

Implementation of School-Based Wellness Program for Adolescents in Rural East Tennessee

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BACKGROUND

- In the United States, 1 in 5 children and adolescents are obese. Factors from society have influenced the child/adolescents' ability to make healthy decisions
- Currently, there is no nutritional education courses that target age-specific groups within the school systems.
- It has been shown that access to health care eliminates barriers such as transportation and resolves disparities like obesity
- Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities and historical and contemporary injustices and eliminate health and health care disparities

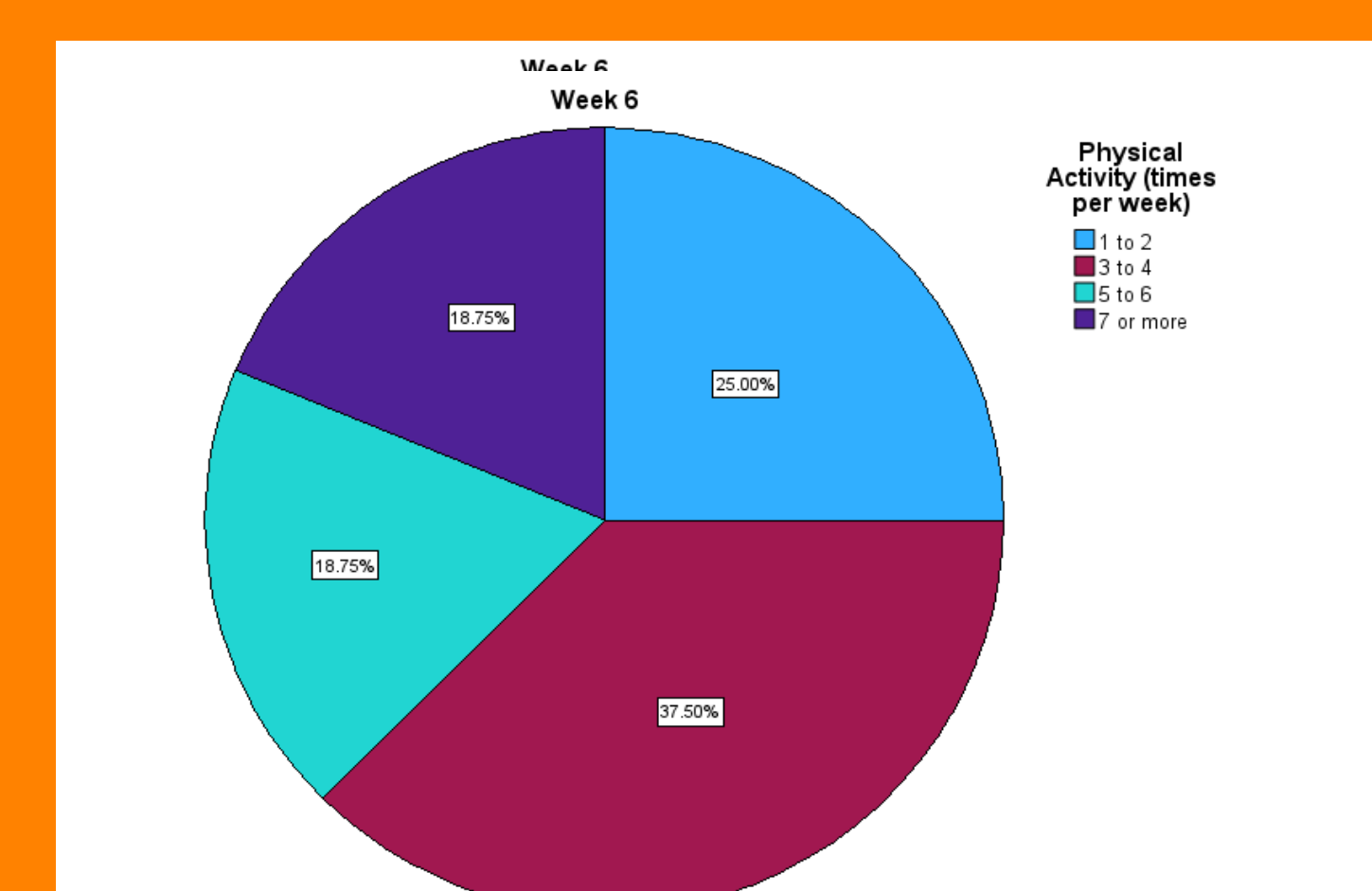
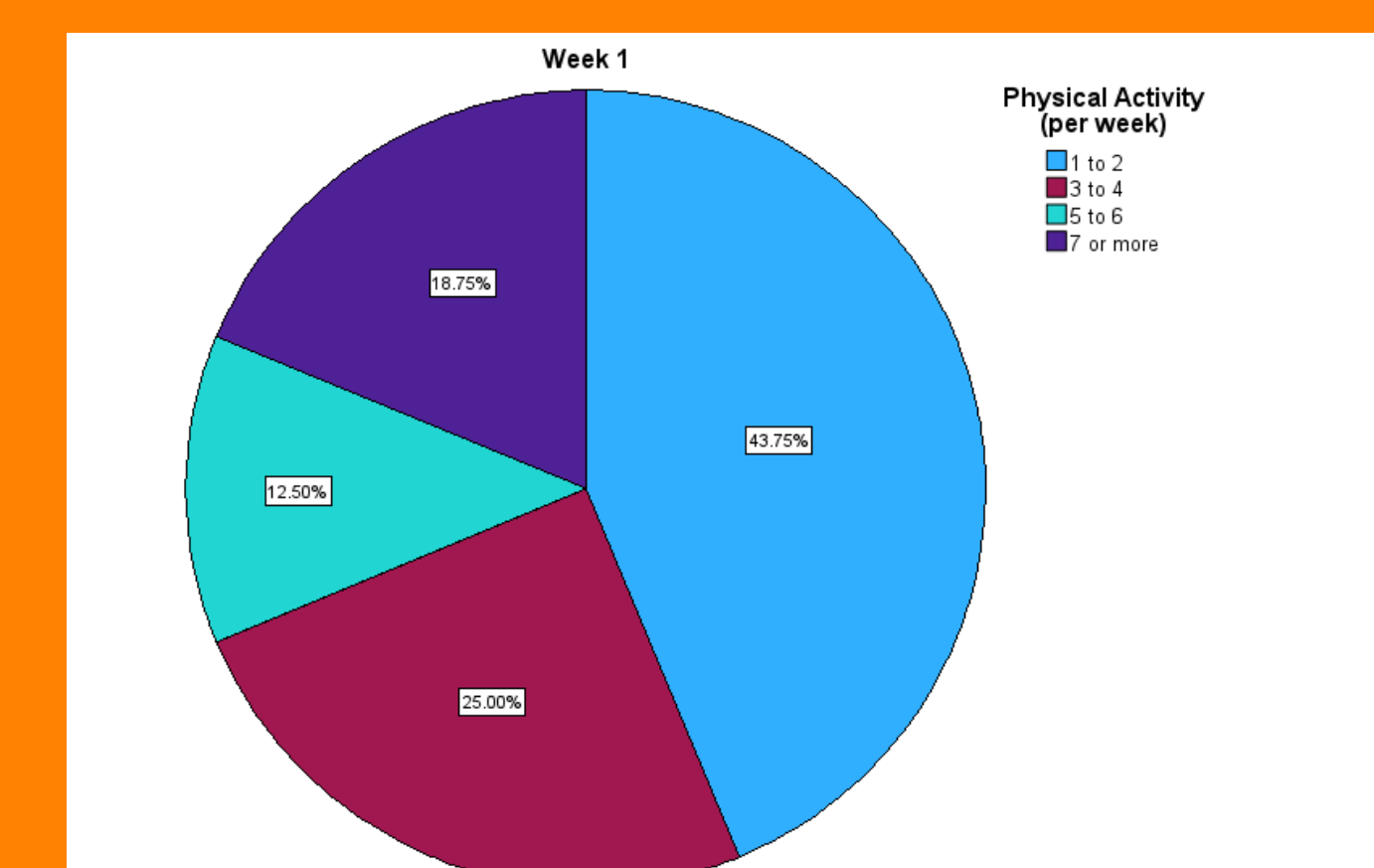
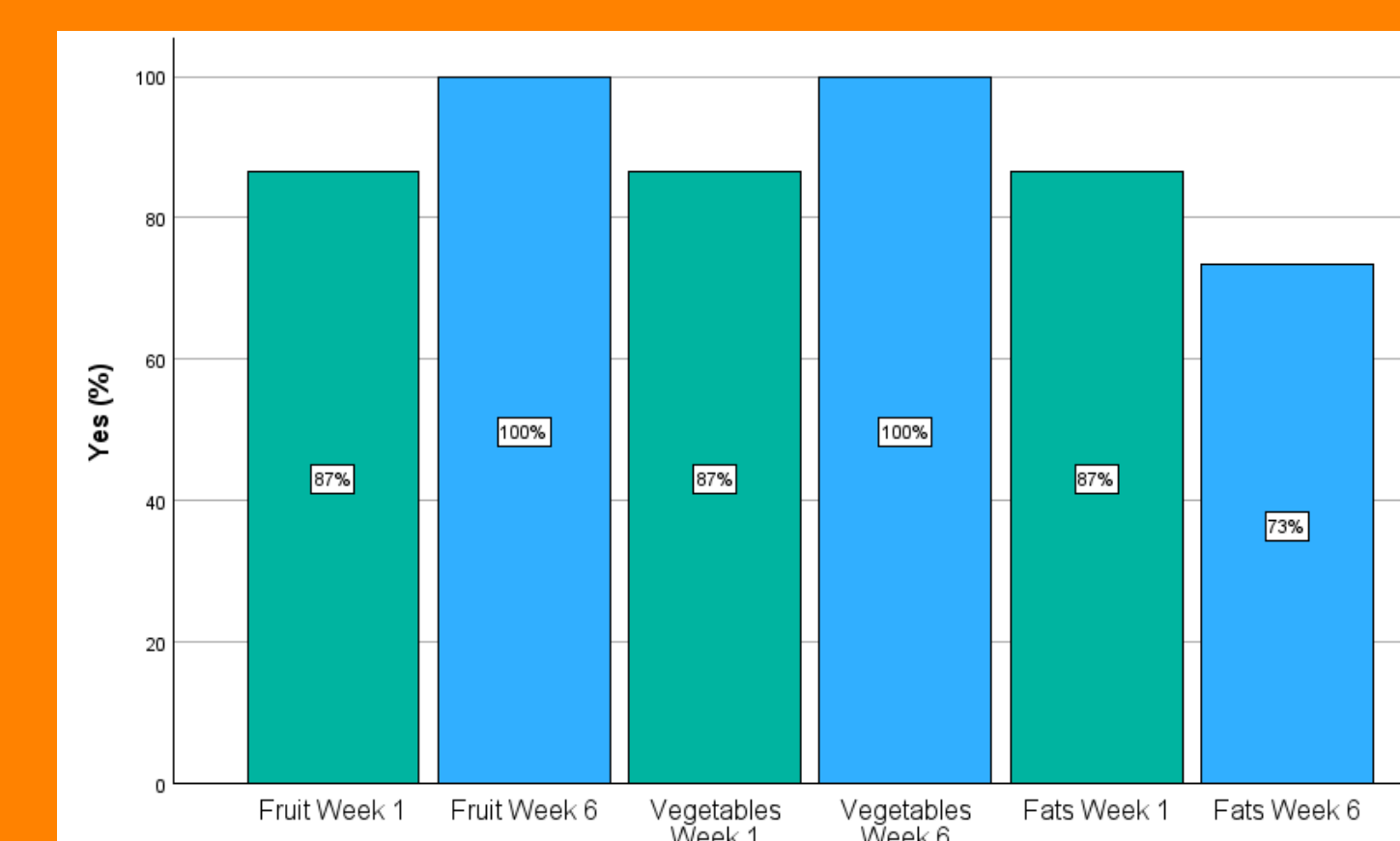
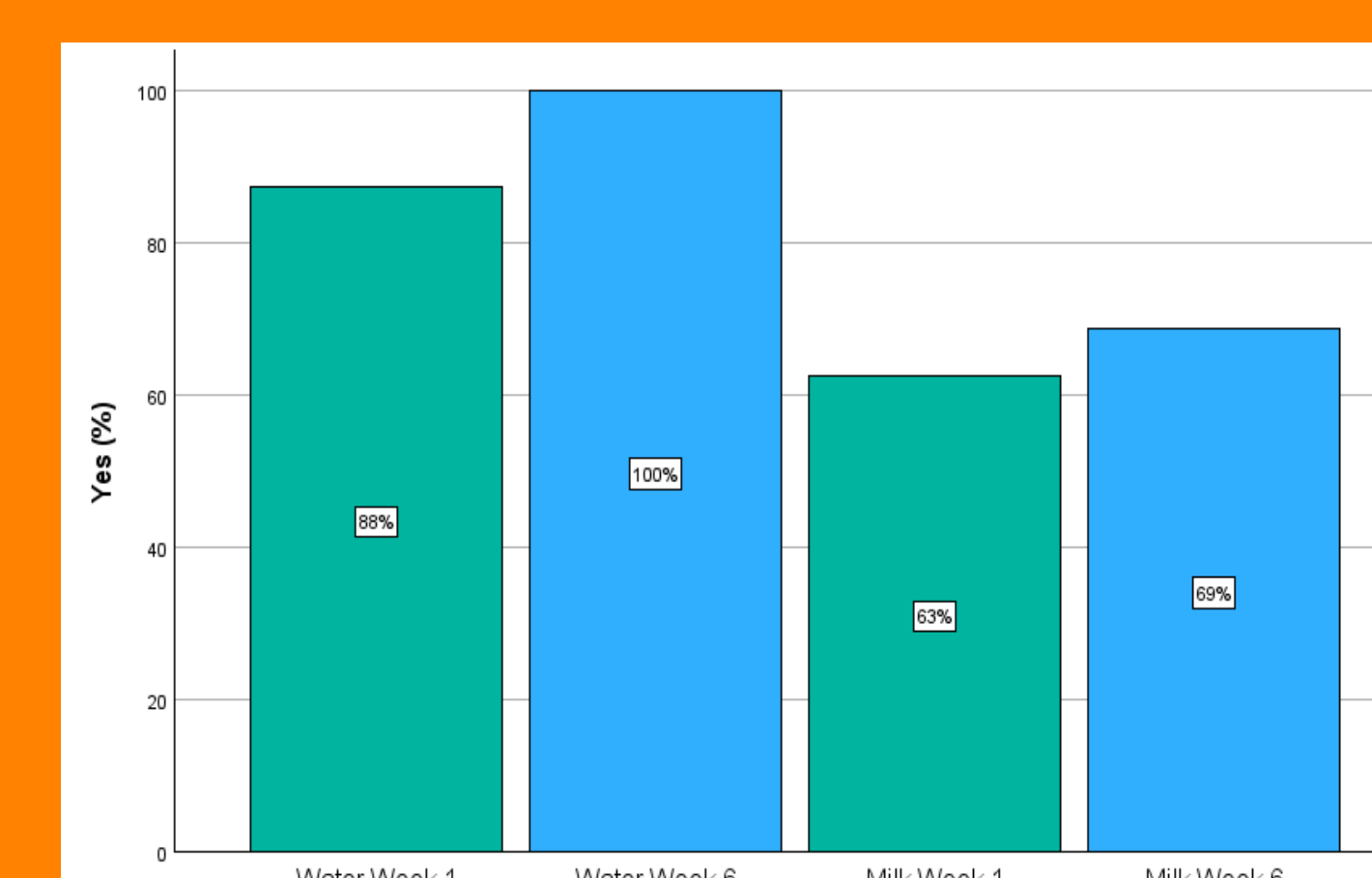
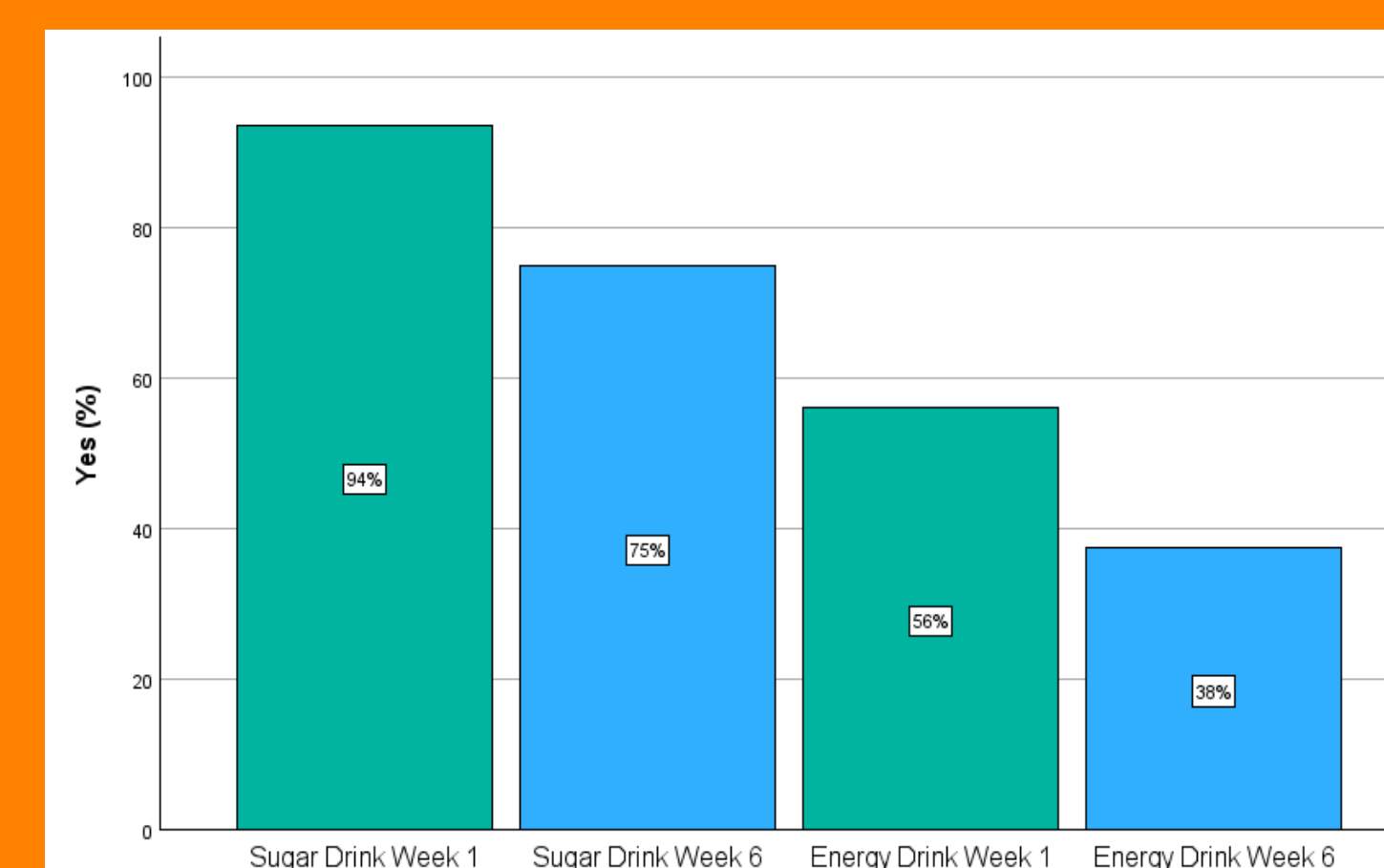
LOCAL PROBLEM

- Claiborne County is a minor healthy county in Tennessee (lowest 0-25%). The county is rated 38% in physical inactivity compared to the rest of the state at 29%
- The Tennessee Department of Education (2021) assessed Tennessee public schools and collected data on the prevalence of obesity and overweight students. The study showed that 17% of students were overweight, while 22.7% were obese.
- Aims of this project included:
 - To decrease the percent of middle-school-aged children in Claiborne County who are obese by 5% within 6 weeks of implementation
 - To create healthy decision-making skills in 20% of middle school-aged adolescents within 6 weeks of implementation

METHODS

- The project followed the guidelines of the John Hopkins Nursing Evidence-Based Practice Model (JHNEBP).
- The nutritional and physical activity questionnaire tool selection using the PDSA (Plan-Do-Study-Act) cycles.
- The participants of the program met every Tuesday for six weeks. At each meeting they were given a nutritional and physical activity questionnaire to assess habits.

Children at risk for obesity
changed their nutritional and
physical activity habits
significantly more after a
school-based wellness
program.



INTERVENTIONS

- Each week a new lesson discussed various aspects of health and wellness. The topics that were discussed were; (1) The Basics of Health and Wellness; (2) The Importance of a Balanced Diet; (3) How Nutrition Affects Cardiovascular Disease (4) The Benefits of Nutrition and Physical Activity on Mental Health; (5) How Nutrition and Physical Activity Supports Immunity and Relaxation; (6) Summary of the Program with Activities
- The children were given questionnaires to fill out at the beginning of each class throughout the six weeks;

RESULTS

- From the first week to the sixth week more kids were physically active three to four times a week (25% on week one, and 37.5% on week six), and five to six weeks (12.5% on week one, and 18.75% on week six).
- 88% of kids were drinking water at week one and by week six 100% were drinking water. 63% of children were drinking milk at week one and by week six 69% were. 94% of children were drinking sugar drinks (juice, tea, and soda), 56% were drinking energy drinks at the first week and by week six 75% were drinking sugar drinks and 38% were drinking energy drinks.
- Lastly, on week one 87% were eating fruits, vegetables, and fats, and by week six 100% were eating fruits and vegetables, while 73% were eating fats.

CONCLUSIONS

- Students who participated in a school-based wellness program showed improvements of both nutritional and physical activity habits
- This can contribute to improving their family's health, and future children and spouse's health. By implementing this program into school systems, over time, we can predict a decrease in obesity and a sedentary lifestyle in the community.



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