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**Evaluating Access to Physical Activity
at Community Recreation Centers
by Latino/a Families
to Reduce Pediatric Obesity**

**Funded by the Robert Wood Johnson Foundation's
Salud America! program**



Aim

- To assess the impact of the Nashville Collaborative, a unique partnership between a Children's Hospital and Metro Parks, on
 - use of Metro Parks facilities by Latino/a families with children
 - Metro Parks programming
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Purpose

- To increase access to physical activity and use of community recreation centers by Latino/a families to reduce pediatric obesity.
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Background

- Nashville's Parks system has undergone a comprehensive assessment of existing conditions, trends, and resident needs.
 - Latinos/as are disproportionately underutilizing indoor and outdoor community recreational facilities, even as the number of Latino/a families are growing.
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Background

- Based at the Coleman Community Center (1 of 23 recreational centers), the Nashville Collaborative was formed in 2008 to develop and test family-based, community-centered programs that reduce pediatric obesity.





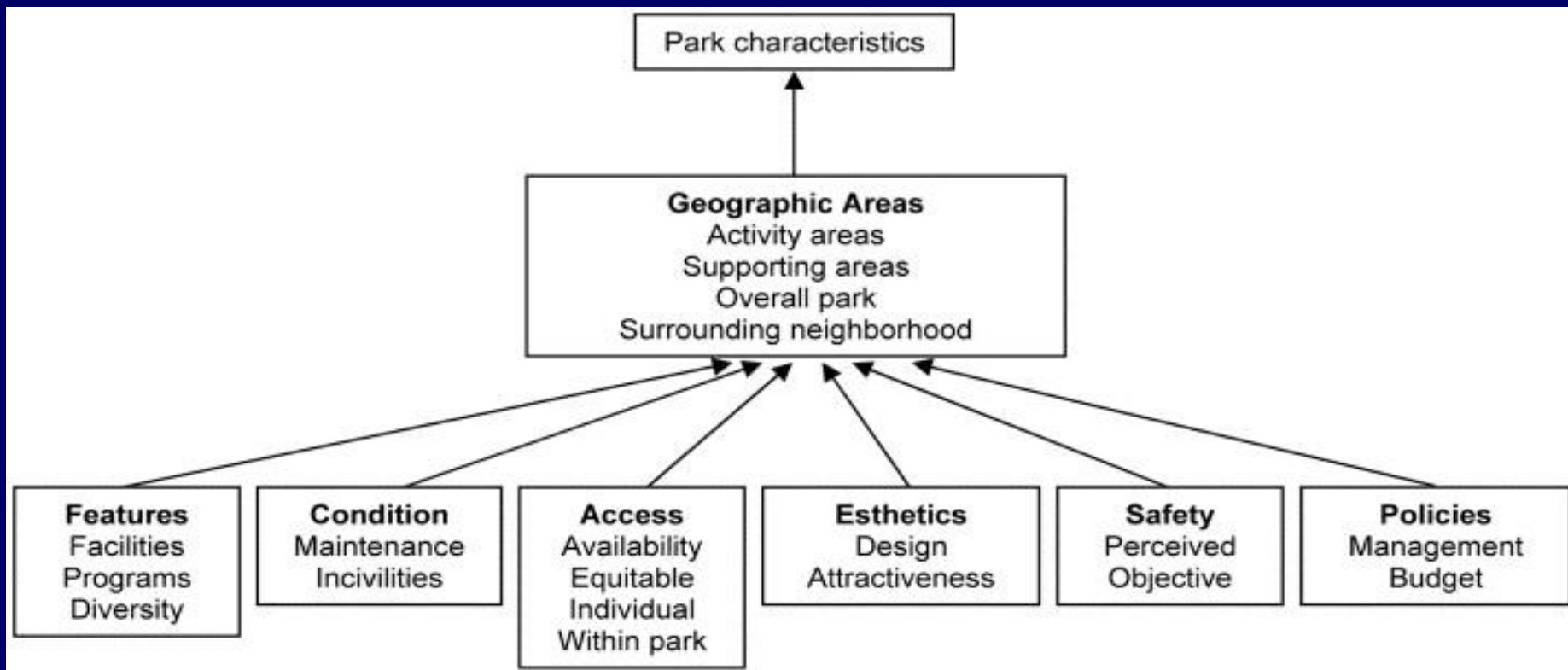
Background

- July 2008 - June 2009, completed randomized controlled trial, Salud con la familia, to change early childhood weight trajectories for Latino/a children ages 3-5 (N=107 parent-child dyads)
 - increase familiarity with use of recreation center
 - increase access to free physical activity community resource
 - train recreation staff on cultural awareness
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Theoretical Framework

□ Bedimo-Rung, Mowen, and Cohen

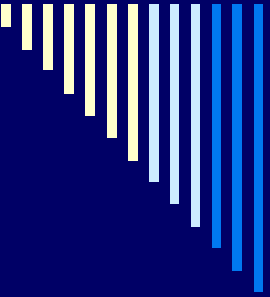
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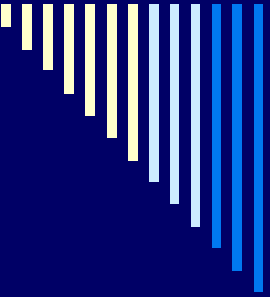
Eligibility Criteria

- Phase 1: Latino/a families with children ages 3-5 who participated in the Salud con la familia program (N=100); matched with controls who did not participate in the program (N=100)
 - match on Zip code, child's age, no family member participated in Salud
 - Phase 2: Metro Parks staff in all 23 centers with access to computer at work
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Study Design – Phase One

- Salud con la familia participants and matched controls identified in the Pediatric Primary Care Clinic at Vanderbilt will be consented for participation.
 - Telephone interviews will be conducted to assess perception of access to physical activity, reported use of the Center's resources, and the frequency of use for physical activity.
 - Environmental Supports for Physical Activity Questionnaire will also be administered.
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Study Design – Phase Two

- Semi-structured interviews with five Metro Parks leaders who direct programming across all Nashville Community Centers to assess their perception of center accessibility and use by Latinos/as.
 - Environmental Supports for Physical Activity Questionnaire, with additional questions developed from the semi-structured interview results, will be e-mailed to all Metro Parks staff.
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Analysis – Phase One

- General linear regression to determine effects of positive and negative attributes of each environmental domain on the likelihood of being physically active at the Coleman Center (dependent variable).
 - Likelihood of being physically active on a 4-point ordinal scale (every day, more than once/week, once/week, never).
 - Effect of main covariate (environmental domain or attribute) will be adjusted for participant age (continuous variable), gender, and Salud participant versus control.
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Analysis – Phase Two

- Assess via qualitative method of grounded theory.
 - Assess distributions of the environmental domains and environmental attributes using frequencies and percentages.
 - Data generated from open-ended questions will be assessed for common themes, applying the same qualitative approach as with the semi-structured interviews.
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Salud con la familia Baseline Demographics

	Parent (N=103)	Child (N=103)
Gender		
Male	5%	45%
Female	95%	55%
Country of Origin		
Mexico	81%	8%
Other Latin American country	13%	1%
United States	6%	91%
Time in US		
≤4 years	12%	
> 5 <10	52%	
≥ 10	36%	
Spanish only	71%	
Maternal Education		
No HS diploma	62%	-
GED/HS diploma	21%	-
Some college or more	10%	-
BMI (kg/m²) parent > 25	79%	-
BMI-for-age percentile child		
Normal > 5% <85%	-	59%
Overweight ≥ 85%	-	41%
SASH summary score (acculturation)		
<2.0	80%	
2.0-2.9	18%	
≥ 3.0	2%	



Policy Implications

- Increase policy focus on active living
 - Provide policymakers assessment of program effectiveness and sustainability
 - Contribute framework for development of program standards
 - Develop tools for measuring public health outcomes
 - Increase institutional collaboration directed at underserved populations
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