## HJR 637 (2007): Joint Subcommittee Studying Childhood Obesity in Virginia's Public Schools

### August 29, 2007 - Meeting Summary

The Joint Subcommittee Studying Childhood Obesity in Virginia's Public Schools held its second meeting of the 2007 interim on August 29, in Richmond, with Delegate O'Bannon as chair. The chairman reminded the joint subcommittee about the upcoming Healthy Students Summit, sponsored by the Secretary of Education and Secretary of Health and Human Resources, and taking place in Richmond on September 20. He encouraged the members to attend the program designed to foster local collaboration between school divisions and health districts.

#### **Presentations**

## Dr. Howell Wechsler, Director of the Division of Adolescent and School Health, for the Centers for Disease Control and Prevention (CDC)

Dr. Wechsler revealed how schools can prevent obesity and how states can assist them in doing so, but emphasized that there is no magic bullet solution to the issue of childhood obesity. He began by setting the stage and presented statistics on the prevalence of obesity among youth, and showed both health-related and economic consequences associated with obesity. Dr. Wechsler also drew the joint subcommittee's attention to current public opinion about school health programs, including that 65% believe schools should play a <u>major</u> role in fighting the obesity problem, and 74% of parents believe schools should spend more time or the same amount of time teaching health education as they do teaching other subjects.

Dr. Wechsler presented a strategy that included different options, making clear that any solution must be comprehensive in scope. First, he noted that any effective effort should be coordinated both across state agencies and also with nongovernmental agencies. Second, states should use state and local data from the out-set to guide decision making and policy formation. The CDC recommends participation in, and publishes data gathered from, the Youth Risk Behavior Survey. However Virginia is one of two states that did not participate in the most recent 2005 survey, which covered such topics as: dietary behaviors, physical activity, height and weight, and weight control behaviors.

The joint subcommittee also heard about a few successful initiatives being implemented by other states, such as: grant programs for schools to implement health program improvement plans, statewide content requirements for local wellness policies, reporting requirements for school divisions on local wellness policy implementation, time requirements for physical education, nutrition standards, and statewide physical assessment programs.

### Penny McConnell, Director of Food and Nutrition Services for Fairfax County Public School

Ms. McConnell informed the subcommittee that the Fairfax County Public School (FCPS) division has precluded the sale of competitive foods (those foods not a part of the official school lunch program) for the entire school day, since 1986. She also noted that FCPS has a new program for two types of vending. In middle/high school dining rooms, vending machines may only offer the same a la carte items that are available on the serving lines. The beverage machines vend only milk, 100% juice, and water. Vending machines located outside of the dining rooms are only operational after the school day and contain items outside of the school lunch program offered by the school division.

Ms. McConnell also discussed the FCPS local wellness policy that strives to focus on the whole child, the needs of the school community, and the school day. The policy incorporates the Governor's nutrition standards and the Institute of Medicine report from the Committee on Nutrition Standards for Foods in Schools.

# LaVern Davis, Supervisor of Health Services, and Barry Trent, Coordinator of Health Education, Physical Education, and Driver Education, for Roanoke County Public Schools

Ms. Davis and Mr. Trent presented the Roanoke County Public School's Body Mass Index (BMI) Screening Program. Roanoke began the program "in an effort to determine the prevalence of weight problems" among the students in the school division. The program, initiated by the school health advisory board, is entering its fourth year of operation. Ms. Davis and Mr. Trent noted that the initial goal of the program was to establish baseline data from which to identify the existence of children who are overweight, at risk for being overweight or underweight, and that the eventual goal is to lower the number of students with weight problems.

The program incorporates several steps. First, parents are notified of the upcoming screening, which corresponds with the existing vision and hearing screening in grades K, 3, 5, 7, and 10. The data is collected by a nurse and the calculated BMI and BMI percentiles are entered to a county-wide data management system. The results of the screening, which include: the student's individual results, frequently asked questions, resources, and the county-wide results of the previous years screening, is mailed to the parent of each screened child. Finally, the school division analyzes the data and presents it to the superintendent and the school board. The Roanoke County Public Schools will continue to gather and interpret data, revise and refine resources sent to parents, and tie future results to the implementation of the county wellness policy.

# Bonnie Conner Gray, Educational Specialist, Health Education, Physical Education, and Driver Education K-12 for Henrico County Public Schools

Ms. Conner-Gray informed the joint subcommittee about Henrico County's use of the POLAR E-600 data downloadable (wireless) heart rate monitors for documenting students' personal activity levels. She emphasized that the data gathered from the monitors reveals significant fitness gains when wearing the monitors while also providing

both the student and teacher immediate feedback as to the efficiency of the physical activity. Also, the heart rate monitors may help reduce the risk of over-exertion and elevated heart rate, as the student can view his/her heart rate during exercise. Finally, the heart rate monitors can increase motivation of students to become accountable for his/her own fitness efforts and also the motivation of teachers to assess instruction as the teacher can monitor the recorded fitness efforts of the students.

Ms. Conner-Gray also announced the findings of a study in Henrico County that shows academic performance increases when physical activity increases. The county studied the correlation between aerobic capacity and SOL scores and found the correlation to be positive. She noted that these results will be presented to the school board in September.

### David Thorp, Director of Government Affairs, American Beverage Association

Mr. Thorp discussed the American Beverage Association's May 2006 adoption of School Beverage Guidelines. The American Beverage Association along with Cadbury Schweppes, The Coca-Cola Company, PepsiCo, and the Alliance for a Healthier Generation, developed the guidelines to provide lower and no-calorie options along with nutritious and smaller-portioned beverages and to balance nutritional and hydration needs with appropriate caloric consumption. Elementary and middle school guidelines limit beverage offerings to water, milk and juice, with an 8oz. serving available in elementary school, and a 10oz. serving available in middle school. High school students have up to a 12 oz. serving available and additionally can access diet soft drinks, diet and unsweetened teas, fitness waters, low calorie sports drinks, flavored waters, and seltzers. Additionally, at least 50% of the beverages available to high school students must be water or no or low calorie options. These guidelines were adopted through a Memorandum of Understanding which requires full implementation by August 2009.

### **Public Comments**

The joint subcommittee heard public comment from three members of the public. A representative from the Virginia Center for Healthy Communities encouraged the joint subcommittee members to participate in the Walk for Children's Health on November 3, 2007. Money raised from the walk will go to communities with initiatives focused on preventing and treating childhood obesity.

### **Next Meeting**

The joint subcommittee plans to have at least one additional meeting, to occur after the September 20, 2007 Healthy Students Summit.

Jessica R. Eades, DLS Staff Nicole M. Seeds, DLS Staff

Study website: http://dls.state.va.us/TechEd.htm