



D2F P.H.I.T.

(Pursuing Health through Innovative Strategies)

EVALUATION RESULTS

- The D2F PHIT Club is a collaboration of community partners which include a fitness expert, community organizations and a medical physician, all of which have more than 20 years of committed experience in working with African American families.
- D2F PHIT implements the Body Works Curriculum which is published by the Office of Women's Health. *Modifications:* While the curriculum primarily targets mothers, D2F PHIT incorporates the mother and daughter into the program. Additional PHIT program components include field trips, mother-daughter fitness challenges, cooking demonstrations and pre/post medical screenings.
- D2F targets 50 African American females ages 13-17 and their primary caregivers in the Roseland community to participate in a 12-week program. There are two sessions, fall and spring, targeting 25 girls and their caregivers for each. Recruitment activities (flyers, information tables, speaking opportunities) are implemented through collaborations with local churches, schools, community based organizations and civic monthly town hall meetings
- During the 12-week program, mother/caregivers and their daughters attend weekly sessions which include curriculum instruction, nutrition information, a 45-minute workout, meal preparation education and field trips. Program evaluation includes: pre survey, post-survey and a six-month follow-up survey as well as pre and post medical screenings and fitness tests.

Presented below are the results from a before and after questionnaire administered to the adolescent female and their primary care giver as well as some of the medical and fitness results. Twenty (20) African American females age 13-17 and their mother/primary caregiver participated in a twelve-week program designed to reduce

the occurrence of weight-related health risks by increasing physical activity and healthful eating behaviors.

Findings-from the first wave of participants some of the (pre-post) findings include:

Caregivers:

- While weight loss was not the goal of the program all caregivers experienced some weight loss ranging from 3lbs-30lbs;
- Believed that if they ate well, their family would follow the example increased from 16% to 67%;
- Believed that if they were physically active, their family would follow the example increased from 16% to 50%;
- Planned their families meals increased from 10% to 75%;
- Reported they often make sure that healthy snacks are easily available for their family increased from 17% to 67%;
- 100% agreed that compared to three months ago (before the program) they now know how to set realistic nutrition goals for their family;
- 100% reported that there is less non-diet soda, more vegetables available during meals, their daughter ate more vegetables, and they cooked with less fat, are more physically active, and shopped for healthier foods;
- Reported they helped their daughter to be physically active and to make healthier food choices increased from 16% to 75%; and
- Reported they do more active things with their daughter increased from 0% to 67%.

Daughters:

- While weight loss was not the goal of the program more than half of the girls experienced some weight loss ranging from 2lbs-20lbs;
- Reported they consume a healthy breakfast increased 0% to 80%
 - Most reported they increased the number of times they ate fruit (from 0% 3-4 times a day to 60%);
- More reported they consumed at least two servings of vegetables (increased from 17% to 40%);

- Fewer reported they drink soda or pop (decreased from 50% 4-6 times a day or more to 0%);
- Most described their weight as slightly overweight or very overweight (88% and 80%);
- All stated they wanted to lose weight (100% - 100%);
- There was a small increase in those that reported:
 - They exercise to lose weight or to keep from gaining weight (83% to 100%);
 - They eat less food, fewer calories, or foods low in fat to lose weight or to keep from gaining weight (67% to 100%);

Based on the findings of the first wave of participants, the PHIT program demonstrated levels of significance in attitudes, knowledge and behavior. A twelve month follow-up survey will be administered in April 2011. A new wave of participants began in March 2011 and pre/post data will be available July 2011. D2F is currently pursuing opportunities to conduct more rigorous evaluation of the PHIT program which will include randomization into treatment and control groups.