

Study looks at keeping migrant workers' children healthy

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As Ohio and Michigan fruit and vegetable farms yield this year's harvest, they also will provide data about the eating choices of Latino migrant children for a Case Western Reserve University researcher. Information gathered this summer will help migrant families understand why their children are part of the growing national obesity epidemic and contribute to new interventions to combat this serious health issue.

With a 41 percent obesity rate among migrant workers' children—a figure that is double the nation's average—Jill Kilanowski, a pediatric nurse practitioner and assistant professor at the Frances Payne Bolton School of Nursing, will survey families about their eating habits and lifestyle issues.

In Kilanowski's pilot project, "Dietary Intake and Nutritional Education (DINE) for Latino Migrant Farmworkers," she will visit farms near Fremont and Tipp City Ohio, and South Haven, Michigan, and talk to approximately 60 families with children between the ages of 2 and 13.

The project is one of the new pilot studies launched by the National Institute of Health-funded Center of Excellence Self-Management Advancement through Research and Translation (SMART) at the nursing school, which was established to find ways to help people self-manage their own health care.

Kilanowski plans to take the data and develop healthy, low cost and culturally appropriate health promotion interventions to assist families in



planning and serving up balanced meals that fit the lifestyle of the working migrant family.

The interventions also will be designed to help working mothers, she said, who may have little energy or time after a day working the fields to satisfy the family's hunger.

Hurried working moms getting a quick dinner on the table and high calorie snack choices between meals might be contributing to the obesity problem, said Kilanowski.

Kilanowski will find out what migrant workers' children are eating for snacks and dinners. She also will learn what physical activities children participate in and whether living in a rural farm environment – possibly too far from organized sports, playgrounds and dependable transportation – might also be part of the obesity problem, she said.

She also has financial funding support from her postdoctoral scholar work through the Case/Cleveland Clinic Multidisciplinary Clinical Research Training Program, which is part of the NIH Clinical Translational Science Award. This study expands previous research Kilanowski has done, where she found that "migrant workers have a low level of food security—that is the lack of well-balanced food choices readily available at all times to maintain a healthy life."

"This can happen seasonally when agricultural work ends or when money runs out at the end of the month," said Kilanowski.

She also will investigate lifestyle questions about how food is prepared, if the family has a working oven, and how much and what kinds of food are eaten each day.

Protecting the families' privacy, Kilanowski will collect survey data by



having families use personal assistant devices (PDA) that have been programmed in cooperation with the university's Center for Health Promotion Research to provide the survey questions via headphones and PDA monitors. Questions will be both in written and oral English and Spanish to make the questions accessible to the participants.

As part of the study, Kilanowski will look at the effectiveness of this technology as a way to gather sensitive information and then share it with other researchers at the university.

Kilanowski's research is among four pilot studies being launched by SMART. Others focus on cardiac rehab, antepartum bed rest recovery and substance abuse treatment.

Source: Case Western Reserve University

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