

THE UNIVERSITY of NORTH TEXAS
HEALTH SCIENCE CENTER at FORT WORTH



A NOVEL FAMILY-BASED E- HEALTH INTERVENTION PROCESS TO REDUCE OBESITY

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Family-Based E-Health



The CRITICAL GAP = how to disrupt the link to destructive factors by connecting families of at-risk children to protective community, family, and individual based factors.

Hypothesis: socioeconomically disadvantaged families of overweight/obese children who receive interactive e-health interventions will have improved knowledge and perceptions of lifestyle behavior choices.



Wellness

Disease: Obesity

Community/Culture supports behavioral goals of families

Public Policy and Advertising ambiguous in youth exposure to tobacco

Family promotes physical activity as a management of stress

Community/Culture devalues exercise and sleep

Individuals motivated to choose and access healthy food regularly

Family embraces maladaptive reactions to stress ie. smoking, alcohol

Individual perceives healthy food choices as unobtainable and undesirable



NIMHD Research Framework

National Institute on Minority Health and Health Disparities Research Framework

<u>+</u> =

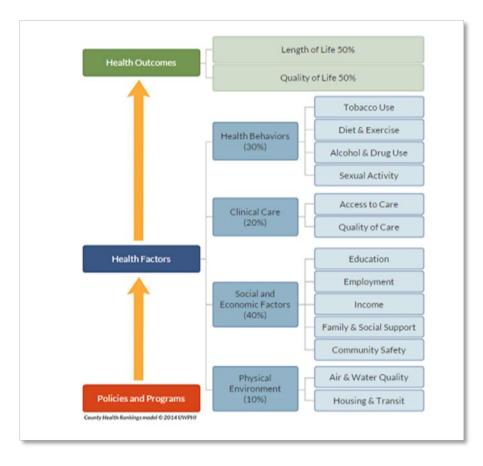
Framework areas addressed by E-health intervention

		Levels of Influence*				
		Individual	Interpersonal	Community	Societal	
Domains of Influence (Over the Lifecourse)	Biological	Biological Vulnerability and Mechanisms	Caregiver–Child Interaction Family Microbiome	Community Illness Exposure Herd Immunity	Sanitation Immunization Pathogen Exposure	
	Behavioral	Health Behaviors + Coping Strategies	Family Functioning School/Work Functioning	Community Functionin	Policies and Laws	
	Physical/Built Environment	Personal Environment	Household Environment School/Work Environment	Community Environment Community Resources	Societal Structure	
	Sociocultural Environment	Sociodemographics Limited English Cultural Identity Response to Discrimination	Social Networks Family/Peer Norms Interpersonal Discrimination	Community Norms Local Structural Discrimination	Social Norms Societal Structural Discrimination	
	Health Care System	Insurance Coverage Health Literacy Treatment Preferences	Patient-Clinician Relationship Medical Decision-Making	Availability of Services Safety Net Services	Quality of Care Health Care Policies	
Health Outcomes		A Individual Health	Family/ Organizational Health	合 Community 合合 Health	Population Health	

National Institute on Minority Health and Health Disparities, 2018
"Health Disparity Populations: Race/Ethnicity, Low SES, Rural, Sexual/Gender Minority
Other Fundamental Characteristics: Sex/Gender, Disability, Geographic Region



Social determinants of health



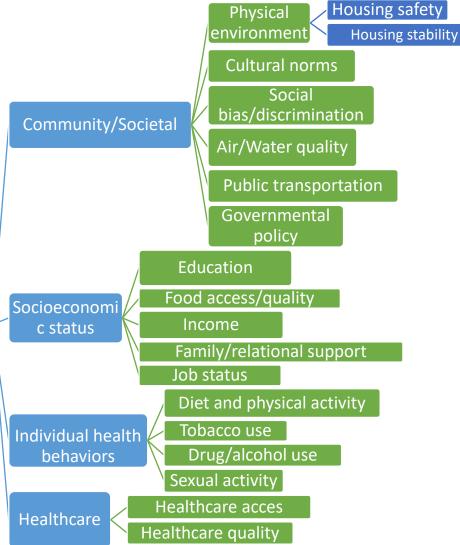
 Notice approximately 50% of health factors are physical environment, economic, or social factors that individuals often cannot influence



Health Outcomes =

Morbidity +

Mortality



National Institute on Minority Health and Health Disparities Research Framework

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National Institute on Minority Health and Health Disparities, 2018

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Lifestyles Impacting Obesity



hsc

Inertia to change

Hoeppner et al., 2017 has demonstrated with tobacco cessation text message studies that Social Cognitive Theory is most impactful in maintaining tobacco abstinence.

Griffin et al., 2018 has demonstrated with text message weight loss studies that self-efficacy, self-monitoring, and goal setting are beneficial to initiate physical activity and nutritional changes

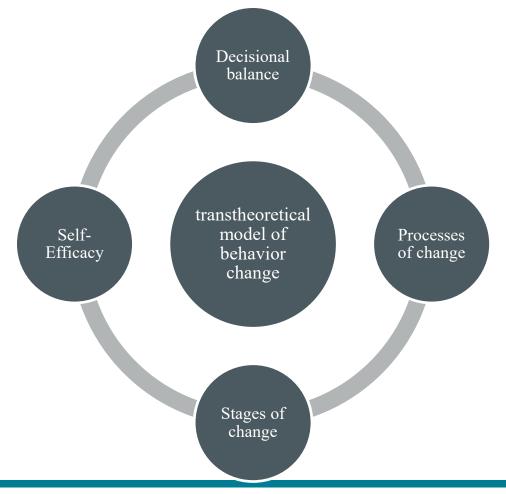






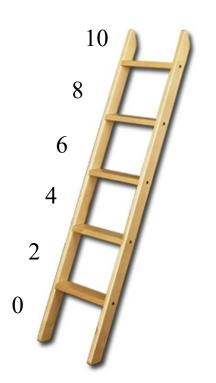
Transtheoretical model of behavior change

constructs





Transtheoretical model



- Maintenance: reinforce positive changes, social support
- Action: facilitate/support steps towards desired behavior
- Preparation: increase knowledge of benefits
- Contemplation: increase in self-efficacy = persuade + motivate
- Pre-contemplation: increase awareness

Specific Aims

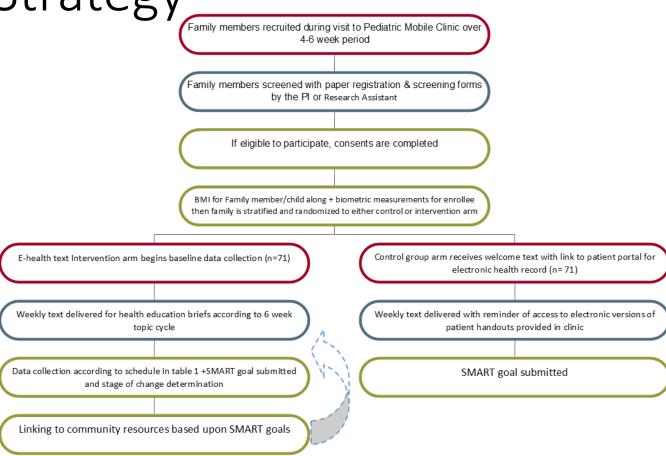


(SA1): tailoring an e-health text message intervention to improve the delivery of information to African American and Hispanic families of overweight/obese children ages 6 months to 11 years

(SA2): can an e-health text message intervention impact family members' attitudes, knowledge, and confidence to achieve SMART goals as related to 6 lifestyle behaviors?



Research Strategy



Enrollment



Objective measures are biometrics such as BMI, abdominal circumference, (+/- total cholesterol, BP, blood glucose) Participants will be delivered weight scales, tape measures, (+/- automated BP cuffs)

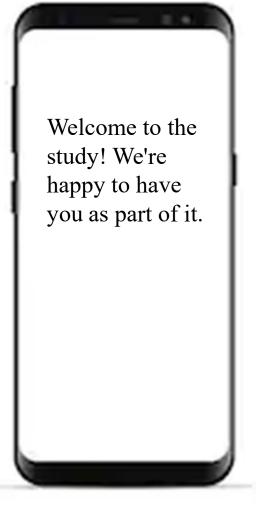


Intervention Overview

- E-health platform software is Mosio which supports features of:
 - Text chat bidirectional text message conversations between the study team and participants
 - Survey questionnaires to be delivered at set times
 - Storylines tailoring for the frequency of text messages per week and motivational messaging



Study Welcome





Control arm

Please visit your patient portal and https://www.cho osemyplate.gov/resources/myplate-tip-sheets to learn more about how everyday choices impacts our health.



Experimental arm

Did you know how you relate to others can impact your health? People who have satisfying relationships are happier, have less health problems, and live longer. On a ladder of 0 to 10, how confident are you in your ability to make changes related to our topic this week?

On a ladder of 0 to 10, how motivated are you to make changes related to our topic this week?

Day 6



Community Resource feature

- Trigger words
 - HELP = signal to initiate text chat when participants need more support (ex: community resource connection)
 - **STOP** = signal to initiate text chat when participants want to leave the study or modify their tailoring frequency



Where we are

Timeline

AIMS/TASKS	Months 0-1	Months 2-8	Months 8-11	Months 12-20
Specific Aim #1		\longrightarrow		
Text message content written	٧			
Community resource list complete	V			
Specific Aim #2				>
Recruit caregiver participants	V			
Collect baseline biometric data	V			
Biometric measurements		$\sqrt{}$	$\sqrt{}$	
E-health content delivery		$\sqrt{}$		
Weekly cognition surveying		$\sqrt{}$,
Behavior monitoring		$\sqrt{}$	$\sqrt{}$	$\sqrt{}$
Post intervention follow up				\longrightarrow

Goals	Months 0-3	Months 4-8	Percent complete
Goal 1			
Text message content written	V		90%
Community Resource list complete	٧		100%
Goal 2			
Recruitment of caregivers participants		V	0%
Collect baseline biometric data		٧	0%
Biometric measurements		٧	0%
E-health content delivery		٧	0%
Weekly cognition survey		٧	0%
Behavior monitoring		٧	0%



Next steps

- Recruit participants for the research study using the eligibility screening tool with each family during clinic encounters and through flyers provided to our community partners.
- We have a rolling enrollment until our target goal of 142 total participants are reached.



Future Directions

- Determine the duration of parental behavior change necessary to impact children's behavior and subsequent biometric changes
- Evaluate impact of lifestyle behaviors on resilience to mitigate stress of COVID-19 and societal stress



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• Thank you to Texas Center for Health Disparities



Thank you!

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