

Slide 1



Hawai'i Dietetic Association Conference
May 2, 2014, 2:45-3:45pm
Building a Pacific Way to Wellness
Professor Rachel Novotny, Principal Investigator, University of Hawai'i

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Slide 2

Session Outline

- Overview & Vision for Community Change in the Pacific - Novotny, PhD RDN LDN
- Engaging the Pacific Community - Fialkowski, PhD RDN LDN
- Gathering Data from Remote Underserved Minority Populations of the Pacific - Ettienne, PhD RDN
- Engaging the Pacific Student - Leslie, DrPH RDN LDN
- Building a Pacific Wellness Workforce - Delormier, PhD PDT
- Networking Data, People, Programs and Policies to Support a Pacific Way to Wellness - Novotny, PhD RDN LDN


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Session Learning Outcomes

1. Explain Pacific-based strategies that can be applied to clinical, private or community programs to prevent (childhood) obesity
2. Explain skills needed to contribute to positive change in the Pacific

Young children in the Marshall Islands




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Session Objectives

- Describe:
 - CHL Vision, Mission and Goal
 - CHL Structure and Strategies
 - Positive Deviance Approach to Community Engagement
 - Positive Disruption and Pacific Ways to Wellness
 - Pacific Data Needs & Plans
 - Skills Needed for this Work
 - Training of Pacific Students
 - Future Plans



CHL Community walking intervention - American Samoa

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US Affiliated Pacific Region



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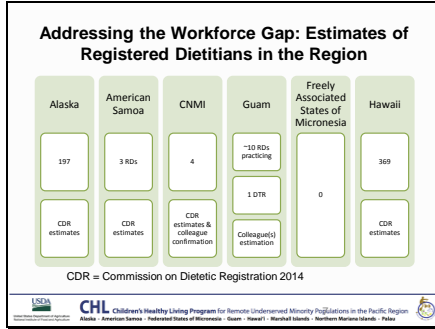
Slide 6

US Affiliated Pacific Region Needs & Approaches

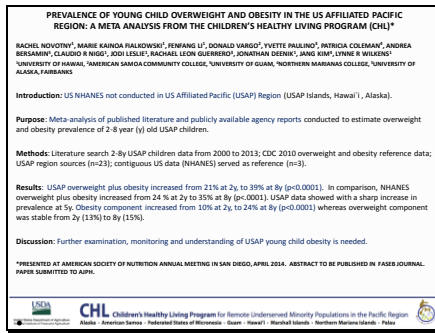
- Obesity prevention- obesity linked to major chronic diseases – Type 2 diabetes, cancer, heart disease
- Start young for true prevention – childhood
- Build data - minimal data on obesity in region – no NHANES
- Build Capacity – few trained professionals in nutrition & obesity prevention in region
- Distinct geography and culture – need locally tailored approach

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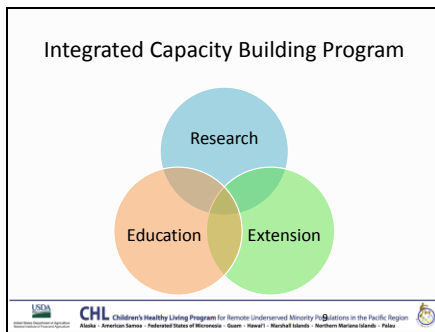
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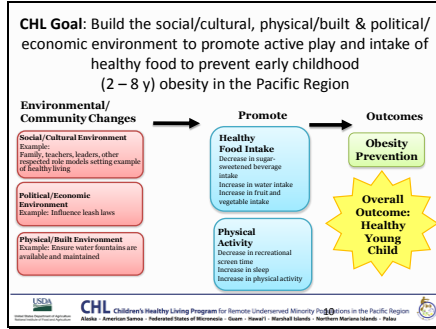
Slide 8



Slide 9



Slide 10



Slide 11

CHL Vision

We envision sustainable community-based systems and environments to raise healthy children in the Pacific Region

Children from the Republic of the Marshall Islands

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Slide 12

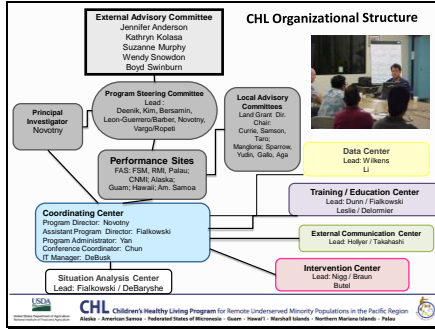
CHL Mission

In partnership with our community, our mission is to elevate the capacity of the region to build and sustain a healthy food and physical environment to help maintain healthy weight and prevent obesity among young children in the Pacific region

Tafuna Elementary, American Samoa, April 2013

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Slide 13



Slide 14

CHL Target Population

- Grant requirement: children ages 2 – 8 years
 - Head Start
 - Preschool
 - Day Care
 - Kindergarten
 - Community Health Centers
 - Community Centers
 - Community Events
 - Supplemental Feeding Program for Women, Infants, & Children

Images from CHL brochure, courtesy of Center on the Family

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CHL Objectives

1. Conduct program / data inventories & situation analysis
2. Train 22 professionals & paraprofessionals in obesity prevention in degree programs
3. Develop Pacific food, nutrition & physical activity data management & evaluation system
4. Develop & conduct an environmental intervention (to prevent, maintain or decrease young child overweight & obesity in the Pacific Region)
5. Evaluate the community - based primary - prevention environmental intervention
6. Incur at least one obesity prevention policy change per state / jurisdiction

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CHL (6 behavioral outcomes, 3 health outcomes)


Primary

1. Sleep by 15 min/day
2. Moderate to vigorous physical activity by 10 min/day
3. Fruit & vegetable intake by 1 serving/day (1/2 c/day)
4. Water intake by 1/2 cup/day

Secondary

5. Sedentary behavior (screen time) by 10 min/day
6. Sweetened beverage intake by 1/2 cup/day

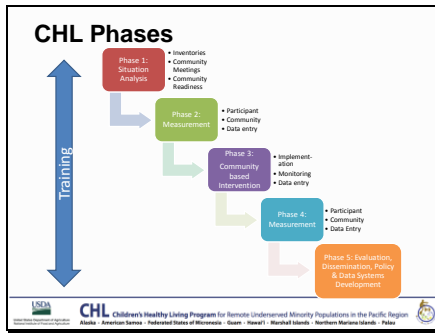
1. Prevalence of obesity by 8% (0.10 kg/m² decrease in BMI z-score)
2. Waist circumference by 2%
3. Acanthosis nigricans by 5%



Positive acanthosis nigricans screen, CHL Study

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Slide 17



Slide 18

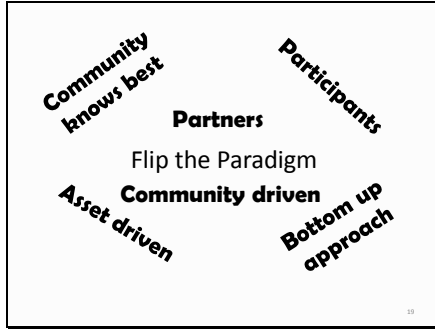
Dr. Marie Kainoa Fialkowski
CHL Assistant Program Director



Engaging the Pacific Community

18

Slide 19



Slide 20

Need for Community Engagement

- Addressing childhood obesity requires multiple perspectives, including the community to address the issue
- Community needs vary
- Application of positive deviance
 - Identify individuals in a community engaging in behaviors that are health promoting
- Take advantage of the community's existing assets or strengths
 - Identify what is **working** in a community NOT what is wrong

Increase likelihood of sustainability

IOM 2012; York 2008; Wishik 1976; Marsh 2004 20

Slide 21

ANGELO – Analysis Grid for Elements Linked to Obesity (Swinburn & colleagues)

CHL SITUATIONAL ANALYSIS & SCAN	MERGE	PRIORITIZE	FORMULATE	GOALS
Demographic, health, risk, and other data Community suggestions to address obesogenic environments • Physical • Social • Policy Scientific literature	Strategies from: Community Literature	Importance Do-ability	Action Plans	Healthy Eating 1. Decrease in SSB intake 2. Increase in water intake 3. Increase in fruit & vegetable intake Physical Activity 4. Decrease in leisure screen time 5. Increase in sleep 6. Increase in physical activity

Simmons et al. 2009

Slide 25

CHL Intervention: Cross-Cutting Functions, Activities & Behavioral Targets	S/S	F/V	PA	W	S	Screen	Sleep
Review Assessment Data for Policy & Physical Environment related to the 6 CHL behaviors							
a. Review preschool wellness policy assessment data to identify training needs	X	X	X	X	X	X	X
b. Review community assessment data to identify areas for advocacy for PA em.	X	X	X	X	X	X	X
Partner and Advocate for Environmental Change							
a. Work with coalitions to advocate for							
i. Better access to parks that are safe & inviting	X		X				
ii. Better access to clean water	X		X				
iii. Safer environments for walking & biking	X	X		X			
iv. Better food placement in stores	X	X		X			
v. Gardens & hydroponics	X		X				
b. Partner with existing entities to purchase or obtain sponsorship for	X		X		X		
i. Water in the preschool	X		X		X		
ii. Gardening supplies for preschool kids	X		X		X		
iii. Sports equipment for preschool kids	X		X		X		
iv. Campaigns & messages	X	X	X	X	X	X	X
Promote the CHL Message							
a. Support role models to deliver CHL messages in various	X	X	X	X	X	X	X
b. Enhance existing social marketing campaigns related to 6 CHL behaviors	X	X	X	X	X	X	X
c. Advertise CHL or other activities that promote 6 CHL target behaviors	X	X	X	X	X	X	X
Train the Trainer							
a. Train individuals to promote gardening in preschools & communities	X	X	X	X	X	X	X
b. Train individuals to lead interactive, hands-on, & family-based sessions	X	X	X	X	X	X	X
c. Train preschool providers on wellness policies	X	X	X	X	X	X	X
d. Train preschool providers in curricula related to 6 CHL target behaviors	X	X	X	X	X	X	X
e. Train role models (community champions, role celebrities, role models)	X	X	X	X	X	X	X

Slide 26

Implementing These Strategies

- Partners with, supports, and "adds value" to existing programs that are conducting activities related to CHL's 6 behavioral outcomes (positive deviance)
- Builds local capacity to sustain programs and policy changes
- Promotes a common CHL message
- Collects process information on the implementation strategies, duration, and reach

Slide 27

Dr. Reynolette Ettienné
CHL Coordinator for the
Freely Associated States of Micronesia

Slide 28

Underweight, Overweight & Obesity Prevalence Survey

Freely Associated States: Palau, Marshalls (RMI), Chuuk, Kosrae, Pohnpei, Yap

- Determine the prevalence of underweight, overweight, and obesity in a representative sample of young children, ages 2 – 8y, from each (FSM) jurisdiction
- Data: Anthropometry (height, weight, waist), Acanthosis Nigrigans, Accelerometry, Questionnaires (Sleep, Sedentary Behaviors, Culture, Demographics, General Health screening), Food and Activity Logs (FAL), Community obesity prevention environmental assessment (CAT), Food & Utility cost survey
- Approximate sample size 200 children per FSM jurisdiction

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Prevalence Survey (cont'd)

Freely Associated States: Palau, Marshalls (RMI), Chuuk, Kosrae, Pohnpei, Yap

- Surveys completed:

Pohnpei	Oct 23 - Nov 7, 2013
RMI	Jan 9 - Feb 3, 2014
Palau	April 7 - 18, 2014
- Upcoming Surveys:

Chuuk	July - Aug 2014
Yap	Sept-Oct 2014
Kosrae	Jan 2015 (tentative)



Child from Pohnpei being measured by CHL FAS staff

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Gathering data with Remote Underserved Minority Populations of the Pacific

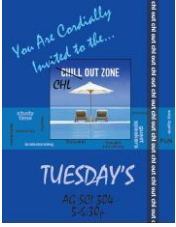
- Multilevel Measures unique to study and region
 - Adaptation of measures and questionnaires to the Freely Associated States of Micronesia
 - Food and Activity Logs (food sources, recipes)
 - Demographics (Betel nut, Tobacco, Alcohol, Water source, Food security/Resource availability)
 - Community Assessment Tool [addition of (region specific) response options e.g. "local foods" and "merchant ships" added to food availability survey, communal "play" spaces on park observation]

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Educational and Transitional Support

- Student mentors
- TA support
- Academic advisors
- TRIO
- #CHLout
- CHL advisors
- CHL program support
- Cohort socials
- Cultural clubs




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Advantages

- Development of professional Pacific network, trained in nutrition & obesity prevention
- Trained indigenous workforce
- Increased cultural sensitivity and understanding
- Teacher-student co-learning
- Student-student co-learning




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Challenges

- Cultural differences:
 - Perspectives
 - Communication styles
- Transition to:
 - New location
 - Independence
 - College
- Balancing class content



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Dr. Treena Delormier
CHL Training Program Collaborator

- Role is contributing to the CHL training curriculum for CHL trainees
- Co-instructing the CHL seminars with the trainees
- Exploring ways to sustaining CHL training program



Guest speaker and Kapuna Amelie McGregor Shares a community perspective on research CHL trainees in Cohort 1.

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CHL Training Curriculum

CHL Seminars (1 credit) – Pacific Perspectives on:

1. “Foundations of obesity”
2. “Evidenced-based approaches for childhood obesity prevention”
3. “Community engagement & capacity-building”
4. “Policy & advocacy in preventing childhood obesity”

Upcoming Fall 2014 - Spring 2015


5. Indigenous seminar with Native Hawaiian & Indigenous Health MPH cohort
6. CHL Seminar - knowledge translation & dissemination

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Sustainability of CHL Training Goals

- Integrating CHL curriculum into Nutrition, Public Health, Nursing, Early Childhood Education
- CHL training tied to home jurisdictions
- CHL trainees integral to the CHL research
- Integrating CHL course content into Nutrition Program
- Introductory Nutrition course integrating a Pacific Perspective of Pacific food and nutrition
- Integrating trainees as instructors



CHL trainee Aifi Tufts PhD student (epidemiology) guest teaching CHL seminar

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Innovative Aspects

- Creating opportunities for Pacific Islander students to address issue important to their communities
- Having Indigenous instructors with experience in nutrition, public health and community-based research experience
- Advocating/balancing trainee's needs, aspirations and listening to their concerns
- Building community capacity to address complex health issues




CHL trainee Sam Foulchag

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Challenges

- University context - expectations, values and norms require trainees time and support to navigate
- Grant time frame and degree achievement
- Community expectations are added to degree expectations
- Diverse educational preparation of trainees requires extensive tailoring of curriculum, advising & cultural competence




CHL trainee Rennie Kyomasa

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**Dr. Rachel Novotny
CHL Program Director**

Networking Data, People, Programs and Policies to Support a Pacific Way to Wellness




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Slide 46

CHL Pacific food, nutrition & physical activity data management & evaluation (monitoring) system in development

- Partnerships developed or developing in CHL jurisdictions
 - Head start / Early Childhood Education (ECE) Centers to collect and share BMI data
 - DOE- BMI data collection & analysis
 - School entry physicals for BMI data
 - MCH program- growth monitoring data
 - MANA program- Pacific wide monitoring
 - BRFS – behavioral risk monitoring




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Other data needed & being collected to evaluate community based program & under consideration for ongoing data system/monitoring

- Community Food and Physical Activity Environment Assessment (e.g. parks, stores, etc..)
- Community Food Costs (cost of basic foods & utilities)
- Individual Diet and Physical Activity Tracking (subsample-using Pacific Tracker tool)



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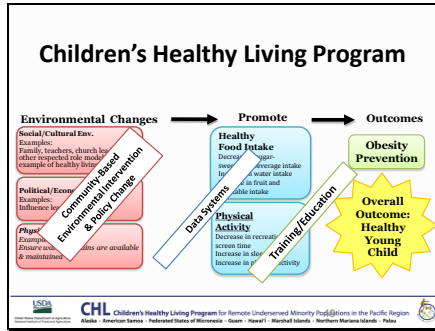
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Working with nutrition related academic programs in colleges in Pacific

- **Nutrition** – UH-Hawaii, UOG-Guam
- **Public Health** – UH-Hawaii, UOG-Guam, UAA-Alaska, COM-Micronesia
- **Nursing** – UH-Hawaii, KCC-Kapiloani, WCC-Windward, UOG-Guam, NMC- Marianas, COM-Micronesia
- **Early Childhood Education** – UOG-Guam, NMC-Marianas, COM-Micronesia, ASCC-Samoa
- **Natural Resources** – UAF- Alaska

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Slide 49



Slide 50

Skills: Role Modeling & Fostering Leadership in Communities

- Building on concepts of positive deviance and positive disruption
- Identified varied role models and fostered leadership among them in communities of the US Affiliated Pacific region

Community Leaders meet in CNMI

Logos: USDA, CHL (Children's Healthy Living Program for Remote Underserved Minority Populations in the Pacific Region: Alaska, American Samoa, Federated States of Micronesia, Guam, Hawaii, Marshall Islands, Northern Mariana Islands, Palau)

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Summary

- Pacific strategies can be applied to clinical, private or community programs to prevent (childhood) obesity
 - community engaged, culturally adapted, built on strengths
- Skills needed to contribute to positive change in the Pacific
 - adapt, problem solve, partner, role model, build on what's working (support positive deviance & build positive disruption)

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Implications for Dietetics

- Reach of dietetic work extends from clinical to community and region
- Impact of nutrition is both down stream (health and disease) and up stream (causes of diet and nutrition status)
- Dietitians - prepare for a diverse environment!

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Thank you from the CHL Team!



CHL Annual Meeting - Guam
June 2013

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