

**HSC 4211**  
Health Behavior and Society

## Organizational level

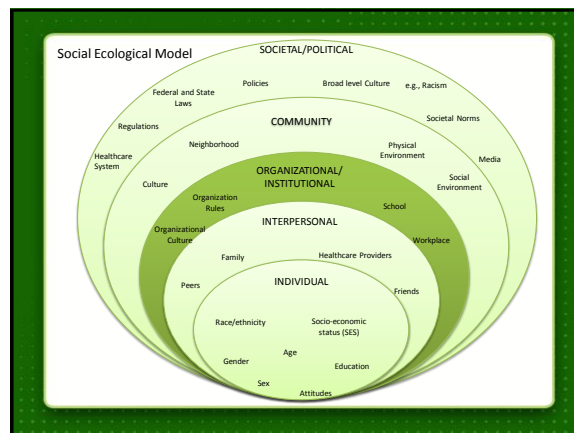
Nichole Murray

### Learning objectives

- Understand the Social Ecological Model (SEM)
  - Impact on health and behavior
  - Use in public health
- Understand the role of the organizational level in the Social Ecological Model
  - Characteristics and impact on health and behavior
  - Use in public health programs
- Apply SEM organization level to create a public health program targeted at obesity

### Social Ecological Model

- Helps us understand the interactions between individuals and environmental factors
- Relies on the belief that individual behavior is affected by multiple factors or levels which are in turn affected by individual behavior.



### SEM – Organizational Level

- In public health, we can utilize SEM to tackle public health issues

### Obesity – A public health epidemic

- In recent years we have seen an increase in obesity in adults and children.
  - 1/3 US population obese
  - 17% of children and adolescence described as obese
  - Associated with increased morbidity and mortality

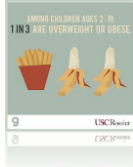
### Obesity at the organizational level

- Childhood Obesity
  - Doubled over the past 30 years
  - Immediate and long term effects
    - Childhood Diabetes
    - Obesity and increased health issues as adults

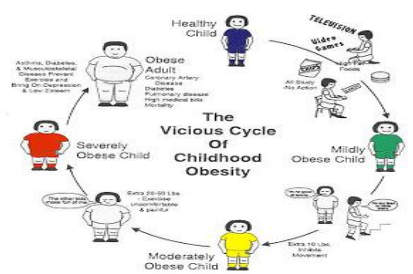


### Obesity at the organizational level

- Social Ecological Model can be used to tackle the issue of childhood obesity by addressing behaviors at an organization level
  - Nutrition education
  - Physical education
  - Healthier school lunch/snack choices




### Vicious Cycle



- Your turn! Can you think of a couple practical examples of how we can address childhood obesity?

### What can be done?

- Increase time, intensity and duration of physical activity during the school day
- Ensure that all foods and drinks served and sold in schools meet or exceed the most recent Dietary Guidelines




### Nutrition Education

- Integrating educational programs that teach healthy food choices.
  - What is the food pyramid
  - Proportion choices
  - Health snack alternatives




## Healthier School Lunches

- Improved school lunches
  - Vegetables
  - Lean meats
  - Whole grain
- Healthier snack choices in vending machines
  - Fruit snacks
  - Granola bars
  - Juice
  - Water




## Physical Education

- Increased physical education
  - Recess
  - Outside physical activities



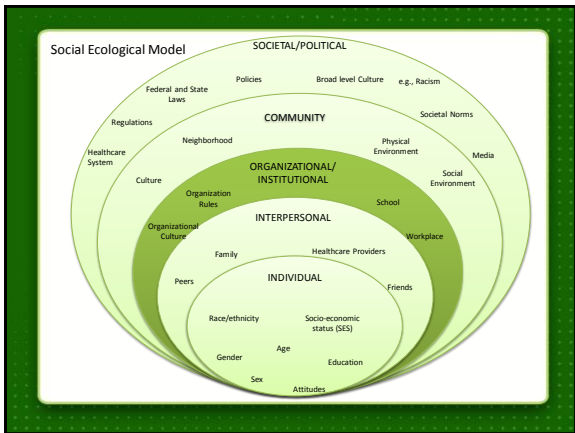
## Example

- New York City's childhood obesity initiative
  - The New York City Department of Health improved city conditions and implemented regulation for food preparation in chain restaurants and stores.
  - policy restricted the use of artificial trans-fats by restaurants and vendors to increase access to healthy foods and to decrease the risk of heart disease and obesity



## Application of Organizational level

Level	Description
Intrapersonal	Knowledge about different foods, skills in cooking, self-efficacy to make changes in diet
Interpersonal (family, friends)	Patterns of food preparation in household, food habits of peers
Community	Community norms regarding diet
Organizational (churches, stores, community organizations, food manufacturers)	Food availability and prices in local stores & restaurants, foods served at church dinners, actions by community groups to improve local availability of healthy foods



## References

- Dahlberg L. L., & Krug, E. G. (2002). Violence-a global public health problem. In: Krug E, Dahlberg LL, Mercy JA, Zwi AB, Lozano R, eds. World Report on Violence and Health. Geneva, Switzerland: World Health Organization,1-56.
- Doherty, K. (2012). "New York's trans-fat ban is working: Study," US Health News. [Online]. Available: <http://health.usnews.com/health-news/news/articles/2012/07/16/newyorks-trans-fat-ban-is-working-study>.
- Economos, C. D., & Irish-Hauser, S. (2007). Community interventions: A brief overview and their application to the obesity epidemic. *The Journal of Law, Medicine & Ethics*, 35(1), 131-137. doi: 10.1111/j.1748-720X.2007.00117.x
- Fitzgerald, N., & Spaccarotelli, K. (2009). Barriers to a healthy lifestyle: From individuals to public policy-an ecological perspective. *Journal of Extension*, 47(1)
- Glanz, K., Sallis, J. F., Saelens, B. E., & Frank, L. D. (2005) Healthy nutrition environments: concepts and measures. *American Journal of Health Promotion: May/June 2005*, Vol. 19, No. 5, pp. 330-333. doi: <http://dx.doi.org/10.4278/0890-1171-19.5.330>
- Staniford, L. J., Breckon, J. D., & Copeland, R. J. (2012). Treatment of childhood obesity: A systematic review. *Journal of Child and Family Studies*, 21, 545-564. doi: 10.1007/s10826-011-9507-7
- Tan, A. S. (2009). A case study of the New York City trans-fat story for international application. *Journal of Public Health Policy*, 30(1), 3-16. doi: 10.1057/jphp.2008.42
- Zenk, S. N., Lachance, L. L., Schultz, A. J., Mentz, G., Kannan, S., & Ridella, W. (2009) Neighborhood retail food environment and fruit and vegetable intake in a multiethnic urban population. *American Journal of Health Promotion* 23:4, 255-264