



## *Education Policy Brief*

### CHILDHOOD OBESITY & SCHOOL INTERVENTION

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- + In the United States between 2000 and 2004, the percentage of overweight (BMI  $\geq$  95<sup>th</sup> percentile<sup>1</sup>) school-aged children between the ages of 2 and 19 has increased from 28% to 34%.<sup>2</sup>
- + We are not alone. The percentage of Canadian obese children tripled between 1981 and 1996.<sup>3</sup>
- + It costs the United States \$127 million per year for hospitalizations among those who are overweight.<sup>4</sup>
- + Today's children may live two to five years *less* than previously predicted. Health complications from obesity are striking people at younger ages.<sup>5</sup>
- + Schools lose significant amounts of money due to overweight children.<sup>6</sup>

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## INTRODUCTION

Many factors are related to a child's likelihood of becoming obese; among them are race and family income.<sup>7</sup> While there is no single cure for the nation's obesity problem, schools can play an important role by helping to shape children's life decisions. For example, schools can help students make better food choices and understand proper nutrition, can provide physical activity, and can help students develop knowledge about how to maintain a healthy body.

This policy brief describes some nationwide initiatives and explores what Delaware is doing in regards to this issue. Prevention is critical since childhood obesity often leads to adult health problems. One-half of children who are obese will become obese adults.<sup>8</sup> Some health consequences include:

- ✚ Asthma-related visits to the emergency room;<sup>9</sup>
- ✚ High blood pressure;<sup>10</sup>
- ✚ Type 2 diabetes;<sup>11</sup>
- ✚ Negative mental health effects such as low self esteem, increased rates of loneliness, sadness and nervousness.<sup>12</sup>

A child's academic achievement is also influenced by obesity. Some research has found that middle and high school-aged obese girls are 1.5 times more likely to be retained in grade. Middle and high school-aged obese boys are twice as likely to quit school.<sup>13</sup> Recognizing the linkage between obesity and achievement makes it imperative that schools commit to addressing this health problem.

## RESEARCH FINDINGS

The scientific community believes that the formula for keeping people at a healthy weight is a combination of healthy food choices and physical activity.<sup>14</sup> Many states are taking a three-pronged approach to reducing childhood obesity by: 1) changing children's eating habits; 2) taxing soft drinks or removing them from school vending machines; and, 3) encouraging exercise.<sup>15</sup> To date, only 15 states have created committees or task forces focused on school nutrition and/or fitness improvement.<sup>16</sup>

Considering the extent of this problem, there has been relatively little attention paid to school-based approaches specifically designed to reduce obesity through healthy eating and activity. Yet programs of this type can benefit all students, including those children from low-income families, at little or no cost to the families themselves.<sup>17</sup> *School Based Approaches for Preventing and Treating Obesity* yielded encouraging results including significant reductions in the percentage of overweight students.

### ✚ *Activity & Physical Education*

A 2002 Center for Disease Control (CDS) survey found that only 39% of 9- to 13-year olds participate in organized physical activity; 77% participate in free-time physical activity outside of school.<sup>18</sup> Among high school students, only 52% are enrolled in physical education classes, with 32% participating daily. States' guidelines about physical education vary significantly. Sixty-one percent of states *require* their schools to follow national or state physical education guidelines while about 25% only *encourage* it.<sup>19</sup>

To strengthen its physical education program, New York City has expanded and centralized its effort by putting a central director in charge of physical education for the entire city along with ten other physical education directors. They provide teachers with curriculum and monthly professional development.<sup>20</sup> Through this system, NYC hopes to reduce its number of overweight children.

### **Knowledge & Health Education**

Effective health education programs that address obesity emphasize the development of knowledge, attitudes and behavioral skills that students need to maintain healthy eating and physical activity.<sup>21</sup>

- *Planet Health*<sup>22</sup> is an interdisciplinary curriculum that focuses on decreasing fat consumption, promoting physical activity, and limiting television time.
- *Active Programme Promoting Lifestyle Education in Schools (APPLES)*<sup>23</sup> includes nutrition education and fitness, improved playgrounds and extracurricular activities, and the provision of healthy school lunches.
- *Pathways Programme*, funded by the National Heart Lung and Blood Institute, is aimed at American Indian children who are at risk for cardiovascular disease and type 2 diabetes.<sup>24</sup>

Some believe that watching television can lead to obesity as it replaces time for physical activity. Children's exposure to food commercials for high calorie foods can also promote obesity.<sup>25</sup>

### **Nutrition & School Food Service**

Quality school food service goes beyond what schools sell in their cafeterias. It includes food items sold in vending machines, school stores and snack bars through fund-raisers and parties.<sup>26</sup> The Arizona Department of Education recently released a study about the financial impact of substituting healthier snacks for high-calorie foods. They found no financial impact after a five-month ban of the high calorie foods.<sup>27</sup> Consequently, substituting healthier foods may not negatively affect revenues.

In Kentucky, the General Assembly passed legislation setting nutrition and exercise standards for their schools. The legislation encouraged in-school exercise time. It banned the sale of soft drinks in elementary schools during class hours. Kentucky schools must have nutrition specialists to plan lunches. Food service directors issue public reports assessing school nutrition and exercise progress.<sup>28</sup>

## **THE DELAWARE SITUATION**

Delaware is addressing childhood obesity in many ways. A Healthy Lifestyles Task Force surveyed schools about their physical education programs in light of the research in this area. A report was released in June 2005 with their recommendations.<sup>29</sup>

### **Activity & Physical Education**

House Concurrent Resolution 37 created a task force to examine physical activity and education policies and programs. A goal is to develop a comprehensive, integrated plan to increase physical activity and reduce obesity.<sup>30</sup> A pilot program to provide a minimum of 165 minutes devoted to physical education and activity per week in six Delaware schools was recommended.<sup>31</sup>

Delaware regulations require that districts offer instructional programs in physical education in grades K-12; all students in grades 1 through 8 must be enrolled in a physical education program. Students in grades 9-12 are required to complete one credit in physical education to graduate from high school.<sup>32</sup> New physical education content standards will be released in June 2007.

### ***Knowledge & Health Education***






The state has adopted a Coordinated School Health Program developed by CDS. It promotes health-enhancing behaviors among students.<sup>33</sup> This holistic approach involves health education, physical education, health services, nutrition services, counseling and social services, staff wellness, and family/community involvement.

### ***Nutrition & School Food Service***

Schools in Delaware can participate in the National School Lunch Program. Child nutrition regulations state that meals for children must be nutritionally well-balanced as defined by the USDA. In addition, nutrition education should be an integral part of the curriculum from preschool through 12<sup>th</sup> grade.<sup>34</sup>

The Lt. Governor's Challenge is a statewide initiative involving a partnership among the American Cancer Society, Christiana Care Health Systems, Division of Public Health, University of Delaware, YMCA, and the DE State Chamber of Commerce. This program is free to all Delawareans and promotes healthier, more active lifestyles.<sup>35</sup>

## **POLICY QUESTIONS FOR CONSIDERATION**

-  On April 6, 2006, the United States Congress proposed a bipartisan amendment to the National School Lunch Act that would require high nutritional standards for all food sold on school premises. How will Delaware respond if this legislation is passed?
-  How can the state integrate its physical activity, health education, and nutrition programs to focus on preventing childhood obesity in Delaware?
-  How can the state better reinforce the importance of these school-based interventions in an environment that currently places so much emphasis on academics, i.e., reading and math?
-  What needs to be done to better educate and involve parents in regards to their role in developing healthy lifestyles of their children?
-  How are Delaware schools responding to the recommendations made by the state's Healthy Lifestyles Task Force?

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