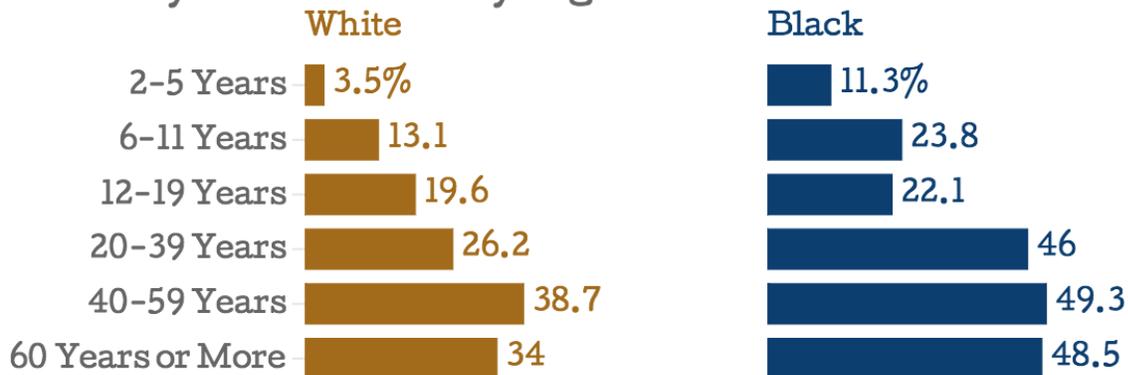


## FAMILY & CHILDHOOD OBESITY: A FACT SHEET

The reality of weight management and obesity among Africans is startling! At every age, blacks are more likely to be obese than whites, according to data from the [Journal of the American Medical Association](#). Comparative data are alarming. And, the collateral damage is profound and includes high blood pressure, high levels of blood fats, LDL cholesterol and other integral and significantly related health issues.

### Obesity in the U.S. by Age and Race



USNews

Lindsey Cook for USN&WR; Source: CDC

#### Other Important facts:

- The 10 states with the highest rates of hypertension are all in the South. West Virginia had the highest rate.
- Approximately 20 percent of cancer in women and 15 percent of cancer in men is attributable to obesity.
- An estimated 24.2 percent of kidney disease cases among men and 33.9 percent of cases among women are related to overweight and obesity.
- Almost 70 percent of individuals diagnosed with arthritis are overweight or obese.

<https://www.heart.org/en/news/2018/05/01/understanding-the-state-of-obesity-in-america>

**The Family:** The health of the African American family and the family unit itself is in peril because of nutritional patterns coupled with lack of exercise. Other causative factors are lack of access to regular preventive health care that include provider assistance and instruction on healthy eating and ways of being physically active even when the environment may not be conducive to outdoor modalities for weight control. It is also important to factor into the equation of healthy eating and weight management the fact that many African Americans do not have a regular source of health care resulting from a lack of health insurance. The under-insurance rates in African American families and individuals is a major health and social policy issue. This latter fact is good reason for increased vigilance in protecting health.

### **OTHER RISK FACTORS AND IMPLICATIONS FOR WEIGHT MANAGEMENT**

STROKE – African Americans are about 50 percent more likely to experience strokes than Whites and for African American men, the odds are 70 percent. Symptoms such as weakness on one side of the body, confusion and trouble speaking and understanding, trouble seeing in one or both eyes, dizziness or difficulty walking, and sudden severe headaches are all an indication that medical assistance and intervention should be immediately obtained.

<http://www.healthcommunities.com/stroke/risk-african-americans.shtml>

Obese African American women had significantly higher anxiety levels, poorer perception of their physical health, more often were overweight as a child, had overweight parents or siblings and experienced more psychosocial problems in their family growing up, compared to overweight and normal weight women, all of which indicate that interdisciplinary clinical intervention may be appropriate. See the article published in the Journal of the National Medical Association for recommendations for action.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2568718/> See also below description of the “I Am Woman” program that was implemented by Community Voices, Morehouse School of Medicine in Collaboration with the Columbia Urban League, South Carolina.

### **CHILDREN: WEIGHT MANAGEMENT, OBESITY, HEART DISEASE, ASTHMA.**

Rates of severe obesity (BMI above 40, greater than 120 percent of the weight and height percentiles for an age range) are also higher among Latino children ages 2 to 19 (6.6 percent) and in African American children (8 percent) compared with White children (3.9 percent).

Many obese children become obese adults, especially if one or both parents are obese.

Childhood obesity has a great influence on risk factors for cardiovascular disease (CVD) and the development of hardening of the arteries (atherosclerosis) which increases the potential for hypertension, heart attack and stroke in later life.

Children with obesity are at increased risk for developing asthma, which is already one of the most common chronic diseases among children. Obesity is associated significantly with worsening asthma symptoms, and poor asthma control. This leads to increase medication use and hospitalizations. And, having an asthma event can mitigate against regular physical activity. Further information on the risk and intervention can be found at

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3377949/>

The Links, Incorporated sponsored and implemented a National Childhood Obesity Initiative in which many childhood obesity intervention models were implemented by chapters across the nation which yielded excellent results. Examples of Links led work to address childhood obesity can be found on this link: <https://www.slideserve.com/rhonda/the-links-incorporated-can-you-imagine-me> Numerous other examples of options in programming can be found on the internet by searching Links, Inc. Childhood Obesity. Information below displays the reach of the Links childhood obesity program across the United States though many, many intervention activities undertaken by local chapters with local funding are not reflected on the map (see below) and continue to this day and a link to data on the Members Only section, Linksinc.org).

### **THE WAY FORWARD: Mother-Daughter Dyads, Family/Spouses/Partners, Boys & Men, and Schools: IT REALLY DOES TAKE A VILLAGE**

Mother and Daughter Dyads offer promise in shared decision-making and actions regarding diet and physical activity to promote weight loss and weight

management. Information on Mother-Daughter dyad programs can be found at:  
<https://www.sciencedirect.com/science/article/pii/S2211335518300780>

Spousal/Partner support was found by researchers to be a buffer against poor health and weight management behaviors for husbands, while depressive symptoms exacerbated poor health and weight management behaviors for wives. Economic pressure directly influenced depressive symptoms and spousal support. Addressing what are referred to as the social determinants of health that include economics and education, among others, is a critical program component.

<https://www.ncbi.nlm.nih.gov/pubmed/25903249>

Save Our Sons is a community-based, culturally responsive, and gender-specific intervention aimed at reducing obesity and diabetes among replicated samples of African American men. A brief description of the Save Our Sons Project that was implemented by the Morehouse School of Medicine in collaboration with the National Urban League and its' affiliates, funded by the Pfizer Corporation can be found below and in the following link.

[https://www.researchgate.net/publication/47348419\\_Addressing\\_Obesity\\_and\\_Diabetes\\_Among\\_African\\_American\\_Men\\_Examination\\_of\\_a\\_Community-Based\\_Model\\_of\\_Prevention](https://www.researchgate.net/publication/47348419_Addressing_Obesity_and_Diabetes_Among_African_American_Men_Examination_of_a_Community-Based_Model_of_Prevention) .

The unanticipated but very significant and unique success of this program that included health education sessions, facilitated use of fitness facilities, and general 'brother-to-brother' sessions was also measured by the numbers of men who began to bring their entire family network into new activities including golf, swimming, tennis, and biking. A physical and cultural change were significant interventions. The goal was weight loss and elimination of obesity along with reductions in issues such as hypertension but so much more can be achieved including significant male bonding that permeated the program and made it so successful.

Childhood Weight Management and Obesity Prevention. Nutrition and physical activity lessons can be woven into the curriculum in core classroom subjects, physical education, and after-school programs-to teach skills that help students choose and maintain healthy lifestyles. In addition to teaching evidence-based nutrition and activity messages, school physical education should focus on getting students engaged in high-quality and regular activity. General program intervention options may also be found at:

<https://www.hsph.harvard.edu/obesity-prevention-source/obesity-prevention/schools/school-obesity-prevention-recommendations-read-and-print/>

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## **Additional Information: More Tools & Techniques and *What YOU Can Do!*\***



### **Can You Imagine Me? National Childhood Obesity Initiative**

#### **Project Overview**

The joint Community Voices and Links, Incorporated National childhood obesity initiative was embraced to give a greater voice and sustainability to the health and well-being of our children. The purpose is to develop and implement strategies targeted to addressing the specific health needs of African-American children. Building upon the initial 7 chapter pilot phase conducted in the Southern Area, this project seeks to increase awareness and heighten understanding surrounding the multi-dimensional issues that contribute to obesity in African-American children. Additional goals are to: develop an action-oriented agenda for

disseminating key policy and educational messages that aid in the prevention of childhood obesity and reduce the incidence of Type II diabetes as well as pre-diabetes related to obesity among African-American children and to establish approaches that will strengthen collaborative networks regarding obesity prevention to sustain on-going health initiatives. Twenty-seven (27) Links chapters were involved in this National Initiative and engaged over 680 children and their families. See link for details.

[https://www.dropbox.com/sh/y9sanrynmtf1v94/AABZGPKNva8t1UK09Nj4Arma/Programs/Health%20and%20Human%20Services/Childhood%20Obesity?dl=0&subfolder\\_nav\\_tracking=1](https://www.dropbox.com/sh/y9sanrynmtf1v94/AABZGPKNva8t1UK09Nj4Arma/Programs/Health%20and%20Human%20Services/Childhood%20Obesity?dl=0&subfolder_nav_tracking=1).

#### **Research Activities**

Twenty-seven chapters nationwide were selected to implement the program in their local communities by engaging children in a six session education curriculum and fun activities such as: Cooking Demonstrations, Gardening, Zumba Classes, Skiing and Walk-a-thons.

### Research Findings

Throughout the implementation phase of the project the following outcomes were achieved:

- **Nationwide Project Overview:** Twenty-six chapters successfully completed the program and have submitted all required documentation. Cumulatively, the program engaged 683 minority children between the ages of 8 and 12.
- **Participant Profile- Ethnicity:** Ninety-two percent ( $n=628$ ) of the program participants were of African American descent. Hispanic and Latino children made up 6% of the overall target population. Lastly, only 1% of the participants were comprised of Asian Pacific Islanders, Arabians and Caucasians.
- **Participant Profile- Gender:** Of participants in the program 58% ( $n=396$ ) of participants were boys; 42% ( $n=287$ ) were girls.

**Body Mass Index:** Forty-eight percent of the students engaged in the program had a body mass Index (BMI) which classifies them as overweight or obese. Two percent of the students were classified as underweight, while 50% were classified in the healthy weight range. Classifications were made by comparing children's measurements to the CDC children's BMI percentile chart based upon their age and weight.

## Mother-Daughter Dyads Project



### Project Overview

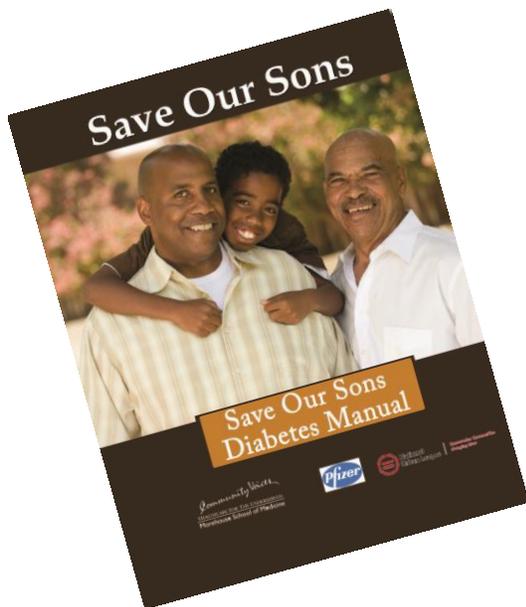
Thanks to the support of the AETNA Foundation Community Voices implemented a research study aimed at examining psychosocial, behavioral, socio-cultural, and environmental factors that may contribute to African American mothers and daughters being overweight. This project also examined methods utilized by pediatricians and family medicine providers to address overweight status among African American female patients.

Key activities of this project:

Focus groups with 28 overweight African American girls' ages 8-12 years old and their biological mothers concerning health beliefs, psychosocial and environmental risk factors and health-related behaviors that may contribute to their overweight status.

- Face-to-face semi-structured interviews with 50 primary healthcare providers concerning structural and practice specific related issues that may assist and/or prevent their capabilities to offer optimal weight reduction and/or management support services for their African American female patients.
- Use of data to inform the development of a culturally centered gender-specific primary healthcare intervention model to help prevent excess weight/overweight status among African American females.

The results included 'prescriptions' that address the needs expressed by the daughters and mothers both independently and as a dyad. These interventions addressed the mother-daughter dynamic, neighborhood challenges, stress of the mother and daughter as a dyad and as individuals living in resource challenged neighborhoods. The goal: to incorporate into evidence-based best practice those variables that stand the best chance of introducing sustainable change into mother-daughter dynamics to include family wellness behavior.



## Save Our Sons: Diabetes and Obesity Prevention Program for African American Men

### Project Overview

The Lorain Country Branch of the National Urban League and the Urban League of Greater Dallas and North Central Texas in partnership with Community Voices: Health Care for the Underserved at Morehouse School of Medicine and Pfizer established the Save Our Sons program. Save Our Sons targets African American men ages 18 and up and focused on ways to incorporate healthy eating and exercise in an effort to reduce diabetes rates and maintain a healthy lifestyle. The Save Our Sons project had two overarching goals: 1) To develop, implement, and evaluate a health education model

aimed at reducing diabetes and obesity among African American men, and 2) To improve access to primary healthcare services for African-American men.

### Research Activities

Workshop sessions included a six-session education curriculum intervention, exercise education, medical screenings, and weight loss data for program participants. We connected program participants with medical and social services to meet their individual needs. Participants were also provided with mental health interventions and a medical home during the program.

### Selected Findings

#### Medical Outcomes

The SOS program achieved positive changes in the health and medical status of its 542 participants. Key results include the decrease of Stage 2 hypertension decreased by 26%, the combined weight loss of over 1095 pounds among all participants for an 4lb. per male average, all participants classified as diabetic or pre-diabetic losing weight, the decrease in diabetic status by 1% as well as a 13 point on average drop on average in glucose levels among diabetic participants and achieving a dramatic 14% decrease in unhealthy cholesterol levels among participants. We assisted 37 men with obtaining a medical home through The Lorain County Free Clinic (Lorain County) or the Parkland Medical Assistance Program (Dallas, TX).

### **Body Mass Index**

At the start of the program, 55% of program participants were classified as obese or extremely obese. Given the obesity status of the men in program, a strong focus was placed on both physical activity and proper nutrition. Post program substantial results were achieved with a 4% decrease in extremely obese status; also the obese classification achieved a remarkable 10% decrease. There was a decrease of 3% in overweight status among the men. The decrease in the healthy range was achieved by the increased weight lifting activity of men who loss fat but gained muscle. Through this program significant weight loss was achieved with 47% of all participants, losing weight for a total of 1095 pounds loss and 4lbs on average lost. While 4lbs was the average for the program, 60 lbs. was the highest weight lost and a large number of participants lost more than 9 lbs. At the start of the program, 19% of participants were classified as either diabetic or pre-diabetic. At the conclusion of the program, the rate of diabetes dropped from 11% to 8%. This decrease can be attributed in part to the high level of physical activity among men, with their average weight loss of 4lbs or more.

### **Diabetic Status**

All participants classified as diabetic pre-program lost weight during the program. The rate of pre-diabetes increased from 8% to 9% due to the reclassification of previously diabetic participants. Of the participants who are still classified as diabetic, blood glucose levels dropped an average of 13 points during the intervention.

The Save Our Sons Program has become a nationwide model and has led to the development of the Save Our Families Initiative.

## **I Am Woman: Fitness and Nutrition Program for African American Women**

## Research Overview

The Columbia Urban League in partnership with Community Voices: Healthcare for the Underserved at Morehouse School of Medicine and General Mills provided The I Am Woman program for the Columbia, SC community. The I Am Woman program is a comprehensive culturally tailored women's health education program designed to increase awareness on health issues, increase physical activity and increase healthy food choices among African American women. The program which targeted African American women and had three main goals 1) to provide a culturally tailored intervention targeting African American women and their families, 2) to increase community awareness on issues related to women's health and 3) to assist community members with navigating the healthcare system and increasing access to a medical home.

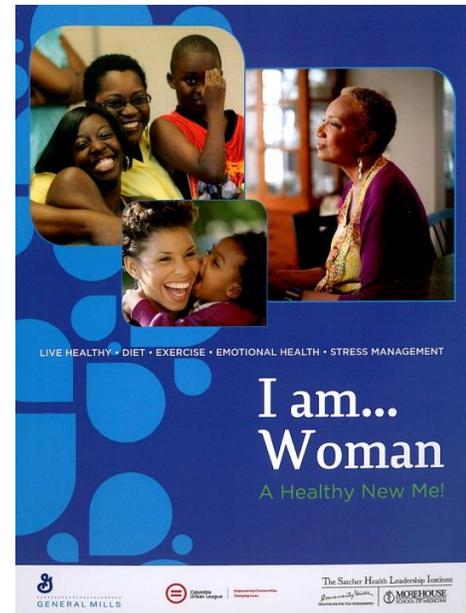
## Research Activities

The intervention included seven sessions which covered topics which included health and nutrition. Additional program activities included: mental health seminars, exercise interventions, cooking demonstrations and free health screenings.

## Research Findings

**MEDICAL OUTCOMES:** Blood Pressure: Stage 1 hypertension saw a remarkable 17% decrease, while Pre-hypertensive and Normal ranges both saw increases of 6% as a result of a decrease of unhealthy blood pressure status. Blood Glucose: At the conclusion of the program the rate of pre-diabetes dropped from 13% to only 8% while the diabetes rate remained unchanged. Of the participants who are still classified as diabetic, their blood glucose levels dropped an average of 2 points during the intervention. **PROGRAM OUTCOMES:** Increase in Knowledge: Test scores improved 15% across program concepts which demonstrate a strong increase in program concepts knowledge. Program concepts include physical activity in daily life, ways to prevent diabetes, how to eat healthier, and speaking to a healthcare provider. Retention Rate: 75% of all program participants completed the program.

\*All work is a product of Community Voices or the Satcher Health Leadership Institute at the Morehouse School of Medicine. Curricula are available.



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## Submitted by Link Henrie Monteith Treadwell, Atlanta Chapter (GA)

Henrie M. Treadwell is Research Professor in the Department of Community Health and Preventive Medicine at the Morehouse School of Medicine (MSM). She came MSM after 17 years at the Kellogg Foundation. She received her degrees from the University of South Carolina where she was the first African American woman ever to graduate from USC and the first since the Reconstruction, Boston University, Atlanta University, and completed post-doctoral studies at the Harvard School of Public Health. Dr. Treadwell also had the honor of serving in the leadership role for the National Childhood Obesity Initiative/Can You Imagine Me?.

