

## Community-based lifestyle program improves diets of pregnant Latina women

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A healthy lifestyle intervention program tailored to Spanish-speaking pregnant Latinas significantly increased their daily consumption of vegetables and fiber.

The program also led to a decreased intake of added sugar, total and saturated fat, and the percentage of calories from solid fats and sugars compared to a control group, according to a new University of Michigan



study.

Researchers evaluated the effectiveness of Healthy Mothers on the Move (MOMs), a Detroit-based intervention program designed to reduce risk factors for type 2 diabetes in pregnant and postpartum Latinas. The Healthy MOMs program structure and content was based on community-based participatory research conducted with pregnant and postpartum women from Detroit, and Detroit community organizations.

The study demonstrates how pregnancy is an important time for interventions to improve dietary behavior that has consequences for the mother and the child, said Edith Kieffer, an associate professor of social work and study's lead author.

Community health workers held two home visits and nine group meetings during pregnancy. The Healthy MOMs meetings offered a place for moms-to-be to get information about nutrition, discuss issues and learn how to exercise regularly and reduce stress. A key component of the Healthy MOMs intervention was informational and emotional support from the peers and community health workers who encouraged women to share strategies and to recognize each other's efforts.

A separate control group received three pregnancy group meetings held by staff of a community mental health agency. Both groups received the same educational content regarding pregnancy, childbirth and the <u>postpartum period</u> during their meetings, along with monthly newsletters with health tips.

Before the intervention, the 275 study participants consumed an average of 27 percent solid fats and added sugar. The women consumed about 4.4 servings of fruit and 2.4 servings of vegetables daily.

After the intervention, Healthy MOMs participants had reduced their



sugar intake by nearly 22 percent and saturated fat by 18 percent. Vegetable servings increased by 25.5 percent, the study indicated.

But for women in the control group, daily nutrient intake remained unchanged, except for a decrease in fiber consumption by 9 percent and vegetable consumption by 11.5 percent.

Added sugar and saturated fat consumption during pregnancy may increase the risk of gestational diabetes, weight retention after pregnancy and development of type 2 diabetes. The successful reduction of these dietary components by women participating in Healthy MOMs could help reduce their risk of developing diabetes.

Kieffer added, "This study adds to evidence that community health workers are effective in empowering residents of low resource communities to achieve healthy behavior change. Sustaining their work as members of health care teams is an essential part of health care reform."

The study's other authors were Diana Welmerink, Brandy Sinco, Kathleen Welch, Erin Rees Clayton and Virginia Uhley – all from U-M – and Christina Schumann of the Community Health and Social Services Center in Detroit.

The findings were published in the American Journal of Public Health.

## Provided by University of Michigan

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