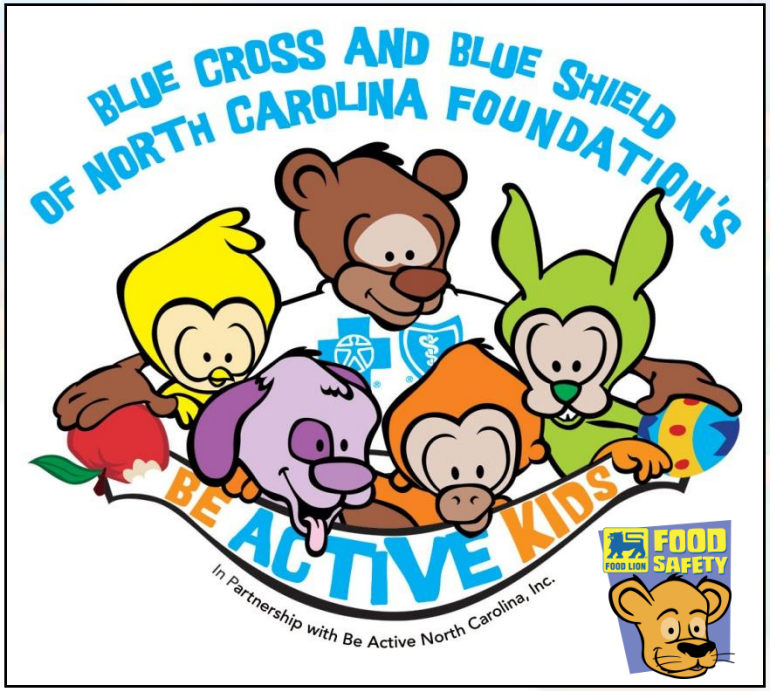
BE ACTIVE KIDS®



2007 Evaluation Report

ADVANCED ORGANIZER

- **History**
- **Methodology**
- **Results**
  - *Trainers*
  - *Providers*
  - *Parents*
  - *Children*
- **Future Implications**

HISTORY

- More than 65 percent of adults are overweight or obese. [1]
- Over one in four 2-5 yrs olds are overweight or at risk.[2]
- In response, Be Active Kids® (BAK) was created.
- Train-the-trainer model.

The NEED

- *assess the effects of training and use of the BAK curriculum.*

METHODOLOGY

Evaluation Duration:

- Took place from December 2005 to June 2007

Trainers:

- Recruited from train-the-trainer session
- 67 trainers completed pre-post training survey
- 23 of the 67 trainers completed follow-up survey

Providers:

- 309 child care providers trained
- 271 pre-training survey & 209 post-training survey
- 128 providers agreed to complete 10-week follow-up survey
- Control group: 600 (450 & 150) solicited, 98/69 completed

Parents & Children

- 11 BAK centers (18 classrooms) & 11 control centers (19 classrooms)
- 110 BAK children & their parents
- 97 control children & their parents

METHODOLOGY

Trainer & Provider Assessment

- *Knowledge*
- *Attitudes*
- *Self-efficacy*

Child Care Provider Assessment

- Diet
- Physical activity habits
- Barriers

Parents & Children Assessment

- Knowledge
- Attitudes
- Behavior

METHODOLOGY

Statistical Analysis

- ***SPSS*** *– version 15.0*

- ***Descriptive statistics*** *– mean, range, and standards deviation*
- ***Paired T-tests*** *– BAK vs. Control*
- ***ANCOVA***
- ***F-test***
- ***Fisher's exact test (two tail)***
- ***Pearson X^2 tests***

RESULTS

Trainers

- Overall, the train-the-trainer model is effective
- Training was well-received by participants.
- Trainers' knowledge, self-efficacy, and some attitudes about PA, nutrition, and food safety **increased significantly.**
- Trainers' knowledge of preschool children's nutrition and physical activity also **increased significantly.**
- Trainers attitudes **improved significantly** from pre- to post-training
- Trainer knowledge, attitudes and self-efficacy scores were maintained at follow-up (after having their first provider training).
- Confidence in their overall teaching skills and ability to teach specific content areas **improved significantly**.

RESULTS

Providers

- **Significant improvement** in knowledge, self-efficacy and attitude scores after being trained on curriculum.
- **Significant improvement** in knowledge of preschool children's nutrition, physical activity by the end of BAK training workshop.
- No significant improvements were shown for control providers.
- No significant improvements for BAK or control providers with respect to diet or level of PA.
- **Providers behaviors related to diet and PA were poor (throughout the evaluation).**
- Greatest barrier for BAK providers was whether children would pay attention to the lessons on these topics.

RESULTS

Parents

- BAK curriculum *may* have a positive affect on parents' knowledge and attitudes.
- No significant increases in behavior scores.
- Both control and BAK parents' diets were significantly correlated with their children's diets.
  - *Frequency of soda consumption, sugar sweetened beverage consumption, intake of potato chips, milk consumption, fruit serving per day and vegetable serving per day.*
- **Less than half of BAK parents received the newsletter.**

RESULTS

Children

- There is a link between BAK curriculum and improving children's knowledge scores around nutrition and PA.
- Significant improvement in the number of BAK children who drank skim or low-fat milk (no improvement among control children).
- Significant increase of BAK children who had 3 or more serving of vegetables (similar finding for control).
- Increase in the number of children who had no sugar sweetened beverages daily (control only).
- No significant changes in PA among both groups.
- Significant improvement for BAK children with respect to television viewing.
- No significant improvements for BAK children's ability to answer food safety questions.

Future Implications

- Main recommendation from providers was the development and addition of a provider health component.
- Improve communication and dissemination of BAK information and materials.
- Improve focus on physical activity (inside and outside).
- Re-evaluate implementation of food safety component.
- Improve ongoing evaluation for both trainers and providers.

REFERENCES

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2. Ogden, CL, Carroll, MD, Curtin, LR, McDowell, MA, Tabak, CJ, Flegal, KM. Prevalence of Overweight and Obesity in the United States, 1999-2004. JAMA. 2006;295(13):1549-1555.