GYM INTRODUCTION

This community-campus partnership sought to build and sustain youth physical activity and health career awareness in an urban, medically underserved Milwaukee faith community by:

a) training Health Advocates and rallying community partners to lead physical activity and nutrition education for at-risk youth and

b) developing organizational structures within the church that promote health-sustaining activity and career choices.

Study Questions:
A. What did Health Advocates learn?
B. How active were youth participants?
C. How did endurance levels change?
D. What did youth learn about health careers?

FINDINGS & DISCUSSION

A. What did Health Advocates learn?

The table on the right represents the results of the retrospective pre-post assessment completed by the Health Advocates following six weekly training sessions. Findings indicate dramatic improvement in the nine objectives of interest.

These findings demonstrate a strong increase in the Advocates’ ability to interact with and advise youth about healthy behaviors associated with physical activity and nutrition.

B. How active were youth?

These findings indicate that, during the ten-week program, youth maintained a consistent level of moderate-to-vigorous physical activity outside of structured GYM sessions.

C. How did endurance levels change from pre- to post-program?

To determine changes in cardiorespiratory endurance during the ten-week session we used the OMNI Rating of Perceived Exertion (RPE) Scale. During the progressive run/walk sessions we asked youth (n=14) to rate individual feelings of exertion (i.e., tiredness) in run segments of Weeks 1, 5, 7, and 10. The RPE values from pre- to post-test indicate that an increase in fitness (i.e., improved cardiorespiratory endurance) occurred across time for the youth.

D. What did youth learn about health careers?

The graph shows significant increases (paired t-test, p<.01) in self-reported knowledge and behaviors associated with health career choices from pre- to post-program. We believe this is due to planned exposure to health professionals during exercise and didactic portions of the GYM program.

CONCLUSION

This pilot study indicates preliminary, highly promising outcomes on physical activity, nutrition and health career awareness for youth in a medically underserved, urban Milwaukee community. Outcomes were supported by strong pastoral leadership and health advocates who strengthened skills to positively influence health. Innovative measurement tools show promise for future, activity-based applications. Most importantly, a promising and potentially powerful health partnership was initiated.

NEXT STEPS

1. Continue analysis of data and refinement of tools for future activity-based urban health initiatives
2. Continue developing the GYM partnership
3. Explore the expansion of the initiative’s focus to other faith-based communities

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