

Using PRECEDE to Develop a Weight Management Program for Disadvantaged Young Adults

Jennifer R. Walsh, PhD, RD; Adrienne A. White, PhD, RD;
Kendra K. Kattelman, PhD, RDN

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Jennifer R. Walsh, PhD, RD^{1,†}; Adrienne A. White, PhD, RD²; Kendra K. Kattelman, PhD, RDN³

ABSTRACT

Objective: To conduct a needs assessment using the PRECEDE model for the development of a weight management program for low-income young adults.

Design: Four phases were implemented using qualitative (focus groups and interviews) and quantitative (survey) methodologies, with steering committee guidance.

Setting: Northeastern residential vocational center.

Participants: Convenience sample of low-income young adults, 18–24 years old (total n = 203), who were attending a job training vocational center.

Phenomenon of Interest: General themes of life satisfaction determinants and issues related to weight, self-reported weight and related behavior, existing environmental supports, and desired changes of behavioral and environmental influences of weight.

Analysis: Content analysis of qualitative data; descriptive analysis and Student *t* test.

Results: Self-image and discrimination were themes for weight issues. More than half of participants were overweight or obese (57%) and had low levels of physical activity (58%). Self-reported fruit and vegetable intake was inadequate (<2.5 cups/d). Identified environmental factors most needing improvement were accessibility for walking and biking and availability of healthful food. Participants reported exercising, getting adequate sleep, eating healthful snacks, and effectively managing stress as behavior they were willing to change.

Conclusions and Implications: The PRECEDE model was useful to identify concerns, priorities, and modifiable factors among a young adult community that can increase the relevancy of a weight management program.

Key Words: weight management, life satisfaction, community-based approach, low income, young adults (*J Nutr Educ Behav.* 2014;46:S1-S9.)

INTRODUCTION

Over 30 million adults in the US are 18–24 years old, which represents almost 10% of the total population.¹ Although young adults who do not attend post-secondary schools represent about half of all young adults, they remain an understudied group compared to young adults who attend college.^{1,2} As alternatives to 2- and 4-year colleges, young adults may choose job

training programs. Almost 60,000 were enrolled in government job training programs in 2010.³ Many of these young adults are low income, minorities, and at great risk of health disparities.^{1,4}

Young adults are at particularly high risk of excess weight gain, which may vary by age and sex.^{2,5} The prevalence of obesity greatly increases from adolescence into the early 30s, and for this specific audience, there are no programs to address this concern.^{2,5}

Therefore, weight management programs are needed for young adults.⁶ Although programs designed in the context of young adults' priorities and interests are ideal, weight management programs may be perceived as challenging with disadvantaged young adults, because their urgent needs are related to the basic needs of housing and financial security through employment. These priorities may be perceived as having more current relevance than health-related priorities.⁷ Since disadvantaged young adults may have to satisfy basic needs, they are not likely to focus on the future, which limits the effect of any attempts to create motivation for behavior change by emphasizing long-term health benefits.⁸

The community-based participatory research (CBPR) approach has been used to find solutions to health-related issues that are supported and implemented by the priority population.^{9,10} With this

¹Department of Family, Youth and Community Sciences, University of Florida, Gainesville, FL

²Department of Food Science and Human Nutrition, University of Maine, Orono, ME

³Health and Nutritional Sciences, South Dakota State University, Brookings, SD

[†]At the time this research was conducted, Dr Walsh was at the University of Maine.

Address for correspondence: Jennifer R. Walsh, PhD, RD, University of Florida, 2029 McCarty Hall D, Gainesville, FL 32606; Phone: (352) 273-2798; Fax: (352) 392-6705; E-mail: jenniferwalsh@ufl.edu

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