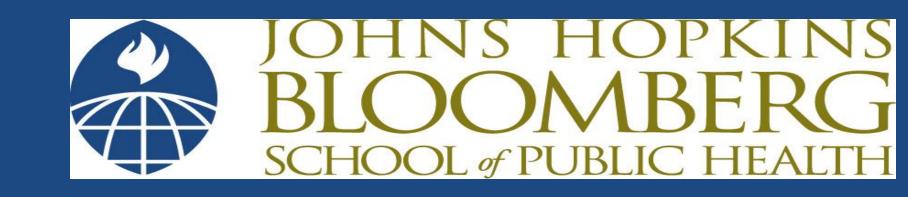
Preventing childhood obesity by promoting healthy lifestyles among children and their caregivers in the Osborn community in Detroit: A community-academic partnership



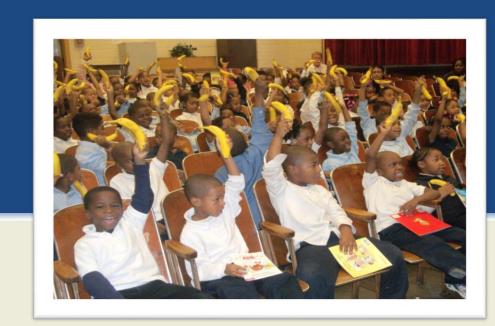
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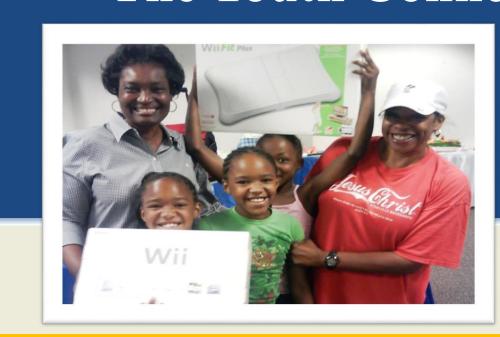
youth

connection













who attend the BOO Walk

who attend the after-school fair

of promotional pamphlets

of community events attended to

of new partnerships made

of referrals to appropriate

physical activity venues

distribute promotional information

distributed for events







BACKGROUND

Childhood obesity is of particular concern among areas of high poverty, high minority population, and limited food access, such as the Osborn community in Detroit, MI, where most residents live closer to a fast food restaurant than a supermarket. The Youth Connection (TYC), a grassroots organization, launched the I2D2 Childhood Obesity Prevention Education Program to promote healthy lifestyles among children 6-12 years old and their caregivers for the prevention of childhood obesity. TYC and Johns Hopkins Bloomberg School of Public Health (JHSPH), with funding support from the Johnson & Johnson Community Healthcare Program, formed a community-academic partnership to evaluate this initiative.

OBJECTIVES

Through a community-academic partnership, build capacity for program monitoring and evaluation to assess the effectiveness of a community-based childhood obesity prevention program.

METHODS

Under the supervision of Dr. Fonseca-Becker, Grace Lee, a doctoral student at JHBSPH, collaborated with TYC staff, Dr. Grenae Dudley, President & CEO, and Joi Mitchell, I2D2 Program Manager. Together they developed a program timeline, conceptual framework, and refined the program goal and objectives. Ms. Lee assisted the staff in collecting and analyzing data, and trained the staff on utilizing Epi Info, a public domain software developed by the Centers for Disease Control and Prevention (CDC). Four training sessions were provided over a 2 year period (see Figure 1).

The program evaluated effectiveness of services provided using skills learned.

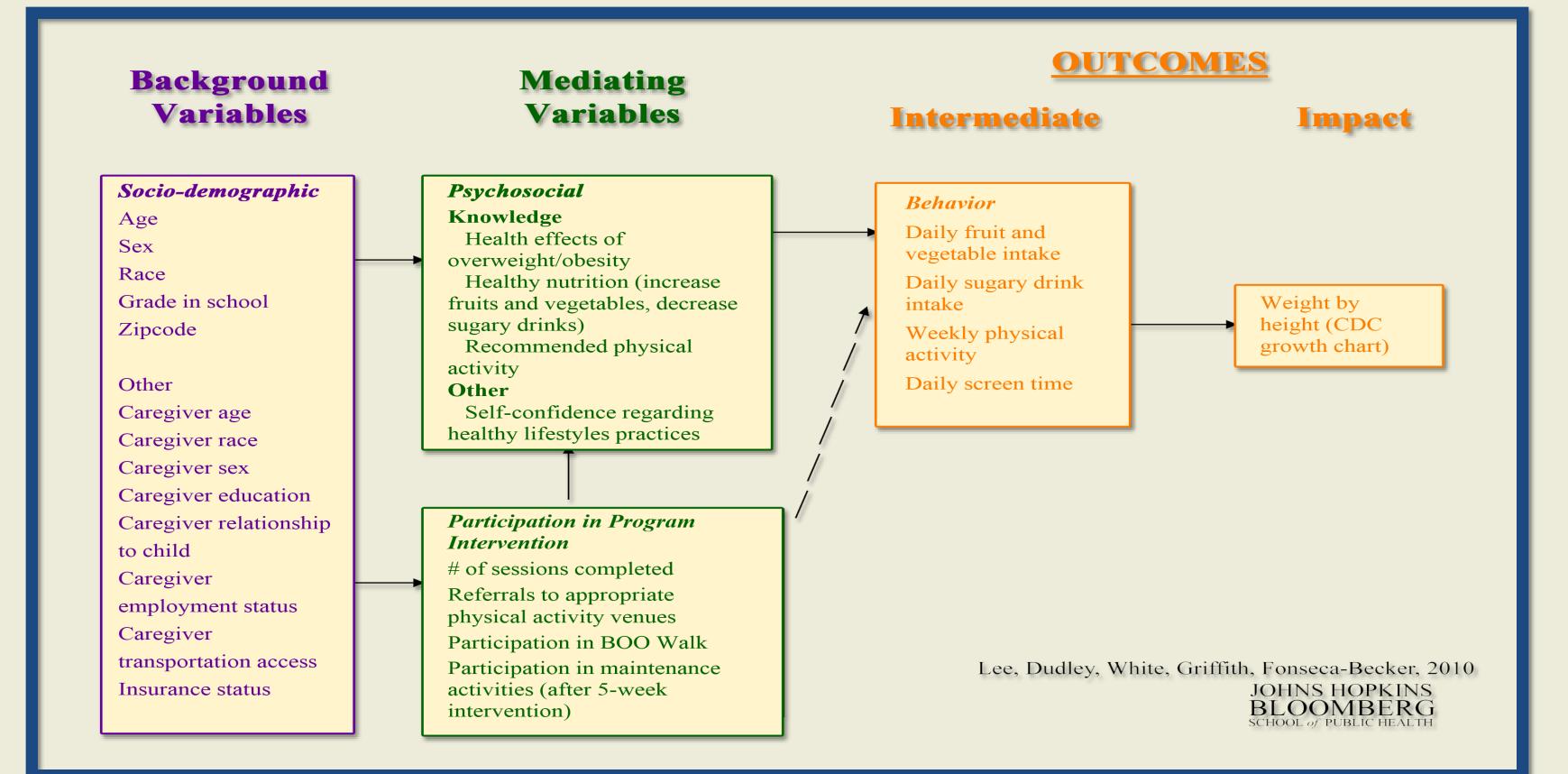
Figure 1. Technical assistance timeline



RESULTS

The conceptual framework was developed to guide project monitoring and evaluation (see Figure 2). Data associated with each indicator were collected at each session and input into Epi Info for analysis.

Figure 2. Conceptual framework for the Youth Connection program evaluation



RESULTS (continued)

The program objectives, and indicators were refined to ensure that they were specific, measurable, attainable, relevant to the goal, and could be implemented within the specified time-frame (see Figure 3).

Figure 3. Program goal and objectives

GOAL: To promote healthy lifestyles among 350 children ages 6-12 and 200 of their main caregivers for the prevention of overweight and obesity in the Osborn community in Detroit, Michigan.

OBJECTIVE #2 OBJECTIVE #3 OBJECTIVE #1 OBJECTIVE #4 Reach 3,000 individuals **Improve** the Improve the healthy Improve the physical lifestyles of 25% of the activity of 30% of the nutritional intake of 50% in the Osborn community children participants by caregiver participants by of the children participants through the promotion by May 2013 May 2013 May 2013 of the I2D2 Campaign by **May 2013 INDICATORS INDICATORS INDICATORS**

INDICATORS

who know the recommended daily intake of fruit and vegetable (4-5 servings/day)

who know the healthy alternatives to sugary drinks

who can identify healthy snacks

who feel confident about choosing a healthy snack at least

who know the recommended minutes of physical activity per day (60 minutes/day for children)

who know the recommended screen time per day (no more than 2 hours/day)

who feel confident that they will be physically active after school at least 3 times/week

who increased their weekly

who increased their daily steps

who decreased their daily

who understand the health impact of childhood overweight/obesity # who understand the health impact of regular physical activity

who know the recommended daily fruit and vegetable intake # who know the healthy alternatives to sugary drinks

who can identify healthy # who can accurately identify a healthy diet

who know the recommended minutes of weekly physical activity (adults: 150 minutes of moderate or 75 minutes of rigorous activity/week)

who know the recommended screen time/day # who feel confident about choosing healthy alternatives at

fast food restaurants # who feel confident that they can decrease their children's screen time

who increase their daily fruit and vegetable intake # who decrease their daily intake of sugary drinks

who increase their weekly

physical activity # who increased their daily steps # who decreased weekly visits to fast food restaurants

RESULTS (continued)

Table 1. Number of Osborn residents reached October, 2010 to March, 2012

Number of participants	78 children; 49 caregivers
Number joint session for caregivers and children	4
Number of outreach activities	30
Number of individuals reached by outreach activities	2,500

Figure 4. Percent of children with correct knowledge of the daily recommendations for physical activity, screen time, and fruit and vegetable intake at Baseline and Follow-up (n=75)

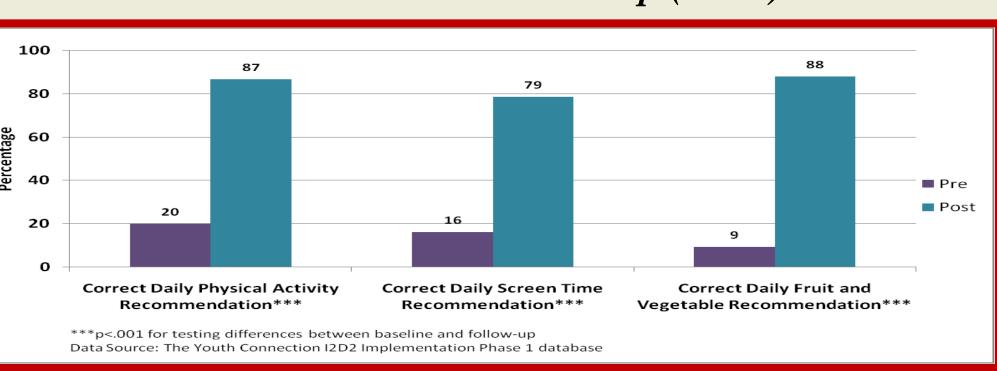


Figure 5. Mean numbers of healthy snacks and beverages children identified at Baseline and Follow-up (n=75)

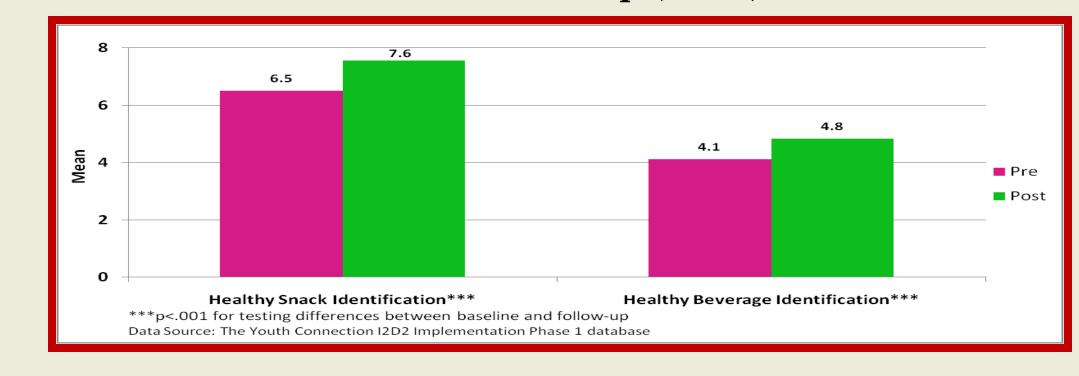
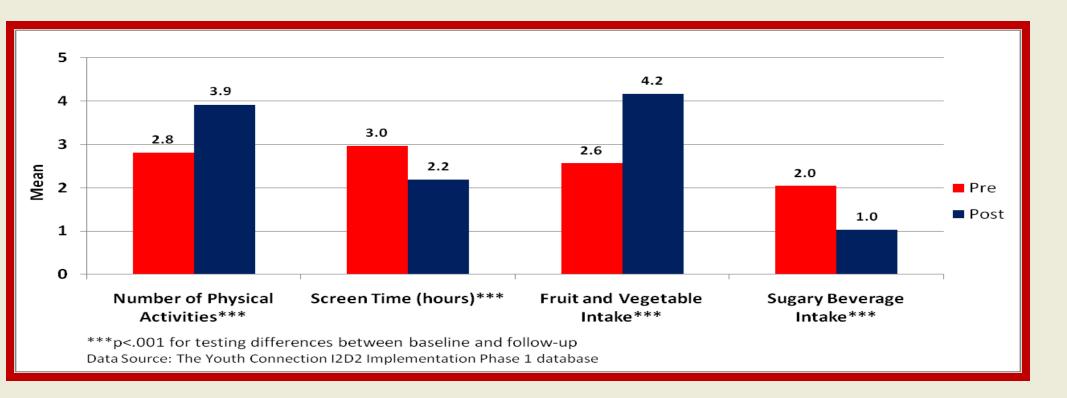


Figure 6. Mean numbers of daily physical activities and nutritional behaviors children engaged in at Baseline and Follow-up (n=75)



CONCLUSIONS

The partnership between The Youth Connection and Johns Hopkins Bloomberg School of Public Health provided a mutual learning experience. TYC acquired the skills to design and implement a monitoring and evaluation plan including; database creation, data entry, analysis, and presentation using Epi Info, which helped prove the effectiveness of the initiative. Additionally, this level of evaluation contributes to TYC's ability to obtain future grants and funding which helps to ensure long-term sustainability. The scholar gained hands-on experience working with a community-based non-profit organization and was able to see a program go from conception to implementation to quantifiable outstanding outcomes. Partnerships between community-based organizations and academic institutions provide a unique opportunity to increase the sustainable in-house capacity for program evaluation and a better understanding of how key components come together to facilitate desired outcomes i.e., addressing childhood obesity prevention in high risk communities.

DISCLOSURE OF FUNDING SUPPORT & CONFLICTS OF INTERESTS

This project is funded by the Johnson & Johnson Community Health Care Program, and the authors report no conflict of interest.

