

Educational group session on nutrition and physical activity for families at North Country Healthcare in Flagstaff, AZ

SCHOOL OF
OSTEOPATHIC
MEDICINE
IN ARIZONA

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Background

In the last 50 years, U.S. childhood obesity rates have increased fourfold.¹ The pandemic has only worsened this trend, with recent CDC data showing a near doubling of body mass index (BMI) in a recent study including 432,302 young people aged 2-19 years, with the most significant increases in BMI occurring in children aged 6-11 and in those overweight prior to the pandemic.² Fortunately, studies have shown that family-based interventions have potential to produce long-term weight loss.³ However, effective implementation is a challenge for community health centers (CHCs) and a useful model is still needed to establish lasting change.

Objectives

- 1) Enhance healthy lifestyle knowledge in families of pediatric patients of North Country Healthcare by introducing them to the basics and benefits of fiber intake and physical exercise.
- 2) Determine the efficacy and perception of group style interventions from the perspective of the families.

Methods

Participants: guardians of pediatric patients ages 7-12 years old.
Recruitment: flyers, pediatrician referrals, and cold-calling. A free catered meal was offered as an incentive to attend.

Group Session:

- Educational session on fiber (30 minutes)
- Healthy snacks discussion (10 minutes)
- Family physical activity (20 minutes)

Qualitative analysis:

Pre-survey: measure of current diet and physical activity

Post-survey: measure of overall perception of group session

Phone-survey: measure lifestyle changes and answer questions



Results

				Pre-Survey	
				Fruit	4 servings/day
				Vegetables	3 servings/day
Recruitment				Do you exercise?	Yes
	Flyer	Referral	Cold calling	Does your child exercise?	Yes
Recruitees	0	0	40	Do you exercise together?	Yes
Attendees	0	0	4	Do you drink water?	3 bottles/day
				Goal: 30 minutes of daily physical activity	
Post-Class Survey				Phone survey	
<ul style="list-style-type: none"> • The guardians reported being highly satisfied, would recommend it to a friend, and it was well taught. • They learned about what to eat including how much daily fiber should be eaten and felt very motivated to learn more about what is good for their bodies. • Their favorite part was the provided food and the physical activity session 				<ul style="list-style-type: none"> • The guardians reported they are creating healthier habits and have increased their physical activity. • As a family they are going to the gym where they do weight lifting and cardio together several days a week. • They are buying more fiber, eating that fiber together, and not skipping meals. 	



Discussion and Summary

Pediatric obesity rates have become a global concern over the past few decades. The World Health Organization has described this epidemic as “one of the most serious public health challenges of the 21st century.”⁴ Community health centers can use family-based group sessions to address this concern and potentially establish lasting change at a local level however hosting these sessions can be challenging. It requires cooperation from multiple disciplines to design, market, and implement but the main source of frustration is attendance.

The group session for this study was designed to promote natural family dynamics while being positive, engaging, and accessible.⁵ It was important to give affordable options, keep the focus on small, easy to achieve goals, and to have an available interpreter. Cold-calling was the most successful marketing technique. However, the low number of attendees (n=1 family) indicates need for an improved waitlist, cancellation, and reminder system. While the small turnout limits the results of this study, the family that did attend was highly satisfied, learned new information about fiber that influenced them to increase intake, and they started being more physically active together. By improving the marketing system, this intervention has the potential to implement positive change within CHC families.

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