

Title:

SNACK: A Collaborative Approach to Improve Children's Fitness and Nutrition

Tracy J. Perron, PhD, RN, CNE, CSN

Department of Nursing, The College of New Jersey, Ewing, NJ, USA

Session Title:

Smart Nutrition and Conditioning for Kids (SNACK): A Collaborative Approach to Combating Childhood Obesity

Slot:

D 03: Sunday, 29 October 2017: 2:45 PM-4:00 PM

Scheduled Time:

2:45 PM

Keywords:

Collaboration, Nutrition and Obesity

References:

ASCD, Centers for Disease Control and Prevention (CDC) (2012). *Whole school, whole*

community, whole child: A collaborative approach to learning and health. Alexandria, VA:

ASCD.

Institute of Medicine (2012). *Accelerating progress in obesity prevention: Solving the weight of*

the nation. Washington, DC: The National Academies Press.

Interprofessional Education Collaborative Expert Panel (IPEC) (2011). *Core competencies for*

interprofessional collaborative practice: Report of an expert panel. Washington

DC: Interprofessional Education Collaborative.

New Jersey Student Learning Standards. (Accessed August 24, 2016). Retrieved from New

Jersey Student Learning Standards <http://www.state.nj.us/education/cccs/>.

Robinson L.E., Stodden D.F., Barnett L.M., Lopes V. P. Logan, S.W., Rodrigues, L.P. &

D'Hondt, E. (2015). Motor competence and its effect on positive developmental

trajectories of health. *Sports Med Sports Medicine*. 45(9), 1273-1284.

doi:10.1007/s40279-015-0351-6.

Rodrigues L.P., Stodden D.F., & Lopes V.P. (2016). Developmental pathways of change in

fitness and motor competence are related to overweight and obesity status at the end of

primary school. *Journal of Science and Medicine in Sport*. 19(1):87-92.

doi:10.1016/j.jsams.2015.01.002.

Wright K, Norris K, Giger J.N., & Suro Z. (2012). Improving healthy dietary behaviors, nutrition knowledge, and self-efficacy among underserved school children with parent and community involvement. *Childhood Obesity* 8(4):347-356. doi:10.1089/chi.2012.0045.

Abstract Summary:

A collaborative approach to improve children's fitness and nutrition, SNACK was developed to combat childhood obesity and type 2 diabetes in 2 urban elementary schools where the childhood obesity rate is 49%. Maximizing a coordinated school health approach increases the positive results on students, schools and communities.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
The learner will be able to evaluate local, regional and national trends influencing the risk for childhood obesity.	Evaluate New Jersey childhood obesity demographics as compared to the rest of the United States. Describe the social determinants of health in elementary school age children within an urban community.
Incorporate experience and knowledge of other professions to develop community values and priorities related to health and fitness	Explain how interprofessional collaboration is effective in the assessment, planning and provision of care to improve health outcomes in children.
Develop positive outcomes relevant to prevention and healthcare through collaboration with other professions.	Review communication strategies for effective teamwork.

Abstract Text:

The SNACK program, a coordinated school health program, was developed to increase the fitness and health of elementary school aged children and to encourage parents and teachers to foster healthy food choices. A coordinated school health program incorporating an interprofessional model is desirable to adequately address health and wellness of children. The SNACK program was developed in response to the 2010 Childhood Obesity Study recognizing a 49 percent childhood obesity rate in Trenton New Jersey public schools. Nationally, if incidence rates remain constant, a projection of the number of youths diagnosed with Type 2 diabetes mellitus will increase by 49 percent by 2050. An interprofessional collaborative model (IPC) along with the Coordinated School Health Program provided guidelines for establishing a diverse multidisciplinary group including nurses, classroom and physical education teachers, administrators, college faculty and nursing, health and exercise science undergraduate and graduate students to improve the health of urban/urban rim children. SNACK was implemented to reduce the risks for obesity and Type 2 diabetes in school aged children. Reaching children at an early age before lifestyle choices are formed allows the establishment of healthy behaviors to potentially reduce the risk of obesity and Type 2 diabetes. The engagement of parents to encourage healthy food choices and

increase physical activity at home maximized the health benefits to children. The SNACK program collaborative allowed participants the opportunity to share ideas from their discipline with members of the interprofessional team building which positively impacted all participating members. The collaborative developed new and stronger partnerships with urban and urban rim schools. Continued learning, and collaboration with peers was modeled in teams to demonstrate shared competencies in a collaborative practice environment. Integration of multiple disciplines in a coordinated school health program (CSHP) can be implemented to meet the needs of the whole child and maximize the positive effects on student, schools, and communities while integrating cooperation of multiple disciplines.