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## Introduction

- Regular physical activity is beneficial to the health and wellness of children and adolescents (1).
- According to the 2008 physical activity guidelines for children and adolescents should be 60 minutes of moderate to vigorous physical activity every day (2).
- A large number of U.S. children and adolescents do not meet recommended levels of participation in physical activity; nearly 62% of children do not participate in organized physical activity outside of school (2).
- Most children and adolescents spend a large amount of time outside of school there is a need to promote more physical activity in community settings (2). One specific setting that can impact and promote youth physical activity would be a church setting.
- Churches are advantages when incorporating physical activity promotion because this setting includes large membership, access to families, a presence in virtually every community, and connection to minorities and low-income communities (2).
- Most children are influenced by the involvement that they have in their community specifically school, religious organizations, and family involvement (3).
- Religious organizations and church settings are where many kids can build a community and participate in physical activity together (2).

## Purpose

- The purpose of the study was to examine the influence of physical activity education and promotion within various church youth programs.
- The goal was to see if churches viewed physical activity as important and having the potential to improve children's health outcomes.

## Methods/Analysis

- A formative research approach was used to study the health and wellness of youths in faith based youth programs. A survey was distributed online via Qualtrics(Provo,UT).
- Websites of each denomination were examined and youth ministers and/or church secretaries emails were gathered.
- During the recruitment process (October 2017 through March 2018), prospective participants were emailed with an introductory invitation explaining the survey, along with a link to the survey.
- The invites were distribution as follows: Methodist n=112, Lutheran n= 115, Catholic n= 154, Baptist n= 109, Episcopalian n=102 and Presbyterian n=156.
- Participants were emailed a reminder ten days after the initial invitation survey.
- Emails were sent to 738 churches representatives, 101 (13.7%) of whom started the survey, with 89 (12.1 %) representatives completing the survey. 8 responses were excluded due to incomplete responses and an analysis was conducted on the remaining 81 responses.
- The qualitative data were analyzed via thematic analysis.

## Results

- Church characteristics are displayed in Table 1.
- The majority of churches were located in Pennsylvania (76.5%), with the remaining churches located in New Jersey (23.5%).
- Most of the churches were located in a metropolitan area (96.3%).
- The specific denominations that responded included: Baptist (6.2%), Catholic (27.2), Episcopalian (7.4%), Lutheran (12.3%), Methodist (17.3%), Presbyterian (21%), and other which includes Church of Christ (8.6%).
- Youth programs age ranges ranged from 15-18 years, 6-18 years, 3-18 years.

Table 1. Church Characteristics (n=81)			
		n	%
State			
	PA	62	76.5
	NJ	19	23.5
Denomination			
	Baptist	5	6.2
	Catholic	22	27.2
	Episcopalian	6	7.4
	Lutheran	10	12.3
	Methodist	14	17.3
	Other	7	8.6
	Presbyterian	17	21
County Type			
	Metro	77	96.3
	Non metro	3	3.8
Age Range Youth Programs			
	6-11 years	14	17.7
	15-18 years	20	25.3
	3-5 years	2	2.5
	6-18 years	19	24.1
	3-18 years	16	20.3
	3-11 years	8	10.1

- Table 2 demonstrates churches program presence of having children programs.

Table 2. Children's health programing presence (n=81)		
No programming	n	%
	65	80.2
Programs targeting adults that children that can join	6	7.4
	6	7.4
Programs for children only	4	4.9
Programs that target families		

- Overall, results indicate that churches think that they, and other churches, have little programming addressing youths physical activity.
- Most (93.0%) church representatives indicated that childhood obesity was not discussed in their church's youth programs. Among these representatives most provided no reason (57.7%) while others did not feel that church was an appropriate place (23.9%) or did not feel prepared to discuss childhood obesity(11.3%).
- When asked about physical activity importance, 74.6% of church representatives viewed physical activity promotion as an important component to include in youth programs.
- When asked about the role the church has in promoting physical activity, 40.8% of church representatives said that the church has an influence.

## Discussion

- To the authors knowledge, this is the first study that has examined the promotion of physical activity within church youth programs.
- This study has great potential to improve physical activity in church settings for youth.
- Limitations included the sample size, the uneven distribution of responses from denominations, and biases associated with voluntary responses.
- This study provides necessary information for understanding church leaders views on physical activity regarding youth programs.

### References

1. Centers for Disease Control and Prevention. (2017, April 26). Retrieved April 05, 2018, from <https://www.cdc.gov/>

2. Trost, S. G., Tang, R., & Loprinzi, P. D. (2009). Feasibility and Efficacy of a Church-Based Intervention to Promote Physical Activity in Children. *Journal of Physical Activity and Health*, 6(6), 741-749. doi:10.1123/jpah.6.6.741

3. National Physical Activity Plan Alliance. *2016 United States Report Card on Physical Activity for Children and Youth*. Columbia SC; 2016.

4. Bopp, M., & Fallon, E. A. (2011). Individual and institutional influences on faith-based health and wellness programming. *Health Education Research*, 26(6), 1107-1119. doi:10.1093/her/cyr096

5. Bopp, M., Lattimore, D., Wilcox, S., Laken, M., McClorin, L., Swinton, R., . . . Bryant, D. (2006). Understanding physical activity participation in members of an African American church: A qualitative study. *Health Education Research*, 22(6), 815-826. doi:10.1093/her/cyl149

6. Vanderweele, T. J. (2017). Physical Activity and Physical and Mental Well-Being in Church Settings. *American Journal of Public Health*, 107(7), 1023-1024. doi:10.2105/ajph.2017.303843