

Healthy Eating



Active Living

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Mission Statement:

The mission of Children H.E.A.L. is to improve physical and nutritional health among the After School Program participants, grades K - 2, at Keheley Elementary in Marietta, GA.

Goals:

1. Decrease absenteeism among participants resulting from poor diet and lack of physical activity.
2. Increase cardiorespiratory fitness and muscular strength among program participants.
3. Improve dietary practices among program participants.
4. Reduce the intake of "slow" foods among program participants (i.e. sugary, high fat foods, etc.).
5. Decrease sedentary behaviors among program participants.
6. Increase parent and children awareness of well-balanced meals

Process/Administrative

By September 17, 2013 (condition), program planners (population) will conduct (outcome) a secondary needs assessment (criteria) on childhood obesity.

By October 31, 2013 (condition), program planners (population) will compose (outcome) the final draft (criteria) of the program rationale.

By November 7, 2013 (condition), program planners (population) will create (outcome) the final draft (criteria) of the program mission statement, goals, and objectives for the program.

By November 7, 2013 (condition), program planners (population) will create (outcome) all (criteria) program intervention activities.

After identifying the monetary and physical needs of the program (condition), the program planners (population) will find (outcome) three sponsors (criteria) to assist in providing resources for the program.

By November 18, 2013, (condition) program planners (population) will ensure (outcome) that all program resources (criteria) will be secured.

Between November 21, 2013 and December 3, 2013 (condition), program planners (population) will implement (outcome) all (criteria) marketing strategies the program through the use of flyers, buttons, and announcements at Keheley Elementary School.

Awareness

After participating in the tossing game (condition), students (population) will explain (outcome) the difference between good food and bad food (criteria).

Learning

(Day 1)

Knowledge

During the presentation on healthy eating (condition), students (population) will name (outcome) the 5 food groups (criteria).

During song about healthy foods (condition), students (population) will identify (outcome) 2 healthy foods (criteria).

During the junk food tree activity (condition), students (population) will identify (outcome) 3 common junk foods (criteria).

During the coloring plate activity (conditioning), students (population) will identify (outcome) what percent of fruits and vegetables (criteria) one should eat per meal.

(Day 2)

Knowledge

After participating in the Match Healthy Foods activity (condition), program participants (target population) will identify (outcome) healthy foods based upon the shape (criteria).

During an introduction of 4 corner puzzles game (condition), program participants (target population) will list (outcome) three benefits of physical activity (criteria).

During an introduction on filling the Basket with Fruits (condition), the children (target population) will be able to distinguish (outcome) between bad foods and healthy fruits (criteria).

During an introduction on color fruit activity (condition), the children (target population) will identify (outcome) their favorite fruits based upon color (criteria).

Skill/Acquisition

After reviewing body weight exercises (condition), the children (target population) will perform (outcome) 2 exercises properly (criteria).

Awareness

After learning the health benefits of water on their water break (condition), the children (target population) will explain (outcome) two ways water can benefit their health (criteria).

(Day 3)

Knowledge

During the discussion “Building” (condition), participants (population) will identify (outcome) healthy foods (criteria).

After completing the Create Your Own Meal activity in session 3 (condition), participants (population) will identify (outcome) 3 healthy options out of the 5 food groups (criteria).

At the beginning of session 3 (condition), participants (population) will describe (outcome) their completed food journals to the group (criteria).

Skill

During the obstacle course activity (condition), participants (population) will perform (outcome) climbing and crawling skills (criteria).

During the recipe activity (condition), participants (population) will make (outcome) healthy snacks which include 3 out of the 5 food groups (criteria).

Attitude

After a review of MyPlate (condition), program participants (population) will explain the importance of healthy foods (criteria).

After creating their own recipes (condition), participants (population) will explain (outcome) how to create a healthy meal based on MyPlate (criteria).

Action/Behavioral

During session 3 (condition), participants (population) will increase (outcome) their physical activity of the day by an extra 15 minutes (criteria) through dance activities.

After completing session 2 (condition), students (population) will record (outcome) in a journal all fruits and vegetables consumed for a week (criteria).

After receiving healthy recipes from session 1 (condition), students (population) with the assistance of their parent/guardians, will create (outcome) one healthy meal (criteria).

After completing session 3 (condition), students (population) will record daily consumption (outcome) of low fat or skim milk for one week (criteria).

At the beginning of session 3 (condition), students (population) will describe the physical activity (outcome) they performed during commercial breaks on TV for a week (criteria).

Environmental

Provided with a take-home poster or handout during the first session (condition), students (population) will be reminded (outcome) about healthy eating on a daily basis (criteria).

At the end of each session (condition), students' parents or guardians (population) will be given (outcome) one recipe card and a list of 3 new healthy eating habits and/or activities (criteria) to improve children's dietary and physical activity habits.

While participating in the program (condition), students (population) will wear their Children H.E.A.L. buttons (outcome) to serve as a reminder to be physically active at least 60 minutes/day (criteria).

Outcome/Program

Six months after the Children H.E.A.L program (condition), school absenteeism among program participants (population) will decrease (outcome) by 30% (criteria).

Six months after the completion of Children H.E.A.L program (condition), there will be a 10% increase (outcome) in cardiorespiratory and muscular fitness (criteria) among program participants (population).

Six months after completion of the Children H.E.A.L program (condition), program participants (population) will continue to engage (outcome) in healthy eating at least one meal a day (criteria).

Six months after completion of Children H.E.A.L program (condition), program participants (population) will show (criteria) a 30% decrease (outcome) in junk food consumption.

Six months after the completion of Children H.E.A.L program (condition), program participants and their guardians (population) will cook (criteria) three healthy meals per week (outcome).

A Rationale for the Program Children H.E.A.L (Healthy Eating and Active Lifestyles)

Priority Behavior: Improve the Eating and Physical Activity

Priority Population: Children Grades K-2

Setting: Keheley Elementary School

Program Planners: Ansley Canby (Director), Breyanna Mikel (Program Coordinator), Armani Piedra (Social Director)

Obesity has become a pandemic, affecting countries across the globe and increasing at an alarming rate. Globally, the rates of adult obesity increased from 200 million in 1995 to 300 million in 2000 (“Controlling the Global Obesity Epidemic,” 2011). Obesity is also a growing threat to children. In both developed and developing countries, over 42 million children ages 5 and under are estimated to be obese (“Childhood Overweight and Obesity,” 2013).

At the national level, 78 million adults and 12.5 million children are currently obese. Also, for over 30 years in the United States, obesity ranks only second to tobacco use as one of the leading causes of death. According to the Journal of the American Medical Association (JAMA), tobacco use has declined as of 1960 but obesity rates have doubled. If not addressed, the obesity epidemic will continue to have a cumulative and long-lasting impact on affected populations and will result in increased risk of cardiovascular disease, diabetes, hypertension, arthritis, and many cancers (“Trends in the Prevalence,” 2012).

An effective strategy in the reduction of obesity among children is to increase physical activity levels as well as improve eating habits. Obesity rates among U.S. children have tripled since the 1980’s, attributing to a total of one-third of children who are obese (“Learn the Facts,” n.d.). According to Let’s Move Program started in 2010 by First Lady Michelle Obama,

approximately one-third of children born after 2000 are going to suffer from diabetes at some point in their lives (“Learn the Facts,” n.d.). Furthermore, according to the Children’s Defense Fund (CDF), children who are diagnosed with obesity have three times higher annual medical costs than children who are not obese (“Childhood Obesity,” n.d.). As stated by the Children’s Defense Fund: “Nationwide, it is estimated that annual costs for prescription drugs, emergency room treatment and outpatient services related to childhood obesity total more than \$14 billion, with an additional \$238 million in inpatient hospital costs” (“Childhood Obesity,” n.d.). As a result, immediate action to reduce the increasingly high rates of childhood obesity must be instituted.

The long-term impact of obesity among children is of paramount concern. The Children’s Defense Fund maintains that obesity can negatively impact children’s ability to learn, play sports, and develop strong self-esteem which in turn, will prevent them from reaching their goals. Obesity is also related to delayed memory performance in children, which leads to poor learning and cognitive skills. Children who are obese or overweight are considered more likely to miss more than two weeks of school in a given year or consequently, repeat a grade in school. In a study conducted by the Children’s Defense Fund (CDF), obese children had a 20% greater rate of absenteeism in school than their non-obese classmates. Therefore, prevention of childhood obesity must rank as the highest of priorities for educators, parents/guardians, and pediatricians (“Childhood Obesity”, n.d.).

Georgia ranks high in obesity rates with nearly 30% of adults being obese which can, at least in part, be attributed to poor dietary and exercise habits as well as living with preventable and untreated health conditions (“Adult Obesity,” n.d.). Georgia is responsible for approximately \$2.1 billion of U.S. total healthcare costs associated with this morbidity (“2008 Georgia Data,”

2008). On a state level, Georgia has been found to be one of the leading states in childhood obesity. According to the 2003 National Survey of Children's Health, 16.4% of children living in Georgia are obese compared to 14.8% nationwide ("National Survey of Children's Health," 2003). Children living with obesity in Georgia have also faced problems with performing daily activities and meeting academic demands ("2008 Georgia Data Summary," 2008).

An effective way to address the rising problem of childhood obesity is through the Children H.E.A.L. (Healthy Eating and Active Lifestyles) Program. Children H.E.A.L. focuses on the overall wellness of youth and adolescents in the Cobb County, GA area. The purpose of the Children H.E.A.L Program is to improve dietary habits and increase physical activity levels among children between the ages of 5 and 8 years old. Through age-appropriate learning activities, students participating in the Children H.E.A.L. Program will be provided practical and attainable information and skills aimed at reducing the development of obesity.

The Children H.E.A.L Program will address not only the issue of childhood obesity, but the importance of overall wellness. Children H.E.A.L. will consist of a three week program, one 45 minute session per week that will be held at Keheley Elementary School's After School Program for children grades K-2 in Cobb County, GA. Program activities will consist of dancing and other strategies to increase cardiovascular endurance. The educational components will consist of healthy snacking, portion sizes, and the importance of daily play and physical activity. Program sessions will be 45 minutes in length, allowing time for the physical activity as well as the educational portions to be fully incorporated. Each session will also include time for students to make their own healthy snacks and recipe cards to take home to their parents/guardians. The goal of Children H.E.A.L. is to further develop proper nutrition and physical activity life skills and to share what they have learned with family and friends.

Both physical and psychological benefits have been linked to children who improved their health through proper diet and physical activity, including a reduction in adult morbidities such as cardiovascular disease, high blood pressure, and metabolic (“Overweight and Obesity,” 2012). Participants of the Children H.E.A.L. Program will benefit from increased self-esteem resulting in potential improvements in academic performance. The Children H.E.A.L. Program will instill healthy lifelong dietary and physical activities habits.

Several successful programs that focus on improving children’s health through proper diet and increased physical activity are Let’s Move! and Play 60. Let’s Move!, a national initiative to reduce childhood obesity, has resulted in the availability of healthy activities accessible to every member of the community and educating children to develop life-long healthy behaviors (“Take Action,” n.d.). Play 60, a national school-based initiative sponsored by the National Football League (NFL), reported improvements in overall school environment and student wellness by making healthy food and activities more readily available (“2012 Survey Results, n.d.). Children H.E.A.L. will utilize similar successful strategies and activities to improve the health status of program participants and is aligned with the objectives of Healthy People 2020 which state: "Nutrition and Weight Status –11: Prevent inappropriate weight gain in youth and adults" and "Physical Activity - 3: Increase the proportion of adolescents who meet current federal physical activity guidelines for aerobic physical activity" (“Healthy People 2020,” n.d). Children H.E.A.L is joining the national initiative on addressing the childhood obesity epidemic.

References

- 2008 Georgia data summary: Obesity in children and youth. (2008). Retrieved from <http://dph.georgia.gov/sites/dph.georgia.gov/files/2008ChildandYouthObesitydatasummary.pdf>
- 2012 survey results (n.d.). Retrieved from <http://school.fueluptoplay60.com/welcome/survey-results-2011-2012.php>
- Adult obesity. (n.d.). Center for Disease Control and Prevention. (2013. Retrieved October 3, 2012, from <http://www.cdc.gov/vitalsigns/AdultObesity/index.html>
- Childhood obesity. (n.d.). *Children's Defense Fund (CDF) : Health Care Coverage for All of America's Children, Ending Child Poverty, Child Advocacy Programs*. Retrieved from <http://www.childrensdefense.org/policy-priorities/childrens-health/child-nutrition/childhood-obesity.html>
- Childhood overweight and obesity. (n.d.). *World Health Organization*. Retrieved from www.who.int/dietphysicalactivity/childhood/en/
- Controlling the global obesity epidemic. (2011). *World Health Organization*. Retrieved from <http://www.who.int/nutrition/topics/obesity/en/>
- Healthy people 2020. (n.d.). Retrieved from <http://www.childhealthdata.org/browse/healthy-people-2020>
- Learn the facts: Let's move! (n.d.). *Let's Move!* Retrieved from <http://www.letsmove.gov/learn-facts/epidemic-childhood-obesity>
- National Survey of Children's Health. 2003. Data query from the Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health website. Retrieved from www.childhealthdata.org

Obesity and overweight for professionals: Childhood: Basics - DNPAO - CDC. (2012).

Centers for Disease Control and Prevention. Retrieved from

<http://www.cdc.gov/obesity/childhood/basics>

Ogden, C. L., et al. (2012). Prevalence of overweight and obesity in the United States, 2009-2010. *JAMA: The Journal of the American Medical Association*, 295(13), 1549-1555.

Retrieved October 1, 2012, from <http://www.cdc.gov/nchs/data/databriefs/db82.htm>.

Take action. (n.d.). *Let's Move!* Retrieved from <http://www.letsmove.gov/action>

Trends in the prevalence of extreme obesity among U.S. preschool-aged children living in low-income families, 1998-2010. (2012). *JAMA*, 308(24), 2563-2565. Retrieved from http://www.cdc.gov/obesity/downloads/jama_highlights

Description of Priority Health Problem and Priority Population

The priority population that the Children H.E.A.L. program is focusing on is primarily children between the ages 4 and 6. Specifically, the priority population consists of Kindergarteners within the After School Program at Kehely Elementary School. **Provide definition and source for childhood obesity – as well as how the Children H.E.A.L. program is a preventative program. Stress importance of increasing physical activity and healthier eating habits.**

Planning Group and Stakeholders Information

- Program Participants (Kehely ASP Students, Grade K-1)
- Parents/Guardians and Siblings of Program Participants
- Educators of Program Participants
- Lori Armbruster, ASP Director
- Liz Jackson, Principal of Kehely Elementary School
- Janie Petrillo, Program Director
- Breyanna Mikel, Ansley Canby, Armani Piedra – Program Planners and Implementors
- Georgia Army National Guard
- Whole Foods
- Publix

Program Setting, Location, and Time

Children H.E.A.L. will take place during the After School Program of Kehely Elementary's gymnasium. The program will begin at 2:50 pm on specified dates and end at 3:40 pm. Specific dates for the program: Thursday, November 21, 2013; Friday, November 22, 2013; and Tuesday, December 3, 2013.

Materials Needed and Budget

Budget – For Detailed List, see Appendix A-1

Materials Needed:

- Various Activity Sheets and Worksheets
- Balls
- Hoops
- Cones
- Jump Ropes
- Hula Hoops
- Basketballs
- T-Shirts
- Water Bottles
- Cups
- Cutouts
- Boombox
- MP3
- Tape
- Crayons

- Posters
- Construction Paper
- Glue
- Cutouts
- Empty bottled water
- Note cards
- Stickers
- Trail Mix

Marketing Strategies

The two marketing strategies used are: flyers and a morning intercom announcement. **See Appendix B-1 and B-2** respectively.

List of Interventions:

Session 1

- Health Education: Interactive discussion about healthy eating. (Will discuss healthy and unhealthy foods, balanced diets, making healthy snack choices.) (10 min.)
- Health Education: Dance to a song about Healthy Foods. (10 min.)
- Health Education: “Junk food Tree” activity as groups. (From Nourish Interactive) (10 min.) (Materials: crayons)
- Health Education: Tossing game identifying go, slow and whoa foods. (Get participants moving around and making healthy choices. “Go, Slow, and Whoa are already used in Keheley to ID how healthy a food is.) Materials: 3 Baskets, Plastic food, labels for baskets (10 min.)
- Health Education: In teams, participants create their own healthy plates and share what makes their plates nutritionally well balanced. (Drawing activity) (10 min.)

Session 2

- Health Education: Matching Healthy Foods (Set up 10 yard cones have participants match the fake healthy foods with shape) (10min.)
- Health Education: Teach group body-weight exercises (review and practice proper push-ups, planks, etc) (15min.)
- Health Education: Water Break (Explain the importance of water) (5min.)
- Health Education: 4 corner puzzles (Set up different food puzzles in 4 corners with cones, split participants in groups of 10 and have them race to put the pieces together from each corner) (15min.)
- Health Education: Filling the basket with Fruits (Split participants into 2 groups, line the participants side by side with fruits in one end and a basket in the other; have participants race to fill the basket with the fruits) (10min.)

- Health Education: Color for Fruit PRIZE (Have participants color their favorite fruit, then participants draw the name of the fruit with their names for a prize) (10min.)

Session 3

- Health Education: Review Presentation from the former sessions about healthy eating and the importance of exercise (5 min.)
- Health Education: "Building" a meal based on MyPlate. (Colored and/or laminated cut out pieces of various foods (fruits, veggies, sugars, etc.). Participants will then create a well-balanced meal and present it to students and explain why it's healthy) (10 min.)
- Health Education: Obstacle course. (Specifically those that will increase their cardio. Include jumping jacks, relay race, and other activities.) (Inside or on playground) (15 min)
- Health Education and Incentive: Dance contest. (Every child would ultimately win something e.g. voucher to a free KSU basketball game (or another athletic event) (10 min.)
- Health Education: Create their own recipes which must include at least 1 food from each of the 4 food groups, primarily focusing on fruits and vegetables. Create a Kindergarten recipe book (The participants can write it themselves and color the pictures. We laminate and bring it back to them as a final trip/final goodbye. Can be given to parents as a gift or sold by the school as a fundraiser.) (15 min.)
- Health Education: Hands on cooking project. (Using several easy recipes such as English muffin pizzas, fruit pizzas, salad, smoothies, etc) (10 min)

References

(put any sources you used here, like websites for the interventions)

Appendix