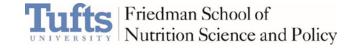


Christina Economos, Ph.D.
New Balance Chair in Childhood Nutrition
Professor, Director of ChildObesity180
July 31, 2016





### **FUNDING DISCLOSURE**

#### **CURRENT FUNDING**

- National Institutes of Health: multiple grants
- United States Department of Agriculture: multiple grants
- Robert Wood Johnson Foundation
- JPB Foundation
- New Balance Foundation
- The Boston Foundation
- Newman's Own Foundation
- Dolan Family Foundation
- New Balance Chair in Childhood Nutrition

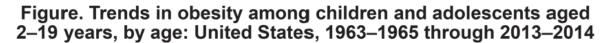
#### **ADDITIONAL FUNDING (WITHIN PAST 5 YEARS)**

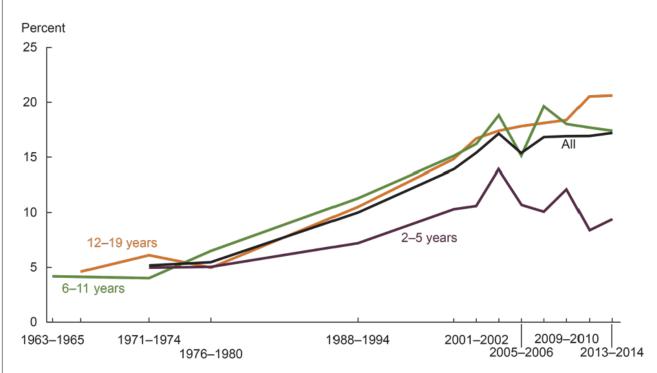
- Harvard Pilgrim Healthcare Foundation
- American Heart Association





#### CHILDHOOD OBESITY NATIONAL TRENDS





NOTES: Obesity is defined as body mass index (BMI) greater than or equal to the 95th percentile from the sex-specific BMI-for-age 2000 CDC Growth Charts.

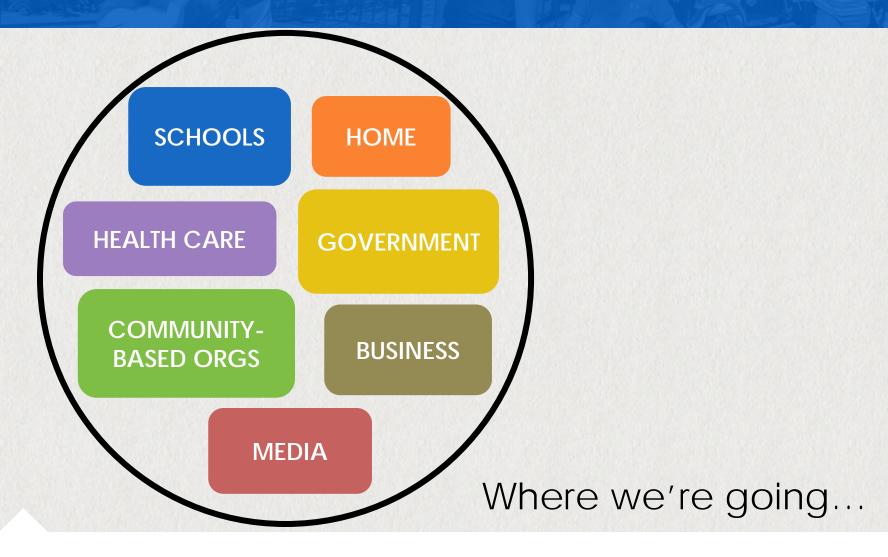
SOURCES: NCHS, National Health Examination Surveys II (ages 6–11) and III (ages 12–17); and National Health and Nutrition Examination Surveys (NHANES) I–III, and NHANES 1999–2000, 2001–2002, 2003–2004, 2005–2006, 2007–2008, 2009–2010, 2011–2012, and 2013–2014.

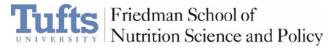
Health E-Stats. July 2016





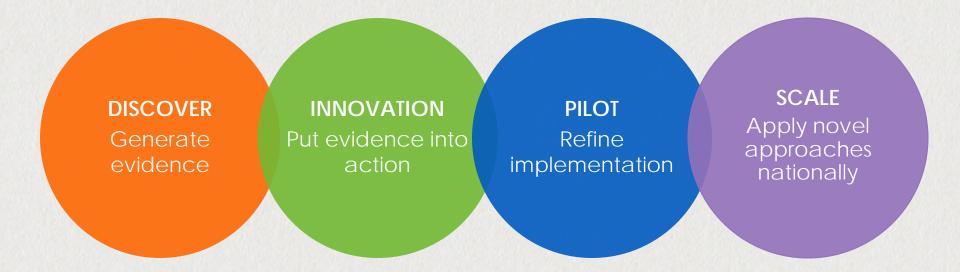
### **HOW WE MUST WORK**

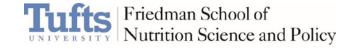






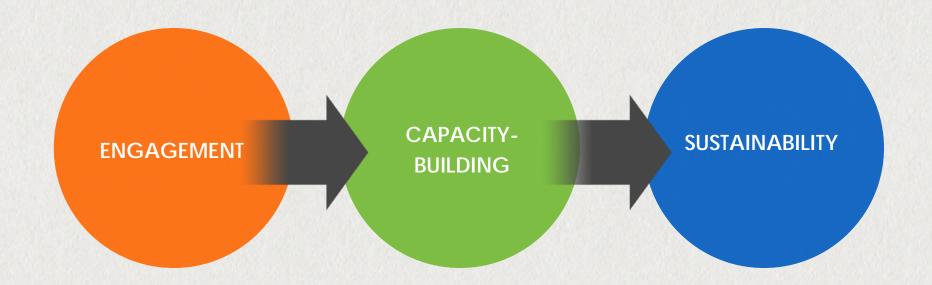
# CREATING IMPACT







### CONDUCTING COMMUNITY INTERVENTIONS



Current Obesity Reports. Springer. 2014, 199-205, DOI: 10.1007/s13679-014-0102-2.



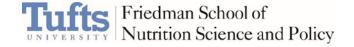


# SHAPE UP SOMERVILLE (2002-2005)



R06/CCR121519-01 from the Centers for Disease Control and Prevention.

Additional support by Blue Cross Blue Shield of Massachusetts, United Way of Mass Bay, The US Potato Board, Stonyfield Farm, and Dole Foods





# SHAPE UP SOMERVILLE: RESULTS

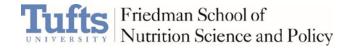
#### **DECREASED**

- BMI-z score
- Obesity prevalence
  - Children
  - Parent spillover
- Sugary drink intake
- Screen time

#### **INCREASED**

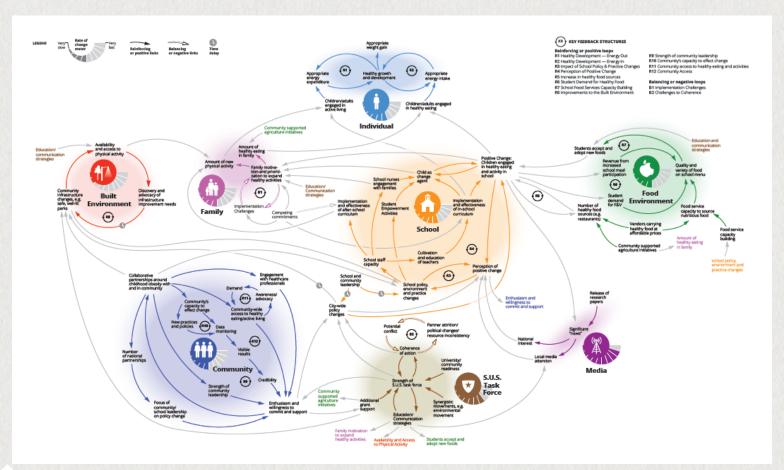
- Sports and activities
- Policy change
- Healthy restaurant meals
- Overhaul of school food and competitive foods

Obesity 2007;15:1325-1336; Prev Med. 2010 Jan; 50 Suppl 1:S97-8. Prev Med 2013 57(4): 322-7; BMC Pediatrics. 2013; 13(1):157. Prev Chronic Dis, 2009;6(3). Prev Chronic Dis, 2009;6(3). Am J Public Health. 2015 Feb;105(2):e83-9.





### THE DYNAMICS OF COMMUNITY CHANGE



Hennessy, Economos et al. Mapping the dynamics of community change: A case study of Shape-Up Somerville (in prep)



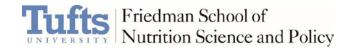


### SHAPE UP SOMERVILLE: SUSTAINABILITY

- Sustained and expanded in Somerville
- Informed change at the national level



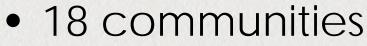






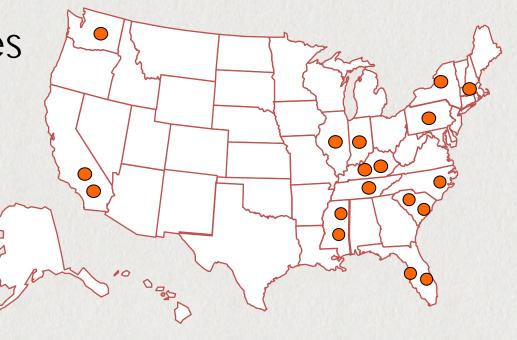
### **REPLICATING SHAPE UP SOMERVILLE (2007-2012)**

• 2007-2012



• 200,000 kids

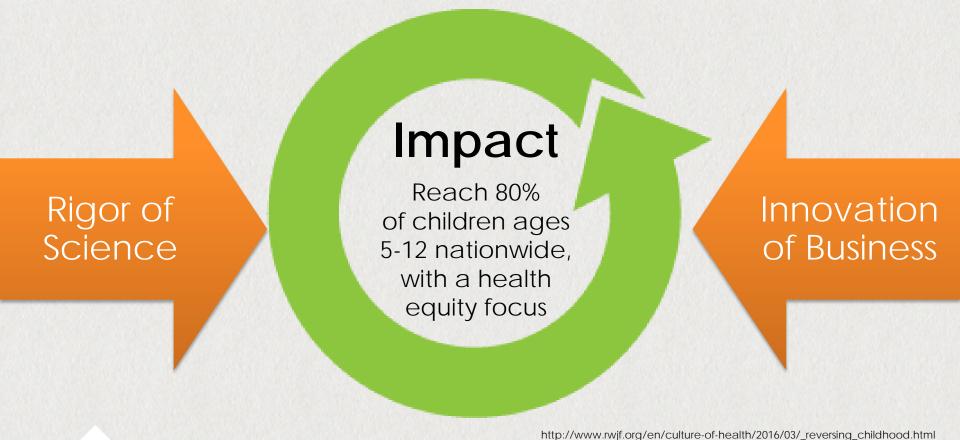
= 0.25%

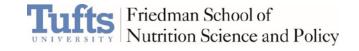






## THE CHILDOBESITY180 APPROACH







# **ENGAGING THE PRIVATE SECTOR**



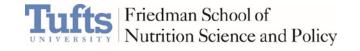
Solving problems



Integrating business strategies



Funding our initiatives





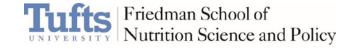
# 4 EVIDENCE-BASED INITIATIVES







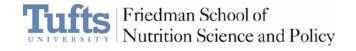






# A FOCUS ON HEALTH EQUITY

- Purposeful collaborations
- Targeted incentives
- Participatory development
- Tracking of key equity metrics
- Staff professional development
- University involvement
- Data- and community-informed interventions



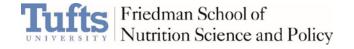


# RESTAURANT INITIATIVE

Increase demand for, and supply of, healthier options for kids.

Innovation	Make a compelling business case while driving consumer demand.
Rigor	Conduct research to inform direction, add to evidence base, influence supply.
Scale	Execute national campaign to boost demand.

<u>IJBNPA</u>. 2014, 11(1):81. <u>Obesity</u>. 2015; 23(5). <u>Health Affairs</u>. 2015 Nov 1;34(11):1885-92. <u>Curr Obes Rep</u>. 2016 Feb 15. <u>J Nutr Educ Behav</u>. 2016;48 (4): 242-249.





# MOMS' BARRIERS AND MOTIVATION FOR CHOOSING HEALTHIER MENU OPTIONS

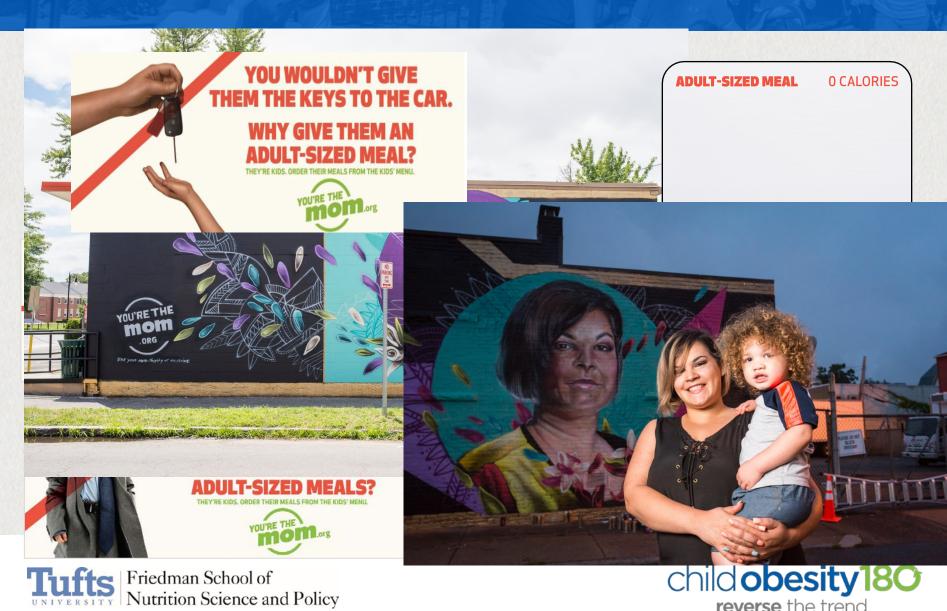
Not the best choice for my Eating healthy at fast food = **Hectic lives** expensive, not satisfying child Very price sensitive Want to raise No time to cook healthy kids Cooking is more expensive Want kids to learn "My child is a Fast food = good reflection of me" healthy habits value, convenient Feel guilty Want kids to be 600 calories their best not enough "I know I for my active child shouldn't" Want kids to be satisfied Posted calorie info nice to have, won't change Way to treat kids

purchase





# PILOTING THE CAMPAIGN



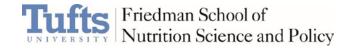
reverse the trend.

#### **ACTIVE SCHOOLS ACCELERATION PROJECT**

Increase quality physical activity in schools.

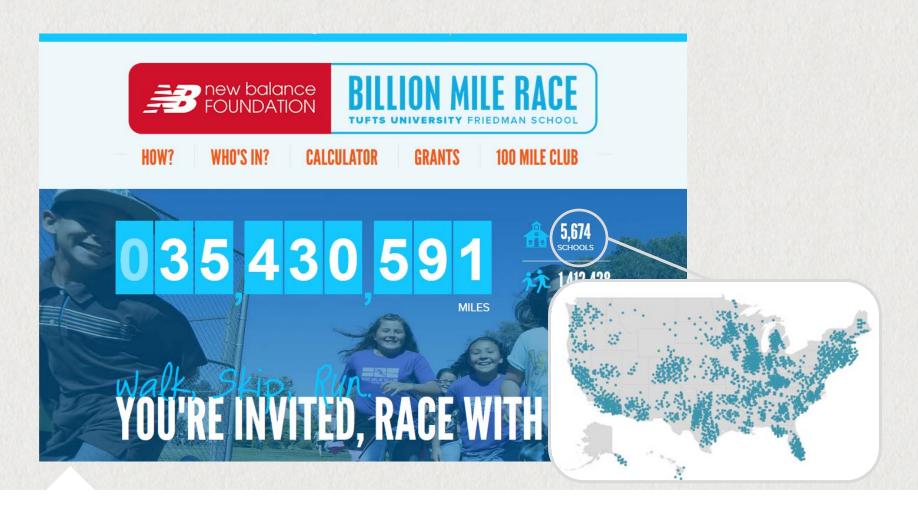
Innovation	Crowdsource school-based PA programs.
Rigor	Pilot and evaluate 3 promising programs in 1000 schools.
Scale	Ignite nationwide walking/running movement.

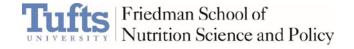
Translational Journal of the American College of Sports Medicine. 2016 1(1): 1-9. Int J Behav Nutr Phys Act. 2016, 13(1):39





# BILLION MILE RACE





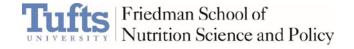


## 2016 SHOE MAKEOVER: BOWLING GREEN, KY





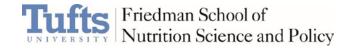






# **COLLABORATION WITH WNET**



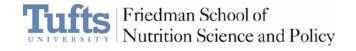




#### HEALTHY KIDS OUT OF SCHOOL

Improve nutrition and increase PA in out-of-school-time programs.

Innovation	Engage nine OST CEOs to develop and adopt 3 consistent, simple principles.
Rigor	Evaluate tailored implementation mechanisms across 3 states.
Scale	Embed tailored programs within structure of national organizations.





# PRINCIPLES AND PARTNERS



**Drink Right:** Choose water over sugary beverages.

Move More: Boost movement and physical activity.

Snack Smart: Fuel up on fruits and vegetables.













**National** 







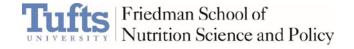
Prev Chronic Dis. 2014 Dec. 31;11:E227. Prev Chronic Dis. 2015; 12(E225). J Nutr Educ Behav. 2014, 46(3):156-163. Childhood Obesity. 2015; 11(4).





### STRONG GIRLS HEALTHY MEETING PATCH





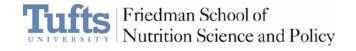


# THE BREAKFAST EFFECT

Advance the evidence base around school breakfast.

Innovation	Leverage natural experiment to study the effect of Breakfast in the Classroom (BIC).
Rigor	Assess individual- and school-level outcomes in schools with BIC.
Scale	Produce video series to share research in support of school breakfast.

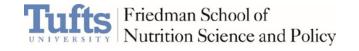
JAMA Pediatrics. 2015; 169 (1): 71-77. Public Health Nutrition. 2014. Pediatr Obes. 2016 Feb 4. Public Health Nutr. 2016, Jan 28:1-11





# BREAKFAST IN THE CLASSROOM





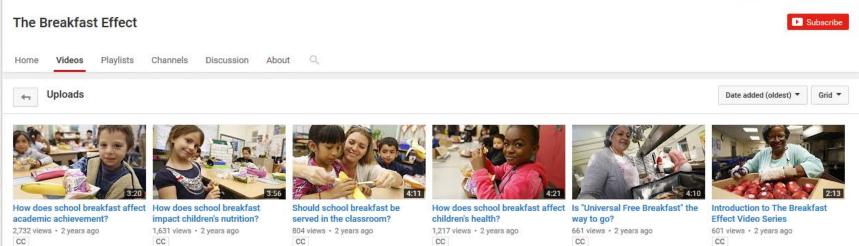


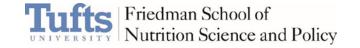
# BREAKFAST EFFECT VIDEO SERIES



# THE BREAKFAST EFFECT

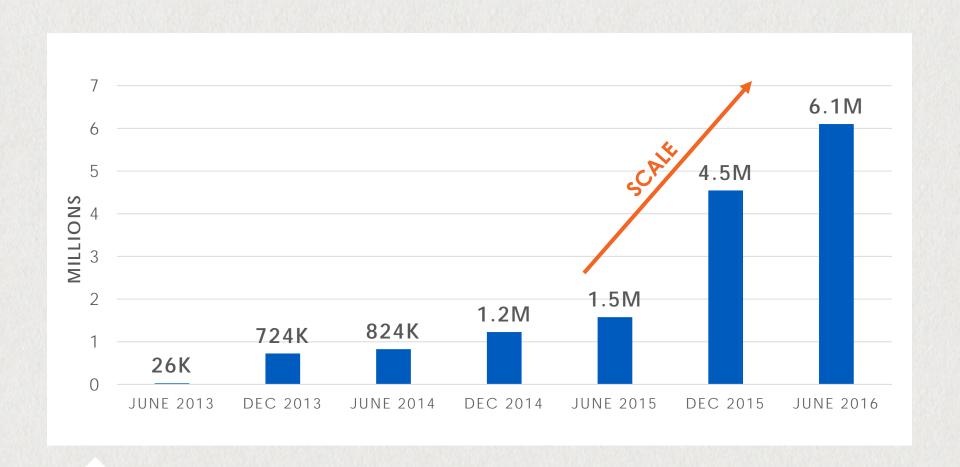


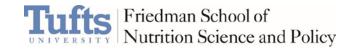






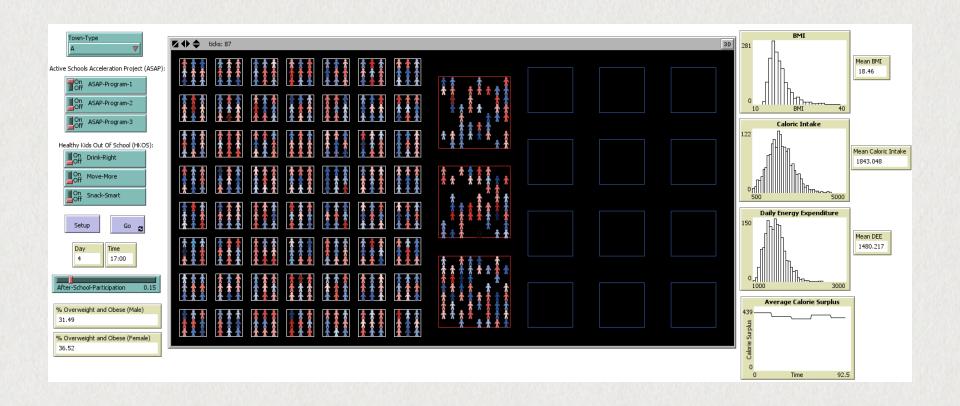
# CHILDREN REACHED



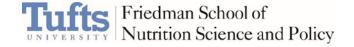




# AGENT-BASED MODELING



Preventing Chronic Disease. 2016 Jan;13:E04.



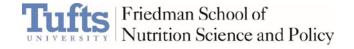


# CHALLENGES OF OUR APPROACH

Academic rigor vs. speed to market

Grassroots relationship-building vs. national scale

Achieving broad reach vs. prioritizing highest-risk children





# **ACKNOWLEDGMENTS**





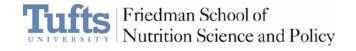








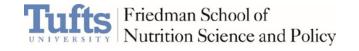






# WHAT YOU CAN DO

- Connect and collaborate with colleagues in other sectors
  - e.g., business, health care, education
- Educate yourself on systems thinking and approaches
- Evaluate your work use rigor and innovative methods
- Scale/expand your programming to other locations or cities and/or a wider group of children within your organization
- Join us!





# JOIN US



ChildObesity180.org





BillionMileRace.org



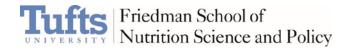
HealthyKidsHub.org



ChildObesity180.org/HealthyMeals



ChildObesity180.org/Breakfast





# THANK YOU!



