CREATING A COALITION: PREVENTING CHILDHOOD OBESITY WITH REV IT UP!

By

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Abstract

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Obesity is a major health issue in the United States. One-third of the American population is obese and the rate of childhood obesity has tripled since the late 1970s. Obesity increases the risk for cardiovascular disease, Type II diabetes, and certain types of cancer.

According to statistics from the Washington State Department of Health, 29.7% of the population in Yakima is obese and 35.6% are overweight. In 2009, Yakima earned the ranking of the 8th fattest city in America. Recognizing the implications to public health, the Yakima Health District established two main objectives: 1.) decrease obesity in Yakima County and 2.) create a community coalition to centralize community efforts. Community coalitions have proven to be a successful strategy in engaging community partners with the goal of health improvement.

Over an 18 month period, the community coalition successfully facilitated five of seven determined outcomes of interest. Unfortunately, unexpected evolving public health challenges
(H1N1) assumed the position of priority and coalition efforts were delayed. The coalition is still intact due to successful communication efforts and the process will resume as the H1N1 priority declines.

The Rev It Up! Coalition is an ongoing community effort to reduce obesity in Yakima County. Obesity affects the health of the entire community and efforts need to remain persistent to bring about change.
Background

One-third of the American population is obese and the rate of childhood obesity has tripled since the late 1970s. Although there has been some stabilization of obesity rates in the last two years, there is no evidence that obesity is on the decline (Ogden, Flegal, Carroll, & Johnson, 2002; Ogden, Carroll, & Flegal, 2008). Obesity in adults is defined as BMI ≥30 and in youth BMI-for-age ≥95% (Centers for Disease Control and Prevention [CDC], 2009). Obesity in adults and children is the result of an energy imbalance created when energy consumption exceeds energy expenditure. Many factors play a part in the excess energy consumption including genetic, behavioral, environmental, social, and cultural. Obesity is a significant health issue and increases the risk for cardiovascular disease, Type II diabetes, hypertension, stroke, and certain types of cancer including endometrial, breast, and colon cancer (CDC, 2009). The greatest predictor of adult obesity is pediatric obesity (Freedman et al., 2005; Guo, Wu, Chumlea, & Roche, 2002). In light of this, early intervention is essential to obesity prevention.

Successful intervention includes a multilevel approach (Sallis & Owen, 2002). The Socio-ecologic Model of Health Promotion targets individual, interpersonal, community, organizational and policy level changes. The model provides a theory base for community prevention efforts (Partnership for Prevention, 2008) and targets the many factors contributing to excess energy consumption. Multiple levels of intervention require a concerted effort by diverse individuals.

Community coalitions have proven to be a successful strategy in engaging community partners with the goal of health improvement (McKenzie, Neiger, & Smeltzer, 2005; Minkler, 2007). Coalitions are made up of diverse individuals or groups who are committed to bring about change. The collaborative work of a coalition is more effective than the effort of individuals or
individual groups. Partners for coalitions can come from multiple sectors. Coalitions reduce duplication of effort and utilize diverse resources to accomplish a common goal (Wandersman, Goodman, & Butterfoss, 2007).

Community Context

Yakima County is an agricultural community in Eastern Washington with a population of 234,564 people (U.S. Census Bureau, 2009). It is considered one of the best apple growing regions in the world and produces 75% of the nation’s hops. Yakima farmers also grow cherries, pears, peaches, and grapes, among other commodities. Yakima averages 290 days of sunshine with an annual precipitation of 7.98 inches. There is an average of 195 growing days per year.

Despite agricultural bounty and sunny days, Yakima earned the ranking of the 8th fattest city in America in 2009 (Banner, 2008). According to statistics from the Washington State Department of Health, 29.7% of the population in Yakima is obese and 35.6% is overweight (Washington State Department of Health, 2008). In Yakima, 19.7% of the population is living below the poverty level and the median household income in 2007 was $41,949 (U.S. Census Bureau, 2009).

Hispanics make up 41.4% of the population, many working in the agricultural industry. The Yakama Indian reservation, located in the Lower Yakima Valley, is home to 5.2% of the county population. White non-Hispanic people make up the remaining majority (51.1%) of the population with a small representation of other ethnic minority groups (U.S. Census Bureau, 2009).

Childhood obesity, as well as adult obesity, is a significant issue in Yakima. The Washington State Department of Health provides information on youth obesity and physical activity through...
the Healthy Youth Survey database (Washington State Department of Health, 2009). The Healthy Youth survey is modeled after multiple nationwide surveys including the Behavioral Risk Factor Surveillance Survey (BRFSS). Started in 1988, the Healthy Youth Survey provides information that allows health care workers, coalitions, and public health practitioners to guide policies and programs designed for youth. In 2006, Yakima County 8th and 10th graders reported overweight and obesity rates of 27.8% and 31.9% respectively. In 2008, these percentages increased to 30.2 and 35.4. The Healthy Youth Survey shows a trend of increasing media screen viewing time and less physical activity for Yakima County Youth during the same time period.

The Yakima Valley Farmworkers Clinic is a local community health clinic targeting Yakima’s underserved population. In six county locations, the Farmworkers Clinic served 13,815 patients between the ages of 2 – 19 years in 2006. Of those patients, 26.42% had a BMI ≥95% indicating obesity.

The Yakima Health District (YHD) provides education and services to promote health and prevent disease. Founded in 1911, the YHD and its successful intervention regarding a typhoid outbreak, was the impetus for establishing county health districts throughout the country (Yakima Health District). Recognizing the current trends of obesity in Yakima County, the YHD established two main objectives: 1.) decrease obesity in Yakima County and 2.) recruit and form a key stakeholders and expert group which would be accomplished through creating a community coalition.

The overall objective of the community engagement effort was to decrease obesity in Yakima County, and the Public Health District outlined four general sub-objectives:

- coordinate countywide efforts around childhood obesity prevention
• secure funding to sustain, expand or implement programs to prevent obesity in Yakima county
• act as a community resource for residents, educators, and professionals to provide accurate information and tools regarding childhood obesity
• advocate for policies that promote healthy lifestyles in Yakima County

The second objective was to engage the community by creating a coalition. The precise outcomes of interest for the coalition included:

• develop a common vision
• review data, determine and conduct assessments as part of a community inventory
• develop criteria and complete a prioritization process
• develop an action plan for prioritized recommendations including action steps utilizing the framework of the Washington State Nutrition and Physical Activity Plan
• determine Action Plan implementation strategies
• form a Rev It Up! advisory committee
• begin implementation of a Rev It Up! Action plan

Methods

Before the coalition was established, multiple community agencies were involved with obesity treatment and prevention but there was little collaboration and no central leadership. Agencies applied to the same local foundations for funding. Obesity was a recognized issue but there was no recognizable community effort for prevention. The Yakima Health District conducted a community needs assessment using the Mobilizing for Action through Planning and Partnership (MAPP) tool (McKenzie, Neiger, & Smeltzer, 2005). The assessment purpose was two-fold: to
determine the community’s awareness of and concern about the problem of obesity, and discover which population groups might benefit most from intervention. The 2006 surveys showed that community leaders considered obesity to be the most important health issue in Yakima County. Community leaders also indicated that obesity was not being adequately addressed by public health partners. Population groups most likely to benefit included school aged children, especially those within certain cultural groups (Hispanic and American Indian) and those living at <185% of the federal poverty level.

The Yakima Health District appointed a community assessment specialist to spearhead the effort towards obesity prevention. Several grants, both federal and state, were applied for and received. The initial goal of coordinating county-wide efforts had begun. Individual agencies were brought together and those who were directly or indirectly involved with obesity treatment and prevention were invited to form a coalition (figure 1). The group decided on a name, Rev It Up! with Yakima County, and committed to the above stated goals for intervention and community engagement.

Grant funding from the Washington State Department of Health Preventive Health and Health Services Block Grant (PHHS) and from Basic Food Nutrition Education Program (BFNEP) facilitated the initiation of two programs aimed at school health. The PHHS Block Grant supported Rev It Up! with Healthy Choices, a program designed to help school districts enhance, revise, implement and evaluate wellness/nutrition and physical activity policies. These policies were required in order for districts to be in compliance with Washington State Substitute Senate Bill 5436 (Healthy Schools Washington, 2009). Many current district policies were vague and did not include implementation strategies. Rev It Up! with Healthy Choices provided scholarships to school districts and access to YHD staff knowledgeable with policy development.
The BFNEP funding facilitated Rev It Up! with CATCH, an after school program which utilized the Coordinated Approach to Child Health (CATCH) curriculum that emphasized nutrition and physical activity. Designed for school-aged children, the CATCH program directly addressed four of eight components set forth by the Centers for Disease Control regarding school health. The CATCH components included health education, physical education, nutritional services, and family/community involvement.

With implementation of the initial program objectives underway, it was time to engage the community and recruit a key stakeholders and expert group who would develop an action plan and introduce the Rev It Up! Coalition to the entire community. On September 17th 2008, the Yakima Health District, in conjunction with partner agencies held the first Rev It Up! recruitment event. Those invited included teachers, school district representatives, school nurses, healthcare workers, parks and recreation managers, nursing school students and faculty, community activists, and interested community members. A prominent Yakima pediatrician with a passion for obesity prevention presented a keynote address to educate and motivate the audience. The audience was given the opportunity to vote on a logo for Rev It Up! and an opportunity to sign up for various levels of involvement in the coalition. Because the population of Yakima County is largely Hispanic, it was exciting to see the Hispanic representation at the initial meeting. Hispanic School teachers from the Lower Yakima Valley provided cultural diversity and expertise in physical education.

Between September and December of 2008, efforts to recruit community stakeholders continued. The number of community partners increased (figure 2). The CATCH curriculum continued and additional funding opportunities were pursued in concurrence with the second sub-goal of the
coalition. Specifically, funding was requested to increase the FTE hours of the CATCH educators thereby increasing the impact in the school districts.

The Washington State Department of Health was invited to advise the coalition building and action planning process. The Washington State Nutrition & Physical Activity Plan was utilized as well as the Healthy Communities Tool Kits 1 & 2. Each of these resources was developed to help communities promote health and assist local policy makers to improve community environments (Washington State Department of Health, 2008; Washington State Department of Health, 2005; Washington State Department of Health, 2010). The first advisory committee meeting was scheduled for December, 2008 with the goal of introducing a timeline for development of an Action Plan and continued commitment from key stakeholders and an expert group see (figure 3). The advisory committee continued to meet monthly through the first quarter of 2009. Sub-committees were established with the intent of conducting a community inventory. The purpose of the inventory was to identify strengths and barriers to improved nutrition and increased physical activity. Sub-committee members and community volunteers conducted the inventory using questionnaires from the Healthy Communities Tool Kit 1. High school students were recruited to inventory local grocery stores, convenience stores, and eating establishments. The county Geographic Information Services office provided maps of all the local eating establishments. A walkability/bikeability subcommittee evaluated the ease of walking and biking throughout Yakima County and another subcommittee looked at the accessibility of recreational facilities. One committee member gathered data regarding school food service menus and provided sample menus with nutritional information. The advisory committee was surprised to learn that elementary students were being offered donuts and Poptarts® for breakfast on a regular basis!
By March, the inventories were completed and reports were written to provide feedback to the members of the advisory group. The participants of this advisory group meeting selected priority recommendations and decided on four areas of focus for the coalition: 1. Improve school wellness, 2. Promote active community environments, 3. Reduce food insecurity, and 4. Increase the proportion of mothers who breastfeed (Table 1).

During the development of the action plan, the Rev It Up! media campaign and website were being developed by YHD experts with the help of community volunteers and agencies. The media campaign aimed to provide information to the community about childhood obesity with the goal of increasing awareness, attracting participants, and creating community advocates. Rev It Up! sponsored six months of television advertisements emphasizing the importance of physical activity and nutrition (link to video clip will be here). Rev It Up! promotional items (pedometers, key chains, pens, and MyPyramid magnets) were made available to distribute at community events. The Rev It Up! website was developed as an active resource for community members, healthcare providers, educators, and parents regarding obesity prevention (www.revitupyakima.org).

The final events for the advisory committee timeline were put on hold due to evolving public health challenges. The community input meetings and a community kick-off were intended to further engage the community and create awareness of the need to work towards a healthier Yakima County.

**Outcome**

The community coalition successfully facilitated five of seven determined outcomes:

- ✓ Develop a common vision
✓ Review data, determine and conduct assessments as part of a community inventory
✓ Develop criteria and complete a prioritization process
✓ Develop an action plan for prioritized recommendations including action steps utilizing the framework of the Washington State Nutrition and Physical Activity plan
  • Determine Action Plan Implementation strategies (still in progress)
✓ Form a Rev It Up! advisory committee
  • Begin implementation of a Rev It Up! Action plan (still in progress)

The coalition was successfully created. Multiple community agencies, groups, and individuals developed a common vision. Community assessments were successfully completed and the coalition determined priority areas. Utilizing the framework of the Washington Nutrition and Physical Activity Plan, an action plan was developed. The Rev It Up! Advisory Committee met on a quarterly basis and two small groups met regularly to focus on school wellness and breastfeeding promotion in Yakima County. Unfortunately, unexpected evolving public health challenges (H1N1) assumed the position of priority and continued coalition efforts were delayed. The Action Plan and action plan implementation strategies (action steps) were put on hold along with the Rev It Up! Community Input meetings and Community Kick-off, scheduled to take place in the late summer and early fall of 2009.

During this delay, some community partners lost motivation. Many, however, remained committed to the common vision. Unexpected success came by way of communication via electronic mail. The Rev It Up! coordinator actively communicated with 57 community partners via the Rev It Up! email database. The email database served as a tool to schedule meetings and disseminate information. It is still currently being used by the Rev It Up! coordinator to share information among committee members.
Interpretation

Creating the Rev It Up! Coalition was a worthwhile undertaking. The need in Yakima County was apparent and community leaders, partners, and individuals indicated a readiness to participate. We began recruiting community partners and implementing projects prior to laying out an Action Plan. If we were to do this again, we would have a clear plan of action with stated goals and objectives, including outcomes for the coalition. We believe that we lost some potential partners during the six month period of establishing the coalition and not having an identified action plan. When we realized our lack of specific planning, we coordinated with the Washington State Department of Health to request assistance with the process.

Recommendations to others would include encouraging public health practitioners to utilize electronic communication and develop a database to keep interested partners informed. This communication allowed our coalition to remain intact in spite of the H1N1 outbreak and subsequent interruption to coalition efforts.

We also discovered that people tire of the planning process. Many are willing to work on specific projects, but being involved in the coalition building constitutes too much commitment.

Currently, as we re-focus on the priority areas, we are attempting to keep the planning process at the advisory level and recruit more community volunteers to participate in implementing specific projects. An example is our community garden project. Community gardens can be implemented as a strategy to improve school wellness, promote active community environments, or reduce food insecurity. The Master Gardeners of Yakima are very interested in implementing a community garden project, but they are not interested in serving on the sub-committees which plan the coalition implementation strategies. (The Master Gardeners are a group of volunteers
who are trained by the Washington State University Extension Program to answer questions related to home gardening.) Our perception is that people are ready to work and are tired of planning.

Overall, our experience was positive and the process is still evolving. The Rev It Up! Coalition is an ongoing community effort to reduce obesity in Yakima County. What started out as a focused effort on childhood obesity has become a more comprehensive effort aimed at reducing obesity within the entire community. Many projects remain focused on youth, but others include adults as well. Obesity affects the health of the entire community and efforts need to remain persistent to bring about change.
Figure 1. Initial Community Partners
Figure 2. Increased Community partners
Figure 3. Advisory Committee Timeline
### Action Plan Priority Recommendations

<table>
<thead>
<tr>
<th>Action Plan Priorities</th>
<th>Action Steps</th>
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<tbody>
<tr>
<td><strong>Priority #1</strong></td>
<td>- Wellness policy implementation – vending programs, food service, farm to school, school gardens</td>
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<td>Increase access to healthy foods and increase physical activity in children.</td>
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<td>Increase access to healthy food, physical activity, and school wellness policies.</td>
<td>- Open gyms</td>
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<td></td>
<td>- Increase physical activity during school day – competitive and collaborative activities</td>
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<td>- More active recess</td>
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<td>- Opening schools for family activities</td>
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<td>- Revenue replacement for vending, fundraisers, etc.</td>
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<td>- Farm to school workshop</td>
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<td><strong>Priority #2</strong></td>
<td>- Work with cities, county, organizations/businesses to influence changes in communities</td>
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<td>Active community environments.</td>
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<td>City comprehensive plans.</td>
<td>- Increase green space/open fields</td>
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<td>- Connectivity to neighborhoods</td>
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<td>- Improve transportation</td>
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<td>- Trails/sidewalks</td>
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<td>- Bike lanes</td>
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<td>- Pocket parks in neighborhoods</td>
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<td>- Require a park per # of residential homes</td>
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<td>- Adequate lighting, public restrooms and water</td>
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<td>- Have a central commercial area within walking distance of residential area</td>
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<td>- Allocate community funding to provide needed changes</td>
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<td><strong>Priority #3</strong></td>
<td>- Recruit and train volunteers for food banks and basic food practices</td>
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<td>Reduce food insecurity.</td>
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<tr>
<td>Work with food banks and basic food program.</td>
<td>- Improve access to healthy foods at food banks</td>
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<td>- Education on food preparation and food dollars</td>
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<td><strong>Priority #4</strong></td>
<td>- Breastfeeding promotion in doctor’s office and in prenatal care</td>
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<td>Increase breastfeeding.</td>
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<td>- Breastfeeding education</td>
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<td>- Breastfeeding friendly workplaces</td>
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Table 1. Priority recommendations
References


Centers for Disease Control and Prevention. (2009, August 19). *Obesity and overweight*. Retrieved from Centers for Disease Control and Prevention:
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http://depts.washington.edu/waschool/wellness_policies/WA_SB_5436_text.html


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