

Choose to Change: Communities Collaborate for Healthy Weights



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Communities

Abstract

Two "Choose to Change" communities are creating healthier environments for children. This project, led by a broad university collaborative, examines behavioral and environmental contributors to early childhood obesity. Family, school, and community-level interventions are assessed to inform, implement, and reassess obesity prevention strategies designed to empower communities and participants to adopt healthy lifestyle patterns.

Objectives

- . Identify environmental and behavioral factors that act as barriers to:
- (a) adopting a high quality diet and
- (b) recommended physical activity levels in
- 2. Increase community knowledge and awareness of healthy food and physical environments
- 3. Develop, implement and evaluate community-, school-, and home-based obesity prevention strategies

Partners

- West Virginia University
- Pre-K and Head Start programs in public schools and childcare centers
- Choosy Kids, LLC
- ◆ Advisory Board Members (e.g., Health Departments, Farmer's Markets, Family Resource Networks, Girls on the Run, YMCA, parents)
- ◆Community Mini-grant Recipients (e.g., community centers, housing complexes, churches, afterschool programs)

Methods

Family

Three family cohorts will be enrolled; two cohorts with 300+ total participants have been enrolled to date

Assessments: Parent surveys, home inventories of food, activity and media equipment, food receipt collections, and Family Fun Event program evaluations

Interventions: Quarterly Family Fun Events educate and model family-style meals and parent/child physical activities, develop skills in targeted behaviors, and showcase local resources



Family Fun Events involve local partners

Choosy visits classrooms

Community

environments

Assessments: Audits of 1,000 food outlets, GIS walkability

audits, eight focus groups with 31 parents and 32 school

staff, and interviews with 31 key community leaders

111 persons), Organization of Community Advisory

healthy environments for young children and families

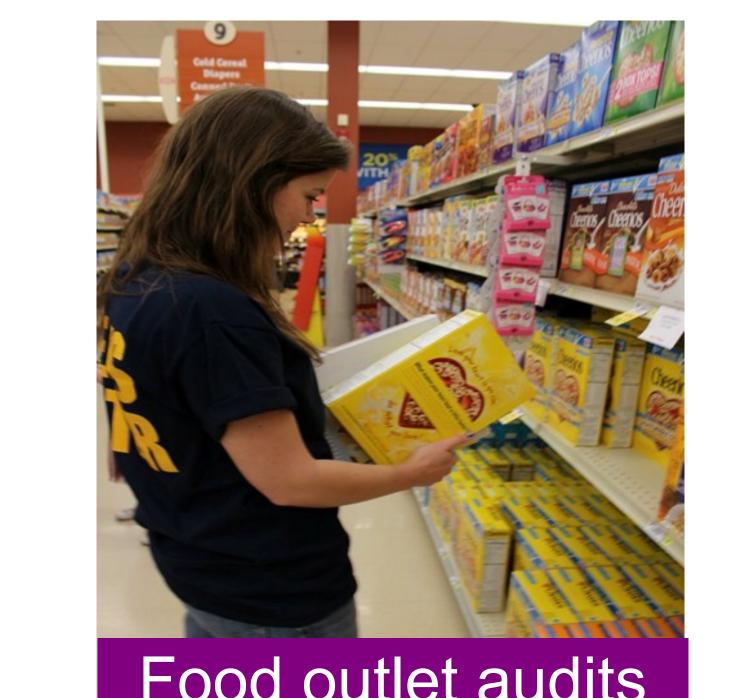
projects (up to \$4,000 each) to promote active, healthy

Interventions: Community Kick-off Events (attended by

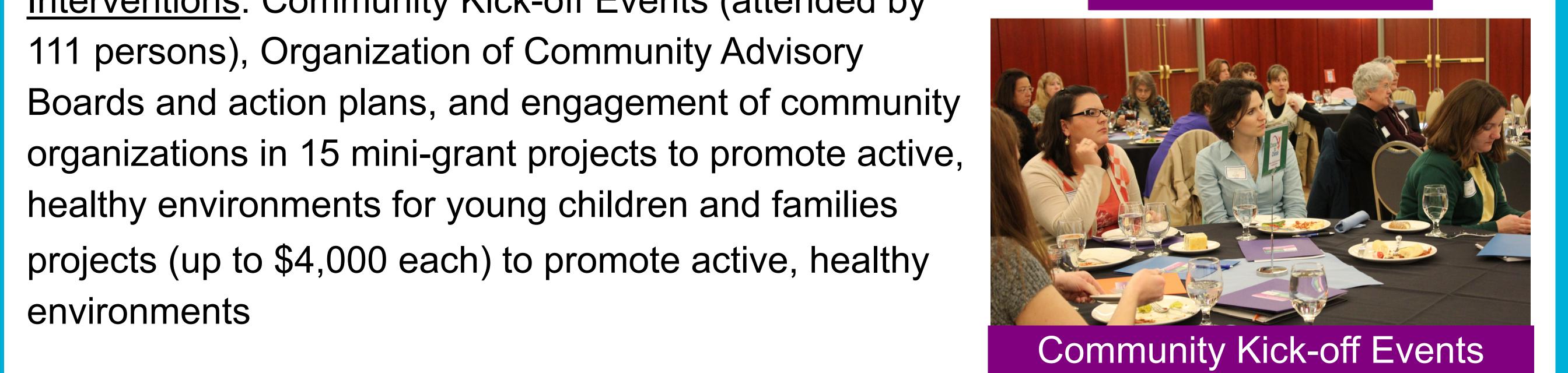
Boards and action plans, and engagement of community

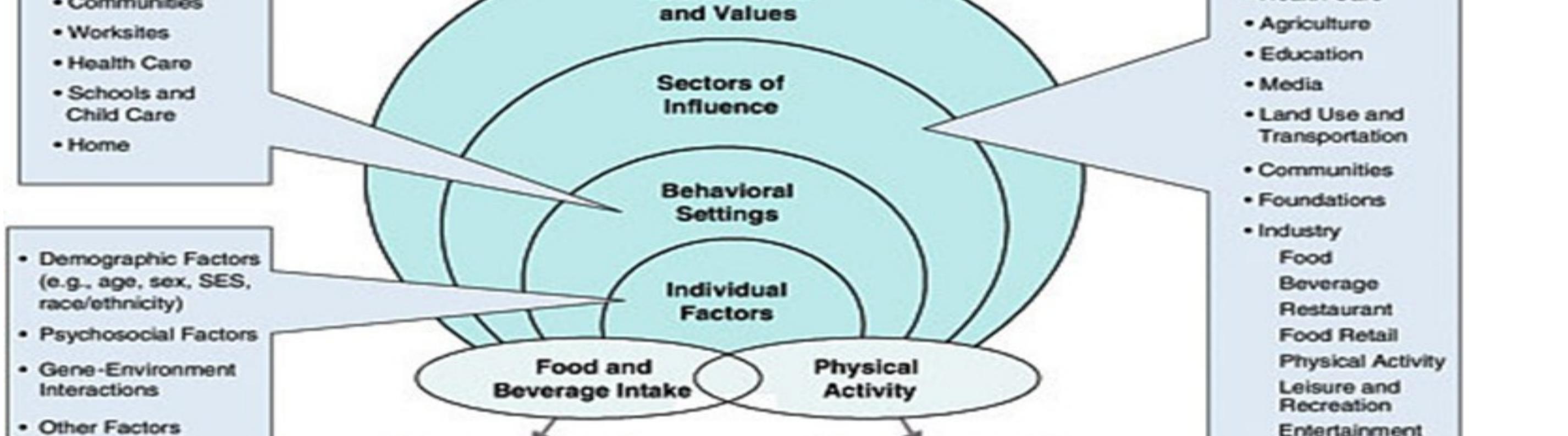
Assessments: Environment and Policy Assessment and Observation Instrument, Healthy Habit System

Interventions: Staff development in I Am Moving, I Am Learning to incorporate health activities and "our health hero," Choosy in routines in 33 classrooms, family-style meals, motor skill assessment, and physical measurements



Food outlet audits





Framework of Influences

Social Norms

Learning from and Sharing Research with Communities

Energy Expenditure

Parent and School Staff Focus Group Results

Perceptions of Childhood Obesity

Energy Intake

[Obesity] is probably among 1%; overweight is much higher.

I know the doctor's scale, they would call them obese but I wouldn't.

Parents don't want to ask their children to do anything because they have been at school all day. But they need to get them active and outside.

I think you know that you just think of someone being obese as not a problem really. But what the obesity causes is what becomes the problem.

School Meals

I'm discouraging eating breakfast because they have the doughnuts, and a funnel cake day

It's difficult because the federal government requires the county nutrition department to provide all of the nutritional value for the child through breakfast and lunch just in case they don't get dinner. So what ends up happening is that they're getting a lot of calories with a lot of fat

Role Modeling

I think by setting an example you teach by example. How you eat; how active you are matters.

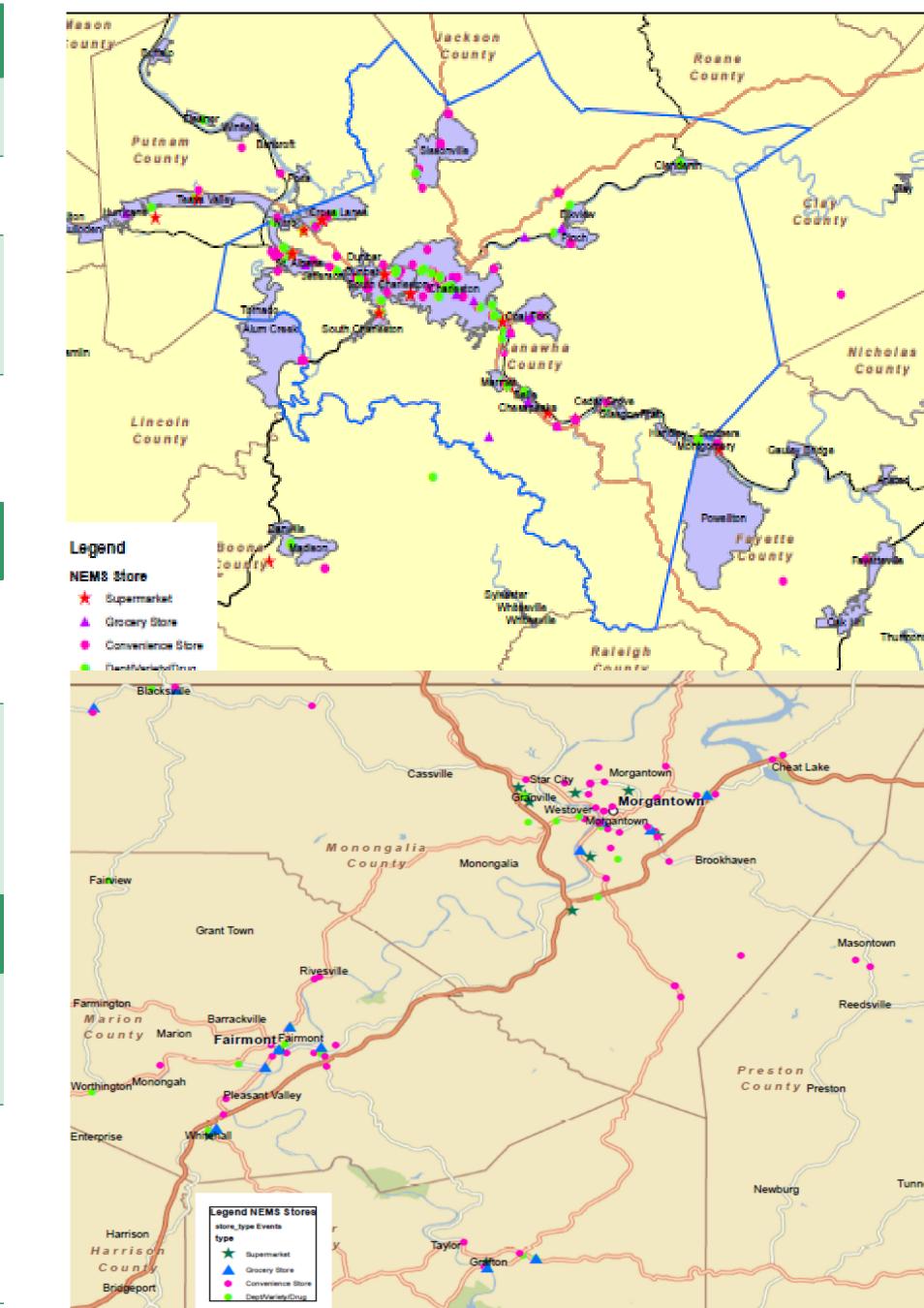
I think if everybody in the community plays their role as a whole, they're all effective.

GIS Maps of Food Outlets

Government

Public Health

Health Care



Conclusions

Community Engagement

- Many sectors of influence do not view child obesity as an issue relevant to their work
- Learning from each other builds capacity for both researchers and community partners to carry out culturally relevant interventions
- Effective Advisory Boards need guidance and meaningful roles Community organizations want to collaborate
- in promoting healthier environments and need funding and mentoring to do this

Focus Groups and Stakeholder Interviews

- Perception of childhood obesity does not reflect current prevalence
- Inactivity was viewed as an important factor in childhood obesity
- School meals were identified as contributors

Community Food Audits

- Rural areas lack access to supermarkets
- Supermarkets had a greater variety of "healthy options" at a lower cost
- Fast Food Restaurants scored consistently higher than other types due to:
- -Greater availability of nutrition information -More healthy options
- -Fewer "barriers" to consuming a healthy diet

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