

School Nurse-Delivered Intervention for Overweight and Obese Adolescents: Lessons Learned

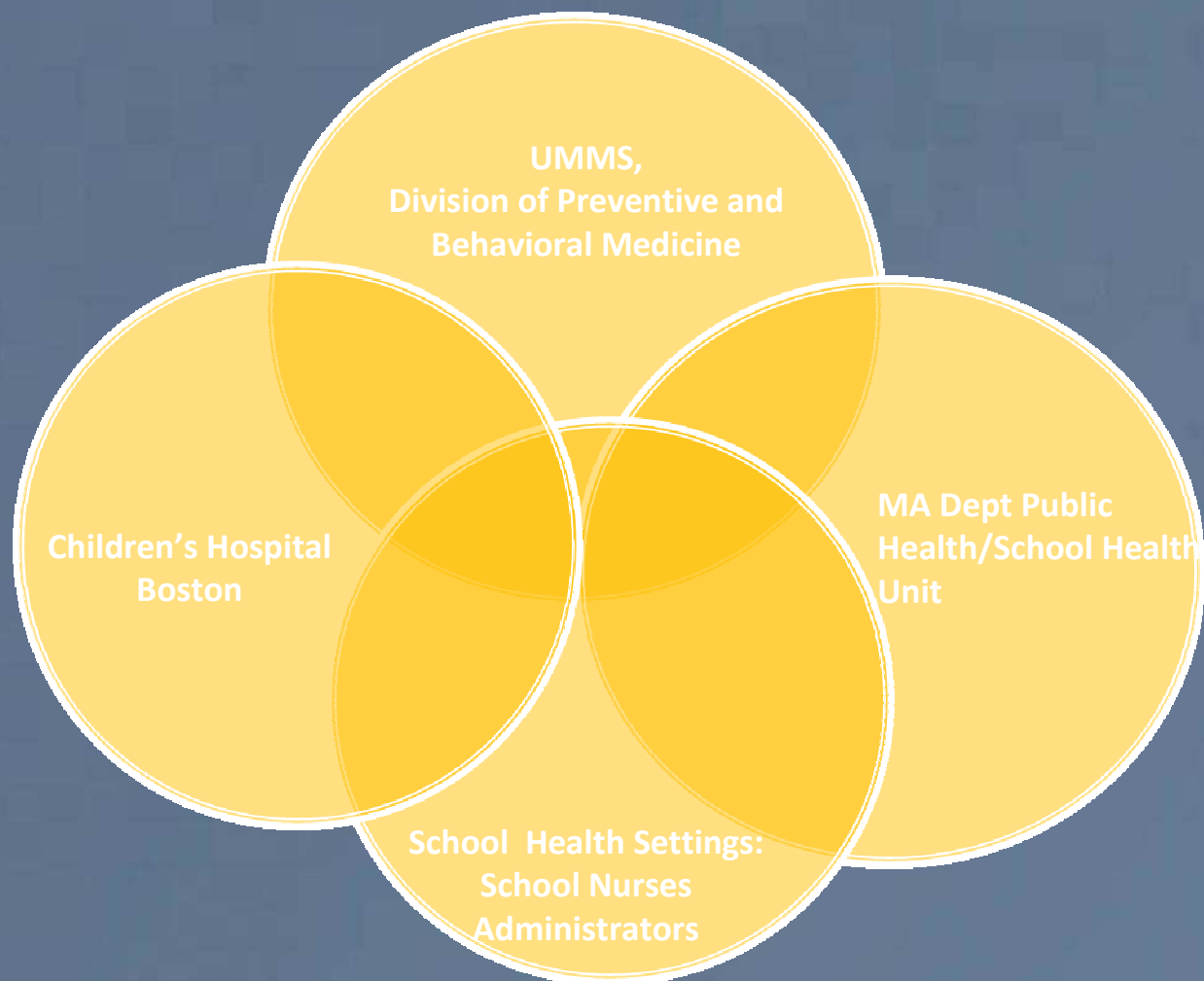
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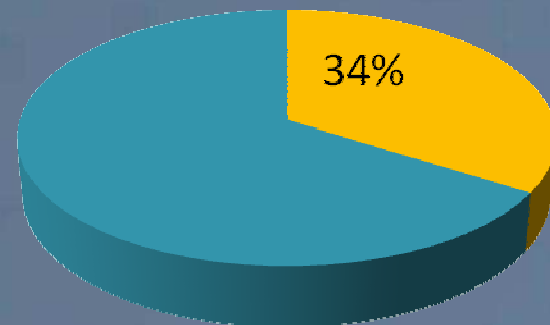
Academic and Community Partnership



Feasible, accessible weight loss treatment approaches for OW/OB adolescents are needed

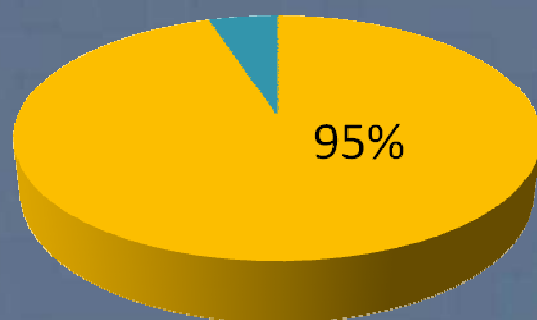
- Systematic review for USPSTF (Whitlock et al, 2010) found moderate/high intensity interventions can ↓ weight, BUT GAPS:
 - targeted younger children
 - conducted in specialty health care settings with limited reach (accessibility, cost) and public health impact

12-19 y.o OW/OB

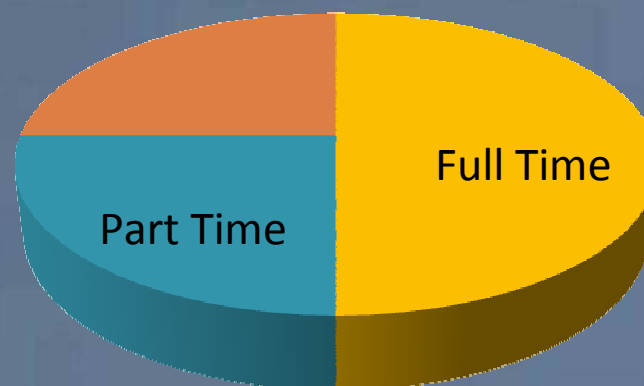


School nurses in the school health setting have tremendous potential for public health impact on adolescent obesity

Adolescents Attending School



School Nurses in HS



- Primary health professional in school setting
- Accessible and continuous care



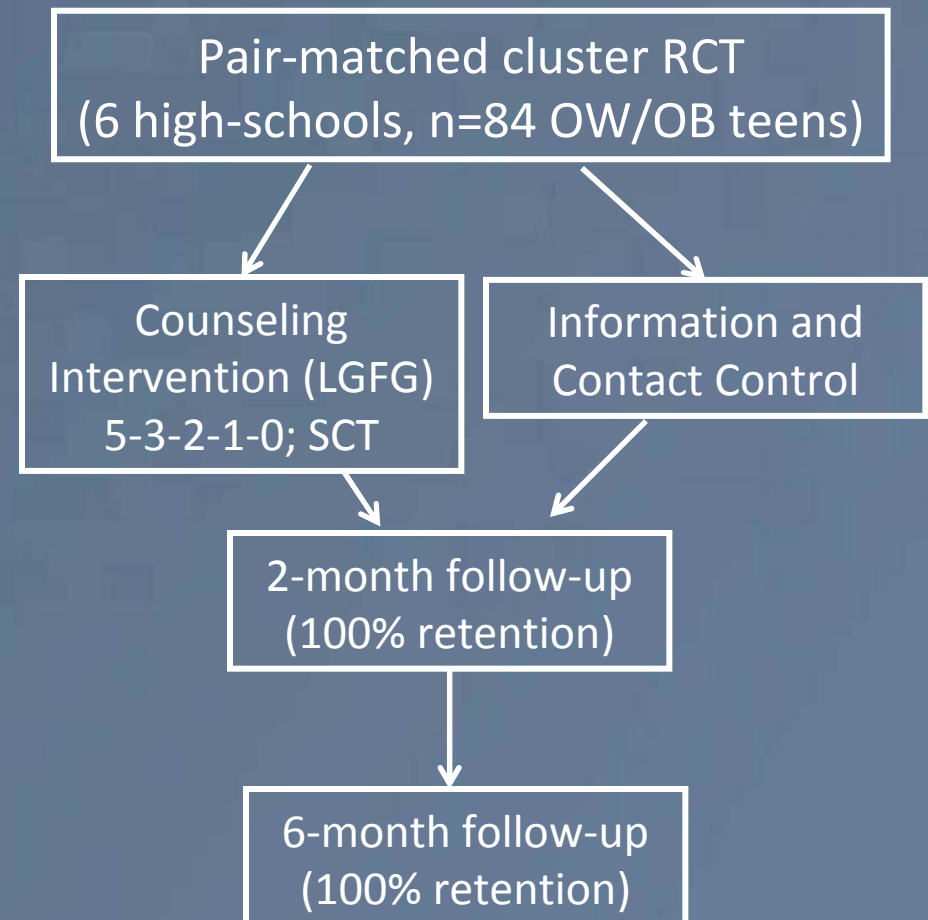
onal organization (NASN) cites role of school nurses to assist regarding diet, physical activity and and provide obesity treatment

Methods to test feasibility of 6-session school nurse-delivered intervention

Achieving a healthy weight: what every teen should know

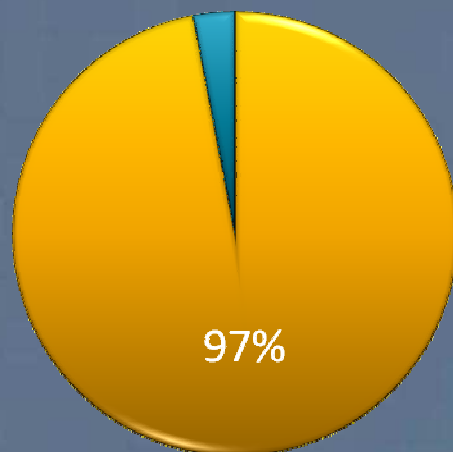


Lookin' good
Feelin' good

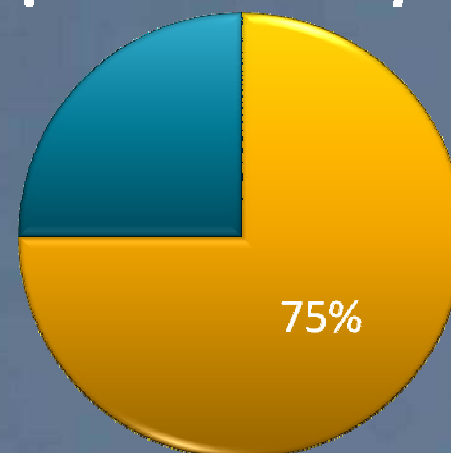


The intervention was feasible for nurses to deliver

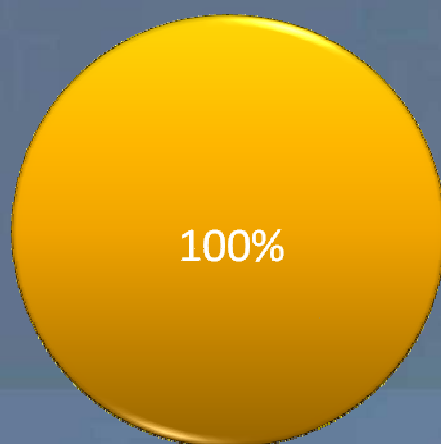
Protocol content covered



Not at all difficult to incorporate into daily work



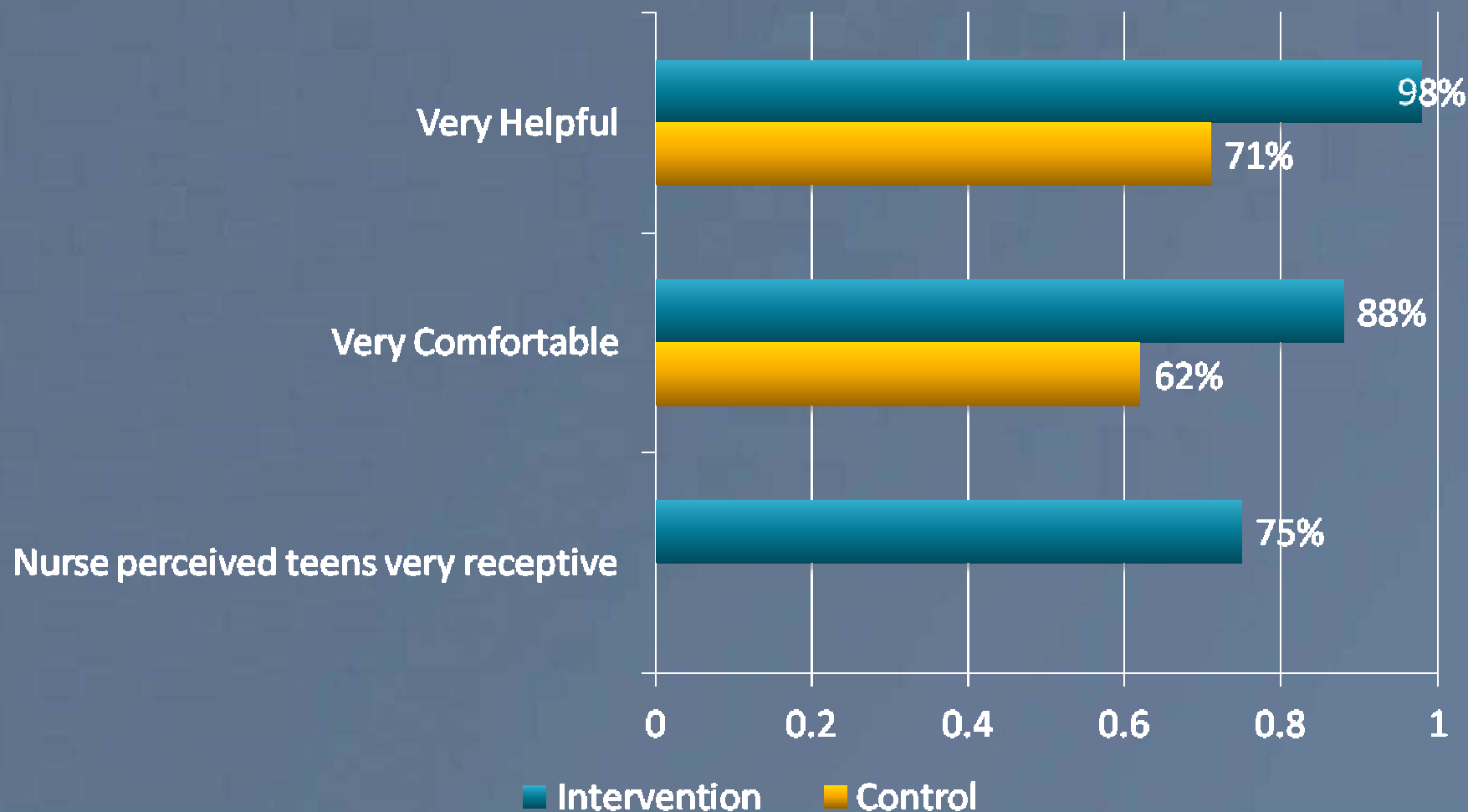
Protocol and materials very helpful



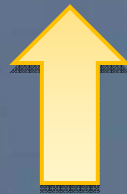
Ability to Counsel



The intervention engaged teens and had high acceptability



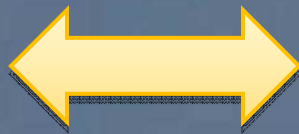
The 6-session intervention improved selected self-reported behaviors but not BMI



Lessons learned.....



Establishing and nurturing personal relationships, trust, and shared goals with community partners is key



- Identified their adolescent health concerns/priorities:
 - ↓ OW/OB among teens
 - Fit their mission and responsibilities
- Engaged administrators to support nurse in this role



Adaptation of intervention to setting and population requires close collaboration and mutual respect of unique contributions

School Health Unit/School nurses

- Experience caring for OW/OB teens
- Understand work flow, feasibility in school setting
- Current practice/style
- Skills and credibility to deliver health-related counseling

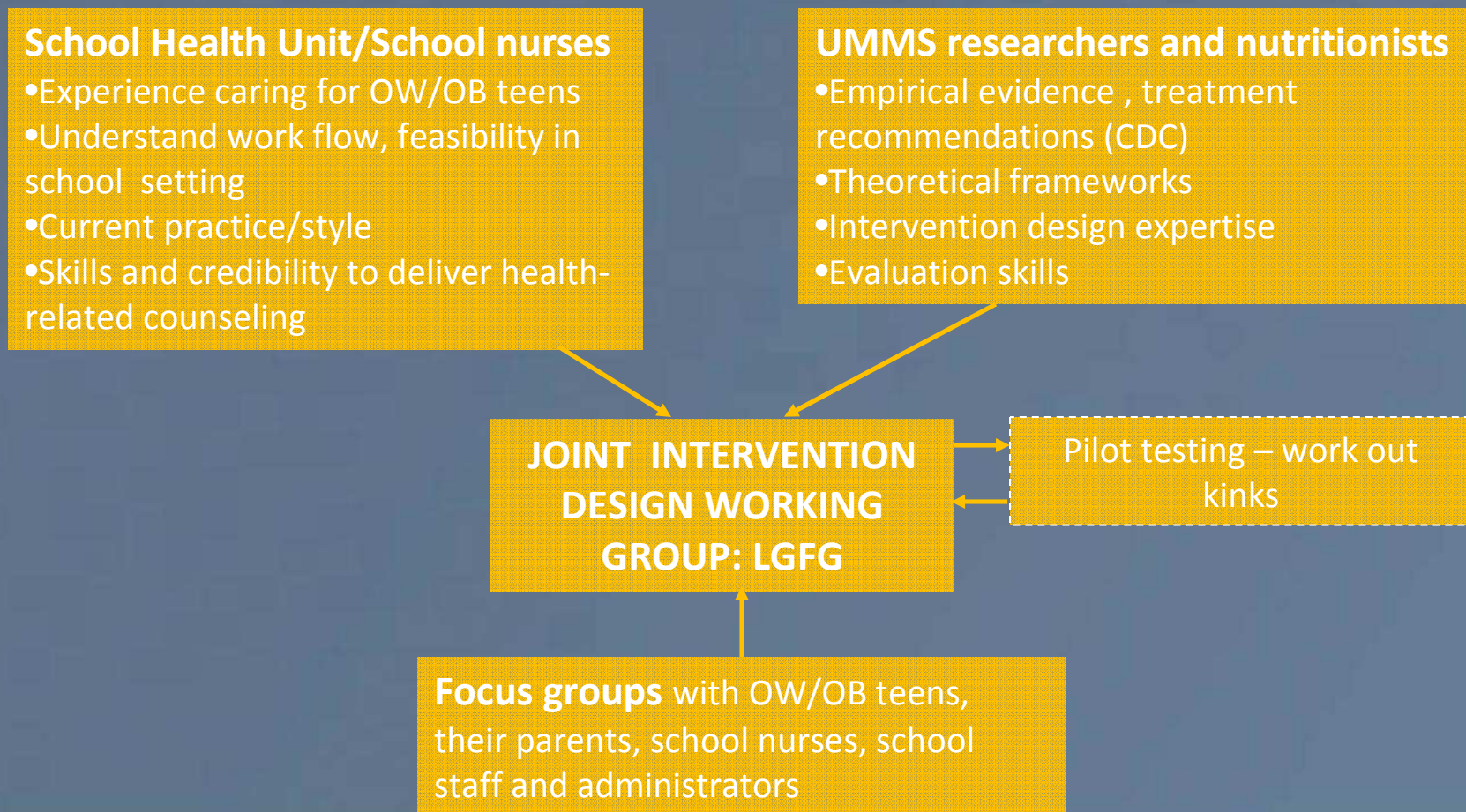
UMMS researchers and nutritionists

- Empirical evidence, treatment recommendations (CDC)
- Theoretical frameworks
- Intervention design expertise
- Evaluation skills

JOINT INTERVENTION DESIGN WORKING GROUP: LGFG

Pilot testing – work out kinks

Focus groups with OW/OB teens, their parents, school nurses, school staff and administrators



Train community interventionists based on core competencies needed; conduct with community partners



Knowledge

- Scope of problem
- Recommendations (diet, PA, SB)
- Theoretical framework, counseling approach

Skills/confidence

- Protocol review and demonstration
- Practice with feedback
- Implementation “tips from the field” (barriers and tested strategies), brainstorm



Motivation

- Compatibility with mission, job responsibilities
- Evidence underlying protocol



Factors facilitating implementation and sustainability occur at multiple levels

School Administration

- Fit mission (education/health of students)
- Did not interfere with academic classes
- See as school nurse role/job

School Nurse

- Compatible with role/mission
- Confident in ability to conduct intervention
- Intervention protocol and materials clear, easy to use (high fidelity)
- Teen comfort/acceptability reinforced delivery

OW/OB Teens

- High acceptability- very comfortable talking with nurse re: weight
- Perceived helpfulness
- Non-interference with academic classes facilitated session adherence
- Easily access nurse without parental involvement, transportation or cost

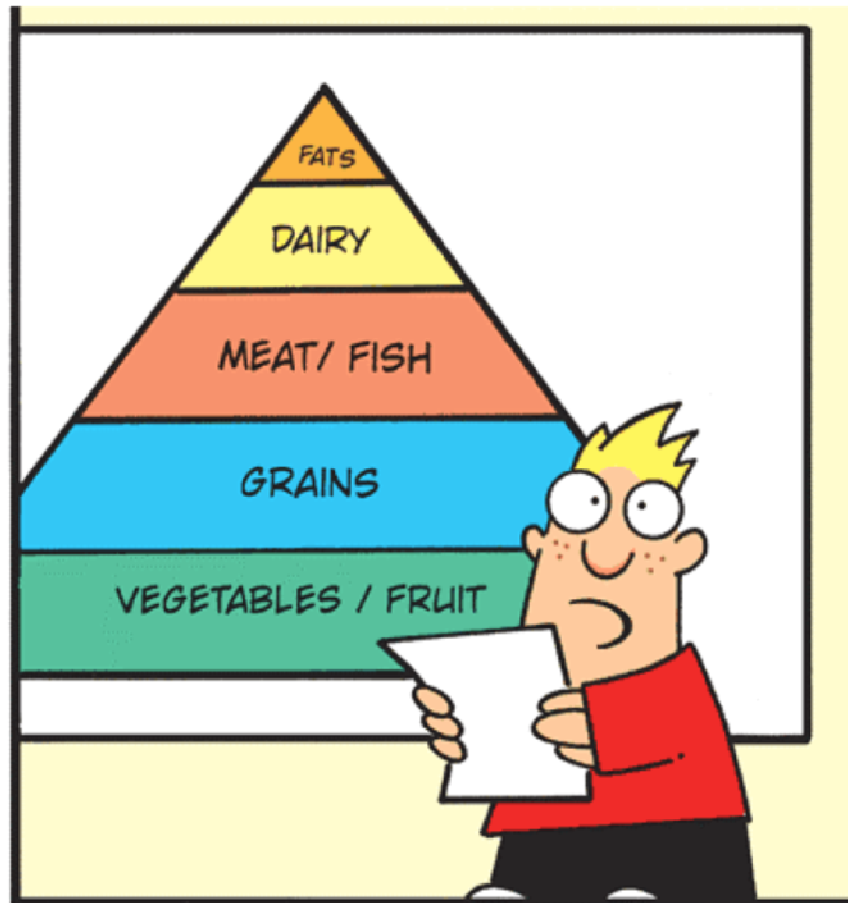
Barriers to implementation and sustainability occur at multiple levels → identify, address and/or study

BARRIER	SOLUTIONS/RESEARCH DIRECTIONS
School Sustaining institutional support	<ul style="list-style-type: none"> • Reinforce benefits (improved health → academics) , address concerns • Engage school staff to support efforts
Lack of PA opportunities	<ul style="list-style-type: none"> • After school exercise program – LGFG-E
School Nurse Time/conflict with other duties	<ul style="list-style-type: none"> • Resources to protect time for intervention delivery (e.g., floating nurse) • Group format , maximize nurse time – LGFG-G
Ongoing delivery	<ul style="list-style-type: none"> • Incorporate into performance evaluation
OW/OB Adolescent Participation	<ul style="list-style-type: none"> • Process to let students know of program • Identify and address barriers to participation
Lack of social support for weight loss efforts	<ul style="list-style-type: none"> • Group format – LGFG-G • Social networking technology – LGFG-G

Questions?



"Snow White was poisoned by an apple, Jack found a giant in his beanstalk, and look what happened to Alice when she ate the mushroom! And you wonder why I won't eat fruit and vegetables?!"



“The first Food Pyramid was built in ancient Egypt by a Pharaoh who hated vegetables so much he buried them at the bottom.”

Theoretical Framework for Intervention

