

Title:

Piloting a School-Based Health-Education Curriculum in a Rural Community to Promote Healthy Behavior

Linda Gibson-Young, PhD

School of Nursing, Auburn University School of Nursing, Auburn, AL, USA

Session Title:

Clinical Posters Session 2

Keywords:

educational, school-based and training

References:

Chiang, R. J., Meagher, W., & Slade, S. (2015). How the Whole School, Whole Community, Whole Child Model Works: Creating Greater Alignment, Integration, and Collaboration Between Health and Education. *Journal Of School Health*, 85(11), 775-784. doi:10.1111/josh.12308

Goesling, B., Scott, M. E., & Cook, E. (2016). Impacts of an Enhanced Family Health and Sexuality Module of the HealthTeacher Middle School Curriculum: A Cluster Randomized Trial. *American Journal Of Public Health*, 106S125-S131. doi:10.2105/AJPH.2016.303392

Abstract Summary:

The ABC Pilot Project partners with schools to initiate health education training. The goal of this health-education curriculum is to develop sustainable healthy behaviors, promote wellness and prevent disease. This project centers on 5th grade students, as these years are the starting point for behavioral choices and development of self-image/self-esteem.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
1. The learner will be able to identify school-based educational opportunities	I. poster with pilot overview, framework used, participant population
2. The learner will be able to identify educational instruction modules and outcomes identified for age population.	II. Poster will display information re: pre and post measurements/ outcomes. We will display non-identifiable, descriptive student information re: behavior choices and health outcomes.

Abstract Text:

Title: Piloting a *school-based health-education curriculum in a rural community to promote healthy behaviors in 5th grade children*. This partnership between multiple disciplines will educate school-aged children on health and behavioral choices.

The purpose of this presentation is to demonstrate the ABC **Pilot Project** as an opportunity to partner with schools to initiate health education training. The goal of this health-education curriculum is to develop sustainable healthy behaviors, promote wellness and prevent disease. This project will center on 5th grade students, as years 11-13 are the starting point for abstract thought and the development of self-image and self-esteem. This pilot project targets 5th grade school children and incorporates undergraduate and graduate nursing students. Topics identified for this curriculum include:

Module 1: Nutrition and activity- PREVENTING DIABETES, HYPERTENSION, AND OBESITY

1. Making Healthy Choices
2. Initiating movement

Module 2: Breathing Strong- PREVENTING INFECTIONS AND ASTHMA/ALLERGY EXACERBATIONS

1. Avoiding Respiratory Illnesses
2. Asthma; How to manage chronic respiratory conditions
3. Sleep Health

Module 3: Mental health- IDENTIFYING AND PREVENTING MENTAL HEALTH ISSUES

1. Bullying,
2. Anxiety,
3. Peer Pressure
4. Depression
5. Suicidal Ideation

Schools are key players in providing comprehensive health services to children. This School of Nursing currently has screening mechanisms in place for rural settings. The focus of this pilot is on prevention of obesity, diabetes, respiratory, mental health, and sleep disturbances. However, there is no formal health education currently in place. Schools in this state are grouped by developmental level.

The specifics for the state of child health in rural X are noteworthy. Y Corporation was a Fortune 500 company employing upwards of 8,000 across the layers of economic strata. In 2005, the company was sold and dismantled systematically with now fewer than 300 jobs remaining the majority of which are hourly and low paying. The community has not been able to successfully transition to a diverse industrial base. The exit of the Middle Class has eradicated the middle third in any statistical measurement of the population including economic, education, literacy and healthcare. The consequences of that dynamic over time have resulted in significant challenges for the community. The current state of the region includes:

1. Eighty percent of the children born each year are born into single family homes.
2. The requirement of generational parenting to include grandparents, great grandparents, cousins and aunts is required for a parent to try to be employed in available jobs. Even while working in those jobs, not one family would be considered above the Federal Guidelines for poverty.
3. The requirements of those parents to work multiple jobs in order to just get by shorten time available for parental opportunity to nurture the children. Survival requires sacrifice. Unfortunately in times of crisis the bulk of the sacrifice is placed squarely on the backs of the children.
4. Rates of obesity, asthma, hypertension in the pediatric population are high. Non-compliance is a major contributor to poor control. Teenage pregnancy is an issue but some progress has been made there because of availability of long term contraception which does not require compliance.
5. There are collaborative efforts to reinforce the value of education in the community. There is a free open to all children Summer Reading Program its sixth year. Based on the premise that education brings opportunity, this program for first through sixth grade students, attempts to keep the momentum of education during the Summer to enhance retention rates from one school year to the next.

This pilot builds on current programs and implement a collaborative education project focused on encouraging student responsibility for their own health. For each session, we have pre and post test questions, small 10-15 min discussions and 1-2 activities implementing active learning techniques. Year one, we incorporated take home information for families in handout homework forms, and provide incentives when students return with completed homework.

We believe enhanced education about nutrition, exercise, control of long term health problems, and mental wellness will have a favorable impact. Additionally, the opportunity to have nursing students to provide interactive education would have more impact than regular classroom teachers for these subjects.

Pilot:

1. Evaluation of baseline healthy behaviors
2. Intervention/Education development
3. pilot 5th grade
4. Future plans to add in 3rd- 6th grades and school districts

Triangulation Framework:

A vital component of effective child healthcare requires partnership between **providers, community/health systems/schools, and families**. Using this approach, we will implement a curriculum for children in the rural school setting.

Results: Data is preliminary and will be ready for presentation via poster.