Nemours. Children's Health System

Obesity Prevention in Early Care and Education Settings

Obesity Solutions Roundtable – October 2015

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Nemours Integrated Child Health System

- Nemours is a non-profit organization dedicated to children's health & health care
- Nemours offers pediatric clinical care, research, education, advocacy, and prevention programs. Nationally, the goal is to improve child health and wellbeing, leveraging clinical and population health expertise
- Nemours operates Alfred I. duPont Hospital for Children and outpatient facilities in the Delaware Valley and the Children's Hospital in Orlando and specialty care services in Northern/Central Florida.
- Nemours focuses on child health promotion and disease prevention to address root causes of health
 - Preventing childhood obesity and emotional/behavior health were the first initiatives
 - Complements and expands reach of clinicians using broader, community-based approach



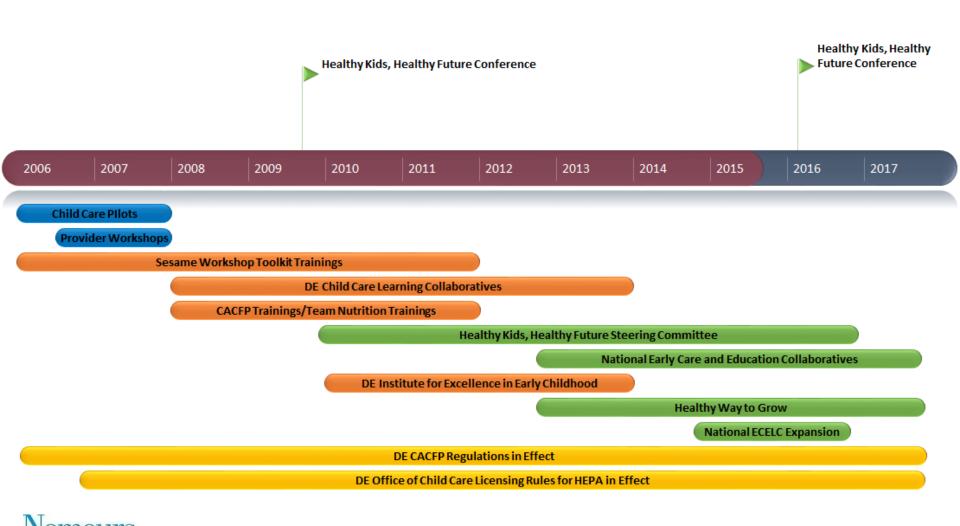
Key Elements of Our Strategy

- Define the geographic population and a shared outcome
- Establish multi-sector partnerships where kids live, learn and play
- Pursue policy and practice changes
- Develop social marketing campaign
- Leverage technology
- Serve as an "integrator" that works intentionally and systematically across sectors to improve health and well-being





Spreading and Scaling Healthy Eating and Active Living in Early Care and Education



ECELC: Examples in Action

"We were inspired to develop goals, prioritize those goals, and put them into practice. Now we have proof of our success. Children will eat healthy food and family-style dining works!"

"These changes have impacted the staff mainly because they are becoming more conscious about the healthy initiatives and are being able to model and pass this on to the children. Overall it has been a great experience and we will continue to implement and promote a healthy environment with what we have learned during the learning sessions."









Lessons Learned

- State organizations need more organizational capacity and bandwidth to manage and implement large projects.
- State organizations don't naturally think about weaving project into existing initiatives (i.e. CDC's Spectrum of Opportunity). Need more direction and pushing on systems change and integration.
- Asking center staff to become leaders and train their entire center is innovative. Requires time and lots of coaching for leadership teams.
- Balance fidelity to a national model and state customization necessary for buy-in and sustainability.
- No perfect trainers; those strong in ECE are weak in health and vice versa. Most important skill is relationship building and coaching with center teams.



Lessons Learned (continued)

- Technology can be a barrier.
- Programs are often overwhelmed with amount of 'quality improvement' efforts.
- Programs find it difficult to participate due to time (to attend sessions and do homework). Many programs don't even have regular staff meetings.
- Corporate programs much harder to engage and participate than non-profit, Head Start and faith based.
- "Lunch box" programs have unique challenges.
- Involving parents and supporting changes at home needs to be more intentional.



Disclaimer

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