personalised plan, users are more likely to adhere to routines, overcome challenges, and ultimately achieve sustained health benefits. Scientific literature and expert recommendations emphasise that these two factors are critical for maintaining physical activity, preventing attrition, and achieving lasting fitness and weight-management goals.

Obesity severely harms almost every body system. Regular, tailored exercise is not just for weight control; it is essential for reducing the risk of many obesity-related illnesses, enhancing both physical and mental well-being, and improving overall quality of life.

Our new curricula emphasise the importance of physical activity for health, serving as both a preventive measure and a therapeutic tool. This approach is supported by interdisciplinary science and designed to be accessible to university students across the EU.

4 Obesity, society, communication and stress management

Long-term monitoring of activities helps identify unhealthy patterns and assess risks before diseases like obesity develop. Chae-Gyun Lim proposes several methods for analysing healthy lifestyle patterns in the data⁷.

⁷ Lim CG, Kim ZM, Choi HJ. Developing a Mobile Wellness Management System for Healthy Lifestyle by Analyzing Daily Living Activities. *Stud Health Technol Inform.* 2017; 245:146-150. PMID: 29295070.

Digital tools, such as apps, can help both clinicians and individuals set, track, and celebrate progress toward lifestyle goals—empowering behavioural change and self-responsibility.

The practice has to be carried out systematically in several ways:

- a) Defining specific, realistic, and trackable goals related to movement, nutrition, and rest.
- b) Using journals or digital trackers to reflect on daily habits.
- c) Engaging in regular check-ins with supportive networks (friends, clinicians, or peers).

Self-awareness—a central theme in positive psychology and mindfulness practices—enables individuals to recognise their feelings, motives, and strengths, thereby facilitating the initiation and maintenance of healthful changes. Mind–Body skills courses (in meditation and guided imagery) increase present-moment awareness, connection to others, and more intentional decision-making⁸.

There are strategies we proposed in the curriculum to develop positive changes in mind and body:

1. Mindfulness meditation to observe thoughts non-judgmentally.
2. Guided imagery for envisioning success and dealing with stress.
3. Group reflection to share experiences and broaden perspective.

Studies indicate that satisfaction and improvement come from reasonable, incremental goals and celebrating every small win, rather than waiting for “perfect” outcomes⁹.

To transform insight into action, the courses begin by using self-reflection to pinpoint unhelpful thoughts or emotional triggers that contribute to unhealthy habits. Once identified, the participants then practise cognitive restructuring by consciously shifting negative self-talk into constructive and positive affirmations.

⁸ van Vliet M, Jong MC, Jong M. A Mind-Body Skills Course Among Nursing and Medical Students: A Pathway for an Improved Perception of Self and the Surrounding World. *Glob Qual Nurs Res*. 2018 Oct 17;5:2333393618805340. doi: 10.1177/2333393618805340. PMID: 30349869; PMCID: PMC6194914.

⁹ Rakowski W, Wells BL, Lasater TM, Carleton RA. Correlates of expected success at health habit change and its role as a predictor in health behavior research. *Am J Prev Med*. 1991 Mar-Apr; 7(2): 89-94. PMID: 1910893.

Finally, these insights should be translated into concrete, specific behavioural goals. For example, instead of broadly aiming to "eat healthier," the students set a clear goal like, "When I feel stressed, I'll take a 5-minute walk instead of snacking."

Awareness of personal and societal biases is key to both self-understanding and effective communication. Positive affirmations, practising empathy, and seeking diverse viewpoints help challenge internal prejudices and promote more open-minded, inclusive attitudes towards health, body image, and weight management¹⁰.

The Mayo Clinic¹¹ suggests that positive thinking strategies—rooted in gratitude practices, a growth mindset, and self-compassion—elevate mood, reduce stress, and support sustained lifestyle changes.

Techniques include:

- Identifying areas for change and focusing on incremental improvements.
- Using humour to navigate difficulties and setbacks.
- Engaging regularly in gratitude practices, such as keeping a gratitude journal.
- Surrounding oneself with positive influences and constructive feedback.

5 Curriculum Structure

The final curriculum consists of four modules:

Understanding Obesity – onsite group and individual activities.

Dietary Guidelines – online self-management training.

Physical Activity Guidelines – individual and group training.

Creating a Personal Plan for Lifelong Health – blended learning format.

¹⁰ See 20 positive affirmations... In: <https://www.powerofpositivity.com/free-your-mind-biased-thinking/> (accessed on 28 July 2025).

¹¹ Mayo Clinic: In: <https://www.mayoclinic.org/healthy-lifestyle/stress-management/in-depth/positive-thinking/art-20043950> (accessed on 28 July 2025).

Each module includes a mix of theoretical themes, practical tasks, and reflective exercises. Students are encouraged to engage in meal planning, physical activity tracking, and personal health evaluations, fostering both knowledge and behavioural change.

Following these concepts, we have introduced the Essential Skills for Obesity Prevention Education, which have been summed up as follows:

Table 2: Strategies supported in the curriculum

Theme	Key Skills Developed	Example Tools/Practices
Monitoring habits	Self-reflection, data tracking, and goal assessment	Journals, health apps, and clinician feedback
Self-awareness & capabilities	Mindfulness, meditation, and emotion identification	Mind-body courses, mindfulness practices
Expectations vs. reality	Realistic goal setting, adaptability, resilience	SMART goals, progress celebration
Changing thoughts & behaviours	Cognitive restructuring, positive self-talk	Affirmations, reframing exercises
Overcoming bias	Empathy, perspective-taking, open-mindedness	Group reflection, affirmations
Positive thinking	Gratitude, optimism, growth mindset	Gratitude journal, social support
Evidence-based communication	Plain language, audience adaptation, counteracting misinformation with facts	Infographics, health literacy resources

When integrated into obesity-prevention efforts through a specifically tailored course, these communication practices strengthen self-regulation, foster social connectedness, and enable more adaptive stress responses, leading to healthier long-term outcomes. The literature in positive psychology, mindfulness, and behavioural medicine highlights the pivotal role of communication in building resilience and supporting behavioural change for obesity prevention.

The curriculum content of the EDU-FIT project aims to integrate a range of models and platforms, led by experienced, certified coaches, that facilitate social support—through group chats, forums, or peer mentoring—and capitalise on the motivational benefits of community. Sharing experiences, challenges, and encouragement with others enhances resilience, reduces feelings of isolation, and fosters long-term participation.

Professionally organised interventions, whether human- or digitally based, can provide immediate feedback or adaptive recommendations—for example, adjusting goals if a user is stressed. This adaptability is associated with improved stress-coping and more sustained weight-management outcomes.

Overall, the pedagogic content within the designed curriculum strongly advocates ongoing research and creative adaptability among coaches, which are essential for guiding the development of communication tools that are personalised, accessible, evidence-based, and adaptable, offering real benefits for stress and weight management. This ensures users receive the appropriate message, through the appropriate medium, at the appropriate time—maximising both effectiveness and reach.

6 Methodologies

The EDU-FIT curriculum was designed using a learner-centred, interdisciplinary, and experiential learning approach, tailored to university students in Europe. The didactic strategy integrates active learning, reflection, and real-world application, ensuring that students not only acquire knowledge but also develop practical skills and personal insights that will help them achieve their goals.

Key Didactic Methods

1. Modular Structure

The curriculum is divided into five modules:

- Understanding Obesity
- Nutrition
- Movement in Your Environment
- Communication and Stress Management
- Preventing and Managing Obesity

Each module includes:

- learning goals
- theoretical introduction
- practical tasks
- group and individual activities
- assessment tools

This structure supports active learning, where students build on prior knowledge and progressively deepen their understanding of the chosen topic.

2. Active Learning Techniques

Students engage in:

- group discussions to explore concepts collaboratively,
- case studies to analyse real-life scenarios,
- role-playing to simulate decision-making and communication,
- workshops for hands-on practice (such as cooking and exercise planning),
- field trips to markets and food environments.

These methods foster critical thinking, problem-solving, and social learning.

3. Inquiry-Based Learning

Students are encouraged to:

- research credible sources on obesity and nutrition,
- conduct interviews with experts (such as doctors and nutritionists),
- compare and evaluate information,
- present findings in class.

4. Personalised Learning

Activities such as:

- meal planning,
- fitness tracking,
- mindfulness exercises,
- self-assessment questionnaires.

These allow students to relate content to their own lives, promoting self-awareness and motivation for behaviour change.

5. Multimodal Instruction

The curriculum uses:

- video lectures,
- presentations,
- handouts and infographics,
- apps and digital tools,
- interactive quizzes

This supports diverse learning styles and enhances students' participation and motivation.

Assessment and Feedback

These assessment forms are integrated throughout the course to help students gauge their progress and solidify their understanding. They are meant to be checkpoints, not high-stakes tests.

Online Quizzes

Following each topic, a short online quiz is provided. These quizzes are designed to quickly assess comprehension of the material covered. They serve as a valuable tool for determining mastery of key concepts before progressing.

Case-Based Discussions

Participation in group discussions involves analysing real-world scenarios. This component focuses not only on theoretical understanding but also on applying knowledge to practical situations and integrating diverse perspectives from peers.

Weekly Reflection Journals

A reflection journal is to be completed each week. This offers an opportunity to connect course content with personal observations and insights, thereby deepening understanding and individualising the learning journey.

Research Essay

A research essay requires an in-depth analysis of obesity-related challenges within a specific population. The essay must also propose evidence-based solutions to these challenges.

Group Presentation

For the group presentation, students will develop and deliver an obesity-prevention campaign targeting young adults. This assessment emphasises collaborative work and the practical application of knowledge.

Final Exam

The final exam will comprise multiple-choice, short-answer, and applied problem-solving questions, assessing a broad understanding of the course content.

The final project

It should involve developing a detailed, realistic plan to prevent or manage obesity in a specific setting (school, university, workplace, or community). The students will demonstrate:

- An understanding of risk factors.

- Application of public health strategies.
- Critical use of research and policy frameworks.

Practical Skills Evaluation

The course will include mainly practical components (in health sciences or nutrition programs), so students have to be evaluated on:

- Interviewing Skills – using motivational interviewing techniques.
- Nutritional Assessment – analysing dietary habits and suggesting improvements.
- Program Planning – creating SMART goals for an intervention.

Feedback Process

All assessments come with structured feedback. Instructors provide insights into strengths and areas for improvement, and everyone will be encouraged to reflect and revise in response to the comments received. These tools help educators monitor progress and provide constructive feedback.

Summary

Medical advancements in the 21st century, supported by ongoing research, have been remarkable. As a result, people today have a greater chance of living longer, with many diseases now treatable and life-saving interventions available for accidents, injuries, strokes, cancer, and more. However, the key question is no longer simply about living longer but about the quality of life we want to achieve.

The answer lies in early prevention and education, starting from adolescence, since health significantly influences relationships, family life, careers, and overall well-being. Obesity, for instance, often caused by a mix of dietary habits, physical inactivity, mental health issues, and genetic factors, can lead to numerous preventable diseases. Addressing these challenges requires research that translates effectively into practical solutions.

The EDU-FIT curriculum adopts this approach by employing modern, inclusive, and participatory educational methods that focus on lifelong learning. It empowers students to take charge of their health, combining knowledge with hands-on practice and fostering both personal growth and methodological skills.

7 Conclusion

The purpose of this curriculum is to support educators in teaching an academic course on healthy lifestyles and well-being for university students. However, these materials can also be used in other settings with similar target audiences to educate audiences about obesity prevention.

The objectives of this course are to provide nutrition education, and encourage students to develop healthy lifestyle habits, such as managing a balanced diet and increase physical activity. This should help young people apply nutrition principles to their own circumstances and make informed decisions about their dietary habits and physical activity.

The curriculum is divided into five modules, each including detailed instructions for the educator. Each module includes a theoretical introduction to the topic, exercises, discussion topics, reflection (i.e., feedback), and additional materials for further activities, all of which will be included in the appendix. The curriculum addresses the following key themes:

- a) Basic Concept of Health and Obesity
- b) Eating Habits and Cultural and Social Influences
- c) Food, Nutrition, and Personal Health
- d) Consumer Aspects of Foods
- e) Food Preparation
- f) Exercise and Fitness
- g) Stress Management

References

- Clewlow, R. R. (2016). "Carsharing and Sustainable Travel Behavior: Results from the San Francisco Bay Area." *Transport Policy*, 51, 158–164.

- Bouchard, C., Blair, S. N., & Haskell, W. L. (2012). *Physical Activity and Health*, Second Edition. Human Kinetics Publishing.
- Covey, Steven R. (2004). *The 7 Habits of Highly Effective People: Powerful Lessons in Personal Change*. Free Press: New York.
- Csikszentmihalyi, M. (2008). *Flow: The Psychology of Optimal Experience*. New York, NY: HarperCollins.
- Gilbert, D. (2006). *The Surprising Science of Happiness* [Video]. TED Talks.
https://www.ted.com/talks/dan_gilbert_the_surprising_science_of_happiness
- Davidson, R., Goleman, D. (2018). *The Science of Meditation*. Penguin Books: New York.
- Djalalinia S, Qorbani M, Peykari N, Kelishadi R. (2015). Health Impacts of Obesity. *Pak J Med Sci*, 31(1), 239-42.
- Dweck, C. S. (2006). *Mindset: The New Psychology of Success*. Random House: New York.
- Emmon, R. (2007). *Thanks! How the New Science of Gratitude Can Make You Happier*. Houghton Mifflin Harcourt. New York.
- Gilbert, D. (2006). *Stumbling on Happiness*. A.A. Knopf: New York,
- Harrison, E. (2016). *Teach Yourself to Meditate*. CPI Mackays: Hachette UK.
- Jayedi A, Soltani S, Emadi A, Zargar M, Najafi A. (2024). Aerobic Exercise and Weight Loss in Adults: A Systematic Review and Dose-Response Meta-Analysis. *JAMA Netw Open*, 7(12), 2452185.
- Kahneman, D. (2011). *Thinking Fast and Slow*. Farrar, Straus and Giroux: New York.
- Keogh, L. Marsh, C. (2017). *The School Year Survival Cookbook: Healthy Recipes and Sanity-Saving Strategies for Every Family and Every Meal (Even Snacks)*. Penguin Random House Canada: Toronto.
- Kramer, E. (2019). *A Guide to Physical Activity*. Open Source. Creative Commons Attribution 4.0 International License.
- Lim CG, Kim ZM, Choi HJ. (2017). Developing a Mobile Wellness Management System for a Healthy Lifestyle by Analysing Daily Living Activities. *Stud Health Technol Inform*, 245. 146–150.
- Lyubomirsky, S. (2007). *The How of Happiness: A New Approach to Getting the Life You Want*. NY: Penguin Books. New York.
- Morgan P.W. (2016) *Physical Activity and Mental Health* (Series in Health Psychology and Behavioral Medicine). Taylor & Francis Publishing: New York.
- Oettingen, G. (2014). *Rethinking Positive Thinking: Inside the New Science of Motivation*. Current: New York.
- Pollan, M. (2006). *The Omnivore's Dilemma: A Natural History of Four Meals*. The Penguin Press: New York.
- Ratey, J. and Hagermann, E. (2013). *Spark: The Revolutionary New Science of Exercise and the Brain*. Little: Brown Spark.
- Rippe JM, Hess S. (1998). The Role of Physical Activity in the Prevention and Management of Obesity. *Am Diet Assoc*. 10 (2), 31-8.
- Seligman, M, et al. (2005). *Positive Psychology Progress: Empirical Validation of Interventions*. American Psychological Association: Washington.
- Stratton, G.; and Draper, N. (2019). *Physical Activity. A Multi-disciplinary Introduction*. Routledge: London.
- Van Vliet M, Jong MC and Jong M. A. (2018). Mind-Body Skills Course Among Nursing and Medical Students: A Pathway for an Improved Perception of Self and the Surrounding World. *Global Qualitative Nursing Research* 5.
- Warburton, D. E. R., Nicol, C. W. and Bredin, S. S. D. (2006). Health Benefits of Physical Activity: the Evidence. *Cmaj.ca. The Journal Stress and Health*, 174(6), 801-809.
- Willet, Walter C. (2005). *Eat, Drink, and Be Healthy: The Harvard Medical School Guide to Healthy Eating*. Free press: New York.

Digital references

- Centres for Disease Control and Prevention (CDC): <https://www.cdc.gov/physical-activity/php/about/index.html>
- Dan Gilbert's TED Talk - The surprising science of happiness. (2004). In https://www.ted.com/talks/dan_gilbert_the_surprising_science_of_happiness
- Eat right: comprehensive information on healthy eating for different age groups, including students. <https://www.eatright.org/>.
- EDU-FIT Handbook (2025). Inclusive Social Education FIT for a Healthy Lifestyle: Preventing Obesity in Young Adults. Project no. 2023 -1-SI01-KA220-HED-000154000. Funded by the EU.
- EUFIC (European Food Information Council): <https://www.eufic.org/en/healthy-living>
- Fitness: <https://www.mayoclinic.org/>
- Health Promotion Knowledge Gateway. (n.d.). Obesity prevention | Knowledge for policy. https://knowledge4policy.ec.europa.eu/health-promotion-knowledge-gateway/obesity_en
- Health Promotion Knowledge Gateway. (n.d.-b). Risk factors related to obesity | Knowledge for policy. https://knowledge4policy.ec.europa.eu/health-promotion-knowledge-gateway/obesity-risk-factors-4_en
- Hedy Kober's TEDx Talk - How can mindfulness help us. (2018). In <https://www.youtube.com/watch?v=4hKfXyZGejY>
- Maintaining a healthy diet as a student. University of Pécs. <https://international.ptc.hu/blog/maintaining-healthy-diet-student>
- Mindful. A website dedicated to mindfulness practices. Features articles, guided meditations, and tips for integrating mindfulness into everyday life: <https://www.mindful.org/>. "Mindfulness" (Journal) includes topics related to mindfulness practice and its impact on mental and physical health, studies on stress reduction and healthy living.
- MyFitnessPal: <https://www.myfitnesspal.com/>
- OECD/European Union (2022). "Overweight and obesity among adults", in Health at a Glance: Europe 2022: State of Health in the EU Cycle, OECD Publishing, Paris, <https://doi.org/10.1787/26e2160a-en>.
- School Nutrition Association: <https://schoolnutrition.org/>
- Seasonal Produce Guide. (n.d.). SNAP Education Connection. <https://snaped.fns.usda.gov/resources/nutrition-education-materials/seasonal-produce-guide>
- World Health Organisation; Obesity and overweight, (2025). <https://www.who.int/news-room/fact-sheets/detail/obesity-and-overweight>
- World Health Organization: WHO. (2020). Healthy diet: <https://www.who.int/news-room/fact-sheets/detail/healthy-diet>
- World Health Organization: WHO. (2024). Obesity and overweight. <https://www.who.int/news-room/fact-sheets/detail/obesity-and-overweight>

About the authors

Dr. **Jozef Štefčík** is Associate Professor at the Bratislava University of Economics and Business with nearly two decades of academic experience. His work focuses on translation studies, disruptive technologies, and project management. A former chairman of the Slovak Society of Translators and a member of the International Federation of Translators, he also conducts research in terminology. He has co-authored publications on e-learning and actively contributes to STEM education and non-profit educational initiatives.

Mgr. **Silvia Adamcová**, PhD is Associate Professor at the Faculty of Applied Languages of the Bratislava University of Economics and Business, where she is a member of the Scientific Board, Vice-Chair of the Faculty Senate, and Head of the Slovak branch of the Society for the German Language (Gesellschaft für deutsche Sprache, Wiesbaden). She graduated from the Faculty of Education of Comenius University in Bratislava with a specialization in German Language and Art Education and later earned her PhD in International Economic Relations at the Faculty of International Relations of the University of Economics in Bratislava. Between 2012 and 2016, she completed an additional Masters degree in English Language and Literature. Her research focuses on German and English linguistics and literature, particularly systemic linguistics, including orthoepy, prosody, orthography, morphosyntax, applied linguistics, languages for specific purposes, contemporary German, and the language of diplomacy.

