

## **2010 Statement of Professional Contributions and Scholarship**

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### **Introduction**

With a Bachelor's degree in Medical Dietetics, a Masters Degree in Public Health, and five years of experience in nutrition and health education, I began the position of Rock County Family Living Educator in 2005. My original UW-Extension appointment was 100%. In 2008, after adding two children to our family, I requested that my position be reduced to 80%. I have remained at that reduced appointment. The other 20% of this position is filled by an interim family living educator, whom I supervise and mentor.

### **Educating Myself as an Educator**

Because I was trained as a clinical dietitian, I started this job with little formal education or experience in adult education. I worked on developing and improving my instructional techniques by participating in workshops such as the Facilitated Dialogue training and Adult Learner Techniques training and by studying recommended texts such as *From Telling to Teaching* by Joye A. Norris.

Reading the Norris book in particular was a pivotal educational transformation for me. Norris relates examples from nutrition professionals like myself and outlines principles I need to engage learners at different levels. I incorporate these principles into my teaching; as an example, now I always greet learners at the door to make them feel welcome. I create an environment for learning by paying attention to the physical environment of the classroom and I ask open-ended questions that help the learners appreciate their own knowledge and insights. I try not to put people on the spot by asking questions to which they might not know the answer. I assess my learners to find out about their learning styles and how they want to get information. I concentrate on what *they* want to learn instead of what *I* want to teach. A quote from one of my after session teaching experiences "*I loved the enthusiasm and vibe of the instructor, she created an environment that was conducive to learning and also fun.*"

### **Assessing Learners' Needs and Setting Goals**

As part of my effort to understand the needs of the learners in Rock County, I conducted needs assessments with key community members in 2005 (exhibit #1) and in 2007. (exhibit #2) These needs assessments identified three areas of greatest concern: *supporting and strengthening families, supporting the aging population, and improving the health of our residents*. I studied local health data and school readiness research to identify educational gaps within these topics. There are of course many ways to address these respective concerns, but I decided to build on my own strengths and experiences by concentrating on three areas: physical activity, nutrition education, and health promotion.

As part of my plan, I set three goals:

1. Increase physical activity among Rock County and Wisconsin residents,
2. Prevent childhood obesity in Rock County, and
3. Improve family health in Rock County through nutrition and health education.

To accomplish these ambitious goals, I quickly formed partnerships with key individuals and organizations to maximize my ability to reach and teach appropriate clientele. Following are summaries of our progress toward these goals.

### **Goal 1: Increase physical activity among Rock County and Wisconsin residents**

Research shows us that regular physical activity improves your mood, combats chronic disease, helps manage your weight, boosts your energy level, and promotes better sleep, among other benefits (Centers for Disease Control and Prevention, 2007). Physical activity promotion and disease prevention programming is needed in Rock County. Like other residents of the U.S. and Wisconsin, many people in Rock County are overweight and inactive according to the Wisconsin Behavioral Risk Factor Survey. In Rock County over 55% of residents are considered overweight or obese and that number is rising. Inactivity can lead to obesity, which can increase risks for arthritis, heart disease, diabetes, and cancer. Research from the Centers of Disease Control shows that nationwide less than 15% of people engage in regular physical activity and less than 7% of women engage in the recommended strength training activity. (US Department of Health and Human Services, 2000). Local and state data from the Wisconsin Department of Health Services confirms these findings.

One proven way to increase physical activity is to encourage people to exercise together, so that they support each other in their physical activity goals. In 2005, however, no local, safe, effective and inexpensive group exercise opportunities were available in Rock County, particularly for older residents. After surveying the evidence-based physical activity education programs available, I decided that the StrongWomen™ Program would address this critical need.

I learned about the StrongWomen™ program at the Priester National Extension Health Conference in 2005. The StrongWomen™ program is a community strength training program developed by Dr. Miriam Nelson and Dr. Rebecca Seguin from Tufts University. It focuses on preventing or reversing the effect of osteoporosis and other chronic conditions on our bodies. The purpose of the StrongWomen™ program is to increase the number of women participating in safe and effective strength training programs (StrongWomen™ Program, National Fitness Program for Women Tool Kit 2003). Participants attend one-hour classes twice a week for 12 weeks to learn basic weightlifting exercises and proper form. They continue exercising together to maintain strength and fitness.

I knew that this program was at that time not implemented anywhere in Wisconsin. I understood that being a StrongWomen™ program leader was not a traditional role for a family living educator. I would have to defend the value of educating individuals about the importance of physical activity and be constantly prepared to explain why, as an extension educator, I was in the best position to implement this evidence-based physical activity program.

I intentionally grew the StrongWomen™ initiative from local to statewide programming including the following highlights:

***Highlights:***

- Completion of StrongWomen™ Leader Training in 2006
- Improved strength, endurance, nutrition and health behaviors of StrongWomen™ participants in Rock County since 2006
- Completion of StrongWomen™ Ambassador Training in 2007
- Marketing of StrongWomen™ to diverse audiences since 2007
- Recruitment and training of 177 StrongWomen™ leaders statewide from 2008-present to provide opportunities for improved strength and health for StrongWomen™ participants in other parts of Wisconsin beginning in 2008
- Addition of nutrition and health curriculum to StrongWomen™ sessions to potentially improve the positive health outcomes of this program in 2008.
- Shared scholarly work of StrongWomen™ Evaluation results among Extension colleagues in 2009
- Better definition of role of Family Living Educator in physical activity education developed in 2010
- Enrollment of 500 StrongWomen™ participants in Rock County accomplished in 2010

**A. The StrongWomen™ Program in Rock County**

I was energized by this program because it fit the needs of Rock County. It also combined my passion of working with women with the promotion of physical activity. In my first attempt to market the program in Rock County, I sent a press release to local newspapers in the hope of getting 15-30 interested women who would like to be research subjects for my pilot study. Sixty women showed up at the informational session! So I planned three classes instead of one. From then on, the program grew by word of mouth. Since 2006, we have had over 500 participants in the StrongWomen™ program in Rock County. There was more demand than my time allowed so I trained 25 volunteer leaders. In 2010 we now have 17 sustainable classes offered year round. (exhibit #3)

I adapted the StrongWomen™ Program to meet the needs of diverse audiences. The program was originally developed to benefit middle aged and older women. The people who first enrolled in the class in Rock County appeared to be 100% white, female and middle class. I saw no reason why StrongWomen™ could not also benefit other demographic groups as well.

- I organized a class for Spanish-speaking women in 2007 by partnering with the Beloit School District's Even Start program. In the process I trained a bi-lingual StrongWomen™ leader who was a volunteer from Beloit College. This class is offered annually and attracts about 30 participants per session.
- Since it appeared that men and women did not seem to prefer mixed gender classes, I organized a "men-only" class in Milton in 2009. Fifteen participants signed up and continue to participate.
- In 2009 I organized a StrongWomen™ class at the Beloit Merrill Community Center in a low-income, African American neighborhood by partnering with the Beloit Area

Community Health Center and training an African American StrongWomen™ leader. This class is offered annually and attracts about 15 participants.

I believe that I have improved my cultural competencies by implementing this program county wide. My intention was to reach women of diverse social-economic class and different cultural-racial backgrounds. As I worked with women in the Latino and African American communities, I learned I needed to develop not just culturally diverse promotion materials, but trusting relationships with individuals if I wanted to have a sustainable audience. I also realized that many women would be excluded from this program if I did not make it more affordable. In effort to meet the needs of this diverse audience, I wrote and received grant money to buy equipment and offer three free or reduced cost classes to participants.

The StrongWomen™ program in Rock County has proved to be not only popular but highly effective. Women in the program have gained physical strength, improved flexibility and balance, increased social connection, and increased productivity. They have improved health and eating habits.

Program evaluation data were collected in multiple ways. The first StrongWomen™ participants underwent physical pre-and post- Senior Fit Tests. Participants took a standardized physical test of endurance, flexibility and strength on the first day of class and then 12 weeks later on the last day of class. (exhibit #4) Participants also completed a questionnaire at the end of the 12-week program. (exhibit #5) Because many participants valued the program highly, they decided to continue in subsequent programs. Therefore, it was possible to contact many participants to conduct a longer-term evaluation to determine the effects of participating in the program over six months. This long-term evaluation data showed many promising findings. (exhibit #6)

The StrongWomen™ program presented me a great opportunity to reach my audiences with health and nutrition education, since anyone who has signed up for an exercise class is likely to be in the right stage to consider improving health behaviors. Jenny Wehmeier, Family Living Educator in Walworth County, and I created 21 nutrition and health lessons to enhance the StrongWomen™ program. (exhibit #7) These lessons are based on researched nutrition and health information and were developed in an appropriate format for adult learners. The purpose of the lessons was to decrease the risks and effects of certain diet-related diseases (e.g., osteoporosis) and improve the participants' quality of life. Post session evaluative data suggest that participants did make positive dietary changes such as eating more fruits and vegetables, drinking more water, and increasing their intake of high-fiber foods. (See knowledge and behavior changes noted in exhibit #5).

### **B. StrongWomen™ extended throughout Wisconsin**

As the need to expand this program statewide presented itself, I became the sole StrongWomen™ Ambassador for Wisconsin in 2007 after receiving training at Tufts University. Ambassador training for the StrongWomen™ program requires the individual to attend three StrongWomen™ trainings, be affiliated with or working within a not-for-profit setting, actively be offering StrongWomen™ classes, personally be active in strength training, and have organizational capacity and infrastructure support to offer several StrongWomen™ leader

workshops per year. I achieved the Ambassador distinction in 2007, and that enabled me to train program leaders in Wisconsin. As an ambassador of the StrongWomen™ program my roles include training and supporting StrongWomen™ leaders in Wisconsin, reporting research statistics to Tufts University, and ensuring the fidelity and sustainability of the program is held. The StrongWomen™ program relies on an expert model training approach to provide as many communities as possible with local training opportunities.

Since 2007, I have organized 11 statewide StrongWomen™ trainings and have trained 177 individuals to become StrongWomen™ leaders in 40 counties. (exhibit #8) At each training, participants were given end-of-session questionnaires. (exhibit #9) From these evaluations, I was able to make changes to ensure that the participants were getting optimal training. Two additions I made to the training were to create a fidelity checklist to assist program leaders with following through with the reliability of the StrongWomen™ program (exhibit #10) and to create a StrongWomen™ training DVD for participants to have a visual learning tool of the StrongWomen™ program. (exhibit #11) These tools and the StrongWomen™ website (<http://rock.uwex.edu/flp/index.html>) are used statewide to support StrongWomen leaders.

In response to my success with the program, the Rock County Administrator, Craig Knutson, implemented a Rock County worksite wellness committee, of which I am a member. The committee offers StrongWomen™ and similar classes for county employees. Insurance companies such as Dean and Mercy Care have also acknowledged the StrongWomen™ class as a reimbursable class for individuals who enroll in that insurance. The media have also taken note of our program. (exhibit #12)

Colleague Jenny Wehmeier and I had the opportunity to present our StrongWomen™ evaluation results at the National Extension Association of Family and Consumer Sciences Conference in 2007. (exhibit #13) We received teaching feedback from our presentations. (exhibit #14) Statewide, I assisted in creating a StrongWomen™ impact report, to share with stakeholders and colleagues both locally and statewide. (exhibit #15) I also had the opportunity to compile my findings from the Wisconsin StrongWomen™ program and write both an article for the *Journal of NEAFCS* in 2009 (exhibit #16) and publish a similar paper for the UW-Extension Department of Family Development, both of which were peer-reviewed.

### **C. Physical Activity Education in Family Living**

Initially, there was some confusion about the role of UW-Extension educators implementing physical activity programs statewide. In response to that concern, I initiated a team of Family Living Educators that would focus specifically on our roles and expectations pertaining to physical activity. I solicited help from individuals on two Family Living state teams, Eating Well and Be Active (EWBA), and Healthy Families and Communities, and from state program directors. I led an effort to create a document that would clearly define the educational roles of family living educators and WNEP staff. (exhibit # 17) To spread the message of programming opportunities and guidelines in the area of physical activity in the Family Living Program Area, I led a team of colleagues to create a district-wide offering called “Get Your Community Moving” (exhibit #18) This half day training has been held with Southern and Northern District Family Living and Nutrition Educators.

## **Goal 2: Prevent childhood obesity in Rock County**

Childhood overweight and obesity are on the rise nationally and locally. According to a study of national costs attributed to both overweight (BMI 25–29.9) and obesity (BMI greater than 30), medical expenses accounted for 9.1 percent of total U.S. medical expenditures in 1998 and may have reached as high as \$78.5 billion (\$92.6 billion in 2002 dollars) (Finkelstein et al., 2003).

In an effort to meet the goal of improving the health of Rock County families, I also focused efforts to prevent childhood obesity.

### ***Highlights:***

- Created and evaluated *Get Active in Rock County* Guide in 2006 and revised in 2009
- 1,000 Rock County families received the *Get Active* Guide 2006-2010
- Piloted and presented Raising Healthy Eaters program in 2006
- Created and presented Active Play program to childcare providers and parents in 2010

First, I created a document to educate stakeholders and community partners about childhood obesity. (exhibit # 19) Then I initiated three projects designed to improve the diet and physical activity level of children in Rock County.

### **A. *The Get Active Guide:***

In 2006 I had the opportunity to partner with Mary Krisco, Rock County Nutrition Program Coordinator and the Healthy Living Coalition of Rock County on the *Get Active in Rock County* Guide (exhibit # 20). The guide is a list of physical activity opportunities for families available in Rock County for little or no cost. The goal of this guide was to increase awareness of opportunities for physical activity and to encourage families to prevent obesity by being more physically active and having fun. We received funding from the UW-Extension Family Living EWBA Team to create, disseminate, and evaluate this guide. We distributed 1,000 copies to our community partners in WIC, Head Start, and agencies in Home Visitation Network. I created the tool for evaluating the guide and compiled the evaluation data. (exhibit #21)

Mary Krisco and I shared our resource with other extension colleagues by developing a template for the guide, putting it on the Eating Well and Being Active UW-Extension website (<https://www.uwex.edu/ces/flp/apps/flrc/team/eating/resource/GetActiveRock.pdf>) and encouraging other colleagues to create a guide appropriate for their county. We also presented the guide and its template to conference attendees at Fulfilling the Promise, a statewide childcare and home visitation conference in 2006. (exhibit #22) I shared the *Get Active* Guide with the Family Living state teams, Eat Well Be Active, and the Healthy Families and Communities, and had it peer-reviewed. To date, at least four other Wisconsin counties have duplicated the guide for their respective counties. The Rock County Women Infants and Children (WIC) program partner funded the guide to be translated into Spanish in 2009. The guide continues to be updated and distributed annually.

### **B. The *Raising Healthy Eaters* Curriculum**

In 2006 I was able to work with state specialists Heather Harvey and Gayle Coleman to use Center of Disease Control funds to revise and field test the *Raising Healthy Eaters* Curriculum. (exhibit #23) UW-Extension state specialists took the lead in creating this curriculum. A team of county colleagues including myself had the opportunity to revise and review the curriculum. The purpose of this curriculum was to prevent childhood obesity by encouraging mothers to feed their toddlers healthy foods and to practice healthy feeding methods. The experience of piloting a federally funded project from its birth broadened my perspective on research implementation and evaluation. I taught *Raising Healthy Eaters* to 45 mothers in Rock County. (exhibit #24). I also had the opportunity to share this curriculum and evaluation data with a national audience at the 2007 NEAFCS Conference.

### **C. The Active Play Program**

More recently, I created a childcare and parent training to increase the amount of intentional physical activity young children get during the day. I presented four workshops to parents and childcare providers based on the book *Active Play* by Dr. Diane Craft of State University of New York at Cortland. (exhibit #25) This program was evaluated locally. (exhibit #26) As a result of *Active Play*, 99% of participants said they intended to incorporate new physical activity skills learned into their centers or homes. The *Active Play* teaching packet was shared with colleagues statewide. I am aware of at least eight colleagues from the northern and southern districts who have used this program with their respective counties.

### **Goal 3: Improve family health in Rock County through nutrition and health education**

When I first started in 2005 in Rock County, many of the educational needs I identified were related to the prevention of chronic diseases. Collaborated with community partners were further developed to educate the public in the areas of both nutrition and health.

#### ***Highlights:***

- Identification of current and potential partners for improving the instruction of families about health
- Participation in coalition and community groups such as the Breastfeeding Coalition, Healthy Living Coalition, Community Baby Shower Collaboration, School Wellness Committee, Smoke Free Community Group and Home Visitation Network.
- Provision of research-based nutrition and health information in my role as advisory council member for WIC, Head Start and the Family Resource Center
- Nutrition classes taught county wide, involving over 200 learners
- Implementation of Dining with Diabetes program in Rock County
- Adaptation of Dining with Diabetes curriculum for diverse audiences

### **A. Rock County Community Baby Shower**

The Rock County Community Baby Shower has given me the opportunity to provide leadership in educating young, limited-income Rock County families about breastfeeding, nutrition and parenting. In 2005, I presented a workshop at the annual community baby shower. In 2006, I had the same role, and also created an evaluation for the event. In 2007 and 2008, I was the

chair of the Rock County Community Baby Shower committee. I learned the art of delegating, coaching and encouraging. I also had an educational role at these events and evaluated and reported the overall results to the community. (exhibit #27) My current role with this event is to lead appropriate educational efforts for the intended audience.

### **B. *Dining with Diabetes* program**

I believe I have put my adult education skills to their best use in implementing the *Dining with Diabetes* program in Rock County. *Dining with Diabetes* is a health education program from West Virginia Extension that utilizes healthy food preparation techniques, physical activity, and nutrition education to educate people with diabetes and their family members or caregivers. I initiated partnerships with Beloit Area Community Health Clinic, Dean Riverview Clinic, Edgerton Hospital, and the Rock County Health Department to make this program available for residents of Rock County. As a result, in 2008 through 2010, six *Dining with Diabetes* programs were offered in Beloit, Janesville, Clinton and Milton. The program is set up for four weekly two- hour classes with a follow-up class three months later. The 90 individuals who have participated in these classes for the last two years have learned much about managing diabetes. Long term data was also collected from participants indicating lower blood glucose levels and positive changed behaviors in controlling their diabetes. (exhibit #28)

Working with community partners and a diabetes educator, I was able to adapt *Dining with Diabetes* for two additional audiences. My partners and I created a Spanish version and marketed it to Latino and audiences. (exhibit #29) In addition I trained a Spanish interpreter in the program and had the lessons and handouts translated into Spanish by Rock County WNEP educator, Yolanda Pena. I also adapted the teaching methods to be more accessible to low-literacy audiences. For example, we realized that many of the Spanish-speaking participants had never followed a recipe, so we had to teach some basic cooking skills. I also learned that Spanish-speaking participants often came as a family unit; our audiences were often multigenerational, with children, parents and grandparents from the same families. I also learned some of these male participants were very uncomfortable in the kitchen. We adapted the program so that families could learn and cook together in teams. To reach the second new audience, I selected soul food recipes that were appropriate for the African-American audiences. (exhibit #30)

### ***A look at the Future:***

I have begun to find my niche in UW-Extension and am looking forward to all the future educational possibilities. I was recently trained by Tufts University in the StrongWomen™ Healthy Hearts curriculum and plan on implementing this 12 week curriculum locally and statewide in the next year. This curriculum focuses on cardiovascular health by improving health and nutrition behaviors and increasing aerobic activity. By integrating comprehensive educational programming in Rock County in the areas of physical activity, nutrition and health, I have been able to use my strengths and experiences and improve my approaches to better serve families in my community. I will continue to respond to community needs and to strengthen and broaden my educational approaches.

<b>Angela J. Flickinger</b>	<b>Support Documents</b>
Exhibit # 1	Rock County Needs Assessment 2005
Exhibit # 2	Rock County Needs Assessment 2007
Exhibit # 3	StrongWomen™ Brochure 2010
Exhibit # 4	Senior Fit test StrongWomen™ Evaluation Data
Exhibit # 5	StrongWomen™-12 week End of Session Evaluation Results in Rock County
Exhibit # 6	StrongWomen™ Long Term Evaluation Results in Rock County
Exhibit # 7	StrongWomen™ Nutrition and Health Sample Lessons (1 of 21)
Exhibit # 8	StrongWomen™ Leaders Trained in WI 2007-2010
Exhibit # 9	StrongWomen™ Leader Training Evaluation Results 2007-2010
Exhibit # 10	StrongWomen™ Fidelity Checklist
Exhibit # 11	StrongWomen™ Training DVD
Exhibit # 12	StrongWomen™ Article: Janesville Gazette
Exhibit # 13	StrongWomen™ PowerPoint Presentation: NEAFCS
Exhibit # 14	NEAFCS Conference Teaching Feedback
Exhibit # 15	StrongWomen™ Wisconsin Impact Report
Exhibit # 16	JNEAFCS Journal Article and UW-Extension Department Paper
Exhibit # 17	Family Living Guidelines for Physical Activity
Exhibit # 18	Get Your Community Moving PowerPoint Presentation & Goals Made by Participants
Exhibit # 19	The Facts: Childhood Obesity
Exhibit # 20	Get Active Guide for Rock County
Exhibit # 21	Get Active Guide Evaluation and Results for Rock County
Exhibit # 22	Get Active Guide PowerPoint Presentation
Exhibit # 23	Raising Health Eaters Curriculum
Exhibit # 24	Raising Healthy Eaters Compilation of Results
Exhibit # 25	Active Play Teaching Packet: Lesson Plan, PowerPoint Presentation, Marketing
Exhibit # 26	Active Play Evaluation and Results 2010
Exhibit # 27	Rock County Community Baby Shower Evaluation and Results
Exhibit # 28	Dining With Diabetes Evaluation Results
Exhibit # 29	Dining with Diabetes: Spanish adaptations (recipes, lesson plan, evaluations, and PowerPoint lesson 1 of 4)
Exhibit # 30	Dining with Diabetes Soul Food Adaptations