



*Georgia Department of Public Health*

# **Eat. Move. Talk!**

## **Georgia's Approach to Addressing Early Brain Development in Early Child Centers**

Presentation to: Chronic Disease University

Presented by: Audrey Idaikkadar, MPH

Date: June 13, 2018



*We Protect Lives.*

# CHES/MCHES Competencies

2.1.3 Facilitate collaborative efforts among priority populations, partners, and other stakeholders

3.2.3 Identify training needs of individuals involved in implementation

7.1.3 Tailor messages for intended audiences

# Georgia Approach to Obesity Prevention

Nutrition and Physical Activity Programs reducing childhood and adult obesity by focusing on healthy environments in:

- Worksites
- Schools
- Early Childhood Education (ECEs) Environments
- Communities



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# Partners



Georgia Coalition  
for Dual Language Learners



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# Program Goals



- Fruits and vegetables
- Quantity and quality of physical activity
- Quantity and quality of words spoken

To support healthy body and brain development and school readiness.

# Healthy Eating

- Nutrition in the first 1000 days can set a lifelong foundation for health or illness.
- 35% of Georgia adolescents are overweight or obese, and more than 10% of children 2-5 years old are obese.



# Physical Activity

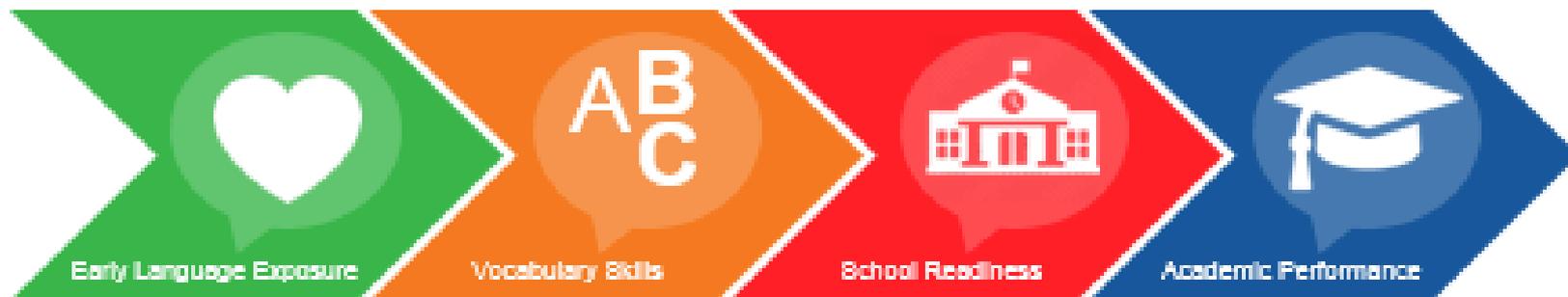
Physical activity in early childhood sets the foundation for lifelong movement and healthy habits.

Benefits include:

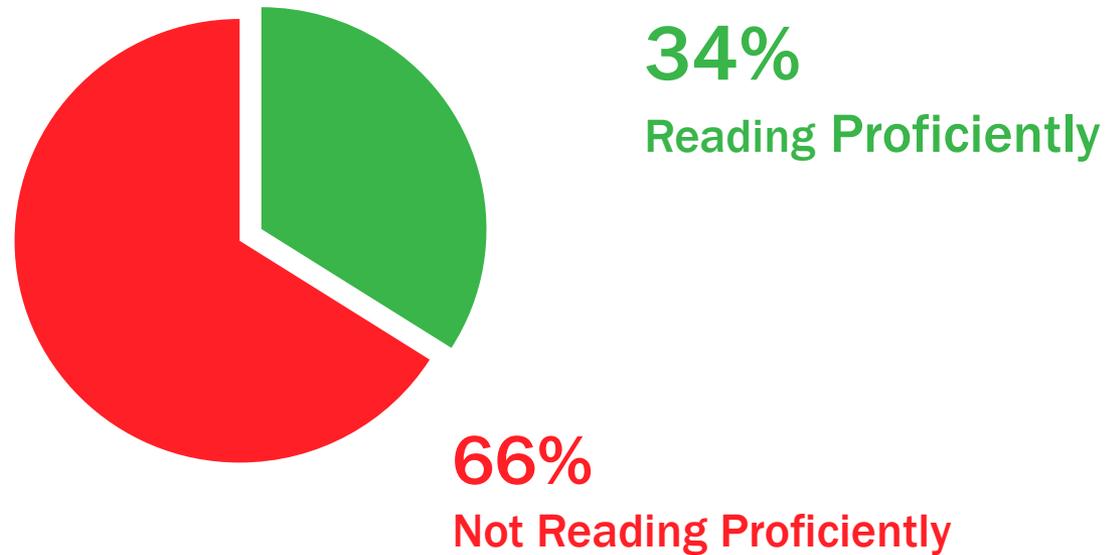
- Building strength, self-confidence, concentration, and coordination.
- Increasing school readiness.
- Developing healthier social, cognitive, and emotional skills.

# Language Nutrition

- The use of language that is rich in engagement, quality, quantity and context that nourishes the child's brain, social skills and language development.
- Includes reading books, telling stories and singing.
- Effective in every language.



# 3rd Grade Reading Proficiency in Georgia in 2014



U.S. Department of Education, Institute of Education Sciences. National Center for Education Statistics, National Assessment of Educational Progress (NAEP) Reading Assessment, 2015.

# Academic and Health Outcomes

Educational achievement is associated with

- higher socio-economic status
- longer life-expectancy
- lower lifelong burden of chronic conditions

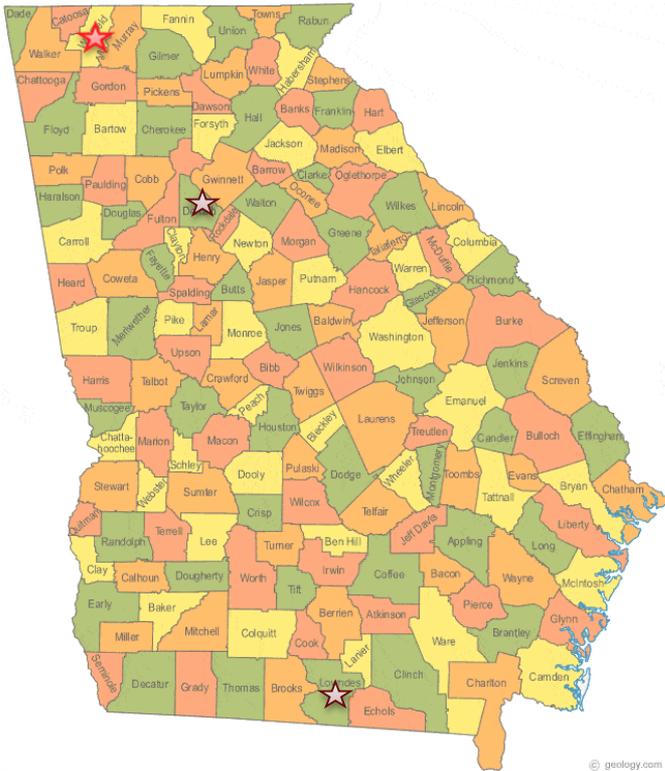
College graduates  
live **8-9 years** longer.



(Braveman & Egerter, 2013)

Individuals who do not complete high school are **6 times** more likely to report poor health, and **2 times** more likely to have diabetes.

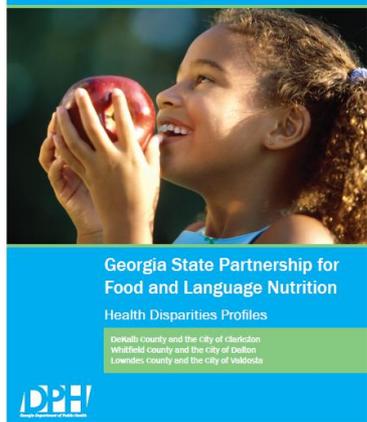
# Target Communities



© geology.com

	Clarkston, DeKalb	Dalton, Whitfield	Valdosta, Lowndes
<b>Number of residents*</b>	7,554	33,529	56,595
<b>Persons under 5 years*</b>	9.7% or 761	9.1% or 3,051	7.7% or 4,357
<b>Under Federal Poverty Level*</b>	43.9%	26.8%	33%
<b>White**</b>	13.6%	65%	43.3%
<b>Black**</b>	58.4%	6.4%	51.1%
<b>Asian**</b>	21.6%	1.7%	1.7%
<b>American Indian/Alaskan Native**</b>	0.4%	0.6%	0.3%
<b>Multiracial**</b>	4.1%	3.2%	1.9%
<b>Hispanic or Latino**</b>	2.8%	48.0%	4.0%
<b>Foreign-born persons</b>	53.5%	27.7%	5.0%

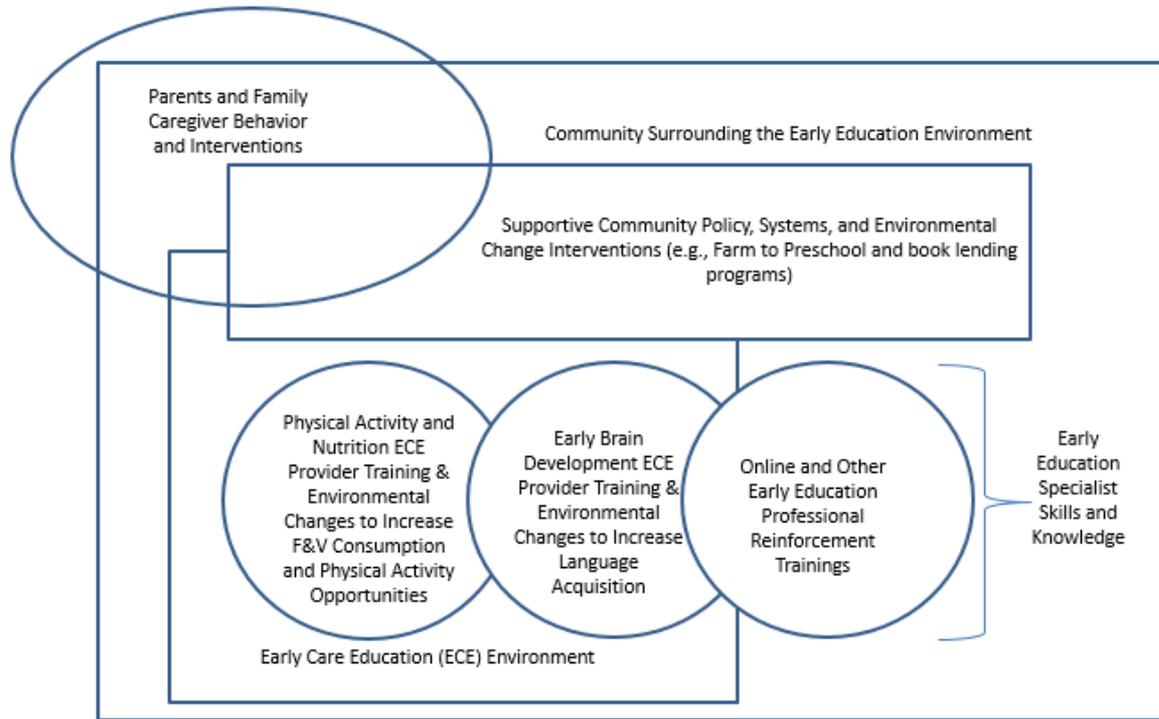
# Health Disparities Profile



Leading Health Indicator/ Proxy	Clarkston, DeKalb	Dalton, Whitfield	Valdosta, Lowndes
Mean daily intake of total vegetables for age 2+	NA	NA	NA
Percent adults with inadequate fruit/vegetable consumption	70.9%	79.3%	74.8%
Percent of 3rd graders in the Healthy Fitness Zone for Body Mass Index	Boys: 69.05% Girls: 70.74%	Boys: 57.41% Girls: 64.81%	Boys: 65.94% Girls: 62.11%
Percent of the population living in census tracts designated as food deserts	25.05%	31.26%	18.68%
Percent population with no leisure time physical activity	21.4%	31.4%	28.9%
High school graduation rate	63%	81%	78%
Proficient and Distinguished Learners for the 3rd grade English Language Arts	15.60%/14.18%	23.70%	25.30%

Data Sources: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health & Human Services, Health Indicators Warehouse. 2005-09. Source geography: County; Georgia Department of Education, 2016; US Department of Agriculture, Economic Research Service, USDA -Food Access Research Atlas. 2010; Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2012; Governor's Office of Student Achievement, 2015; Governor's Office of Student Achievement, 2015

# Conceptual model for Eat. Move. Talk!



O'Connor, J., Ejikeme, C., Fernandez, M., Powell-Threets, K., Idaikkadar, A., Kay, C., Vall, E.A., Stringer, K., Fitzgerald, B. (2016). Integrating food and language nutrition to reach Georgia's children in early care and education environments. *jGPHA*, 6(2), 147-154. doi: 0.21633/jgpha.6.216

# Facilitating Collaboration

- Build on existing networks focused on childhood obesity and early brain development
- Convene state-wide and local partners in a partner stakeholder group
- Convene a curriculum development team
- Include state early care and learning agency, early brain development and chronic disease experts, and training organizations

**Georgia  
Coalition**  
for Dual Language Learners

 EMORY | NELL HODGSON  
WOODRUFF  
SCHOOL OF  
NURSING



Friends  
of  
Refugees



# Local Partnerships

- Early Education Empowerment Zones (E3Zs) in Dalton and Valdosta
- Friends of Refugees and the Family Literacy Program
- Clarkston Early Learning Network and CDF



Friends  
of  
Refugees



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# Identifying Training Needs and Messages

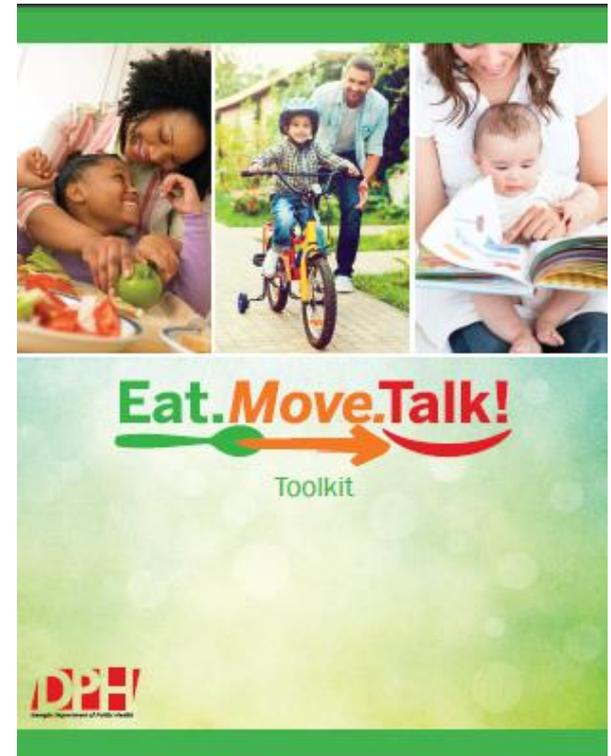
- Six community listening sessions with 31 family members and 39 early childhood educators:
  - Strategies: trying new foods, including children in food shopping, accessing public parks and play spaces, role modeling physical activity, asking open-ended questions, and reading books.
  - Challenges: access, expense of healthy food and physical activity facilities, and time to prepare food and to support reading.

# Early Child Care and Education Training and Toolkit

- Five-hour professional development credits
- Online Coaching Training: Talk With Me Baby for Infant and Toddler Teachers

[www.readrightfromthestart.org](http://www.readrightfromthestart.org)

- Follow-Up and Technical Assistance
- Accessibility for English Language Learners



# Eat. Move. Talk! Training

## Language Nutrition Key Elements

- Connect
- Take Turns
- Keep it Going

# Eat. Move. Talk! Training (cont.)

## Language Nutrition to Support Healthy Eating and Moving

### Conversations about Healthy Eating

- Food shopping
- Cooking and food preparation
- Eating
- Reading books and telling stories



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### Movement Vocabulary

#### Actions

- Walk
- Run
- Jump
- Hop
- Leap
- Skip
- Gallop
- Slide

#### Space

- High
- Middle
- Low
- Forward
- Backward
- Sideward
- In Your Own Space
- Through Space

#### Body Parts

- Shoulders
- Chest
- Stomach
- Hips
- Back
- Arms
- Elbows
- Wrists

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# Toolkit and Resources

## Toolkit

- Why is this important?
- Handouts for centers and families
- Center success stories

## Resources

- Books and posters
- Family engagement dry erase boards



### Kids in the Kitchen

Encourage the children in your care to try new foods by having them help you in the preparation of snacks and meals. Children are less likely to reject foods that they help to make. Kids feel good about doing something "grown-up." Give them small jobs to do. Praise their efforts.

As toddlers and preschoolers grow, they are able to help out with different tasks in the kitchen. While the following suggestions are typical, children may develop these skills at different ages. Consider incorporating some of these ideas into your center and sharing these ideas with families.

<p><b>5 Years</b> All that a 4-year-old can do, plus:</p>	<ul style="list-style-type: none"> <li>• Measure liquids</li> <li>• Cut soft fruits with a dull knife</li> <li>• Use an egg beater</li> </ul>
<p><b>4 Years</b> All that a 3-year-old can do, plus:</p>	<ul style="list-style-type: none"> <li>• Peel eggs and some fruits, such as oranges and bananas</li> <li>• Set the table</li> <li>• Crack eggs</li> <li>• Help measure dry ingredients</li> <li>• Help make sandwiches and tossed salads</li> </ul>



# Training Evaluation

## Purpose

- Training early child care educators as agents to support infants and toddlers and their families to improve healthy behaviors, active living and language interaction.

## Evaluation approach

- Assess participants' perceptions about changes in their knowledge of the topics covered.
- Assess satisfaction with training conduct.
- Assess willingness to take the next step training.

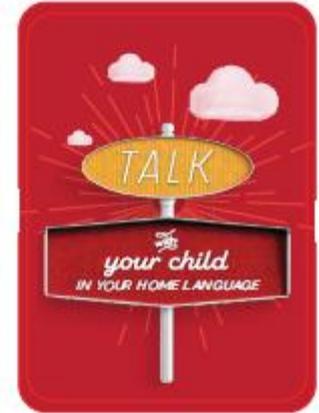
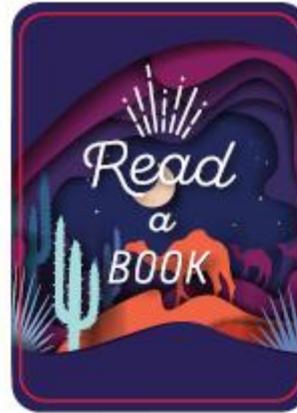
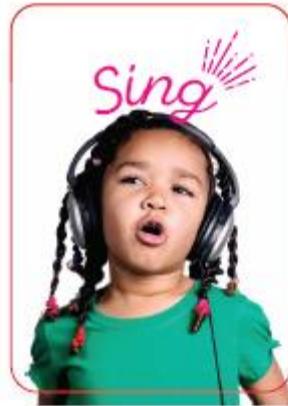
# Cumulative Perceived Knowledge Gain

Healthy Eating	Physical Activity	Language Literacy
1.61	1.51	1.40

## Paired Sample T-test

	Healthy Eating	Physical Activity	Language Literacy
T alpha at 95% CI	20.4	18.8	15.8
Confidence Interval	1.29-1.57	1.18-1.62	1.04-1.36

# Messages for Families



# Discussion/Questions



# Thank you!

Audrey Idaikkadar, MPH

[Audrey.Idaikkadar@dph.ga.gov](mailto:Audrey.Idaikkadar@dph.ga.gov)

404-657-0614