

CASEY Health: Coordinating Activities to Support Empowerment of Youth



Cohort:
2019-2022

Team Members:

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Location:
Lexington, Kentucky

Focus Areas:
Addiction & Substance Use
Education
Food Systems & Nutrition

Wicked Problem Description

The tobacco and fast-food industries take advantage of our youth by spending billions of dollars on targeted advertising and product promotion. Their persistent and insidious tactics result in unhealthy behaviors and pave a road to a lifetime of otherwise preventable health problems. These industries benefit from regular market renewal from our youth, which enhances these companies' ongoing financial success. Disadvantaged communities throughout rural Kentucky suffer heavily from these focused marketing tactics that contribute to poor health, poor diet, high tobacco use, and reduced quality and longevity of life. Moreover, the recent COVID-19 pandemic has impacted schools in this rural community, adding another layer of complexity to prevention and health promotion measures, resulting in increased risk of adverse health outcomes.

Our Team seeks to work with this community by leveraging current evidence that supports the implementation of various projects to help children learn and establish early healthy behaviors for improved health trajectories later in life. Programs that introduce health promotion and nutrition concepts at an early age (4 years of age and through elementary school-age) show

improvements in children's knowledge of nutrition and preference of vegetables, which can lead to healthier eating habits and other healthy behaviors. Effective interventions to increase healthy behaviors often involve school-based implementation and dissemination. Peer-leader models of health education will be used to promote acceptability, as this approach is known to have a positive effect on both the peers delivering the health education intervention and those receiving the intervention.

Project Strategies

Our four-prong strategy focuses on using Robert Wood Johnson Foundation Culture of Health concepts to 1) learn from and engage with parents and teachers regarding their respective knowledge and concerns for youth health, 2) identify, motivate and partner with key stakeholders to develop and implement novel health initiatives, 3) develop tailored health promotion and risk avoidance messages for delivery to elementary school youth, based on our work with parents, the school and community, and 4) work with school and community partners to enhance and expand a high school peer mentoring program to convey health concepts and promote healthy behaviors in elementary school children.

Current Actions

Our Year 1 efforts focused on fostering a working relationship with the school and community. We attended several school events involving parents and children, and met with key school personnel, both in-person and virtually after restrictions due to the coronavirus pandemic. We provided assistance in meeting several key needs identified by the school, by underwriting and providing water-bottle filling stations and other supplies identified by teachers and school administration, to promote safety and health at the school.

In Year 2, we focused on developing partnerships in the school and community, strategies to assist in empowering partners, and the development and delivery of health lessons for the third-grade classes. We began by seeking input from a teacher focus group to gain insight into their perceptions of how health was valued at the school, and to explore opportunities to teach health to middle elementary students. We also obtained input from the parents of third and fourth grade students by developing and distributing a novel Health Belief and Behavior Inventory (HBBI). The results from this survey provided insight into the behaviors parents perceive as important to the development of a healthy child. These data, combined with information from our biweekly virtual meetings with the school principal and assistant principal, allowed us to maintain communication and collaboration regarding the development and progression of our project. Based on our collaboration with school personnel, we developed novel health lessons we call B.R.I.E.F. Here, the varied expertise of our Clinical Scholars was leveraged to create a series of health messages that are B-brief, R-regular, I-interactive, E-energetic and F-fun that can be delivered to third grade students and meet the Kentucky Academic Standards for third grade students.

The Health Ambassador Program (HAP) was initiated and provides an opportunity for high school students to peer mentor health education to third grade students. Led by Meagan Klee, the 4-H Youth Development Officer and County Extension Agent, and with the help of two high

school teachers (Nikki Wethington and Cathy Williams) we collaborated in the development of Standard Operating Procedures for the HAP. The implementation of these procedures led to an application process, and the identification of the first three Ambassadors during the Spring of 2021. The Ambassadors underwent training on how to teach health during the summer and fall months, using the newly designed lesson plans and the B.R.I.E.F. health messages.

Finally, we asked the school to develop a wish list to identify items they need to help expand the culture of health at their school. Their current list consists of support for outdoor learning space, gardening supplies, a video projector to be used for all-school activities and large audience settings, and wagons for transporting play and fitness items to the playground (fitness items are also included). The school principal plans to use the video projector to highlight weekly health messages as part of a planned morning assembly.

Future Actions

Our focus for the coming year is to 1) ensure success of the Health Ambassador Program and the delivery of health lessons and messages to the third-grade students, 2) continue to collaborate with key stakeholders and provide ongoing empowerment for change by delivering health-related support to the school by maintaining ongoing and regular communication, and 3) expand sustainability efforts for the initiatives and messaging that we have created.

Outcomes

Completed Outcomes

Health Belief and Behaviors Index Survey Activities

- Developed and tested our Health Belief and Behavior Inventory (HBBI)
- Analyzed the HBBI survey results and drafted manuscripts for publication

Health Ambassador Activities

- Developed a health curriculum that meets the Kentucky Academic Standards
- Established the Health Ambassador Program and guided the creation of standard operating procedures for this program
- Identified, enrolled and trained high school students to be peer-mentors of health at WHE
- Scheduled Health Ambassadors to come to WHE
- Initiated paperwork to establish an endowment fund to underwrite the Health Ambassadors Scholarship program

Virtual Focus Groups

- Held virtual focus group with teachers (analysis pending; engaged consultant in qualitative analysis)

Community Partner Activities

- Established regular communication with key school personnel
- Developed a fact sheet regarding coronavirus for the school

- Provided input regarding the school re-entry plan, as requested by school personnel
- Provided resources requested by the school to promote safety and well-being upon school re-entry
- Empowered community key stakeholders
- Established a mechanism to fund wish list items that help maintain a 'culture of health' at WHE

COVID-19 Rapid Response Project

- Obtained funding for COVID-19 Response focusing on providing school personnel with support
- Obtained grant funding for school summer back-pack food program

Anticipated Future Outcomes

- Publish findings from Focus Group and HBBI
- Evaluate effectiveness of health-related curriculum (health modules) tailored to third grade
- Obtain feedback on the training of peer-leaders
- Obtain feedback on the teaching effectiveness of peer-leaders
- Improve the Health Ambassador program based on feedback
- Order and deliver health-related wish list items to the school
- Explore opportunities for maintaining future interactions with the school
- Interact with key stakeholders to develop new funding stream to support this program and collaborate with existing programs focused on youth health

Timeline - (for the remaining fellowship time period)

- Continue to collaborate with 4-H leader to effectively deliver health curriculum using high school peer-mentors through the Health Ambassador Program.
- Continue to meet with 4-H leader monthly to review the existing curriculum; develop strategies to supplement and adapt to younger (3rd grade) children. Focus on incorporating puppets/health promotion/prevention messaging prevention and other activities.
- Continue bi-weekly meetings with school administration, based on their availability.
- Develop strategy to implement "Health Days" contingent on our ability to return to visiting the school/classrooms.
- Publish HBBI survey data.
- Transfer funds to establish the endowment fund for the Health Ambassador Scholarship Program
- Develop sustainability strategies.
- Purchase items on WHE wish list.

Partnerships - (including community partnerships, extended team members, etc.)

- Continue existing partnerships with the school, district, parents, community leaders and academic experts.

Evaluation Strategies and any findings so far

- Evaluate Health Ambassador Program
- Evaluate Health Curriculum
- Evaluate Health Messages and messaging delivery format

Contact Person Information

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