



FROM CLINIC TO COMMUNITY

ADAPTING EVIDENCE-BASED WEIGHT MANAGEMENT
FOR OVERWEIGHT LATINO CHILDREN IN IMMIGRANT FAMILIES



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BACKGROUND

US BORN LATINO CHILDREN
WITH IMMIGRANT PARENTS HAVE
DISPROPORTIONATELY
HIGH CHILDHOOD OVERWEIGHT/
OBESITY RATES



INTENSIVE INTERVENTIONS
AS RECOMMENDED BY CURRENT
GUIDELINES ARE IMPRACTICAL
FOR LOW-INCOME FAMILIES
FACING OTHER BARRIERS
TO FREQUENT ENGAGEMENT
WITH HEALTHCARE SYSTEMS



ACTIVE AND HEALTHY FAMILIES,
A SPANISH-LANGUAGE,
CULTURALLY TAILORED CLINIC
PROGRAM FOR CHILDREN HAS
DEMONSTRATED EFFECTIVENESS IN
REDUCING BMI



ADAPTING THE
INTERVENTION
FOR COMMUNITY-BASED
DELIVERY MAY INCREASE
ACCEPTABILITY
AND FAMILY ENGAGEMENT



OBJECTIVE

TO ENGAGE A STAKEHOLDER NETWORK IN IDENTIFYING ADAPTATIONS
OF AN EVIDENCE-BASED WEIGHT MANAGEMENT PROGRAM
FOR COMMUNITY-BASED IMPLEMENTATION BY:



ENGAGING COMMUNITY
ORGANIZATIONS,
PATIENTS, AND HEALTHCARE
PROFESSIONALS TO CREATE
A STAKEHOLDER NETWORK



USING INTERVENTION MAPPING-
ADAPT TO ASSESS FIT, PLAN
ADAPTATIONS AND IDENTIFY
ESSENTIAL INTERVENTION
COMPONENTS

RESULTS

Stakeholders identified **three functions** (i.e.essential components)
of the evidence-based intervention: and reached consensus
on **forms** (strategies to meet each function) needed
for community-based implementation.

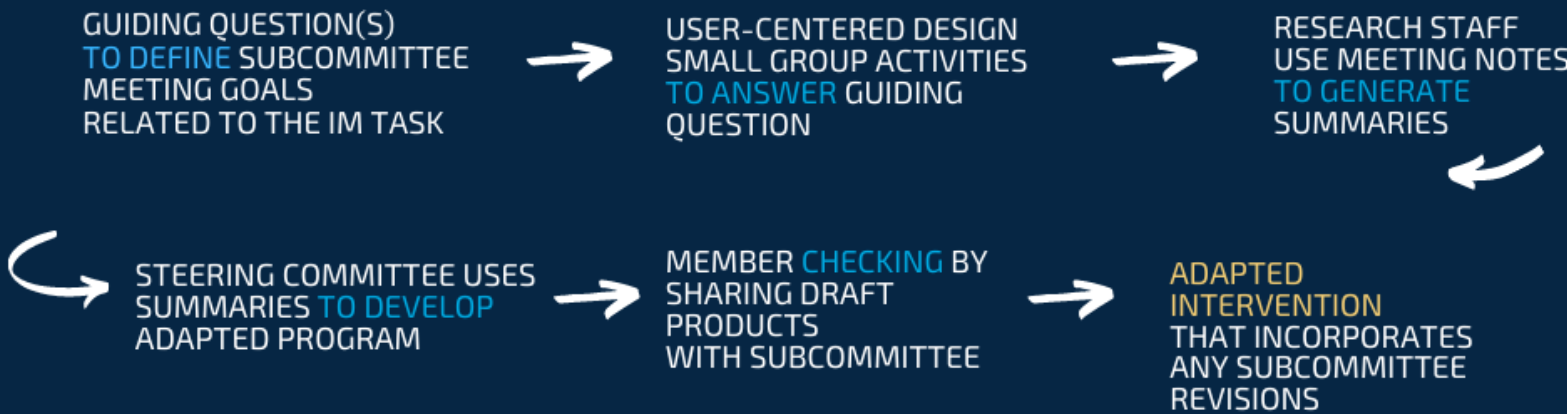
ACTIVE AND HEALTHY FAMILIES FUNCTION	AHF FORM	COMMUNITY AHF FORM
COLLABORATIVE, MULTIDISCIPLINARY LEARNING ENVIRONMENT THAT FOSTERS CO-LEARNING WITH AND BETWEEN PARTICIPANTS	Physician or Advanced Practice Provider/Registered Dietician/ Community Health Worker (CHW) Triadic Co-Facilitation Model	Nurse/CHW Dyadic Co-Facilitation Model
FAMILY BEHAVIOR CHANGE TO REDUCE CHILD BODY MASS INDEX	Spanish-language culturally tailored curriculum that addresses immigration, family dynamics, food preferences and cultural perceptions of weight	AHF curriculum PLUS addition of discussion of community/ structural level facilitators and barriers to behavior change and strategies to mitigate these barriers
FINANCIALLY-SUSTAINABLE MODEL	Reimbursement using physician/ advanced practice provider group visit model	Community-based reimbursable service using Medicare Diabetes Prevention Program as a model

METHODOLOGY

STAKEHOLDER ACTION NETWORK



STAKEHOLDER NETWORK PROCESSES TO COMPLETE INTERVENTION MAPPING-ADAPT (IM) TASKS



CONCLUSIONS

STAKEHOLDER ENGAGEMENT AS PART OF AN INTERVENTION MAPPING PROCESS
DEFINED **FUNCTIONS** OF AN EVIDENCE-BASED WEIGHT MANAGEMENT INTERVENTION
AND **KEY FORM** CHANGES FOR COMMUNITY-BASED VS. CLINIC-BASED IMPLEMENTATION

COMMUNITY-BASED IMPLEMENTATION MAY BETTER ADDRESS SOME SOCIAL
DETERMINANTS OF HEALTH BARRIERS **TO HEALTHY WEIGHT FOR LATINO CHILDREN IN
IMMIGRANT FAMILIES**

