

Obesity Prevention & Wellness Program Strategies/Initiatives

Educating Practices/Physicians in their Communities (EPIC): Pediatric Obesity Evaluation, Treatment and Prevention In Community Settings (2011-Ongoing)

The purpose of the EPIC: Pediatric Obesity Evaluation, Treatment and Prevention In Community Settings program is to deliver an educational curriculum on childhood obesity screening, treatment and prevention within the primary care practice settings in Pennsylvania to address protocols to:

- Assure universal childhood obesity screening of all children,
- Identify appropriate patient education materials to prevent and treat overweight children, and
- Refer patients to community resources such as weight management programs, nutritionists and dieticians.

Regional presenters are trained, via a train-the-trainer format, to provide training to primary care practices in communities across the state. Trainers include primary care physicians, nutritionists and dieticians. The presenters will primarily disseminate the training program on-site at primary care settings, but also through grand rounds, pediatric staff meetings at community hospitals, regional and state meetings for physicians, nurses, nurse practitioners, physician assistants and other ancillary office staff.

The curriculum was developed by physicians and healthcare providers for physicians and healthcare providers. This initiative provides trained teams of a Physician and a Registered Dietitian to meet with the physicians and the entire practice staff at pediatric and family medicine offices, and a variety of professional conferences, to provide a free, CME/CEU, 1.5 hour update on current obesity prevention research and the American Academy of Pediatrics Expert Committee Recommendations on overweight and obesity.

As of September 30, 2012, 139 regional presenters have been trained and have conducted 57 presentations reaching 1,487 attendees. While many practices do not provide patient population, these 1,487 practitioners potentially reach 367,015 patients.

Safe Routes to School and Capacity Building Mini-Grant Programs (2012-Ongoing)

The Safe Routes to School Mini-Grant Program strives to increase the number of schoolchildren walking or bicycling to school. Safe Routes to School is a national initiative to create safe, convenient and enjoyable opportunities for children to walk and bicycle to and from school. It is built on collaborative partnerships that often include educators, parents, city planners, business and community leaders as well as health care officials. The Safe Routes to School initiative incorporates 5 specific components referred to as the 5 E's and they are: Engineering; Education; Encouragement; Enforcement; and Evaluation. The 5 E's capture the wide range of activities anticipated to be included and contribute towards a program's success through partnerships. This program is designed to increase children's physical activity, thereby playing a critical role in reversing the national trend of childhood obesity and inactivity. Through an application process, a minimum of 20 schools will be selected to receive mini-grants.

The Capacity Building Mini-Grant Program will provide technical assistance and support to selected schools to conduct the CDC School Health Index (SHI), a self-assessment and planning tool to improve their health and safety policies and programs related to physical education and nutrition. Participating schools will utilize SHI findings to develop an action plan, which will serve as the foundation for the mini-grant funding for implementation of evidence-based strategies to include, but not be limited to community-wide campaigns, social support for physical activity, joint use agreements, active school yards and playgrounds and physical activity policies in schools. Disparate populations will be identified through data, such as, but not limited to eligibility for free and reduced school lunch program. Through an application process, at minimum of 15 schools will be selected to receive mini-grants.

New School Foods and Labeling System Initiative (2010-2012)

- This creates a school environment that supports improved nutrition and healthier lifestyle choices.
- Innovative public-private partnership to introduce and promote new food items low in fat and sodium and high in micronutrients and fiber and that meet or exceed the USDA and PDE nutrition guidelines into some elementary and secondary school lunches and vending machines in several Pennsylvania school districts.
- The Department's partners were from The Pennsylvania State University, Center for Food Innovation and Prevention Research Center for the Promotion of Human Development, and Metz Culinary Management, Inc.
- Implementation of the initiative occurred in 53 schools in six Pennsylvania school districts in school year '11-'12; schools varied between urban, suburban, and rural, across socioeconomic statuses and enrolled 30,684 students.

The main program components were as follows:

1. A cash subsidy to be used for the purchase and prep of healthier, fresh food items to be offered at a price point consistent with the reimbursable lunch.
 2. Point-of-selection informational materials to accompany these healthier foods, including:
 - a. "Go" (based on the NIH "We Can" Program) food label was a simple icon indicating the foods which are lowest in fat and sugar, lower in calories, rich in vitamins, minerals and great to eat anytime.
 - b. A nutrition label that with information on total calories, fat, and selected macro- and micronutrients (information was provided according to grade level), displayed with each item.
 - c. Ideas for promotional activities in the school (signage, announcements, etc.).
- Key Findings, Achievements, and Recommendations
 - Most school districts used initiative-provided funds to offer fresh and/or healthier foods at a price point within the reimbursable lunch program.
 - More whole food items were purchased than were prepared food items; students' acceptance of whole foods was higher. Sales of prepared items and student acceptance remained stable throughout the initiative.
 - The combination of "Go" and Nutrition labels was associated with increased sales of whole wheat pasta salad. The addition of promotional materials was associated with improved sales of apple slices and whole wheat pasta salad. Also, schools that displayed the "Go" label experienced an increase in vegetable sales.
 - Food service staff reported that more students tried the whole wheat pasta salad and black bean salad wrap on days when the "Go" label was displayed. Overall, several of the new foods were well received and likely to be sustained. Student acceptability was generally high for whole food items (particularly for familiar items). Labels may be more important for less familiar or multi-component items. Bagged fruit holds great promise for widespread adoption; however, price was identified as the primary barrier for sustaining and expanding bagged fruit within the reimbursable lunch program.

WalkWorks (2010-2012)

- Through WalkWorks, access to local walking routes and social support of individuals wanting to improve their physical activity habits is enhanced. Specifically, WalkWorks has:
 - Identified, mapped and promoted safe walking routes that are accessible to people of all ages and abilities;
 - Established and promoted guided community-based walking groups; and
 - Educated about local policy related to safe pedestrian transportation in the built environment.

- Through WalkWorks, walking routes were established with attractive signage in 24 communities in six Western Pennsylvania counties (Cambria, Crawford, Greene, McKean, Venango and Washington).
- Forty-eight walking groups have been established to enhance social support for walking in these communities, and a website www.pawalkworks.com provides downloadable tools and resources to support the walking routes and groups.

Young Lungs At Play (2010-2012)

- In partnership with the Pennsylvania State University Cooperative Extension, the Department implemented Young Lungs at Play (YLAP), which aimed to decrease smoking prevalence, teen smoking initiation, and exposure to secondhand smoke through creation of tobacco free parks, playgrounds and recreation areas in 18 counties.
- Community-based YLAP program assistants educated municipal officials, stakeholders and residents about the health and environmental consequences of tobacco use, and promoted policy change through establishment of tobacco-free parks, playgrounds and other outdoor places where children play. YLAP signs are displayed to increase the visibility of public health prevention and tobacco ban messages.
- These efforts have resulted in establishing 837 tobacco-free parks and playgrounds in more than 133 municipalities.

Counter Details (2010-2012)

The objectives of the Pediatric Obesity Update 2010 Counter Details are to help healthcare professionals:

- Translate obesity associated co-morbidities (diabetes, cardiovascular disease, depression, sleep apnea) and the application to their practice and propose strategies to foster prevention and early identification in children.
- Identify tools and strategies to communicate the healthy lifestyle message effectively, taking into consideration cultural and literacy barriers.
- Assess and encourage the impact of the new WIC food packages on childhood obesity and encourage breastfeeding if appropriate.
- As of October 2012, 347 physicians have obtained CME credits from this monograph.