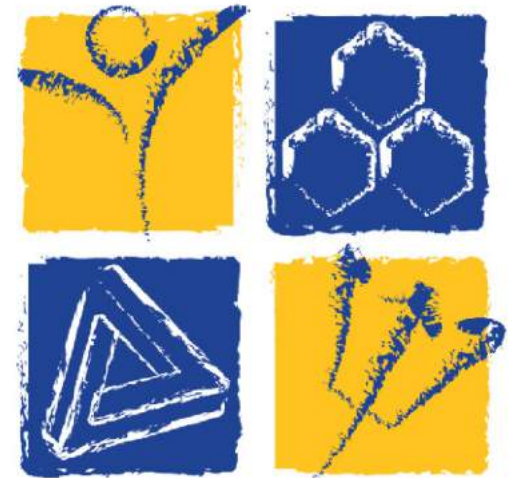




THE UNIVERSITY
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The George Alleyne
Chronic Disease
Research Centre

Evidenced-based advocacy: understanding and engaging local stakeholders

Dr. Natasha Sobers

Lecturer in Epidemiology

Background

- In the 2011 Global School Health Survey
 - 31.9 % of our 13 – 15 year olds were overweight or obese
- In 2015 National Nutritional Centre finalized BCHOPP (2015-2018)
 - Guidelines aimed at reducing childhood obesity

Of general interest to all stakeholders

What has been our progress in implementing these policies?



#TOOMUCHJUNK



I AM

AT RISK



THE ROLE OF Schools IN PROMOTING PHYSICAL ACTIVITY

RECESS

Students who get at least

20 minutes of recess per day

have a lower body mass index percentile than their peers.

P.E.
In states with P.E. requirements, high school girls were active

37
more minutes per week.

SAFE ROUTES TO SCHOOL
Students who walked to school every day had

24
more minutes of physical activity per day.

ACHIEVEMENT
Teens who were active in school were

20%
more likely to earn an "A" in math or English.

Active Living Research
www.activelivingresearch.org

Sources: RECESS: Fernandes M and Sturm R. "The Role of School Physical Activity Programs in Child Body Mass Trajectory" Journal of Physical Activity and Health, 8(2): 174-181, February 2011. P.E. Cowley J, Meyerhoefer C and Newhouse D. The correlation of youth physical activity with state policies. Contemporary Economic Policy, 16(12):1287-1301, 2007. ACHIEVEMENT: Nelson MC and Gordon-Larsen P. "Physical Activity and Sedentary Behavior Patterns Are Associated With Selected Adolescent Health Risk Behaviors." Pediatrics, 117(4): 1281-1290, April 2006. SAFE ROUTES TO SCHOOL: Sirard JR, Riner WF, Mciver KL and Pate RR. "Physical Activity and Active Commuting to Elementary School." Medicine and Science in Sports and Exercise, 37(12): 2062-2069, 2005.



STUDY 1 – JAMBAR Kids

- *School environment observational audit and influence on child nutritional status in Jamaica & Barbados*
- *Led by Suzanne Soares-Wynter*
- *With Pamela Gaskin, Peter Chami (UWI-Cave Hill), Stacey Aiken-Hemming (CAIHR)*
- *90 schools in Jamaica*
- *35 schools in Barbados*



STUDY 2- Understanding drivers, facilitators and barriers

- *Case studies from Barbados to understand*
 - *(1) drivers to childhood obesity in pre-adolescents and teenagers (DChOP);*
 - *(2) impact of a healthy school policy initiative on the school environment (Barbados only)*
- *Natasha Sobers, Natalie Greaves, Madhuvanti Murphy (UWI-Cave Hill)*



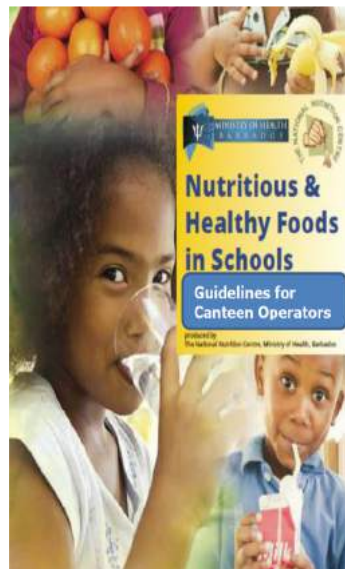
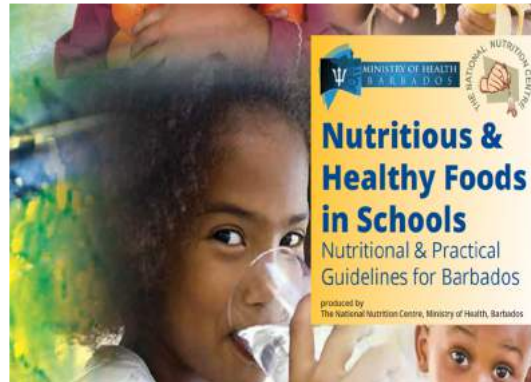
Focus of Inquiry

Aims

1. To review the policy/guideline environment around school nutrition and physical activity
2. To explore the facilitators and barriers associated with the implementation of a healthy school policy initiative in Barbados



Highlights from Review of Local Guidelines



WellSAT 2 Domains:

1. Nutrition Education
2. Nutrition Standards for Food and Beverages Provided and Sold (to schools)
3. Promoting Healthy Food and Nutrition Environment
4. Communication and Evaluation



Highlights from Review of Local Guidelines: Policy Successes

All three documents gained highest scores in establishing Nutritional Standards.

Section 2 Nutrition Standards for Food and Beverages Provided and Sold (to schools)

NS10: Addresses limiting sugar content of foods and/or beverages provided and/or sold.

BCHOPP

4.2 Fiscal measures to improve diet and physical activity adapted, debated and enacted. (SSB Taxation)

Nutritional Guidelines

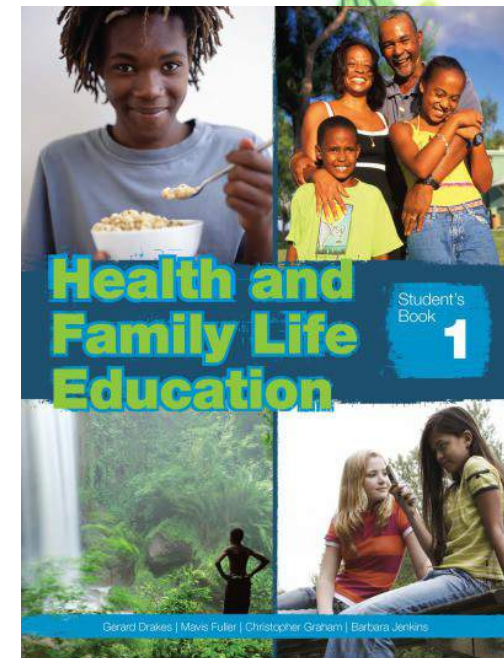
Suitable beverages should be readily available. These include water, fat free milk (skimmed) or low fat milk (1%), smoothies made with fat free milk or yogurt, low-sugar flavoured milk or calcium-enriched soy beverages (less than 10% added sugar), yogurt drinks and 100% fruit juice (4-8 ounces daily)



Highlights from Review of Local Guidelines: Areas to be Strengthened

Nutrition Education:

- While addressed in BCHOPP – the reference was specifically in regards to **revamping HFLE** in secondary schools, no strategies for primary schools identified
- This may be because these aspects are addressed in curriculum development a MOE function, and Nutrition Guidelines were developed by MOH – Nutrition Centre.
- The role of teachers in establishing and maintaining healthy food environment, was also not clear in any of three documents.
- Critical parental education not addressed.



Highlights from Review of Local Guidelines: Areas to be Strengthened

Communication and Evaluation:

Included issues such as

1. **Parental access** to nutritional standards and school menus
2. Health Committees within schools to **monitor adherence** to standards
3. Measures to deal with **breaches of standards**, concerns, complaints or suggestions.
4. How will updates to **standards be communicated** from Ministry to other stakeholders.



Progress & Next Steps

Steps taken

- Ethical approval has been sought from UWI/MOH Institutional Review Board
- Ministry of Education permission has been sought
- Review of National Policy Documents has been conducted

Next steps

- Participating schools will be asked to submit any policies they have developed.
- Schools have been identified for online questionnaire.
- Online questionnaire is ready to be distributed.
- A subset of schools will be asked to participate in an interview



What happens next

- Review of Policy Documents
 - Using WELL-SAT instrument for local school policies
- Structured questionnaire distributed online to several schools
 - Questions based on International Study of Childhood Obesity, Lifestyle and the Environment (ISCOLE)
 - Which was developed to determine the relationships between lifestyle behaviours, behavioural settings and obesity in children.

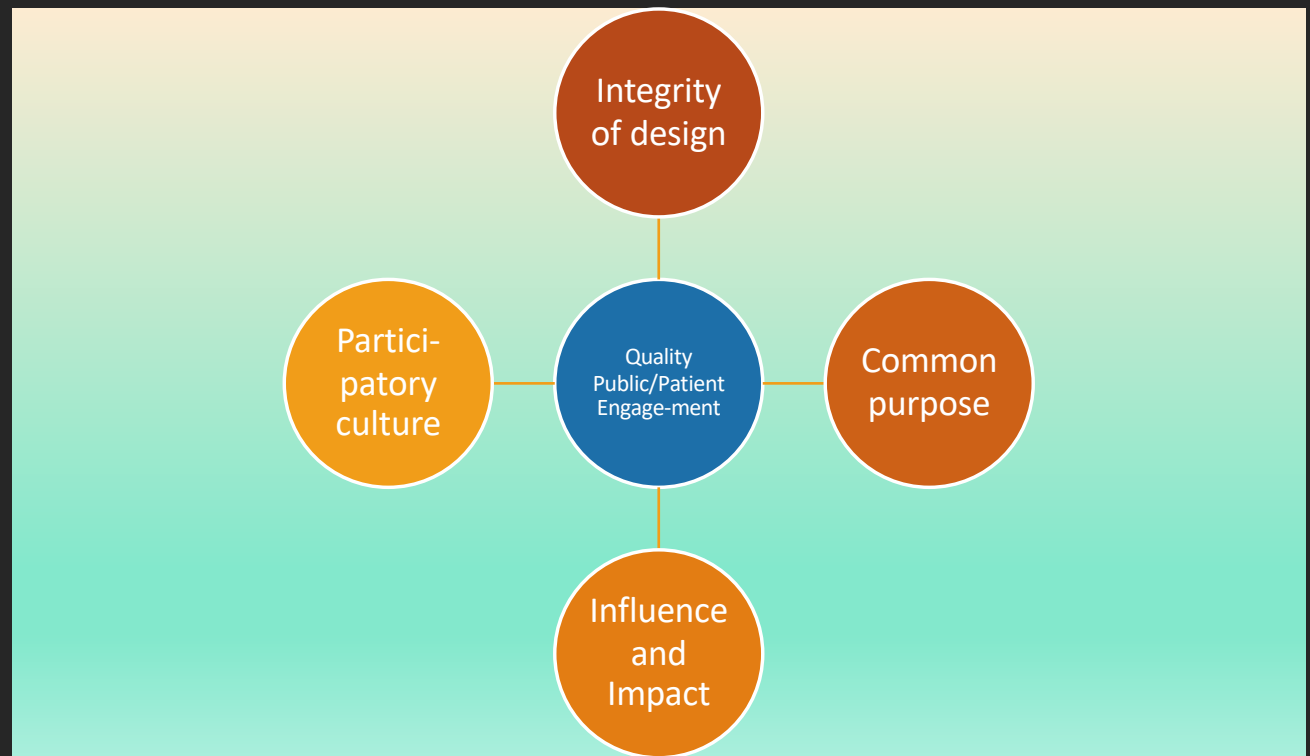


Facilitators and Barriers

- Semi-structured interview with health policy focal point
 - Developed using the tools and template guidance of the Consolidated Framework for Implementation Research.
 - To investigate:
 1. adaptability and complexity of guidelines
 2. implementation planning
 3. Costs of implementation



Framework for Public engagement in policy development





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Collaborators

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Dr. Madhuvanti Murphy

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