



**ASU** Southwest Interdisciplinary  
Research Center  
Arizona State University

# Policy brief

## Importance of School Climate in Youth Obesity Prevention Programs

Nationally, there is serious concern over the dramatic rise in obesity in the United States. Nearly two-thirds of adults and almost one-third of youth ages 10 to 17 are overweight or obese which may cause major health problems including type-2 diabetes and hypertension. Schools find that youngsters who are obese or overweight may have decreased mental ability, behavioral health problems or be subject to bullying. Being overweight is also associated with absenteeism from school, lower grade point averages, standardized test scores and perceived lower academic performance. Schools are an ideal place to implement obesity prevention programs because they can provide opportunities for youngsters to eat healthy meals and engage in physical activities. Studies have shown schools can also help to improve students' health by providing education about food purchasing and preparation and by offering school physical education programs.

However, the success of school obesity prevention programs often depends on an accepting school environment. Schools differ in program implementation. Important to program success are schools' policies and practices, school personnel's attitudes and beliefs about prevention, the level of overall commitment by the school, collaborations by individuals who have a stake in school programming, and a reduction of barriers to program implementation. Success may depend especially on participation by front line staff, as well as participation in strategy and decision making by

health professionals, teachers, and other school personnel who are critical to implementing a prevention program and seeing it through. There is broad agreement that programs to promote healthy eating and physical activity should be considered by schools in order to have a wide ranging and meaningful impact on decreasing obesity among youth.

**Methodology:** Researchers at Arizona State University explored school environments and obesity prevention and determined key factors in implementing evidence-based health and wellness policies and practices in Kindergarten to 8th grade programs in the Southwest. In December 2011, data were collected from 62 health professionals, representing 12% of public elementary/middle schools and 29.4% of districts within a targeted Southwestern county. Participants completed an anonymous and confidential survey administered over a two-week period through a state department of education listserv. The 149-item online School Health Survey was part of a county-funded needs assessment of obesity prevention initiatives and school-based prevention studies. The survey asked whether various policies and practices were implemented in school settings and whether there was perceived acceptance by school personnel. Questions were included about knowledge of schools' nutritional strategies, physical education and activities and overall health strategies.

Survey areas were grouped into four categories: **1) Attitudes and beliefs toward prevention** including satisfaction with strategies, beneficial outcomes expected, advantages of implementation and an organization's prevention knowledge; **2) Commitment to prevention** including internal and external organizational support for prevention, sustainability of strategies, the administration's commitment to prevention, and incorporation of prevention into regular school operations; **3) Stakeholder collaboration** including commitment of individual school health professionals to implementation and staff participation in strategy decision making; and **4) Barriers** including the lack of a clear strategy, external resistance to prevention efforts, organizational instability in staffing and operations, need for external support for implementation, and need for formal training to implement a program.

Results showed that the more barriers there were to program implementation, the less likelihood that healthy food policies were in place. Conversely, where fewer barriers and a higher commitment to obesity prevention programming existed, there was greater likelihood that healthy food policies were implemented.

The interaction of school commitment and barriers was extremely important. For example, when stakeholders, such as food service staff, health educators, school nurses and teachers, had limited involvement in prevention strategies, they were less likely to promote school-wide nutrition programming and healthy food policies. Furthermore, they were more likely to exclude youth from physical education programs as punishment for misbehavior.

Elements for successful school interventions addressing childhood obesity include school level commitment, collaboration by stakeholders, resource allocation and an understanding that depriving youth of physical activity as a means of punishment is contrary to accepted obesity prevention practices. In developing programs, prevention policies and school environments should also be assessed to see if they are aligned with individual schools organizational readiness, implementation and sustainability. School climate, combined with school commitment, collaborative stakeholders and barriers are the most important factors in determining whether or not school obesity prevention efforts will be both effective and sustainable.

The obesity epidemic represents a major public health, social, and economic challenge, estimated to cost more than \$14 billion per year for children in the United States. While school commitment is vital in reducing childhood obesity, schools do not exist in a vacuum. Many policies are set by state or federal regulations leaving little room locally for input, influence, collaboration on strategic planning or adaptability. While stakeholder collaboration is vital it does not automatically ensure success. Obesity prevention programs also depend on Federal leadership and the availability of resources available to operate and sustain programs for the nation's youth. Findings from this study support the need for policy collaboration at the federal, state, county and school levels in order to implement successful obesity prevention programs for our youth.



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