



Padres Preparados Jovenes Saludables: A Curriculum Adaptation Process to Prevent Obesity Among Latino Youth

**SILVIA ALVAREZ DE DAVILA PH.D.
2017, NCFR ANNUAL CONFERENCE**

BACKGROUND



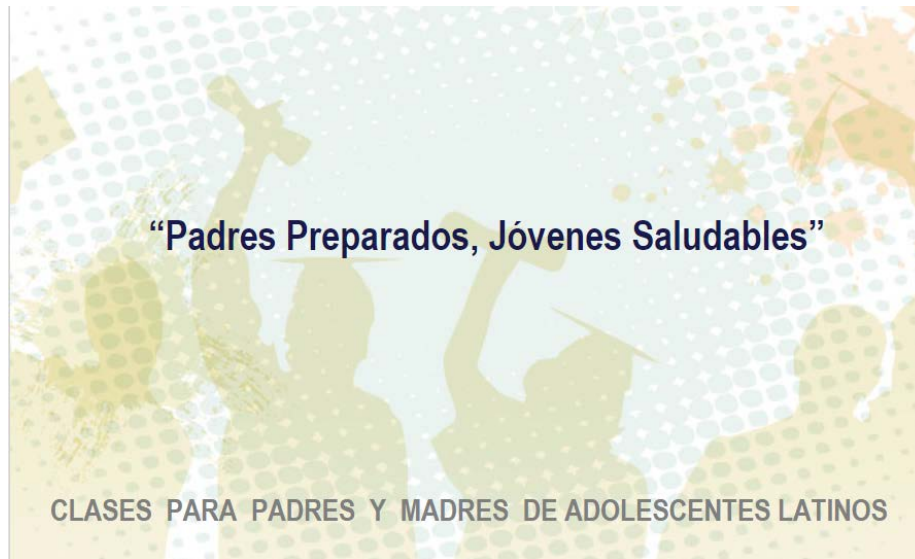
- Parents play an important role in obesity prevention (Larsen et al, 2015;Kaushal& Rhodes,2014).
- Dietary intake and physical activity are energy balance-related behaviors (EBRBs) related to weight change and the development of childhood obesity.
- Latino immigrant parents face challenges from cultural and environmental transitions and adolescent development. However, few studies have examined parenting practices among Latino families and their influence on adolescent eating and physical activity behaviors.
- Family programs are effective, but father/caregiver attendance remains low in such programs (Garcia-Huidobro, 2016).
- Preventing obesity among Latino youth is a public health priority given the disparity in obesity prevalence and potential for associated health problems.

THE PROBLEM



- The Latino population has a disproportionately high prevalence of obesity compared with other race/ethnic groups (Ogden et al ,2014).
- Nearly one in four school-aged Latino children and adolescents are obese (Ogden et al ,2014).
- Latino immigrant families have perceived the physical and sociocultural environment as unfavorable to healthy eating and physical activity in the U.S. compared with their home countries (Tovar et al ,2013).

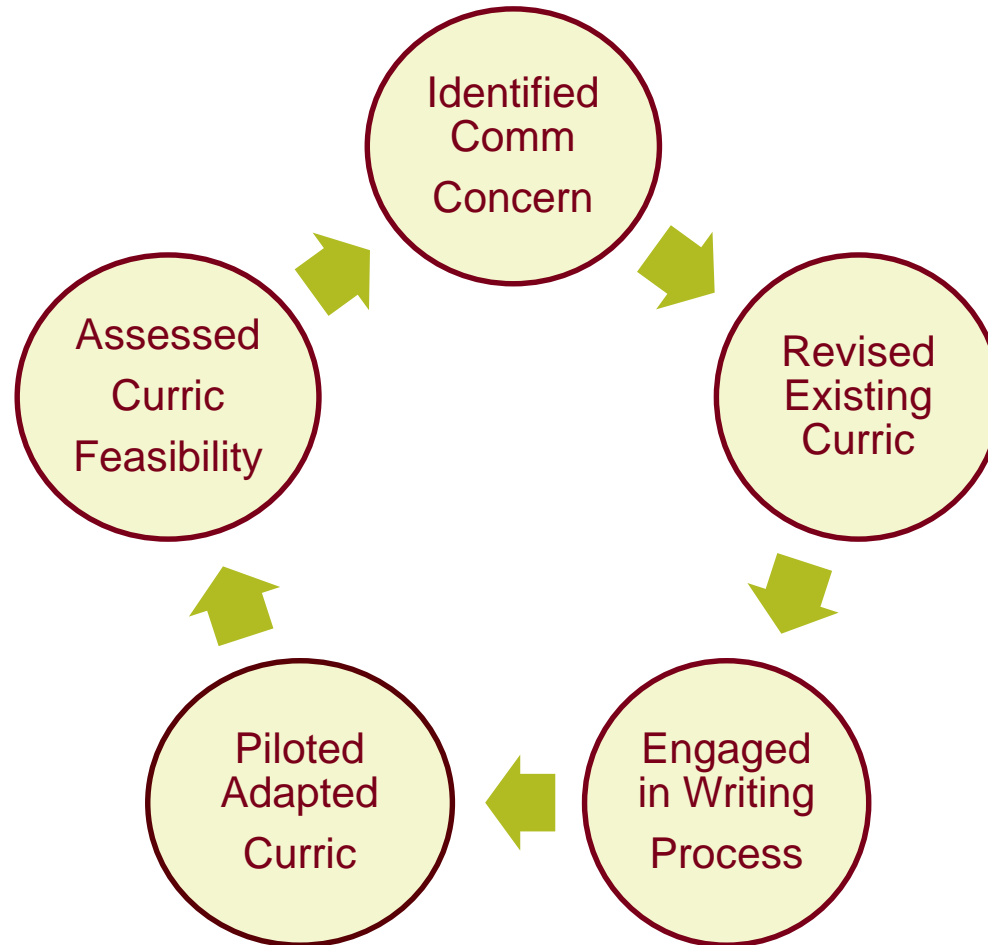
PADRES PREPARADOS, JÓVENES SALUDABLES



IDENTIFIED CONCERN

- By the literature
- By the community
- By the research team

CURRICULUM ADAPTATION



CURRICULUM ADAPTATION PROCESS

- The University of Minnesota team became partners with serving organizations



SETTING THE STAGE

- The core group determined that existing evidence-based substance use prevention curriculum was appropriate for Latino audiences
- The Padres Informados curriculum was identified as a starting point for adaptation.

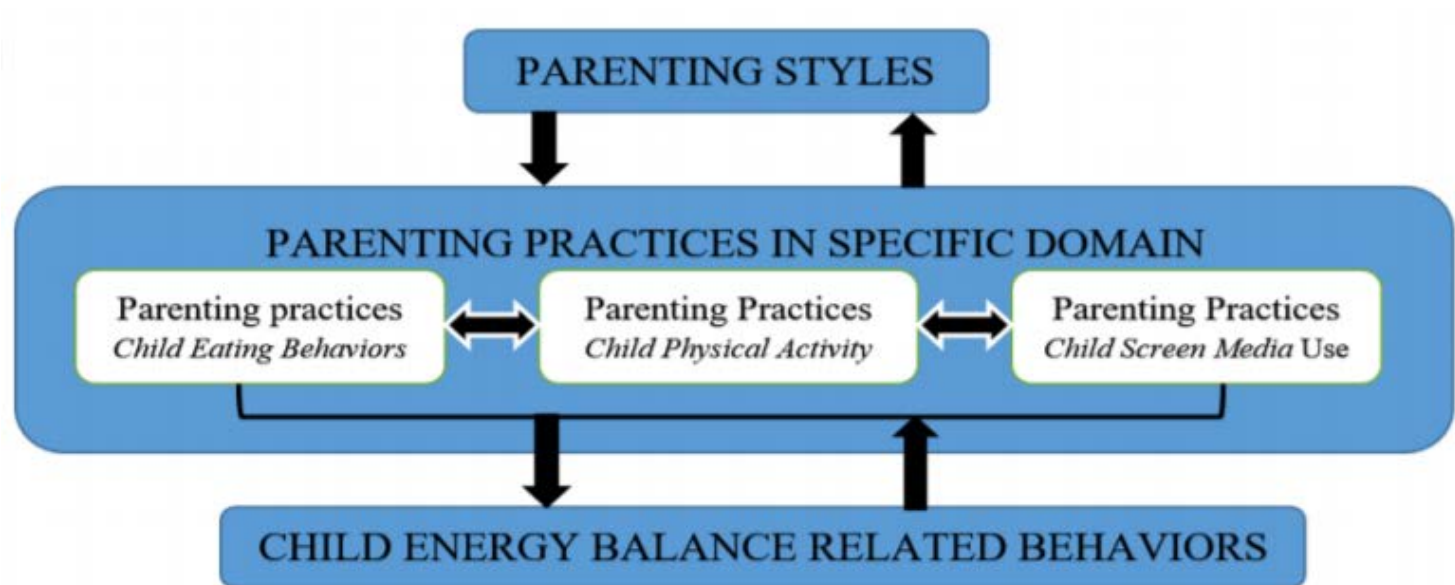
CONSULTED WITH THE COMMUNITY

- Focus groups
 - To identify behaviors and practices, challenges and barriers
 - To inform the adaptation process of the Padres Informados, Jóvenes preparados curriculum

REVISED EXISTENT CURRICULUM

- Developed Criteria
- Identified Core Concepts
- Identified and Kept Cultural Values

DEVELOPED A MODEL



(Adapted from Patrick 2013)

DRAFTED LESSONS OUTLINE

- Session 1: Positive parenting practices and healthy habits
- Session 2: Multiple cultures, active lifestyles
- Session 3: Adolescent development and healthy foods
- Session 4: Communication and limiting screen time
- Session 5: Rules, expectations and healthy beverages
- Session 6: Managing conflict and healthy snacks
- Session 7: Supervision and fast food
- Session 8: Connecting with your child and family meals

DRAFTED A FORMAT

- Format for each session:
 - Prepare food & share a meal (P+Y)
 - Parenting skills education (P)
 - EBRB education (P+Y)
 - Physical Activity (P+Y)
 - Application of Parenting Practices to EBRB (P)
 - Goal Setting (P+Y)

CONSULTED WITH THE COMMUNITY

- Father Advisory Board
 - Four- 90 minutes sessions
 - Discussion included program priorities and program preferences to increase relavance among fathers

ENGAGED IN WRITING PROCESS

- Included different voices from practitioners, community members and content experts to assure balance of the core curriculum content
- Reconciliated multiple views and perspectives
- Allowed a creative process in a participative environment

PILOTED THE CURRICULUM



PILOT RESULTS- FATHERS



Table 1. Pre- and post-intervention comparison of **parents' responses to the Food Behavior Checklist (n=14)**

Measures (range or servings)	Pre-intervention (mean ± SD)	Post-intervention (mean ± SD)	p
Fruit intake frequency (1-4) ^a	2.7 ± 0.8	2.7 ± 0.7	1.00
Daily fruit servings (serving) ^b	2.2 ± 0.9	3.2 ± 1.2	0.00
Fruit or vegetable snacks (1-4) ^a	2.7 ± 0.8	2.4 ± 0.8	0.21
Vegetable variety (2-8) ^c	4.6 ± 1.2	5.1 ± 1.5	0.55
Daily vegetable serving (serving)	2.0 ± 1.0	2.6 ± 1.0	0.07
Fruit and sport drink intake frequency (1-4) ^a	1.8 ± 0.8	1.7 ± 0.6	1
Regular soda intake frequency (1-4) ^a	2.2 ± 0.8	1.8 ± 0.6	0.07

^aA range of intake frequencies in response to “do you eat/drink ...?” 1=no; 2= yes, sometimes; 3 = yes, often; 4 = yes, always.
^bSelf-reported daily intake servings.
^cA summed score of intake frequencies of eating one or more kind of vegetable each day and eating two or more vegetables at main meals.

PILOT RESULTS- FATHERS



Table 2. Pre- and post-intervention comparison of parents' responses to the Parenting Style and Dimension Scale (n=14)^a

Parenting style and dimension	Pre-intervention (mean ± SD)	Post-intervention (mean ± SD)	p
Authoritative			
Warmth (5-25) ^b	17.5 ± 3.1	17.1 ± 2.3	0.39
Reasoning (5-25) ^b	17.1 ± 3.1	17.6 ± 1.9	0.08
Autonomy granting (5-25) ^b	15.7 ± 3.7	16.2 ± 2.8	0.73
Authoritarian			
Physical coercion (4-20) ^c	5.7 ± 1.8	5.3 ± 1.4	0.43
Verbal hostility (4-20) ^c	9.7 ± 2.3	9.6 ± 1.9	0.82
Non-reasoning (4-20) ^c	8.3 ± 2.3	6.5 ± 2.2	0.01
Permissive			
Indulgent (5-25) ^b	11.2 ± 2.3	11.6 ± 2.6	0.15
^a Response options for each item were 1=never, 2=once in a while, 3= about half of time, and 4= always. ^b Summed score of five items pertaining to each dimension of the corresponding parenting style. ^c Summed score of four items pertaining to each dimension of the corresponding parenting style.			

PILOT RESULTS-YOUTH

- Intake remained relatively stable with post-intervention intakes of 1.1 ± 1.1 fruit servings and 1.1 ± 0.7 vegetable servings.
- Paternal and maternal frequencies of providing unhealthy foods (range: 3-15) reported by youth were 7.0 and 6.6 before the program and 6.1 and 5.4 after the program, respectively.
- Youth participants reported that parents were less likely to make unhealthy food items available at home.



DISCUSSION

- The current program demonstrated preliminary effectiveness in improving food and activity parenting practices including setting goals, teaching, and modeling fruit and vegetable consumption and physical activity.
- Youth participants reported that parents were less likely to make unhealthy food items available at home. Parenting practices have been found to be mediating factors of children's behavior change.
- The relationship between parenting practices and child behavioral outcomes indicates the potentially positive impact of the current program on youth healthy lifestyle behaviors.

FURTHER STEPS

- The program will be implemented at the 6 collaborating sites during years 2-4.
- Participants will be recruited and enrolled by community sites/agencies that are known and trusted within the Latino community including two community based organizations, three extension sites, and one public school.





THANK YOU!

If you want to know more about the study, contact

Principal Investigator Marla Reicks

mreicks@umn.edu

Extension Educator Silvia Alvarez de Davila

salvarez@umn.edu

© 2017 Regents of the University of Minnesota. All rights reserved.

The University of Minnesota is an equal opportunity educator and employer. In accordance with the Americans with Disabilities Act, this PowerPoint is available in alternative formats upon request. Direct requests to 612-624-1222.