

# **GoKids Boston: Innovative Ideas for Fostering Children's Health in Community Programs**

Presented by:

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# We are all gatekeepers for children's healthy development.

- “Optimal health is a dynamic balance of physical, emotional, social, spiritual, and intellectual health.” M. O’Donnell, Am J Health Promotion 24: iv: 2009
- In the US, unhealthy lifestyles are so widespread that they are causing a chronic disease epidemic.
- A third of US children are overweight or obese, placing them at risk for premature, lifelong chronic disease.
- Childhood obesity is preventable through adequate physical activity and healthy eating.



# Who we are:

- Unique fitness, research and training center
- Within College of Nursing and Health Sciences
- Team includes faculty, professional staff and students

# Utilization—FY2011

- **KIDS:**
  - 178 unique children, 266 total enrollments
  - 8 programs
  - 3,061 visits
- **STUDENTS:**
  - 89 CNHS students/4 classes
  - 324 visits
  - 15 paid/volunteer students



# NAA Healthy Eating and Physical Activity Standards (NAA HEPA) Address:

- Content and Quality
- Staff Training
- Social Support
- Program Support
- Environmental Support



# A Process for Implementing the National Afterschool Association Healthy Eating and Physical Activity Standards

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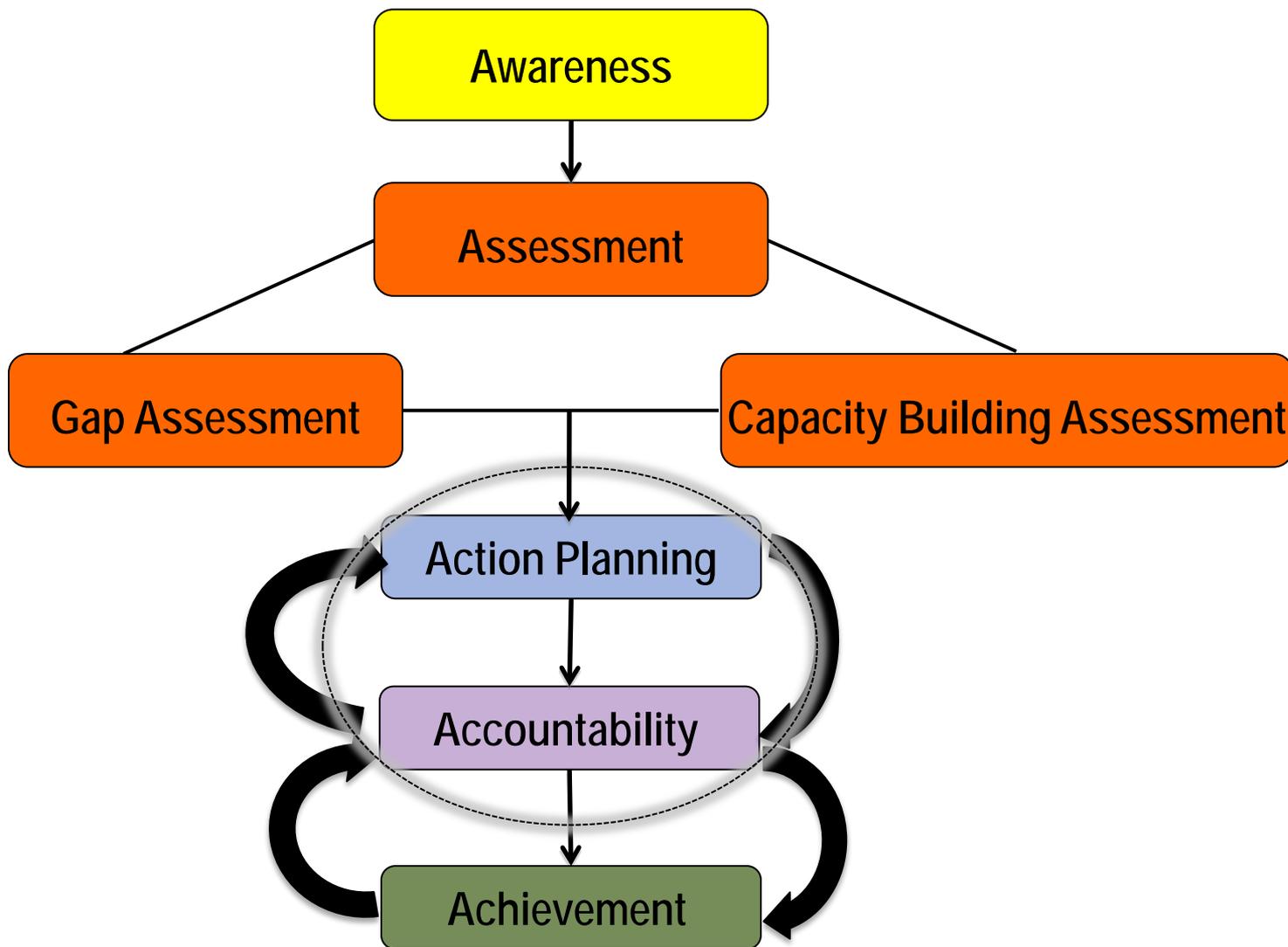
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Funding generously provided by the  
Pritzker Family Foundations

# A+

- A+ is a process for implementing standards for Healthy Eating and Physical Activity in out-of-school time programs
- Programs create solutions that are as simple as possible yet as detailed as necessary
- Site Staff collect and share information about their site's healthy eating and physical activity practices using a series of tools
- Site Staff and Program Directors work collaboratively on Action Planning to outline what sites need to do to achieve and sustain the Standards
- Key Decision Leaders (program, branch, and corporate leaders) promote, support, and recognize the steps sites take with A+, no matter how long the process takes

# Moving Through **A**<sub>+</sub>: Use the Navigator



# A+ Navigator: Step by Step

	What happens	Who's involved
Awareness	Key decision leaders at all levels of the organization understand the importance of promoting physical activity and healthy eating	CEO, Vice-President of Child Care, Program Directors, Community Health leaders
Assessment	Sites assess current practice and diagnose capacity for improvement <ul style="list-style-type: none"> <li>• Gap Assessment - what's happening at our site</li> <li>• Capacity Building Assessment – what's getting in our way</li> </ul>	Site Staff
Action Planning	Plan, communicate, and implement improvement plans based on information collected from your site's Assessment <ul style="list-style-type: none"> <li>• Action Planning – how are we going to do this</li> </ul>	Site Staff, Program Directors
Accountability	Monitor progress on Action Plans among staff, sites, and the overall program; and monitor sustainability when goals are achieved	Program Directors, CEO, Vice-President of Child Care
Achievement	Afterschool programs fully implement the Health Promotion Standards and are recognized and rewarded for providing healthy environments	All Staff, Parents, Kids

**A**wareness:

## NAA Healthy Eating Standards

The next slides show the actual standards.

# Healthy Eating: **Content & Quality**

Programs serve foods and beverages in amounts and types that promote lifelong health and help prevent chronic disease. These include minimally processed foods made with whole grains and heart-healthy fats or oils and without added sugar or trans fats; fruits and vegetables; and beverages made without added sugars.

# Menu Content & Quality:

- On a daily basis, the Program
  - serves a fruit or vegetable (fresh, frozen, canned or dried without added sugar)
  - Offers water at the table during snack, and has water accessible at all times.
  - Only serves foods made without trans fat
  - Serves beverages that are not made with caloric sweeteners. Beverages made with caloric sweeteners include but are not limited to sodas, juices, juice drinks/ades, sports drinks or iced teas.
  - Serves no candy or other foods that are primarily sugar based.
  - Through portion size and variety of items offered each day, provides each student with enough calories to avoid both hunger and over eating.
  - Offers choices and accommodates dietary restrictions related to allergy, food intolerance, religion and culture. Examples include offering high-calcium beverages for children that cannot drink regular cow's milk such as soymilk or lactose-free milk.

# Menu Content & Quality:

- The menu
  - Emphasizes nutrient dense options including baked goods made with whole grains and without trans fats, and protein foods that include lean meats, nuts or beans.
  - Emphasizes healthy beverages including low or nonfat milk; plain or naturally flavored non-carbonated water; and 100% fruit juice
    - Does not offer flavored milk made with added sugars or artificial ingredients.
    - Fruit juice should be limited to one 8 oz serving per day
    - No limits on low/nonfat plain milk or water
  - Offers sweet baked goods no more than twice a month, and these contain no trans fats
  - Serves no foods that are deep fried, par fried or flash fried unless a healthy oil (unsaturated or poly-unsaturated such as canola, peanut or olive oil) was used in the frying process.
    - Does not offer fried salty snacks such as potato or corn chips regardless of type of oil used in cooking
  - Avoids foods and beverages made with artificial ingredients (sweeteners, flavors, or colors)
  - Is based on a minimum 2 week cycle, and ideally a 4 week cycle to maximize variety.

# Menu Content & Quality:

- The Program's food choices are guided by an evidence-based source of nutrition guidelines for snack menus whose content is drawn from scientific literature. Programs should avoid guidelines produced by institutions with ties to specific products or for-profit industries. Examples of evidence based sources of nutrition guidelines include but are not limited to:
  - Institute of Medicine Nutrition Standards for Foods in Schools. *Standards for the Afterschool Setting*. [URL]
  - California Department of Education *Nutrition Standards for Snacks in After School Programs*. [URL]
  - Alliance for a Healthier Generation school meals and competitive foods/ afterschool program standards. [URL]
  - USDA Child and Adult Care Food Program [URL]
  - FRAC document [URL]
  - YMCA health promotion standards for afterschool programs [URL]

# Healthy Eating: **Staff Training**

Staff regularly participate in learning about healthy eating grounded in effective training models using content that is evidence-based.

# Healthy Eating:

## **Nutrition Education Curriculum**

Programs that offer nutrition education classes with ensure that materials presented to children are evidence-based, do not support a particular industry or food sector agenda, and delivered by qualified personnel.

# Healthy Eating: **Social Support**

The program creates a social environment, including positive relationships, that encourages children to enjoy healthy foods. Research shows that children's food choices are influenced not only by food appearance, taste and familiarity, but also by social factors including peers, role models, group dynamics, and having healthy options.

# Social Support:

- Function of food in the program is to promote healthy eating and good nutrition.
  - Food is not used as a reward or punishment
  - Holidays and birthdays are celebrated with healthy items
  - Fundraisers emphasize healthful foods or rely on nonfood items.
- Students participate in food selection, distribution, preparation, and clean-up.
- Staff model and promote healthy eating.
  - Staff members sit and eat the daily program snack or meal with students
  - Staff discuss the health benefits of snack components with children
  - Staff members do not bring in/consume personal food or beverages in front of children other than items that would appear on the program's menu.

# Healthy Eating: **Program Support**

Infrastructure supports healthy eating through management and budgeting practices.

# Healthy Eating: **Environmental Support**

The program's physical environment supports healthy eating. Availability of vending machines, advertising and availability of kitchen facilities can all influence food choices and food availability.

# Environmental Support:

- No posters or advertisements on the walls promote unhealthy foods or include logos or trademarks from companies that produce foods that do not support the healthy eating standards.
- The program environment provides positive messages about healthy eating through posters, pictures and books
- Students do not have access to vending machines that sell foods and beverages that do not support the healthy eating standards.
- The program restricts screen time (as described in Physical Activity section) to avoid exposure to food marketing.
- The program has adequate kitchen and storage facilities—and has adequate access to them-- to support the healthy eating standards, for example through shared use agreements with host sites.

**A**wareness:

## NAA Physical Activity Standards

The next slides show the actual standards.

# Physical Activity: Content & Quality

The program's physical activity offerings support the USDHHS 2008 guidelines recommending that all children and youth obtain at least 60 minutes of physical activity per day that includes a mixture of moderate and vigorous intensity activity as well as bone and muscle strengthening activities.

# Content & Quality:

- Dedicates at least 20% or at least 30 minutes of morning or afterschool program time to physical activity (60 minutes for a full day program).
- Provides physical activities in which students are moderately to vigorously active for at least 50% of the physical activity time.
- Play takes place outdoors whenever possible.
- Ensures that daily physical activity time includes aerobic and age-appropriate muscle- and bone strengthening and cardio-respiratory fitness activities.
- Includes a variety of physical activity options aimed at engaging students in fun, recreational, and life-long learning opportunities.

# Content & Quality:

- Offers unstructured free play or structured activities that involve all program attendees.
- Offers non-competitive activities.
- Offers competitive physical activities in an intra mural program (see NASPE guidelines).
- Offers activities that are adaptable, accessible and inclusive of children with all abilities, including physical, sensory and intellectual disabilities.
- Conducts physical activities that are integrated with enrichment, academic, or recreation content; goal-driven, planned, sequentially designed and delivered, safe, inclusive, developmentally appropriate, and success-oriented.
- Provides short physical activity breaks between and/or within learning activities to invigorate children and eliminate long periods of sitting; incorporates physical activity into transition time.
- Does not permit access to television or movies, and limits digital device time to less than one hour per day to allow for other activities. Digital device use is limited to homework or devices/programs that actively engage children in moderate to intense physical activity.

# Physical Activity: **Staff Training**

Staff participate in learning about physical activity using effective training models and using content that is evidence-based.

# Physical Activity: **Social Support**

The program creates a social environment, including positive relationships, that encourages children to enjoy and participate in physical activity. Research shows that children's physical activity choices are influenced not only by preference and familiarity, but also by social factors including peers, role models, group dynamics, and having multiple options.

# Physical Activity: **Program Support**

Infrastructure supports physical activity through management and budgeting practices.

# Physical Activity: **Environmental Support**

The program's physical environment supports the physical activity standards.

# Assessment

# Assessment

Sites need to assess current practices and their capacity building needs.

Completing the **Gap Assessment portion of the Assessment** will help sites:

- Identify which Standards the site is meeting
- Identify which Standards the site is not meeting

Completing the **Capacity Building Assessment portion of the Assessment** will help sites:

- Identify specific barriers related to knowledge, skills, and resources that make some Standards more difficult to implement than others
- Realize that despite having barriers, they can prioritize where to begin Action Planning



# Assessment

After completing your Site's Assessment,

Site Staff: at this point you should know:

- Which Standards you are meeting, not meeting, close to meeting
- What your capacity building needs are for each Standard

Program Directors: at this point you should know:

- How each site is doing and where sites want to start
- What are the common gaps and capacity building needs across sites
- Effective planning probably means scheduling time to observe at the sites

# Action Planning

# Action Planning

- Is planning, communicating, and implementing improvement plans based on Assessment
- Is thinking reflectively
- Allows sites to create action steps that address their gaps and capacity building needs
- Is identifying what might be done differently



Site & Program  
Directors work  
together

# A Good **A**ction Plan will:

- Address gaps and capacity building needs identified on your Assessment
- Include simple action steps that map how your team will meet the Standards
- Steps should be clear, realistic, measurable, and observable with target completion dates
- Identify people responsible for each action step
- Include how kids can also be part of the change
- Be flexible and change if necessary
- Feel “right” – inspire commitment and motivation

# Sample Action Plan:

SAMPLE TOPIC

## Improve menu options

Action steps are clear, realistic and measurable.

**Notes from Assessment:** need more kid feedback; identify to parents what trying to do; better shopping

Specifically addresses the capacity building needs noted on the Assessment.

Action	Person/s Responsible	Target Date
Complete Healthy Eating Assessment.	Henry	By June 30
Taste test one new fruit or vegetable	Jill w/kids	Every Tuesday
Talk to the cafeteria manager about getting a cooler of water	Colin	By next Monday
Talk to PD about buying water cooler	Suzie	After talk to cafeteria manager

Observable target completion dates.

Identifies person(s) responsible for each action step.

# Achievement

# Achievement

- Is promoting a healthy environment that offers appropriate, adequate physical activity and provides healthy snacks in an environment that supports and encourages healthy lifestyles every day.
- Is building healthy relationships with all kids
- Is when staff model healthy behaviors

# Physical Activity **A**chievement is when:

- Physical activities meet the Standards every day.
- Sites formally observe 2 to 3 times per year to continuously monitor quality.
- Sites don't rely on television to occupy kids time.
- Sites don't sit kids out of physical activities for discipline.
- Sites have no mass media advertising up.
- Sites are building healthy relationships with all kids.
- Everyone (staff, kids, parents) understands they have a role.
- We have a system in place to address backsliding.

# Healthy Eating **A**chievement is when:

- Snacks meet the Standards every day.
- Sites review snack menus 2 to 3 times per year to continuously monitor quality.
- Sites are building healthy relationships with all kids.
- Everyone (staff, kids, parents) understands they have a role.
- We have a system in place to address backsliding.

# Collaborating to Improve Effectiveness

# Innovation in Community Based Organizations

- Focus on Providing better *services*
  - *Note:* service is often the outcome of interest
- Real Risks:
  - Waste time, energy
  - Visible failures
  - Lost Opportunities

# From the Community Based Organization Side

- Mission driven systems
- Underfunded
- Service oriented (not evaluation)
- Spectrum of business models, from simple to complex (e.g., storefront to YMCA network)

# Considerations for Translational Research

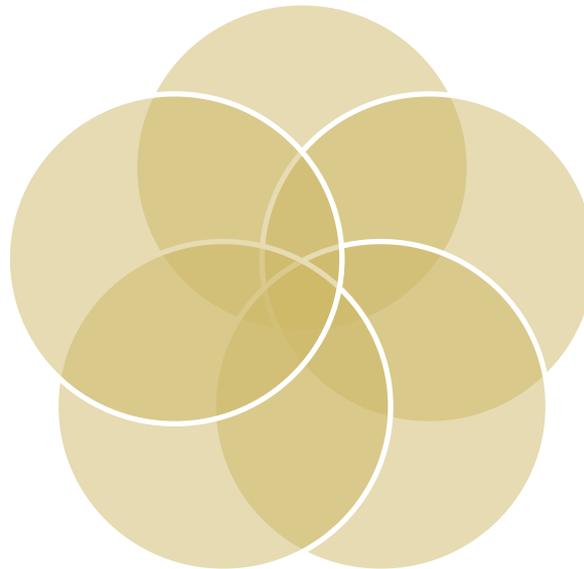
Research  
Framework  
(CBPR)

The Human  
Element

Business &  
Management

Innovation  
Theory

Research  
Design



# Strong Research Collaboratives



# Considerations for Translational Research

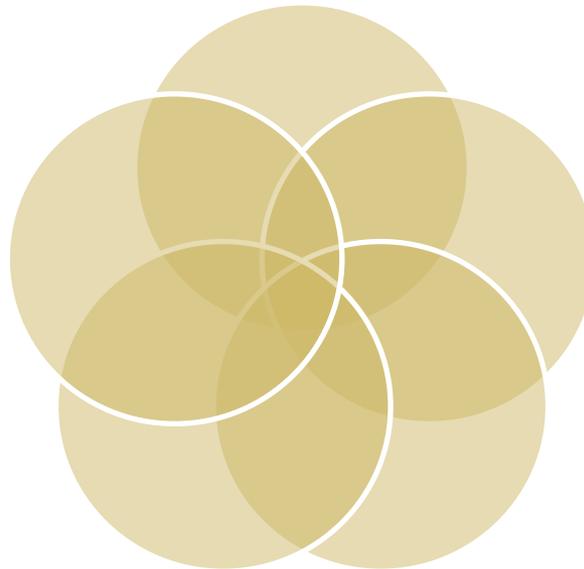
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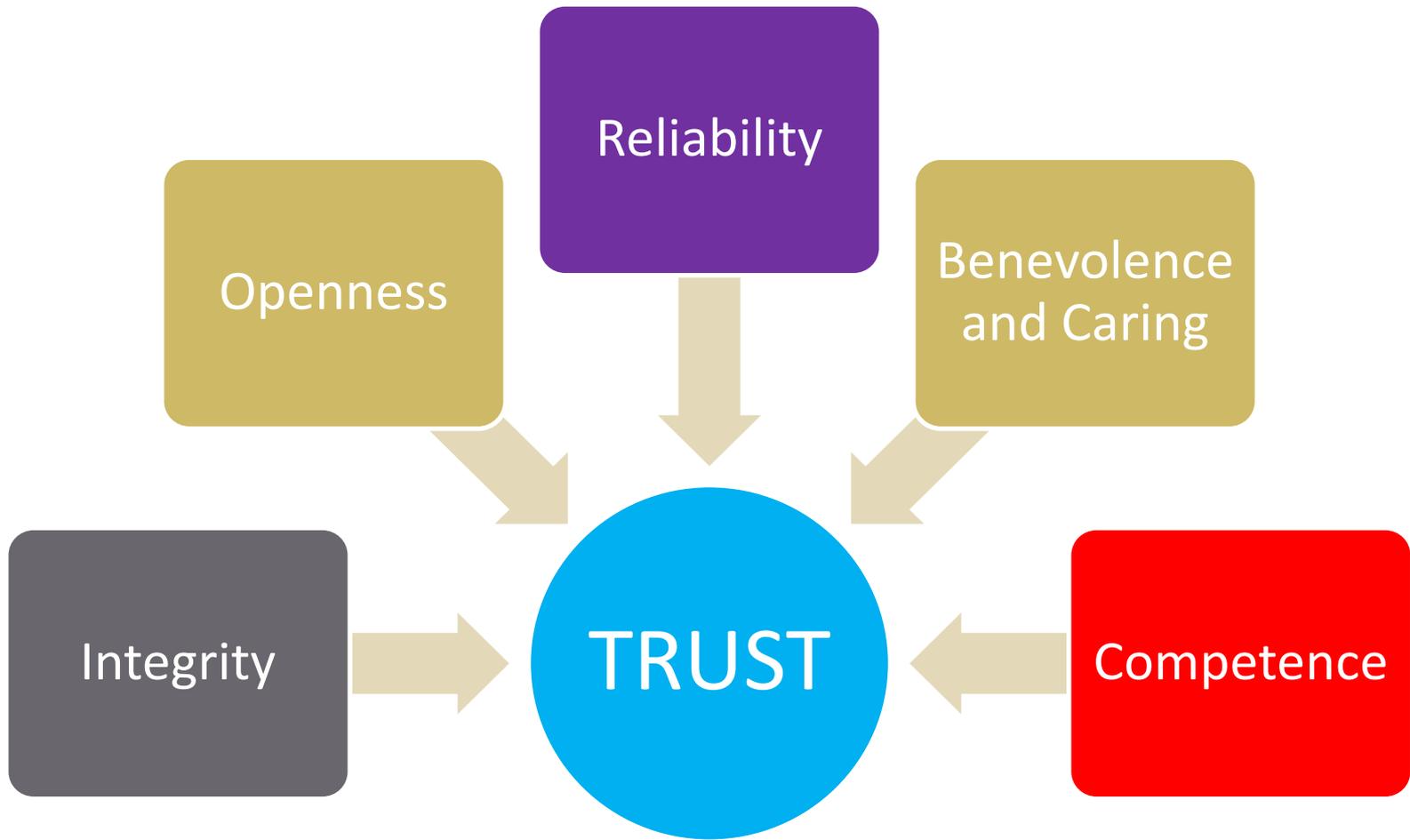
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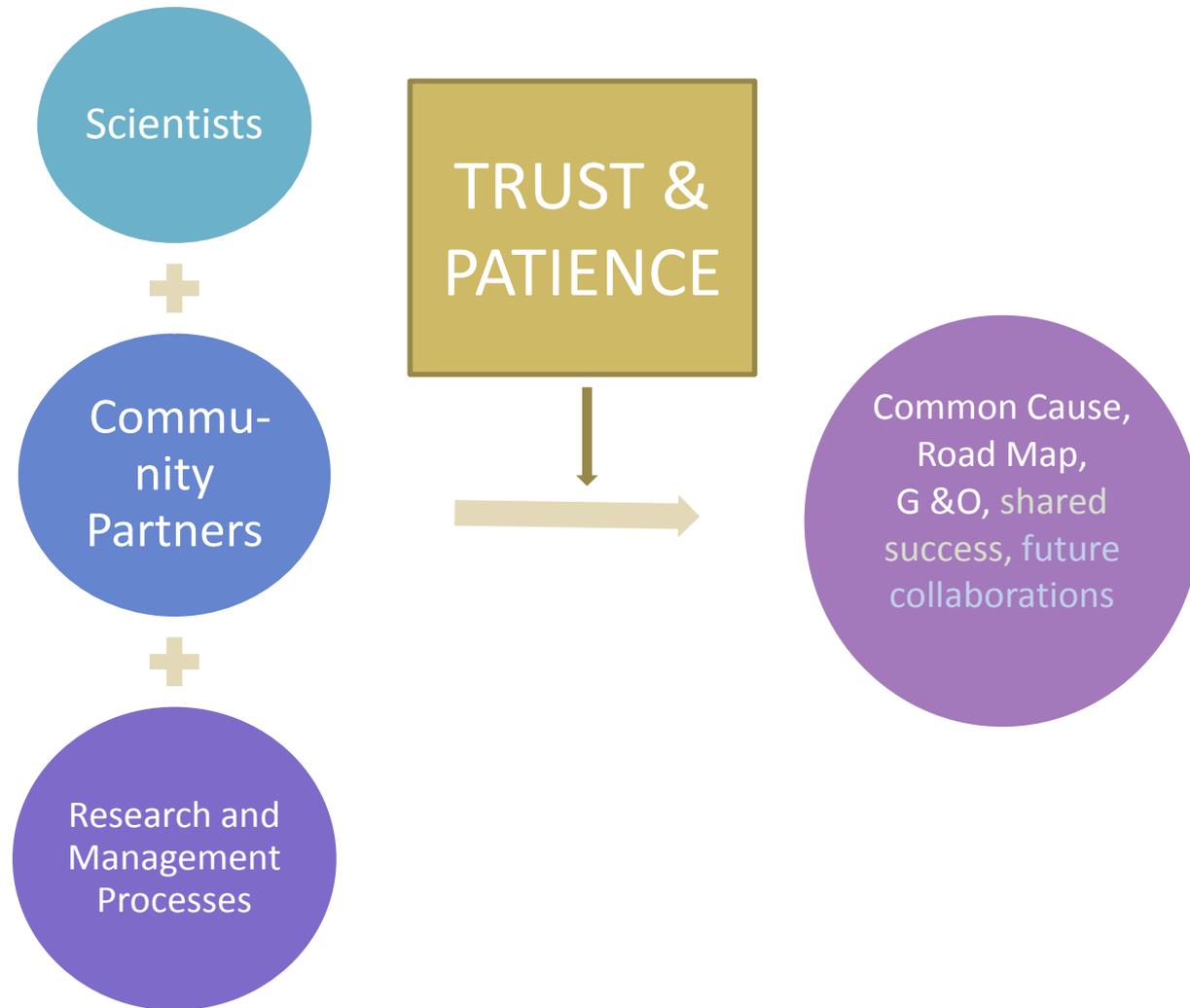
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# Frameworks for Obesity Prevention and Control

With examples from GoKids Boston!



# Healthy Weight Promotion at GoKids

# US recommendation: 60 min PA per day. For teens, boys get 45 min and girls get 25 min per day.

TABLE 4. Mean (SEM) minutes per day above specified cut points\* for moderate and vigorous activity overall and in modified bouts of 10+ min.

	Males			Females		
	Moderate	Vigorous	Combined	Moderate	Vigorous	Combined
Overall (includes every minute over cut point)						
Age						
6–11	79.5 (3.7)	16.0 (1.3)	95.4 (4.7)	65.1 (1.6)	10.1 (0.6)	75.2 (2.0)
12–15	39.2 (2.7)	6.0 (0.7)	45.3 (3.4)	21.7 (1.4)	2.9 (0.5)	24.6 (1.8)
16–19	29.8 (2.1)	3.0 (0.3)	32.7 (2.2)	18.5 (2.3)	1.1 (0.3)	19.6 (2.4)
20–29	37.9 (1.9)	1.9 (0.3)	39.7 (2.0)	22.4 (1.0)	1.3 (0.3)	23.6 (1.1)
30–39	41.3 (2.0)	1.6 (0.4)	42.8 (2.1)	19.9 (1.4)	1.4 (0.3)	21.3 (1.5)
40–49	33.4 (1.7)	1.3 (0.2)	34.7 (1.7)	19.3 (1.3)	0.5 (0.1)	19.9 (1.2)
50–59	25.3 (1.4)	1.1 (0.3)	26.4 (1.5)	15.0 (1.3)	0.4 (0.2)	15.4 (1.4)
60–69	16.3 (1.1)	0.4 (0.2)	16.7 (1.2)	12.3 (0.9)	0.1 (0.0)	12.4 (0.9)
70+	8.6 (0.7)	0.1 (0.0)	8.7 (0.7)	5.4 (0.4)	0.0 (0.0)	5.4 (0.3)
Race/ethnicity†						
Ages 6–11 yr						
Non-Hispanic white	78.0 (5.2)	14.4 (1.7)	92.3 (6.3) <sup>a</sup>	63.6 (2.8)	9.5 (0.5)	73.1 (3.2) <sup>a,b</sup>
Non-Hispanic black	92.3 (3.9)	21.7 (1.2)	114.0 (5.0) <sup>c</sup>	75.8 (5.7)	11.6 (0.9)	87.4 (6.2) <sup>c</sup>
Mexican American	79.5 (3.1)	17.5 (1.9)	97.0 (4.6) <sup>a</sup>	61.9 (2.7)	8.9 (1.1)	70.8 (3.4) <sup>b</sup>
Ages 12–15 yr						
Non-Hispanic white	35.6 (2.5)	5.4 (0.9)	41.0 (3.4) <sup>a</sup>	23.9 (2.3)	2.4 (0.4)	22.4 (2.0) <sup>a</sup>
Non-Hispanic black	46.5 (4.8)	7.6 (0.6)	54.1 (5.2) <sup>c</sup>	21.0 (2.1)	1.6 (0.3)	26.4 (2.6) <sup>c</sup>
Mexican American	43.2 (3.1)	7.4 (0.8)	50.6 (3.8) <sup>a,b</sup>	24.1 (2.0)	2.8 (0.7)	26.9 (2.6) <sup>a</sup>
Ages 16–19 yr						
Non-Hispanic white	26.5 (2.4)	2.8 (0.6)	29.3 (2.7) <sup>a</sup>	17.9 (3.0)	1.1 (0.4)	19.1 (3.1) <sup>a</sup>
Non-Hispanic black	38.3 (3.4)	4.1 (0.6)	42.5 (3.6) <sup>c</sup>	17.4 (2.2)	0.6 (0.3)	18.1 (2.4) <sup>c</sup>
Mexican American	38.5 (3.4)	2.6 (0.6)	41.0 (3.3) <sup>b</sup>	23.4 (3.4)	2.3 (0.5)	25.7 (3.4) <sup>b</sup>

Troiano et al., Physical Activity in the US Measured by Accelerometer, Med Sci Sports and Exercise, 2007.



# Background– Obesity Treatment

- American Academy of Pediatrics 2007
- Treatment Goals are to foster healthy eating and physical activity habits and emotional well-being
- Progress toward healthy weight will follow.



# Treatment Components

- Intensive, progressive exercise protocol
- High staff to participant ratio
- At least 2.5 h/w (afterschool)
- Summer programs at higher intensity
- Workbooks on social cognitive strategies
- Nutrition information
- Parent engagement
- Monthly monitoring
- Social networking presence

# Behavioral Treatment Strategies

Implementation of strategies, based on learning principles, that provide tools for overcoming barriers to compliance with diet or physical activity changes:

- Self-monitoring
- Stress management
- Stimulus control
- Problem-solving
- Contingency management
- Cognitive restructuring
- Social support



# Teens in Balance Program

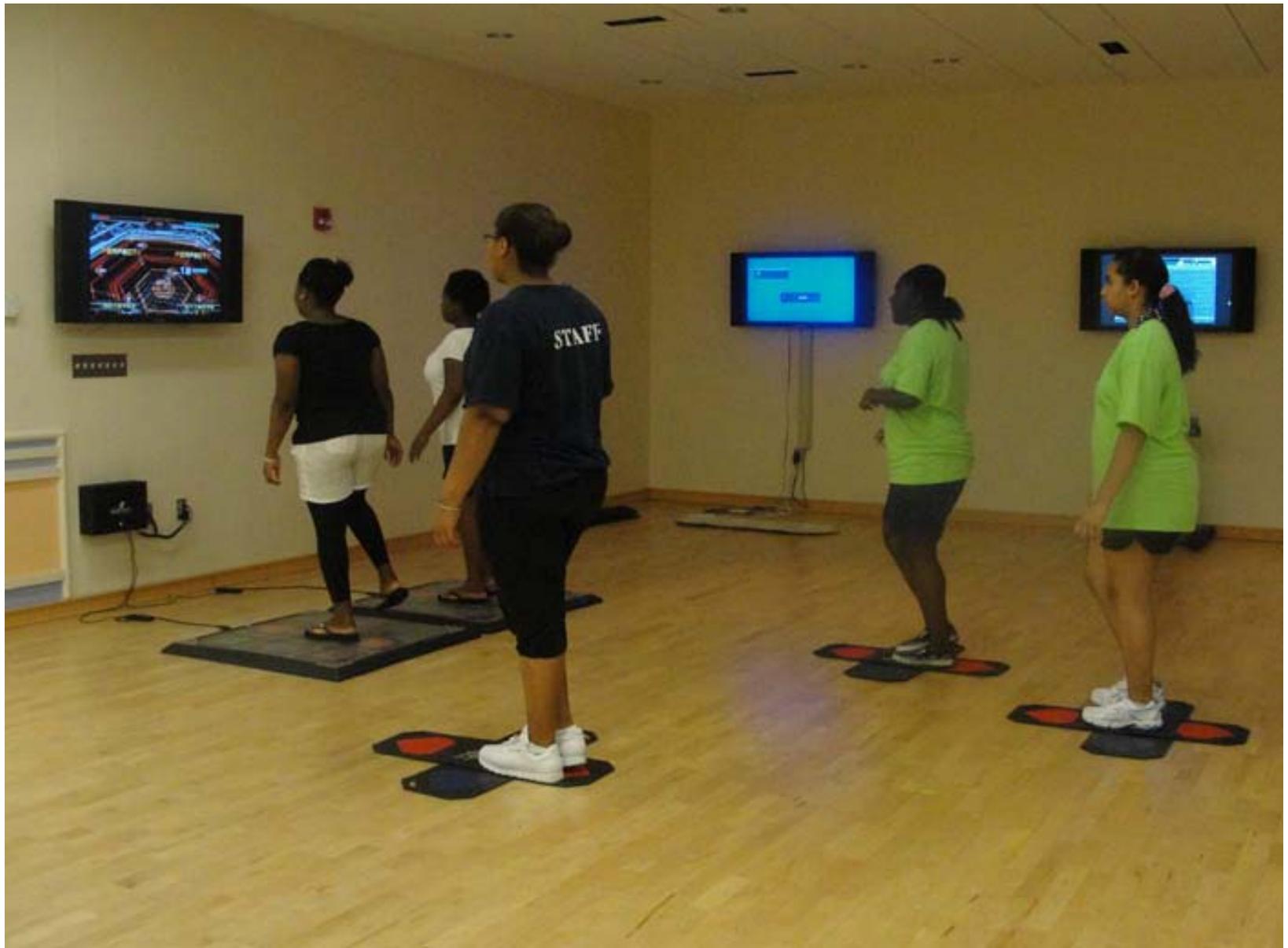
- Summer 2011
- 12 teens, 6 f/6 m, mean BMI%ile 99.6.
- Age 13-17 (mean 14.1); B (9) H (2).
- Goal: change in intentions and self-efficacy for PA, healthy lifestyle
- Week 1,2 and 4: 5 h/d, 4 d/w
- Week 3: off
- Paired with mentors





# Fit2Lead

- Spring and Summer 2011 (12 weeks)
- 12 youth, mean age 15.5, 6m/6f, non-obese; B(8), H (4).
- Spring: 1.5 h/wk; Summer 12h/wk
- Personal workout plus mentoring time
- Mentored Teens In Balance program
- 2-yr results show impact on lipids, body composition, and fitness





# What the girls said about their week off

My week off I get up every morning and walk around with my friend P.

I sometime will get some water and when I am not feeling water any more I will get some fruit juice and I will drink it.

And if it's like a long weekend I will spent most of my time in bed talking on the phone with my friend or I will be like watching t.v and stuff.



# What the girls said about their week off

My week off could've gone better.

I feel that if I really really put my [mind] on it I could've done more work out.

I did a lot of walking. At home I try to do most of the things we do at go-kids.

I kinda slip up a little bit by eat those two cupcakes, but they were just calling my name. I couldn't help.

# What the girls said about their week off



During my weekend, I felt myself doing things I don't normally do. Like getting up early and actually **walk** for more than an hour. More like an hour and thirty minutes.

I drank only water those past two days and little portion foods. I also noticed I'm naturally **eating smaller than I normally would**.

On Wednesday, I started going to the beach... castle island, after watlking around it, I drank all my water and was still thirsty.

So, I bought a soda. Then **I got hooked back on soda again**.



# Working toward a healthy weight: Observations

- TIB girls know what they need to do
- They like being active; they also like being inactive.
- They are very vulnerable to social eating cues.
- They are typical teenagers.

# Both groups showed improvements .

- Fit 2 Lead girls (n=6)
  - Modest improvement in self-image as leader
  - Increased weight load on leg press by 80% and doubled chest press load (both  $p < 0.05$ )
  - Minor weight gain appeared to be due to increased fat free mass
- TIB girls (n=3 with pre/post measures)
  - BMI %ile 98+
  - Weight held steady, % body fat improved slightly
  - Minor gains in chest press performance

# TIB: What did we learn?

- The Teens in Balance model worked well to promote physical activity and intention
- The girls were open about their weight issues and happy to be engaged in working with us.
- The girls knew some things about healthy eating, but they had much to learn as well.
- Girls that need healthy weight promotion need programs that help with behavior management skills.
- Mentoring was viewed more positively by the boys than by the girls.





# Acknowledgments

- New Balance Foundation
- U Mass Medical School
- Boston Athletic Association Charity Teams Program
- Lightspace Corporation
- RJ Fasenmyer Foundation
- USDA Cooperative Extension
- Meghan Feeley, Irmalyn Hernandez, Montel Hill, Leigha Levesque, Mike Russo, Svenja Sjoquist



## Healthy Eating:

In April, 2011, the National AfterSchool Association adopted these standards for healthy eating in out-of-school time programs. Accordingly, new language addresses snack content and quality, staff training, curriculum, social support (including staff role modeling, parent engagement and children's social development), program support, and environmental support.

### **Content and Quality:**

**Standard:** Programs serve foods and beverages in amounts and types that promote lifelong health and help prevent chronic disease. These include minimally processed foods made with whole grains and heart-healthy fats or oils and without added sugar or trans fats; fruits and vegetables; and beverages made without added sugars.

### *Best Practices*

1. On a daily basis, the Program...
  - a. serves a fruit or vegetable (fresh, frozen, canned or dried without added sugar).
  - b. offers water at the table during snack, and has water accessible at all times.
  - c. only serves foods made without trans fat.
  - d. serves beverages that are not made with caloric sweeteners. Beverages made with caloric sweeteners include but are not limited to sodas, juices, juice drinks/ades, sports drinks or iced teas.
  - e. serves no candy or other foods that are primarily sugar based.
  - f. through portion size and variety of items offered each day, provides each student with enough calories to avoid both hunger and over eating.
  - g. offers choices and accommodates dietary restrictions related to allergy, food intolerance, religion and culture. Examples include offering high- calcium beverages for children that cannot drink regular cow's milk such as soymilk or lactose-free milk.
2. The menu...
  - a. emphasizes nutrient dense options including baked goods made with whole grains and without trans fats, and protein foods that include lean meats, nuts or beans.
  - b. emphasizes healthy beverages including low or nonfat milk; plain or naturally flavored non-carbonated water; and 100% fruit juice...
    - i. does not offer flavored milk made with added sugars or artificial ingredients.
    - ii. fruit juice should be limited to one 8 oz serving per day
    - iii. no limits on low/nonfat plain milk or water
  - c. offers sweet baked goods no more than twice a month, and these contain no trans fat.

- d. serves no foods that are deep fried, par fried or flash fried unless a healthy oil (unsaturated or poly-unsaturated such as canola, peanut or olive oil) was used in the frying process.
    - i. Does not offer fried salty snacks such as potato or corn chips regardless of type of oil used in cooking.
  - e. avoids foods and beverages made with artificial ingredients (sweeteners, flavors, or colors).
  - f. is based on a minimum 2 week cycle, and ideally a 4 week cycle to maximize variety.
3. Alternatively, or in addition, the Program's food choices are guided by an evidence-based source of nutrition guidelines for snack menus whose content is drawn from scientific literature. Programs should avoid guidelines produced by institutions with ties to specific products or for-profit industries. Examples of evidence based sources of nutrition guidelines include but are not limited to (URLs can be found at the end of the document):
- a. Institute of Medicine Nutrition Standards for Foods in Schools. *Standards for the Afterschool Setting*.
  - b. California Department of Education *Nutrition Standards for Snacks in After School Programs*.
  - c. Alliance for a Healthier Generation school meals and competitive foods/ afterschool program standards.
  - d. USDA Child and Adult Care Food Program
  - e. School Wellness Policy and Procedure document
  - f. YMCA health promotion standards for afterschool programs

### **Staff Training**

**Standard: Staff regularly participate in learning about healthy eating grounded in effective training models using content that is evidence-based.**

#### *Best Practices:*

1. All training on healthy eating is comprehensive, evidence-based, does not support a particular industry or food sector agenda, and delivered by qualified personnel.
2. Facility adheres to local standards/regulations for food safety
3. Healthy Menu Development:
  - a. Appropriate Staff (those charged with this responsibility) receive training in healthy menu development at least once each year
    - i. Such training may complement but not replace training for compliance or participation in federal food assistance programs
    - ii. In programs where food is not purchased by the program, the staff are educated on healthy menus so that they may advocate with their food sources for quality menu items.
  - b. New staff are quickly oriented to healthy menu development (if regularly scheduled training is at least a month away).
  - c. At least 2 staff are trained at a time.
4. Health promotion awareness training and coaching:
  - a. All staff receive training on the role of healthy eating, physical activity, and social supports for healthy behaviors minimally once per year.
  - b. New staff are quickly oriented to this information.

## **Nutrition Education Curriculum**

**Standard: Programs that offer nutrition education classes will ensure that materials presented to children are evidence-based, do not support a particular industry or food sector agenda, and delivered by qualified personnel.**

### *Best Practices:*

1. The program uses a curriculum that is grounded in nutrition and behavioral science such as CATCH Kids Club or YMCA's Food and Fun After School
2. USDA Cooperative Extension nutritionists deliver curriculum.

## **Social Support**

**Standard: The program creates a social environment, including positive relationships, that encourages children to enjoy healthy foods. Research shows that children's food choices are influenced not only by food appearance, taste and familiarity, but also by social factors including peers, role models, group dynamics, and having healthy options.**

### *Best Practices*

1. Function of food in the program is to promote healthy eating and good nutrition.
  - a. Food is not used as a reward or punishment
  - b. Holidays and birthdays are celebrated with healthy items
  - c. Fundraisers emphasize healthful foods or rely on nonfood items.
2. Students participate in food selection, distribution, preparation, and clean-up.
3. Staff model and promote healthy eating.
  - a. Staff members sit and eat the daily program snack or meal with students
  - b. Staff discuss the health benefits of snack components with children
  - c. Staff members do not bring in/consume personal food or beverages in front of children other than items that would appear on the program's menu.
4. Parents are engaged with the program's emphasis on healthy eating.
  - a. Educational materials (that meet standards for curriculum above) are made available to parents/families through pamphlets, newsletters, email blasts or other means
  - b. Healthy food is served at parent events
  - c. Parents receive guidelines about food that may be brought into the program by the parent or child to ensure that such foods support the healthy eating objectives of the program.
    - i. The program has a process in place for discussing inappropriate food choices with parents.
  - d. Healthy eating standards and practices are shared and discussed during parent advisory group meetings
  - e. Programs develop parent advisory groups to support developing healthy habits at home.

## **Program Support**

**Standard: Infrastructure supports healthy eating through management and budgeting practices.**

### *Best Practices*

1. The program budgets appropriately for food costs based on a food and beverage

- program that addresses the standards above
2. The program accesses federal nutrition programs that can assist with providing healthy snacks and meals to participants, including the Child and Adult Care Food Program, the National School Lunch Program, and the Summer Feeding Program
  3. If the food budget has a small margin, the program does not use their food budget for food-based crafts (i.e., uses their supply budget for pasta intended for use in craft projects).
  4. Program managers and executives support healthy eating through coaching, mentoring, and monitoring menu quality.
  5. Foods served at staff meetings are healthy.
  6. Staff at all levels model healthy eating on the job.

### **Environmental Support**

**Standard: The program's physical environment supports healthy eating. Availability of vending machines, advertising and availability of kitchen facilities can all influence food choices and food availability.**

#### *Best Practices*

1. No posters or advertisements on the walls promote unhealthy foods or include logos or trademarks from companies that produce foods that do not support the healthy eating standards.
2. The program environment provides positive messages about healthy eating through posters, pictures and books
3. Students do not have access to vending machines that sell foods and beverages that do not support the healthy eating standard.
4. The program restricts screen time (as described in Physical Activity section) to avoid exposure to food marketing.
5. The program has adequate kitchen and storage facilities—and has adequate access to them-- to support the healthy eating standards, for example through shared use agreements with host sites.

## **Physical Activity:**

In April, 2011, the National AfterSchool Association adopted these standards for Physical Activity in out-of-school time programs. As adopted, NAA's standards for physical activity support the USDHHS 2008 guidelines for activity patterns shown to promote lifelong health and prevent chronic disease. Accordingly, new language addresses content and quality, staff training, social support (including staff role modeling, parent engagement and children's social development), program support, and environmental support.

### **Content and Quality:**

**Standard: The program's physical activity offerings support the USDHHS 2008 guidelines recommending that all children and youth obtain at least 60 minutes of physical activity per day that includes a mixture of moderate and vigorous intensity activity as well as bone and muscle strengthening activities.**

#### *Best Practices*

1. Dedicates at least 20% or at least 30 minutes of morning or afterschool program time to physical activity (60 minutes for a full day program)
2. Provides physical activities in which students are moderately to vigorously active for at least 50% of the physical activity time
3. Play takes place outdoors whenever possible.
4. Ensures that daily physical activity time includes aerobic and age-appropriate muscle- and bone strengthening and cardio-respiratory fitness activities
5. Includes a variety of physical activity options aimed at engaging students in fun, recreational, and life-long learning opportunities
6. Offers unstructured free play or structured activities that involve all program attendees.
7. Offers non-competitive activities
8. Offers competitive physical activities in an intra mural program (see NASPE guidelines)
9. Offers activities that are adaptable, accessible and inclusive of children with all abilities, including physical, sensory and intellectual disabilities.
10. Conducts physical activities that are integrated with enrichment, academic, or recreation content; goal-driven, planned, sequentially designed and delivered, safe, inclusive, developmentally appropriate, and success-oriented
11. Provides short physical activity breaks between and/or within learning activities to invigorate children and eliminate long periods of sitting; incorporates physical activity into transition time
12. Does not permit access to television or movies, and limits digital device time to less than one hour per day to allow for other activities. Digital device use is limited to homework or devices/programs that actively engage children in moderate to intense physical activity.

### **Staff Training**

**Standard: Staff participates in learning about physical activity using effective training models and using content that is evidence-based.**

#### *Best Practices*

All staff leading physical activities at the afterschool program:

1. Receive annually a minimum of eight contact hours of professional development on effective practices and strategies for including physical activity that supports the USDHHS guidelines as an element of their programs.
2. Are First Aid/CPR certified and provide 16 hours of annual in-service training, including: new staff orientation, service training, (including new staff orientation, training in health/activity, training in behavior management).
3. Are trained in adapting physical activity opportunities to include children and youth at all levels of athletic availability and those with physical, sensory or intellectual disability.

All staff...

1. are trained not to withhold opportunities for physical activity (e.g., not being permitted to play with the rest of the class or being kept from play-time), except when a child's behavior is dangerous to himself or others. Staff members are trained to use appropriate alternate strategies as consequences for negative or undesirable behaviors.
2. are trained and familiar with curricular resources on integrating physical activity throughout the program.

### **Social Support**

**Standard: The program creates a social environment, including positive relationships, that encourages children to enjoy and participate in physical activity. Research shows that children's physical activity choices are influenced not only by preference and familiarity, but also by social factors including peers, role models, group dynamics, and having multiple options.**

*Best Practices:*

1. Staff leads and participates in active play (e.g., games and activities).
2. Staff does not withhold or use physical activity as a punishment or reward.
3. Students participate in activity selection, organization and leadership.
4. Parents are engaged with the program's emphasis on healthy physical activity
  - a. Educational materials are made available to parents/families through pamphlets, newsletters, email blasts or other means.
  - b. Parent events incorporate physical activity.
  - c. Physical activity standards and practices are shared and discussed during parent advisory group meetings.
  - d. Programs develop parent advisory groups to support physical activity at home.

### **Program Support**

**Standard: Infrastructure supports physical activity through management and budgeting practices.**

*Best Practices*

1. The program budgets appropriately to provide high quality physical activity experiences.
2. Program managers and executives support physical activity improvements through coaching, mentoring, and monitoring progress.
3. Program participates in ongoing self-evaluation and program improvement strategies.
4. The program's liability and risk management policies enable staff to participate in physical activity with students.
5. The organization promotes and encourages a physically active lifestyle among staff.

## **Environmental Support**

**Standard: The program's physical environment supports the physical activity standards.**

### *Best Practices*

1. Equipment for games, sports and activities is age and developmentally appropriate.
2. Equipment is sufficient to engage all participants and meets all required safety standards
3. Equipment supports USDHHS physical activity goals by facilitating cardiorespiratory and musculoskeletal fitness.
4. The program has adequate indoor facilities for physical activity.
5. The program has adequate outdoor facilities for physical activity, including fields and playgrounds that meet safety standards for surfacing, equipment, and workmanship.
6. The program has adequate access to indoor and outdoor facilities through formal or informal shared use agreements with host facilities.
7. The program environment provides positive messages about safe and developmentally appropriate physical activity through posters, pictures and books.

## Resources for Standards

Alliance for a Healthier Generation, Healthy Schools Program Framework. *Healthy Schools Program Framework: Criteria for Developing a Healthier School Environment*. Retrieved June 14, 2010, from [http://www.healthiergeneration.org/uploadedFiles/For\\_Schools/Healthy\\_Schools\\_Program\\_Framework/Framework\\_July09\\_sp\\_highres.pdf](http://www.healthiergeneration.org/uploadedFiles/For_Schools/Healthy_Schools_Program_Framework/Framework_July09_sp_highres.pdf).

California After School Resource Center, Nutrition. (n.d.). *California Department of Education Nutrition Standards for Snacks in After School Programs*. Retrieved June 14, 2010, from <http://www.californiaafterschool.org/c/@JHxi0ZcQA6BYY/Pages/nutrition.html>.

Center for Collaborative Solutions, Healthy Behaviors Initiative. (2010). *Changing Lives, Saving Lives, A Step-by-Step Guide to Developing Exemplary Practices in Healthy Eating, Physical Activity and Food Security in Afterschool Programs*. Retrieved June 14, 2010 from <http://www.ccscenter.org/afterschool/Step-By-Step%20Guide>.

Eat Smart, Move More North Carolina. (2009). *North Carolina Recommended Standards for After-School Physical Activity*. Retrieved June 14, 2010, from <http://www.eatsmartmovemorenc.com/>.

Food Research and Action Center. (2010). *School Wellness Policy and Practice: Meeting the Needs of Low-Income Students*. Retrieved June 14, 2010, from <http://frac.org/federal-foodnutrition-programs/school-breakfast-and-lunch/local-school-wellness-policies/>.

The National Academies, Advisors to the Nation on Science, Engineering, and Medicine, Committee on Nutrition Standards for Foods in Schools. Institute of Medicine Nutrition. Stallings, Virginia A., and Ann L. Yaktine. (2007). *Standards for Foods in Schools: Leading the Way Toward Healthier Youth*. Retrieved June 14, 2010, from [http://books.nap.edu/openbook.php?record\\_id=11899&page=1](http://books.nap.edu/openbook.php?record_id=11899&page=1).

Yale Rudd Center for Food Policy & Obesity. (2011). *Childcare and Preschool*. Retrieved June 14, 2010 from [http://www.yaleruddcenter.org/what\\_we\\_do.aspx?id=10](http://www.yaleruddcenter.org/what_we_do.aspx?id=10).

YMCA of the USA. *YMCA Health Promotion Standards for Afterschool Programs*. In: *Food and Fun After School*. Retrieved June 14, 2010 from <http://www.hsph.harvard.edu/research/prc/projects/food-fun/>.



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**Site Directors:** Assess your site’s healthy eating program practices and capacity for improvement in meeting the NAA Healthy Eating Standards. This is NOT a report card! It is a planning tool.

**GAP ASSESSMENT:**

**Step 1: Program Practices. Using a menu from a previous month, assess your healthy eating program practices. If you don't have a menu, you can either create one and use it for a 4 week block; or, keep track of what you serve every day for 4 weeks. In either case, complete this Assessment AFTER the 4 weeks are over.**

\_\_\_\_\_

*Number of days on the menu* \_\_\_\_\_

\_\_\_\_\_

**GOAL:** The number of days served should equal or be close to the number of days on the menu.

	Number of Days Served	Not Applicable
1. We served a fruit and/ or a vegetable, other than potatoes. Fruits or vegetables can be fresh, dried, canned or frozen.		
2. We offered water at the table		
3. We offered skim or low fat milk that was unflavored		
4. We did not serve sugar-sweetened beverages, such as sports drinks, fruit drinks, or juices with added sugar		
5. We did not serve cookies, cakes, frozen treats, candy, and other dessert type foods.		
6. We did not serve fried salty snacks.		
7. We had healthy alternatives available for kids with dietary restrictions.		

<b>Step 2: Purchasing Practices that put the NAA Healthy Eating Standards into Action</b>			
<i>If your site does not purchase or order its own snacks skip to Step 3.</i>			
<b>GOAL: Striving for a YES circled in every row.</b>			<b>Comments</b>
1. When we purchase snacks, we always check the ingredient lists to make sure there are no trans fats or partially hydrogenated oils.	YES	NO	
2. When we purchase milk or yogurt, we always get low or non-fat versions.	YES	NO	
3. When we purchase fruit juice, it is always 100% juice without added sugar.	YES	NO	
4. When we purchase meats, we always buy lean products such as baked ham or turkey.	YES	NO	
5. When we purchase baked goods, we always check the ingredient list to make sure some items are made with whole grains (ie. whole wheat, oats).	YES	NO	
<b>Step 3: Some additional best practices for supporting healthy eating.</b>			
<b>GOAL: Striving for a YES circled in every row.</b>			
1. Parents are engaged in our healthy eating focus through written materials, events and meetings.	YES	NO	
2. We use program time to talk to kids about why healthy eating is important.	YES	NO	
3. Staff model healthy eating behaviors.	YES	NO	
4. Staff receive training in menu development.	YES	NO	
5. The program budget appropriately supports buying healthy snacks.	YES	NO	
6. Students participate in food selection, preparation, distribution, and clean-up.	YES	NO	

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## CAPACITY BUILDING ASSESSMENT:

**STEP 5: Where do you need to build capacity in order to meet the YMCA Health Promotion Standards? Use the list below to identify some of your capacity building needs. Feel free to add additional items.**

### General

- I wasn't aware we had these Standards.
- I am not sure what we are supposed to do.
- Staff turnover makes implementing these Standards more difficult.
- Having our program take place in borrowed space makes implementing these Standards more difficult.
- We have to follow a different snack pattern because of licensing regulations, Child & Adult Care Food Program or because we get snack from the school district.
- We don't engage with parents around the topic of healthy eating.
- I wasn't aware there were curriculums such as Food & Fun or CATCH Kids, or that USDA Cooperative Extension Nutritionists can help.

### Staff Knowledge

- Staff don't understand why serving healthy snacks is important.
- Staff can't interpret nutrition labels.
- Staff don't know what a sugar-sweetened beverage is.
- I don't know what my budget is for purchasing snacks.
- I am not in communication with my vendor.
- I don't know what foods to buy.
- Staff are not aware of snacks that meet guidelines and kids will eat.

# Draft

### Skills & Behavior

- We don't role model healthy behaviors.
- We don't serve healthy snacks at staff meetings.
- We have trouble communicating with parents about the healthy snacks we serve.
- We're not sure how to organize parent engagement opportunities related to child and family wellness.
- We don't involve kids in deciding about food selection, distribution, preparation, or clean-up.
- Implementing the Standards seems too hard.
- We don't have regular menu development training by a reputable source.
- We are not sure how to have celebrations without involving treats.
- We are not sure how to have a fundraiser without promoting treats.

### Budget, Support, & Physical Facilities

- I don't have the power to make program changes.
- I don't have the responsibility to make program changes.
- I don't have purchasing power.

- { } I am not sure or don't think my budget will support buying healthier snacks.
- { } I am not in charge of ordering.
- { } I don't have someone I can ask questions about nutrition content.
- { } We don't have adequate on-site storage for non-perishable foods.
- { } We don't have a refrigerator on-site for perishable foods.
- { } We don't have prep space for washing and slicing fruits and vegetables.
- { } Staff can't do the shopping.
- { } We depend on non-program staff to get our food.
- { } Staff don't demonstrate a positive attitude for change.
- { } Staff don't understand why the changes are important.
- { } Staff don't believe the changes are important
- { } We can't restrict access to school vending machines.
- { } We can't restrict access to posters on the wall.

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**SUMMARY: Looking at your gap and capacity building assessments, how are you doing meeting the NAA Healthy Eating Standards?**

Programs serve foods and beverages in amounts and types that promote lifelong health and help prevent chronic disease. These include minimally processed foods made with whole grains and heart-healthy fats or oils and without added sugar or trans fats; fruits and vegetables; and beverages made without added sugars.

What is your status?		Comments
We are meeting this standard but still want to improve.		
We are not meeting this standard but we are close.		
We are not even close.		

Staff regularly participate in learning about healthy eating grounded in effective training models using content that is evidence-based.

What is your status?		Comments
		<h1>Draft</h1>
We are meeting this standard and will maintain our current practices.		
We are not meeting this standard but we are close.		
We are not even close.		

Programs that offer nutrition education classes will ensure that materials presented to children are evidence-based, do not support a particular industry or food sector agenda, and delivered by qualified personnel.

What is your status?		Comments
We are meeting this standard and will maintain our current practices.		
We are not meeting this standard but we are close.		
We are not even close.		

The program creates a social environment, including positive relationships, that encourages children to enjoy healthy foods. Research shows that children’s food choices are influenced not only by food appearance, taste and familiarity, but also by social factors including peers, role models, group dynamics, and having healthy options.

What is your status?		Comments
We are meeting this standard and will maintain our current practices.		
We are not meeting this standard but we are close.		
We are not even close.		

Infrastructure supports healthy eating through management and budgeting practices.

What is your status?		Comments
We are meeting this standard and will maintain our current practices.		
We are not meeting this standard but we are close.		
We are not even close.		
The program's physical environment supports healthy eating. Availability of vending machines, advertising and availability of kitchen facilities can all influence food choices and food availability.		
What is your status?		Comments
We are meeting this standard and will maintain our current practices.		
We are not meeting this standard but we are close.		
We are not even close.		

# Draft