A School District (DC) – University (AU) Collaboration to Address Childhood Obesity

American Public Health Association
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School of Education, Teaching & Health &
DC Office of the State Superintendent of Education
Overview

• Community-based Participatory Research
• American University’s mission
• The DC Community
• Healthy Schools Act 2010
• The School Health Environment and its relationship to academic achievement
• Power of partnerships
Community-based Participatory Research (CBPR)

- CBPR is an **applied collaborative approach** that enables community residents to more actively participate in the full spectrum of research.
- Community members and researchers partner to combine knowledge and action for **social change** to improve community health and often reduce health and education disparities.
- Academic/research and community partners work to develop models and approaches to building communication, trust, and capacity with the final goal of **increasing community participation** in the research process.

DC HSA Evaluation; Snelling, Belson, Malloy, Van Dyke, & Watts; 2014
American University

- AU is a Private, co-educational research university founded in 1893 of about 14,000 Students, 825 Full-time Faculty, with 61 Bachelor’s, 54 Master’s, 11 Doctoral Programs
- SETH is committed to advancing theory and professional practice, recognizing the significance of education and health in contemporary life, the potential of each individual, and our special responsibilities to produce educators and health promotion professionals for the twenty-first century.
American University and DC

A special commitment to DC Schools
83,000 students
Schools as natural settings
Policy often “leapfrogs” over research – evaluation is rarely empirical.
DC is a leader in passing the DC Healthy Schools Act.
Full implementation and empirical analysis will allow the Act to reach its intended results to reduce childhood obesity, thereby improving students’ health status and allowing them to achieve academic success.
DC’s Families

• Living in poverty has a negative effect on academic performance (Kozol, 1991, Delpit, 2001)
• 35.4% of school age children in DC are overweight/obese.
• 30% of DC children receive the majority of their meals at school.
Office of the State Superintendent of Education (OSSE)

- OSSE is charged with raising the quality of education for all DC residents & serves as the District’s liaison to the U.S. Depart of Education and works closely with the District’s traditional and public charter schools.

- In 2010, DC Council enacted the Healthy Schools Act and charged OSSE with implementation and monitoring of the school health environment.
<table>
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<tr>
<th>District of Columbia Healthy Schools Act</th>
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<td><strong>School Nutrition, Physical, and Health Education</strong></td>
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<td>• Encourage schools to serve a vegetarian option each week</td>
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<td>• Require schools to serve:</td>
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<td>• a different vegetable and fruit daily, serve 1% milk</td>
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<td>• Require students in grades K-5 to have at least 150 minutes per week of physical education</td>
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<td>• Require students in grades 6-8 to have at least 225 minutes per week of physical education</td>
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<td><strong>Farm-to-School Program</strong></td>
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<td>• Encourage a preference for unprocessed foods grown in DC, Delaware, Maryland, North Carolina, New Jersey, Pennsylvania, Virginia, and West Virginia</td>
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<td>• Provide grants to establish school garden programs</td>
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<td><strong>Wellness Policy and Health Profiles</strong></td>
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<td>• Require schools to annually assess and report on student achievement according to health and physical education standards</td>
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<td>• Require schools to develop a school health environment profile detailing health, nutrition, physical education programs and wellness policies</td>
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School Health Profile

- Due annually to OSSE by February
- A reporting requirement by HSA
- Self-report instrument
- Completed by a principal or someone designated at the school
- School-level data
- Completed online

DC HSA Evaluation; Snelling, Belson, Malloy, Van Dyke, & Watts; 2014
Health Compliance and Environment Scores

HSA Compliance Score
• 28 questions from the school health profile
• Maximum points of 38 points
• Most questions are yes (1) or no (0); 4 questions are on a sliding scale
• Reflects the provisions within the HSA

School Health Environment Score
• 42 questions from the school health profile
• Maximum points of 53
• Most questions are yes (1) or no (0); 6 questions are on a sliding scale
• Reflects the overall school health environment

DC HSA Evaluation; Snelling, Belson, Malloy, Van Dyke, & Watts: 2014
## Compliance Score Ranges

<table>
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<th>Percentile</th>
<th>Elementary School Compliance Score</th>
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<tr>
<td>Bottom 25%</td>
<td>&lt;19.62</td>
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<tr>
<td>Middle 50%</td>
<td>19.62-23.36</td>
</tr>
<tr>
<td>Top 25%</td>
<td>&gt;23.36</td>
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2014 Elementary Schools CAS Math Scores grouped by HSA Compliance Score
Elementary Schools

2014 HSA Compliance Score

Regression Line
2014 Elementary Schools CAS Reading Scores grouped by HSA Compliance Score
3rd Grade DC CAS Math & Minutes of PE

CAS Math Score vs. 3rd Grade PE Minutes (Fitted Regression lines included)
3rd Grade DC CAS Reading & Minutes of PE

CAS Reading Score vs. 3rd Grade PE Minutes (Fitted Regression lines included)
A Community Working Together: DC Healthy Schools Act

• For the past three years, AU has brought together stakeholders from across the District School system at the annual Healthy Schools Act Conference.
In the words of Henry Cisneros, former U.S. Department of Housing and Urban Design secretary:

“The long-term futures of both the city and the university in this country are so intertwined that one cannot—or perhaps will not—survive without the other.”
Thanks!

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Malloy, Van Dyke, & Watts: 2014