

Using Healthy School Initiatives to Impact the Health of Children

Building Healthy Communities

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All about you?

- What is your profession? (What do you do?)
- What are you hoping that you will get out of this session?



A Little Bit About Me...

- Taught for 5 years in the public school setting
 - Elementary and High School
 - Physical education and health
- Undergrad and Masters from University of Illinois
 - Kinesiology
- Ph.D from University of Texas at Austin
 - Curriculum and Instruction
- Currently an Assistant Professor at Wayne State University
 - Kinesiology, Health and Sport Studies, College of Education
 - Researcher in the Center for Health and Community Impact
 - Focus on increasing physical activity and healthy eating and the impact on childhood obesity and academic achievement of children

Overview

- Understand schools' role in about the overall health of children
- Overview of the Building Healthy Communities program
- Ways to collaborate with schools to provide healthy opportunities for children



Survey Says...

One in every five
children in American
are overweight or
obese



On average,
children spend 28
hours a week of
the TV each week



1 in 3 children
will become
diabetic



The average 15
year old
accumulates 1
hour of exercise a day



Michigan School Health Profiles

Physical Inactivity (2012)

- **15.2%** did not participate in at least 60 minutes of physical activity on at least 1 day
- **50%** not active for 60 minutes at least 5 days a week
- **74%** not meeting the national recommendation of 60min/day
- **65%** did not attend physical education classes on 1 or more days in an average week when they were in school
- **27%** watched television 3 or more hours per day on an average school day
- **34%** used computers 3 or more hours per day on an average school day

Which is more Appealing?



Benefits of Healthy Eating & Physical Activity

Physical

- Reduced chance of obesity
- Reduced risk for chronic diseases

Emotional

- Reduced feelings of depression & anxiety
- Promotes psychological well-being

Cognitive

- Improved attention & concentration
- Memory
- Verbal ability
- Academic Achievement

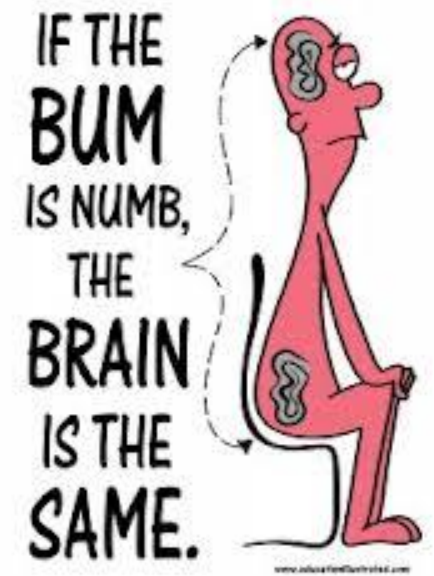
Eating Healthy & Eating Breakfast

- Improved attendance
- Fewer sick days
- Reduced tardiness
- Cognitive functioning
- Academic achievement
- Children who participate in school breakfast programs show decreased anxiety, depression, and hyperactivity

(Rampersaud et al., 2005; Taras, 2005; Sigfusdottir et al., 2007)

Physical Activity

- Physical activity and fitness has been linked to:
 - Improved time on task (Greico, 2011)
 - Fewer discipline issues (Mahar, 2008, Dwyer et al 1979)
 - Less unexcused absences (Cance, Centeio, Castelli, in press)
 - Improved academic performance
 - Reading and Math achievement (Castelli et al. 2007)
 - Grades and standardized test scores (Kolbe et al. 1996)
 - Higher ROI & Improved learning in Math and Reading – Building Healthy Communities program (Centeio, et al. 2016)



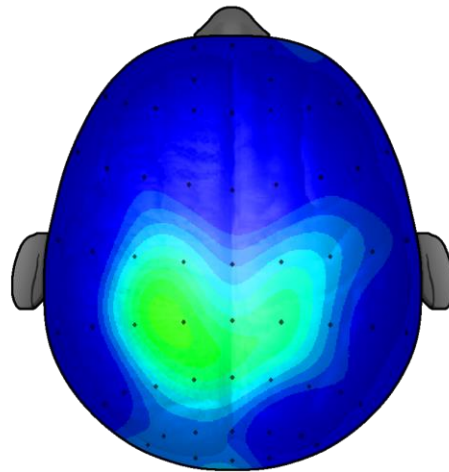
Brain Booster

FAST FINGERS

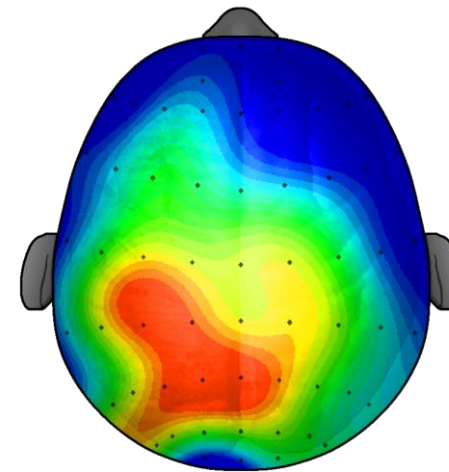


Healthy Body, Healthy Mind

- Physical activity has been shown to have a positive association with cognitive functioning in children (Sibley & Etnier, 2003)
- Acute bout of physical activity (Hillman et al., 2009)



After 20 minutes
sitting quietly



After 20 minutes
of walking

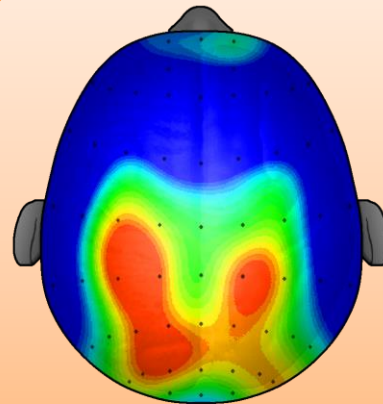
Healthy Body, Healthy Mind

Chronic physical activity

- FIT Kids Afterschool program
- 75 minutes of PA

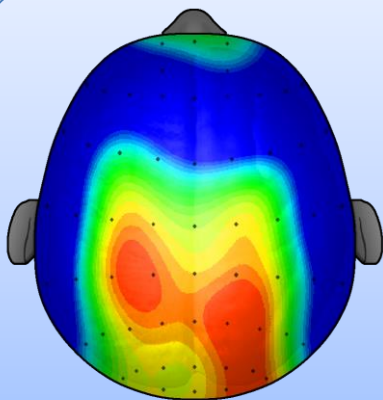
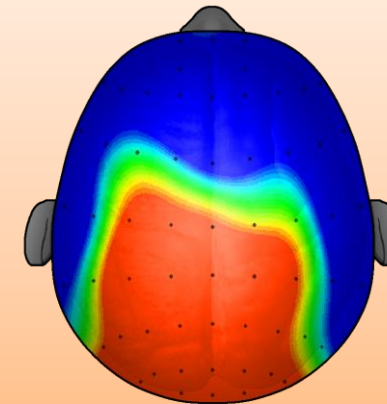
Castelli, D.M., Hillman, C.H., Hirsch, J., Hirsch, A., & Drollette, E. (2011). FIT Kids: Time in target heart zone and cognitive performance. *Preventive Medicine*, 52(1), S55-S59. PMID: 2128167

Pre-test

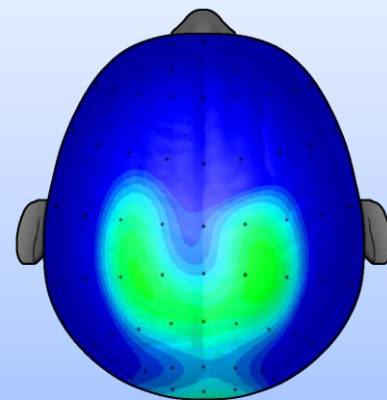


FIT Kids Intervention

Post-test



Waitlist Control



Fitness and Obesity

- Aerobically fit children have faster response time, better accuracy, & allocate more working memory toward a given task (Kamijo et al., 2011)
- Adiposity inhibits cognitive performance (Kamijo et al., 2012)



Misconceptions....

- Just because our students look “physically fit” doesn’t mean that they are
 - Should be measuring some form of fitness within your school
 - Fitnessgram
 - Now affiliated with the Presidential Fitness Challenge
- Provide as many opportunities as possible for children to participate in PA to help them become more “Fit”



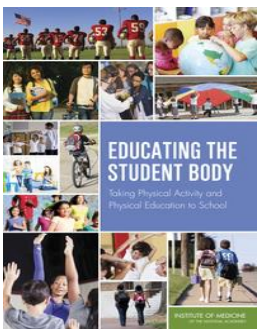
What Needs To Happen?

- Change the culture within and around the school
 - Make physical activity a common happenin
- **Principals play a key role** in this culture of change within the school environment!
- BUT communities and the support that a school has in a community is also essential



Whole-of-School Approach

- Greater alignment, integration and collaboration between health and school culture
- To improve physical and cognitive health

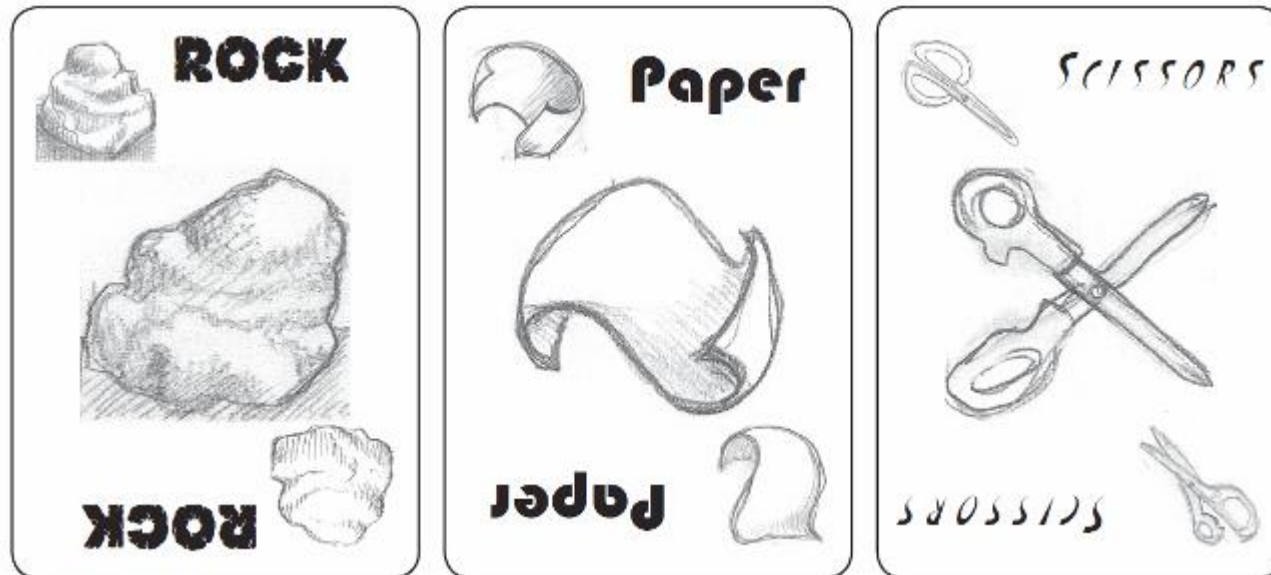


WHOLE SCHOOL, WHOLE COMMUNITY, WHOLE CHILD
A collaborative approach to learning and health



Brain Booster

ACTIVE



What Happens Currently in your Community?

- Are there any current partnerships with schools?
- Do you know of any initiatives that schools are participating in?
 - Think – Share with neighbor

Building Healthy Communities: Elementary School Program



A partnership between



Supporters



Blue Cross Blue Shield of Michigan and Blue Care Network are nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association.



Building Healthy Communities: Elementary School Program

- Building Healthy Communities: Elementary School Program
 - Focused on six key components
 1. Principal engagement
 2. Classroom education
 3. Quality physical education
 4. Active recess
 5. Student leadership
 6. Healthy kids club (Afterschool program)
- Each school has an initial onboarding professional development



Principal Engagement



- Supports program implementation
- Reads daily morning announcement
- Facilitates newsletter and electronic messaging



Classroom Education



- Teaching classroom healthy eating lessons
 - Taught by coordinator, co-taught, and then teacher led
- Physical activity break resources
- Classroom newsletter messaging
- Parent handouts
- Recommendations for healthy classroom transformation
 - Policy changes surrounding food and not using PA as punishment

Quality Physical Education



- EPEC curriculum
 - The Exemplary Physical Education Curriculum™ for K–5
- PE equipment to support the curriculum
- EPEC professional development and training
 - Includes introduction to the boxed curriculum and PE best practices
- On-going support for PE teachers

Active Recess



- PA equipment for recess along with a recess cart
- Training for recess monitors and classroom teachers
- Indoor recess training



Student Leadership



- Fuel Up to Play 60
 - Partner with UDIM (United Dairy Industry of Michigan)
 - Schools have the opportunity to win an additional \$4000 in grant money
 - Encouraged to complete all six steps
 - Required to fulfill two “plays” during the grant period (one PA and one HE)
 - Student leadership team is formed and the BHC coordinator checks in with the Student Leadership team leader

Healthy Kids Club



- After-school Club

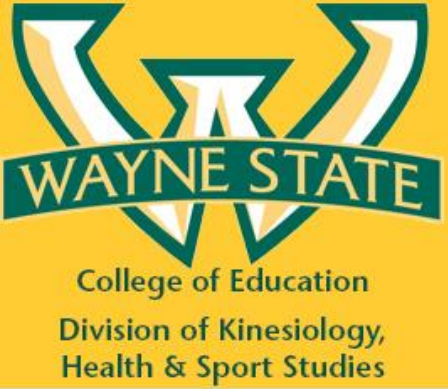
- Designed to be a free opportunity for physical activity
- Healthy snack is provided
- Students participant in a walking/running club for 20 minutes
- 20 minutes of fun, non-sport, games provided by the club leader



RESEARCH FINDINGS FROM THE BUILDING HEALTHY COMMUNITIES – ELEMENTARY SCHOOL PROGRAM



-  Increased physical activity
-  Increased healthy eating behaviors
-  Increased physical activity levels led to higher math scores
-  Higher level of implementation led to higher reading scores
-  Decreased obesity
-  Support of the school principal matters in overall school change



Building Healthy Communities: Elementary School Program Research Results

Centeio, E.E., McCaughtry, N., Gutuskey, L., Garn, A., Shen, B., Martin, J., & Kulik, N. (2014). ***Comprehensive School Physical Activity Programs in Urban Elementary Schools.*** Journal of Teaching in Physical Education, 33, 573-591.

- **PURPOSE:** This study explored overall changes in student, educator, and parent physical activity after an 8-month CSPAP-based program.

Participants

- Six urban elementary schools
 - Students: 301 fourth graders ($M_{age} = 9.39$; $SD = .44$; Girls = 57%; African American (53%), Caucasian (23%), Other (20%), Hispanic (2%), Asian/Pacific Islander (1%), and American Indian (1%))
 - Guardians: 109 completed Pre/Post surveys ($M_{age} = 36.38$; $SD = 6.04$; 91 mothers, 17 fathers, and 1 male guardian; 53% African American, 29% Caucasian, 1% Hispanic, and 17% Other)
 - Educators: 22 4th grade teachers ($M_{experience} = 10.8$ years, $SD = 8.64$) and 12 administrators ($M_{experience} = 1.76$ years, $SD = 2.89$)

Building Healthy Communities: Elementary School Program Research Results

Participants were engaged in the BHC program in their school for 8 months

Measures

- Students
 - Self-reported age, gender, race/ethnicity
 - Physical activity measured in steps by accelerometers (Actigraph GT3X+)
- Adults
 - Self Reported PA data with the short version IPAQ (International Physical Activity Questionnaire)
 - (Craig et al., 2003; Lee, Macfarlane, Lam, & Stewart, 2011)





Building Healthy Communities: Elementary School Program Research Results

Results

- **Student** In-School MVPA increased by an average of 4.5 minutes per day
 - Pillai's Trace, $F(1,308) = 100.09$, $P < .001$, $\eta^2 = .25$
 - 4.5 minutes a day is equivalent to 22.5 additional minutes of MVPA per week
 - Over one school year this totals 810 minutes of MVPA, 27 separate bouts of 30 minutes of MVPA or an extra 54 PE classes.
- **Parent** physical activity (reported in MET-minutes)
 - Increase in MET-min of PA reported from pre to post
 - Pillai's Trace, $F(1,115) = 13.39$, $P < .001$, $\eta^2 = .10$; $M_{pre} = 10,402$ MET-min, $M_{post} = 18,181$ MET-min
- **Educator** physical activity (reported in MET-minutes)
 - No significant change in physical activity



Building Healthy Communities: Elementary School Program Research Results

Centeio, E.E., Somers, C., Moore, E.W., Kulik, N., Garn, A., Shen, B., Martin, J., Fahlman, M., & McCaughtry, N. (under review). *The relationship between academic achievement and healthy school transformations in urban elementary schools*. Research Quarterly for Exercise & Sport

- **PURPOSE:** This study examined the relationships between physical activity, fruit and vegetable consumption, obesity level, and academic rate of improvement in math computation and reading comprehension

Participants

- Four urban schools
- 378 fourth graders ($M_{\text{age}} = 9.04$; $SD = .74$; Girls = 44.6%)
- African American (45.7%), Caucasian (26.1%), Multi-Racial (15.1%), Other (8.2%), Arab American (3.4%), Hispanic (1%), and Asian (.5%)

Building Healthy Communities: Elementary School Program Research Results

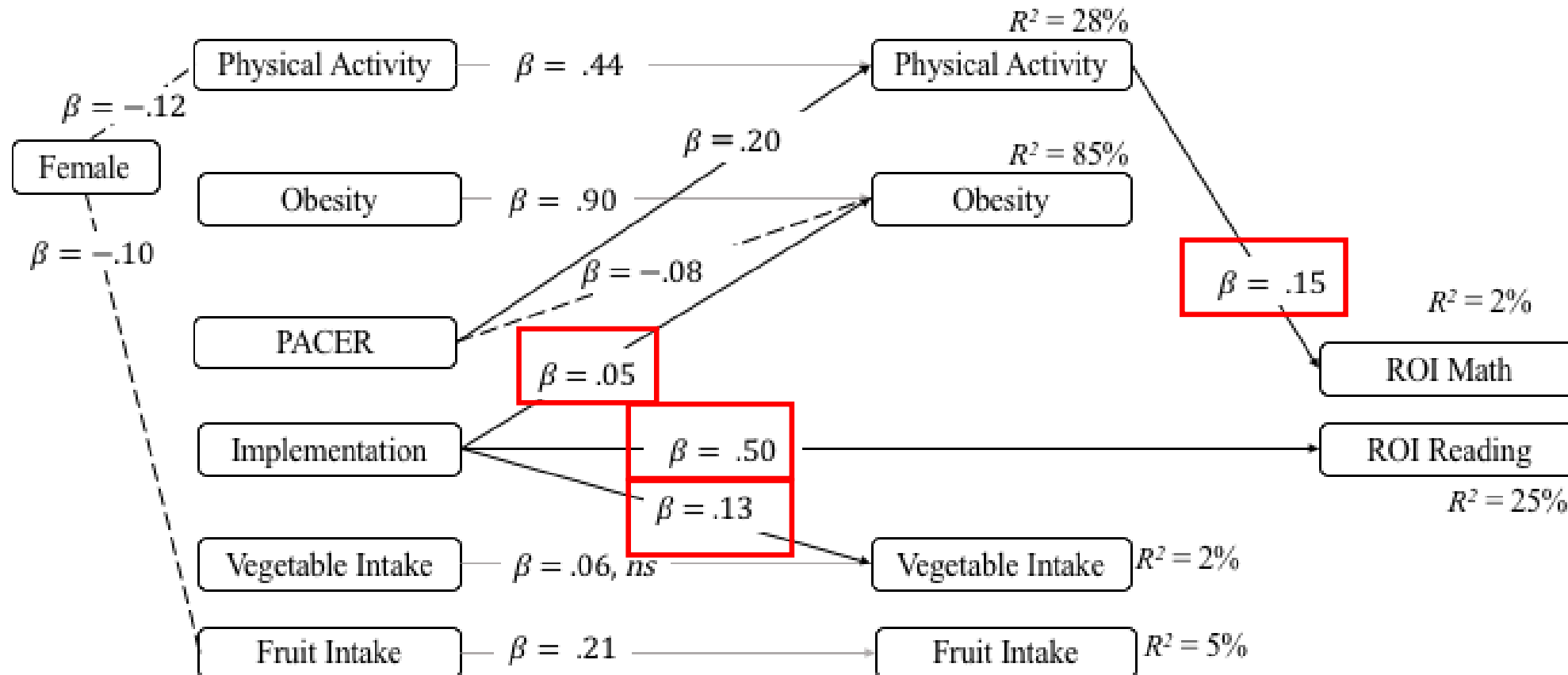
Participants were engaged in the BHC program in their school for 8 months

Measures

- Self-reported age, gender, race/ethnicity
- Weight, height, waist circumference
- Physical activity measured in steps by accelerometers (Actigraph GT3X+)
- Aerobic fitness (PACER)
- Fruit and vegetable intake (SPAN)
- Academic achievement
 - Math – AIMSweb
 - Reading – DIBELS
- Program implementation



Building Healthy Communities: Elementary School Program Research Results



Building Healthy Communities: Elementary School Program Research Results

Centeio, E.E., McCaughy, N., Moore, E.W., Garn, A., Fahlman, M., Martin, J., & Kulik, N. (2017). ***Building Healthy Communities: A Comprehensive School Health Program to Prevent Chronic Disease***. To be presented at ASCM Annual meeting, Denver, CO.

PURPOSE: This study examined the impact of a school-wide nutrition and PA intervention on 5th graders' central adiposity as a primary predictor of chronic disease.

Participants

- Six Metro Detroit schools (4 treatment and 2 control)
- 628 (377 treatment, 251 control) 5th graders





Building Healthy Communities: Elementary School Program Research Results

Participants took part in the 6 component BHC program in their school for 8 months while the control schools did not participate in any new PA or nutrition programming

Measures

- Self-reported age, gender, race/ethnicity
- Body Mass Index
- Waist to Height Ratio
 - Better early predictor of central adiposity and chronic disease

Data Analysis

- ANCOVA – to control for T1 differences between treatment and control groups

Building Healthy Communities: Elementary School Program Research Results

Results

- ANCOVA
 - Controlled for age, gender, and race
 - Significant difference in Waist to Height ratio and among treatment and control groups at time two $F_{MI}(24.61, 63.08) = 4.59, p < .001, R^2_{Treatment} = 0.01$
 - Significant difference in BMI among treatment and control groups at time two ($M_{diff} = -0.23, 95\%CI$ upper boundary: -0.03)
 - There were no significant differences in T2 WHtR or BMI based on:
 - Age $F_{MI}(0.02, 63.08) = 0.44, p > .05$
 - Gender $F_{MI}(0.03, 63.08) = 0.001, p > .05$
 - Race $F_{MI}(0.15, 63.08) = 0.02, p > .05$
 - A total of 64% of T2 WHtR variance was accounted for by this model

Building Healthy Communities: Elementary School Program Research Results

Conclusions

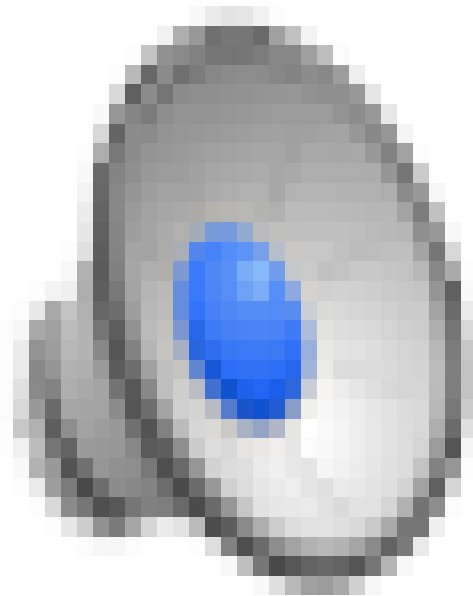
- The BHC healthy school intervention led to significant differences in central adiposity and BMI levels among 5th grade students, regardless of age, gender, or race
- This supports the ability of schoolwide programs to significantly and positively impact student health and chronic disease prevention





College of Education

Division of Kinesiology,
Health & Sport Studies



Rethinking Physical Activity Across the school day

What does it look like and
what is your role?

Quality Physical Education

- Hold Physical Education Teachers accountable
 - 50% of time in PE should be Moderate-Vigorous in Nature
 - National and State Standards should be followed
 - Busy-Happy-Good IS NOT BEST
- Create an environment at the school where PE is valued
 - Have policies that don't allow students to get pulled out
 - Cancel PE as least as possible
 - Try to find as much time as possible for students in PE

Physical Activity During School

- Brain Boosters
 - GoNoodle
 - Jammin Minutes
 - HopSports
- Active Recess
 - Provide a recess cart
 - Equipment bags
 - Buckets for stations
 - Painted playgrounds
- Drop in PA Opportunities



Physical Activity During School

- Active learning
 - Needs to be planned by teachers
- Classroom “tools” to encourage movement
 - Standing desks
 - Stability balls
 - PVC Pipe



Physical Activity Before and After School

- Contribute to total PA
- On school campuses, prior to or after the daily schedule
- Give a variety of activities to participate in & Make sure it is culturally relevant
 - Not just traditional sports
 - Think outside the box (non-competitive)
 - Yoga
 - Zumba
 - Ultimate Frisbee
 - Team Handball



Physical Activity Before and After School

- Walk & Bike to school
 - Walking school bus
 - School marketing
- Start of the day movement
 - During announcements
 - Assemblies
- Open gym time
- Zero hour PE
- Intramural and PA clubs
- Interscholastic sports



Family and Community Engagement

- Get students and families active together!
 - Family fitness nights
 - Fun Runs (Color Runs, Turkey Trot, etc)
- Involve the community
 - Local YMCA's and fitness centers
 - Corporate sponsors or joint activities

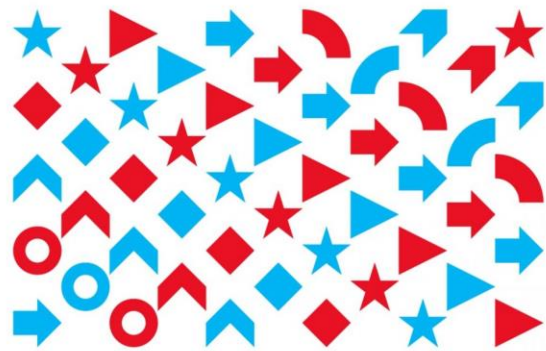


Staff Involvement

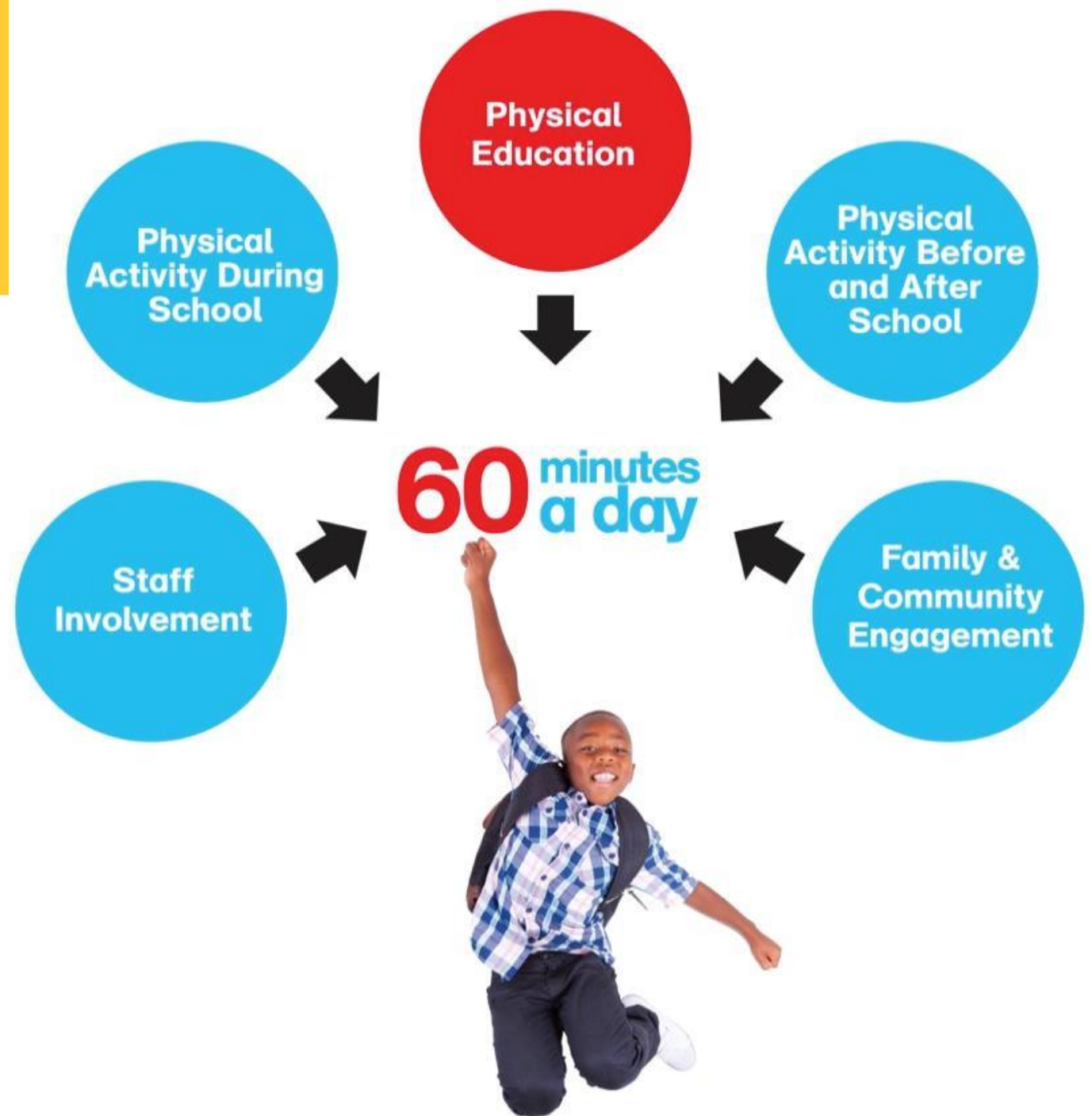
- Before school PA
- Faculty challenges
- Community events
- Being active with students
- Walking meetings/lunch



Carousel Activity



Let's Move. Active Schools

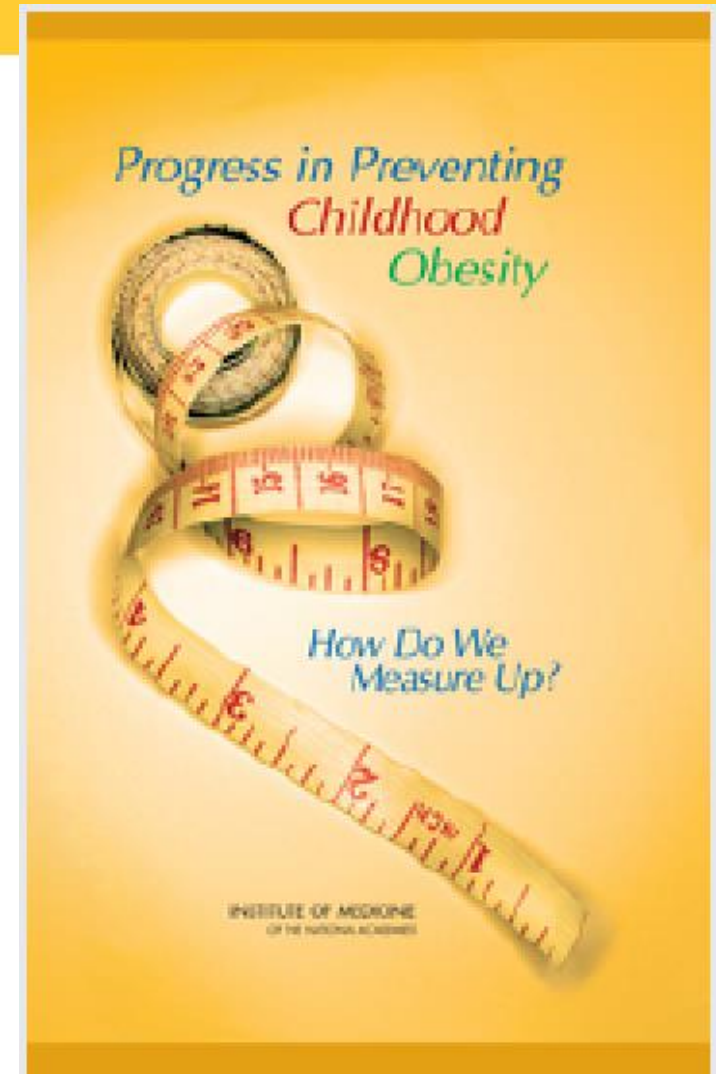


What is recommended from the National Academies?

- Working together as a WHOLE community
 - California Medical Association (CMA) Foundation
 - Physicians for healthy communities initiative (2005)
 - Coordinates HE and PA programs in schools and community organizations
 - California Nutrition Network for Healthy and Active Families
 - Trained 250 physician champions to become educators and advocates in schools and communities
 - Tools have been created to help physicians help with obesity prevention of youth
 - CIGNA, AHIP, BCBS, Kaiser all have their own funding that is dedicated to the prevention of childhood obesity and many of these resources could be used in schools
 - Advocating for BUILT environment
 - Safe access to PA
 - Stigma of schools vs. credentials of medical professionals

What is recommended from the National Academies?

This Free PDF is available at
<http://nap.edu/11722>

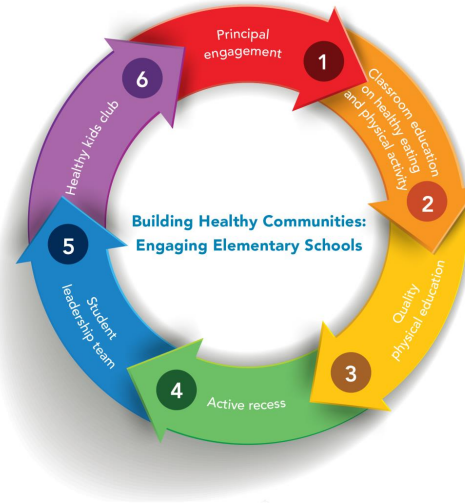


How can YOU make an impact in your area?!

- Policy, Policy, Policy
 - Be an advocate
- Know the right language
 - Talk in relation to your stakeholders or target audience
- Volunteer time
- Reach out!
- Local Examples
 - Walk with a Doc <http://walkwithadoc.org/>
 - Brilliant Detroit partnership
 - Bringing services to the community

Grants & Funding

- Building Healthy Communities
 - Elementary School Program
 - Valued at \$6000
 - Six component model
 - Step Up for School Wellness
 - Each component valued at \$1000 per award
 - One or more components



Grants & Funding

- Project Healthy Schools (Middle School Program)
 - Eat more fruits and vegetables
 - Choose less sugary food and beverages
 - Eat less fast and fatty foods
 - Be active every day
 - Spend less time in front of a screen



Grants & Funding

- Elementary and Secondary Education Act (ESEA)
 - Newly authorized under Title IV Part A
 - Part 4107 -- Provide all students with access to a well-rounded education (including Health and Physical Education)
 - Part 4108 – Implementing programs that support a healthy, active lifestyle (nutritional and physical education)
 - Schools will be able to apply for funding from the MDE (applications open in January)
 - Comprehensive needs assessment of your school environment – including health and physical activity

What are you currently doing and what could you see adopting?



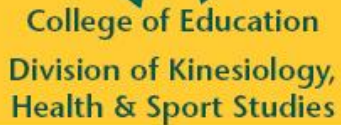
Think



Pair



Share



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