Jump IN for Healthy Kids

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Reducing Childhood Obesity and Overweight in Central Indiana: Impact through 2023





Mission

To create healthy places, neighborhoods, and communities where families have real opportunities to make healthy choices that promote their health, vitality, and well-being, including access to affordable, healthy food and meaningful opportunities to play and be active.

Rationale: Inequities of the Childhood Obesity Epidemic

Obesity is a global pandemic, the World Health Organization's #2 threat to global health in 2019. Childhood obesity tripled in the United States between the early 1970s and 2000.

In 2013-14, Jump IN founders concluded that by 2015 childhood overweight and obesity in central Indiana would reach an estimated 43%, rising to 53% by 2025 if trends continue. The burden of childhood obesity falls disproportionately on vulnerable populations. Data from the Jump IN FitnessGram project confirms that prevalence among central Indiana Hispanic and African American students is consistently higher than among white students.

Solution: Comprehensive, multi-sector interventions work

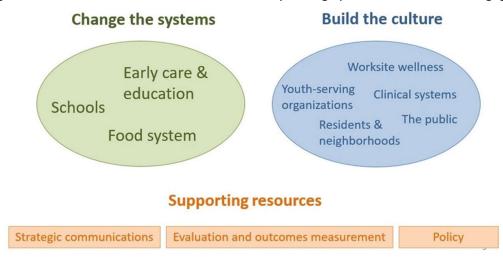
The research demonstrates consistently that *greater comprehensiveness, dose, and reach across policy, systems, and environments in multiple sectors at organizational, local, and state levels* are associated with reduced childhood obesity prevalence in community-wide populations.¹

Complementary research completed by Cindy Collier and Daphne Clark in 2011-13 also found that multisector, coordinated efforts across the community demonstrated success in moving the needle on childhood obesity, and recommended the same for central Indiana.

Policies Implemented

Jump IN for Healthy Kids was created to reduce the high prevalence of child overweight and obesity in central Indiana, an area facing profound health disparities and economic disadvantages. Bringing together stakeholders to form a comprehensive, multi-sector collective impact effort, Jump IN focuses on:

- **changing the policies, practices, and environments** in schools, child care facilities, and other places that influence the health behaviors of children and families
- addressing barriers to healthy food access and active living; and
- improving the overall culture of health in the community through public awareness and engagement.



¹ See especially the six-article special issue "Childhood Obesity Declines Project" from the National Collaborative for Childhood Obesity Research (Jernigan et al., 2018, *Childhood Obesity*); and results of the Healthy Communities Study, Strauss et al. 2018, *Pediatric Obesity*.



<u>Changing the System:</u> Early Care and Education

Thanks to multiple years of investment and progress, Jump IN can see the finish line to our goal: integrating nutrition and physical activity best practices into Indiana's early care and education systems to ensure that the youngest Hoosiers are exposed to the healthiest possible early care environments. Following the CDC's Spectrum of Opportunities Framework, Jump IN has accomplished integration or is in the process of integrating in multiple areas: provider training, technical assistance, and educational preparation.

- To date, Jump IN has helped secure more than \$1 million in funding to provide comprehensive training to more than 300 child care centers serving more than 10,000 young children in central Indiana. This work continued through the Better Together project, developed by Nemours Health and the University of North Carolina's Go NAPSACC project (Nutrition and Physical Activity for Child Care), a \$365,000 two-year grant that was completed in July, 2022.
- In 2020-2022, cohorts of 65 providers in low-income communities met for intensive training to change policies, systems, and environments to create healthier places for the children in their care. Using validated Go NAPSACC pre- and post- assessments, 65 Better Together ECE providers in Indiana increased best-practice adoption from an average of 48% to 70% a 22 percentage-point increase across the domains of breastfeeding and infant feeding, child nutrition, physical activity, and screen time.

Participation in Nemours Training Programs ¹		
Training Session	# Child Care Centers	# Children Enrolled
2013-14	43	9,700
2014-15	68	7,500
2015-16	42	4,735
2016-17 ²	48	1,470
2017-18	37	765
2018-19	34	1,098
2020-21	37	1,735
2021-22	28	617
Total	337	27,620

- 1. Statewide in 2013-14, 2014-15, 2020-21, 2021-22; central Indiana in all other years.
- 2. Starting in 2016-17, small-enrollment Family Child Care Homes were introduced.
- SPARK Learning Lab, Indiana FSSA's technical assistance provider for all early care and education providers in Indiana, integrated the nationally-recognized Go NAPSACC tools, resources, and training into the statewide coaching and technical assistance platform.

- The Indiana Association for the Education of Young Children (IAEYC), with support from Jump IN, successfully integrated in 2022 healthy best practices into the IAEYC's training for the Child Development Credential (CDA), a professional development credential required for lead instructors in licensed centers. Additionally, a Spanish-English bilingual cohort of early childhood providers was identified to pilot the integration of healthy best practices into a full Associate's Degree in partnership with Ivy Tech. The pilot began in May 2022. Conversations are underway for best practice integration into the full CDA credential nationwide, and full integration into Ivy Tech's Associate Degree program statewide.
- The Indiana Department of Health has committed to fund Indiana Go NAPSACC license through 2025.
 This tool has been embedded into SPARK's technical assistance (TA) system to be the nutrition and physical activity best practice standard across the state. SPARK coaches support providers as they assess their child care environments, create plans for improvement, and measure and celebrate success.
- Jump IN has received funding to support a Program and Relationship Manager (PRM), a position that will
 actively recruit ECE providers to engage with the Go NAPSACC tools and progress along the path of
 increasing healthy best practices. The PRM will also help SPARK launch a new TA program, engaging
 providers with a specially designed farm-to-ECE curriculum and training in 2023.

Changing the System: Schools

We have learned through this work that the **direct, technical assistance** is **critical for helping** the school districts and individual school buildings identify appropriate nutrition and physical activity improvements and sustainably embed those improvements in school culture and daily practices. Since 2017, Jump IN has offered Jump Right UP, a structured technical assistance program and resources to 71 schools at high risk of childhood obesity in four Marion County school corporations.

Despite pandemic-related barriers, IPS fully endorsed the Jump Right UP approach for all district schools, dramatically increasing participation from **11 IPS schools in 2020-2021 to all 43 IPS schools** educating more than 21,000 students in 2021-2022. All completed School Health Index (SHI) assessments, selected at least 2 SHI standards as goals for improvement during school year 2021-22, and initiated Action Plans for each goal. During spring semester, 66% of 84 projects at 44 buildings were complete or better than 50% complete at the end of the 2021-2022 school-year.

The pandemic clearly had an effect on the ability of school buildings to work on comprehensive school health improvement. Before the pandemic, IPS schools in Jump Right UP saw annual gains of up to +2.5 percentage points in School Health Index composite score. In fall 2021, the cohort of 11 schools saw a slight decrease in SHI scores averaging -0.7% as schools redirected resources to pandemic and learning recovery priorities. With support from Jump Right UP, IPS created a bold wellness policy in 2022 and was recognized by the Indiana Department of Health for its strength. The policy, which guides the district in



establishing a healthy environment that promotes student health, wellbeing and learning ability, was awarded 170 out of a possible 200 points – one of the highest in the state.

A second priority objective of the Jump Right UP program is to work with district administrations to increase district commitment to comprehensive school health and wellness by **implementing administrative and structural changes that increase sustainability** and accountability for school health and wellness district-wide. This past year, three districts did just that. IPS has added district wellness accountability into key roles. MSD

Warren and MSD Pike have created full-time roles to administer school wellness policy and WSCC (Whole School, Whole Community, Whole Child) model implementation. In fall 2022, Jump IN CEO Julie Burns was recognized by IN SHAPE, the Indiana Society for Health and Physical Educators, with a Special Contributor Award for Jump IN's work in helping implement the WSCC model. The award is given to an individual who is "outside the school physical education profession but has made important contributions to health education, physical education, recreation, dance, and/or sport." Kathy Langdon, IPS' District Physical Education and Health Coach, was also recognized with the special Honor Award for her work with Jump Right UP and WSCC implementation across IPS schools.

Changing the System: Strengthening the Healthy Food Access System

One persistent barrier to community health in high-risk areas is **lack of access to healthy food**, a social determinant of health priority on every community development and investment framework.

From 2017 through 2020, Jump IN launched healthy corner store interventions in the Far Eastside of Indianapolis, a severe food desert. Rather than waiting years hoping for a full-service grocery to arrive, this initiative created access to healthier food within a matter of months. Jump IN's work much more fully developed during 2020 and 2021. By partnering with the City's Office of Public Health and Safety, Jump IN funded and completed an intensive community-engagement process. This process led the City-County Council to pass an **ordinance in early 2021 establishing the Food Access Advisory Commission** (FAC) and creating the city's Division of Community Nutrition and Food Policy, thus expanding an empowered and sustainable food system leadership infrastructure to partner with the reimagined Indy Food Council, now named the Indianapolis Community Food Access Coalition (ICFAC). Throughout 2021, Jump IN worked to stand up FAC and initiate its collaboration with an expanded ICFAC comprising many community voices, stakeholders, and sectors. The Division and the Coalition enable the Indianapolis food system stakeholder groups – food insecurity response, healthy food access (retail), and food economy (growers and supply chain) – to communicate, problem-solve and ensure that all Indianapolis residents have access to nutritious food that supports optimal health.



In 2022 Indy FAC approved the following initial priorities, and started to frame workplans:

- Develop a food equity plan;
- Decrease barriers to participation in federally funded nutrition programs like WIC and SNAP;
- Increase urban farm development;
- Create a centralized Food Hub: in 2022 Jump IN, in partnership with the City of Indianapolis, completed a feasibility study that determined that a centralized food hub would be effective in Indianapolis.

As a founding member of Indy FAC and a developer of the model, Jump IN will contribute significant time in 2022/2023 to the following:

- Developing a multi-year approach to standing-up and sustaining a centralized Food Hub.
- Leading a collaborative application for the central Indiana region's Local Food Purchase Assistance (LFPA) grant and supporting its administrative arm; This supports the Urban Farm development work.
- Leveraging partnerships and resources to decrease barriers to participation in nutrition programs.
- Designing a multiprong communication approach that includes targeted and awareness-based strategies to help funders and residents understand the scope of FAC and how it can work with ICFAC to accomplish community needs.
- Examining how and ensuring that the food equity plan drives all of these priorities.

We are also working with a national funder to support capacity-building and project development. This is truly moving our city to the next level of improved food capacity and infrastructure as we implement a more coordinated system.

Building the Culture: Public Awareness and Policy

In 2022, Jump IN secured funding for the initial year of a 3-year approach to engaging the community in understanding and taking action on 5210 healthy habits. Partnering with Radio One, this sponsorship package will launch in early 2023 and focus on Black and Latino households in Marion County through a combination of radio advertising, community events, Radio One personality endorsements, and strategic on-air interviews highlighting 5210 and the resources available to support these healthy habits.

As part of the Top 10 Coalition, Jump IN helped lead a second broad-scale awareness campaign in summer 2022 to reduce sugary drink consumption, including a large media partnership with Radio One. The campaign has shifted to advocacy for the city to adopt a policy on healthy drinks as the default drink with children's meals in restaurants.

Jump IN also worked closely with stakeholders to draft the Child and Adolescent Health recommendations considered by the Governor's Commission on Public Health. Jump IN advocacy and expertise strengthened the final recommendations by ensuring that recommendations addressed both the early care and education and school-age education environments. In addition, Jump IN co-authored language for Recommendations 27-29, thus embedding critical systems-change priorities in the final Report and recommendations.

Building the Culture: Clinical and Community Resources

We connect regularly with health system divisions and staff that are implementing and testing clinical systems changes and clinical-community collaborations that hold potential to strengthen prevention and management of childhood obesity in central Indiana. This is an organic process and Jump IN checks in regularly with these partners with the objective to mutually identify new dots to connect with communities, resources that strengthen prevention impact, and action steps to leverage them.

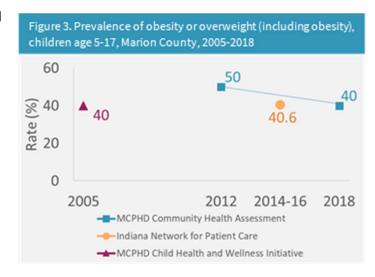
Building the Culture: Data Collection and Analysis

Local data on childhood obesity at the city, county, and region-wide levels is not easily available, yet is critical if our community is to monitor trends and identify what is working in childhood obesity prevention.

Jump IN has led efforts to address this gap by analyzing biometric data collected from more than 60,000 students over three years. The unweighted prevalence of childhood overweight and obesity in central Indiana from this dataset is estimated at 43%, statistically unchanged from 2016-2018.

Along with Jump IN's schools study, periodic childhood overweight assessments from Marion County Health Department surveys and a preliminary baseline pointestimate from our 2017 electronic health records feasibility study (Indiana Network for Patient Care at IHIE with Fairbanks School of Public Health research team) offer the richest picture of child obesity and overweight for Marion County and Central Indiana.

In 2022 Jump IN collaborated closely with IU Fairbanks School of Public Health and Regenstrief Institute researchers to propose a four-year plan to develop central Indiana childhood obesity population prevalence estimates. The proposal was accepted and funded by the Health Issues and Challenges Grant

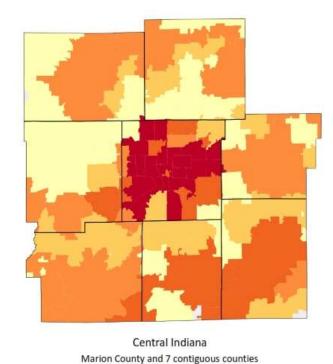


program in June 2022. Work begins in late 2022 and represents a significant milestone in reaching a long-

sought objective – regular, local, sustainable, and publicly available childhood obesity surveillance estimates and trends for Marion County and central Indiana.

Equity, Health, and Structural Racism

A 2015 model produced by Jump IN to identify communities where children are at high risk for overweight and obesity relied on social determinants of health that are associated with higher risk of childhood obesity. The figure below shows the resulting map of Marion and its contiguous counties and indicates that the Marion County zip codes where poor housing, high crime, low income and poverty, poor access to transportation, low educational attainment, and other community deficits are important burdens correspond with highest risk. These data acknowledge the impact of systemic racism in causing the stark health disparities. Working to improve social determinants of health--such as strengthening healthy food access and ensuring the built environment and infrastructure promote safe and accessible physical activity--drives change among our most disenfranchised residents.



Jump IN Childhood Overweight Risk Index v3

Data source: American Community Survey 5-year estimates (2009-2013), US Census Bureau, by ZIP Code Tabulation Area (ZCTA)

Compiled by: Jump IN for Healthy Kids

Map engine: QGIS 2.10.1-Pisa

Counties

Lowest Highest risk

Components of the index Percent of population, Hispanic any race (DP05) Percent of population, non-Hispanic Black-alone (DP05) Percent of families with children <18 and below 185% of FPL (from B17022) Percent of children <18 covered by one type of health insurance, Medicaid-or-other-means-tested (B27010) Percent of population with less than a high-school diploma (from \$1501) ZCTAs quintiled in each component, and each ZCTA assigned a component score of 1 to 5 corresponding to its quintile for that component (higher score associated to higher risk for CO). Each ZCTA's five component index scores were then summed, yielding a composite Jump IN CO Risk Index of 5 to 25 by ZCTA, with 25 indicating highest risk for childhood obesity or overweight.

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Our Work and COVID

It is impossible to reflect on the activities and impact that Jump IN has made in 2022 and pursues in 2023 without acknowledging the complications brought on by COVID-19. While nearly all youth-serving programs, from schools to child cares to after school and extra-curricular activities have been modified, curbed, or cancelled outright, the need for our work is greater than ever, as the severe outcomes for COVID-19 are far worse for individuals with obesity and its related chronic diseases. Early research indicates that COVID-19 has potentially worsened children's prevalence of overweight and obesity, once again impacting poor and at-risk children disproportionately.

Jump In has been fortunate to continue our systems-change work by strengthening our messaging to ensure that community partners recognize the urgency of our work. The community weaknesses that existed before COVID-19 have been magnified during this time and have helped us see even more clearly how critical our work is and will be in the coming years.