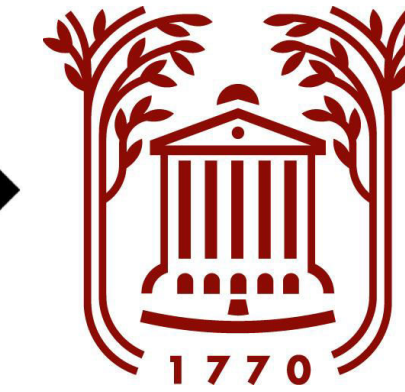
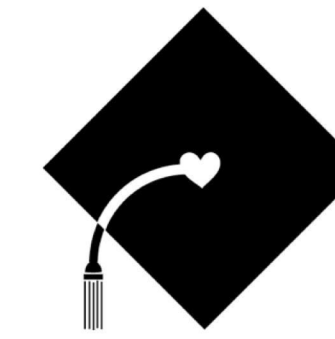


# Reducing Health Disparities in Our Youth

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## Introduction

My senior capstone is based on a health intervention organized for Chucktown Squash after school program. The program was entitled the Squash Health and Wellness Fest. The duration of the program was 15 weeks and included informative yet interactive sessions, healthy snacks, and games. A pretest and posttest measured the student's overall progress.

I chose 5 specific health concerns/areas of improvement based on a joint assessment conducted with the students and program coordinator, Remy Starker. The 5 relevant health topics included:

1. *The Importance of Fresh Fruits and Vegetables*
2. *How to Eat Healthy on a Budget*
3. *Hydration is Key*
4. *Hygiene*
5. *Sugar Consumption Reduction*

The Health Intervention was constructed to provide useful knowledge about relatable and relevant health issues. The goal was to increase the students' awareness and encourage them to change specific health behaviors. I am grateful I had an opportunity to share the knowledge I gained from a degree in Public Health with my mentees. As a result, student will have the capacity to improve their overall quality of life and reach their maximum potential while playing squash on the courts.

## Methodology

Week 1-3: Mentor training reviewed the purpose of the program and leading by example with healthy lifestyle choices. Mentors identified our own strengths and interests and analyzed how we can incorporate them in order to enrich the scholars.

Week 4 (09/14/2016) We conducted a fitness test using the FitnessGram Pacer test, calculating BMI, crunches and flexibility. Students will be tested at the end of the semester to track progress and encourage further development.

Week 5 (9//19/16, 9/21/16, 9/23/16) Mentors completed a cultural competency training involving a poverty simulation and discussion.

Week 6-7 Hurricane Matthew Evacuation Preparation, so programming was shortened for the week.

Week 8-9 (10/17/16, 10/20/16) I conducted the first session of an intervention, I started with a pretest, containing a Likert scale and questions assessing attitudes toward various health topics. I presented a prezi about the Importance of Fresh Fruits and Vegetables, distributed a trifold, and facilitated a discussion about health eating habits, especially among the youth.

Week 10-11: I conducted the second session of an intervention called Chucktown Squash Health and Wellness Fest. I presented a prezi about eating healthy on a budget and distributed a comic trip for the students to take home. Students were instructed to write a paragraph long reflection, those who read aloud were rewarded with fruit leather, a tasty but nutritious snack containing 1 serving of fruit and no added sugar.

Week 12 (11/10/16) I conducted the third session: I presented on the Importance of hydration, false advertisements that do not promote water consumption, and a module for behavior change. We used fruit infusion to make water more appealing. Water was infused with watermelon, strawberries, lemon, oranges, mint, and kiwi. Students calculated how much water they should drink each day and set a goal based on BMI. Students wrote a reflection vowing to make water related behavior changes based on the information given in the session.

Week 13 (11/17/16) I conducted the fourth session of an intervention: I gave a presentation on hygiene and handwashing. I encouraged the scholar's creativity by dividing 4 groups to create advertisements for deodorant. The winning group received a prize. We played performed improv related role play scenarios including a person, place, and problem related to hygiene. A brief mime game demonstrated the World Health Organization's 11 steps of hand washing.

Week 14-15 (12/01/16) I conducted the fifth session of an intervention, I gave a presentation on 'The Truth about Sugar' and then led a discussion about future behavior changes to reduce adolescence sugar consumption. We played a game where teams guess the amount of sugar in various food items such as soda, candy, cereal, fast food salads, and juice. Afterwards, we played Jeopardy to review content from all 5 Sessions.



## Conclusion

I conducted a post-test, containing a likert scale and questions assessing attitudes toward health topics discussed in the intervention. Student's awareness and attitudes of the 5 health concepts increased by 23%.

Throughout the health intervention I was able to connect with the students and understand why they were making certain health decisions and then improve the behaviors with valuable knowledge

As a result I was able to connect three key areas my own passion and interest. I addressed social issues such as lack of access to fresh fruits and vegetables (food deserts). At the time the closest grocery store to most of the students, the BILO on meeting, was replaced. The key factors in impacting a health behavior change are a supportive environment, awareness, and the behavior change itself. I incorporated all three into my intervention to ensure effectiveness.

With a minor in sociology, I witness the connection between personal health and social determinants. Those in underserved communities experiences health disparities at an increased rate. In most cases health behavior is influenced by media, environmental conditions, and family. Many acquired behavior are cultural and generational. As a mentor to growing adults, it is my responsibility to share the skills and knowledge I have gained from Public Health because an individual's education and socioeconomic status has direct relationship with their health status. This includes access to quality care and access to knowledgeable resources which lead to making informed health decisions.

## Special Thanks

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