Pilot program helps Hispanic children adopt healthier lifestyle, prevents excess weight gain

SAN ANTONIO (June 15, 2015) — Hispanic children who participated in a unique weight-maintenance pilot intervention were more likely to adopt healthy lifestyles, resulting in healthier weights, than children who didn’t participate, according to a UT Health Science Center at San Antonio study in the June 2015 issue of the journal *Childhood Obesity*.

The pilot study, which paved the way for a new $2.9 million grant to test the intervention on a larger scale through 2019, was implemented with parent-child pairs in a federally funded rural health clinic in New Braunfels from March 2010 to April 2011.

Children who participated were Hispanic, age 5 to 14, and were either overweight (body mass index between the 85th and 95th percentile for age and gender) or obese (body mass index greater than 95th percentile).

“U.S. Hispanic children experience a disproportionate burden of obesity. Comprehensive behavioral programs have been shown to help these children improve their weight status. However, more efficient interventions that can be done in primary care clinics must be developed for Hispanic children,” said Deborah Parra-Medina, Ph.D., M.P.H., study author and associate director for education and training programs at the Institute for Health Promotion Research at The University of Texas Health Science Center at San Antonio.

The pilot study, which was funded by the Centers for Medicare and Medicaid Services, trained pediatric health care providers and the clinical staff to implement a standard of care intervention with behavioral counseling – consistent with the American Academy of Pediatrics established guidelines – during a routine clinic visit and three follow-up visits over four months.
Half of the randomized participants received additional behavioral intervention components, including a face-to-face counseling session with a health educator immediately after the participant’s first visit with the pediatrician and monthly telephone counseling and mailed newsletters for the four-month period. The in-person session with the health educator also included creating a family action plan.

All participants were asked to pick two healthy dietary behaviors from a Healthy Lifestyle Prescription that listed 11 healthy lifestyle strategies, including eating a daily healthy breakfast, not drinking sugar-filled drinks, and limiting eating out.

“Participants and their families concentrated on adopting those two healthy lifestyle changes,” Parra-Medina said. “They also were tasked with playing outside 60 minutes a day outside of school or limiting television screen time to no more than two hours per day.”

The pilot study’s 118 participants had their weight, waist circumference and height assessed at the beginning of the study and again after four months.

Results showed that the families who received additional counseling and education did better than those that did not receive the additional behavioral intervention.

The standard care children had a 90.2 percent weight gain while the intervention group had a 70.2 percent weight gain. The standard care participants had a 73.8 percent waist circumference increase while the intervention participants had a 50.9 percent increase.

“In these studies, we do not promote weight loss with children. We promote a healthier rate of weight gain. Children have the advantage of growing. We hope to slow down their weight gain so they can grow into their weight. We hope they will adopt these healthy lifestyle changes so they will not leave childhood overweight or obese and continue that trajectory into adulthood and become obese adults,” Dr. Parra-Medina said.

The success of this pilot study resulted in a $2.9 million grant to the UT Health Science Center from the Eunice Kennedy Shriver National Institute of Child Health and Human Development, which is part of the National Institutes of Health. The five-year study, titled “Health4Kids Intervention Trial for Hispanic Families,” began last year and is currently enrolling participants from pediatric clinics of the University Health System.

“The pilot study was the ‘proof of concept’ we needed to be able to get full funding. With what we learned from the pilot study, we made several modifications, including extending the study to six months, adding text messaging, using electronic pedometers to track physical
activity, limiting the ages to 6 to 11, and limiting inclusion to children who have body mass indexes between the 85th and 98th percentiles. In addition, we will do follow up with the family for an additional six months," she said.

When the study is completed in 2019, Dr. Parra-Medina and her team at the Institute for Health Promotion Research will be able to measure if a pediatric-clinic-based weight management program can help change the trend of obesity in this country’s Hispanic children.

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The Institute for Health Promotion Research (IHPR) at The UT Health Science Center at San Antonio investigates the causes and solutions to the unequal impact of cancer and chronic disease among certain populations, including Latinos, in South Texas and the nation. The IHPR, founded in 2006, uses evidence-guided research, training and community outreach to improve the health of those at a disadvantage due to race/ethnicity or social determinants. Visit the IHPR online at [http://ihpr.uthscsa.edu](http://ihpr.uthscsa.edu). Follow the IHPR’s Latino health social media campaign, @SaludToday, at [http://www.saludtoday.com/blog](http://www.saludtoday.com/blog).

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