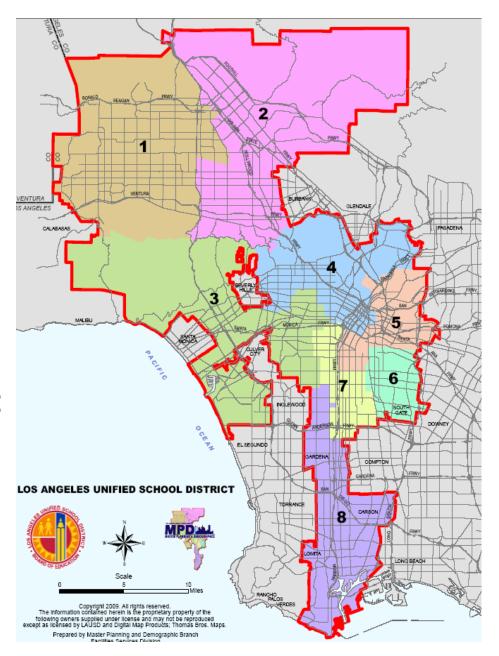


Childhood Obesity: A shifting paradigm in school-based assessment and management

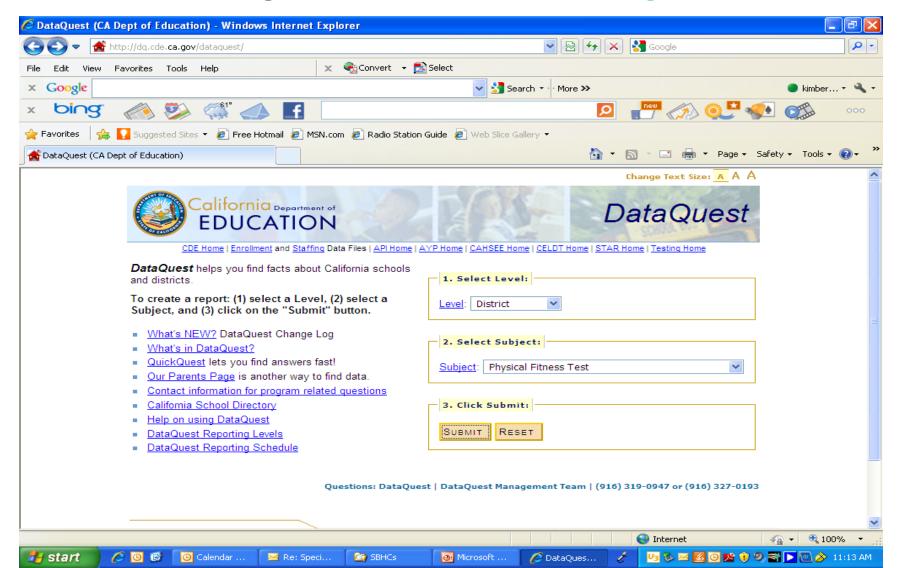
Kimberly Uyeda, MD, MPH
Director Student Medical Services
July 25, 2011

Overview

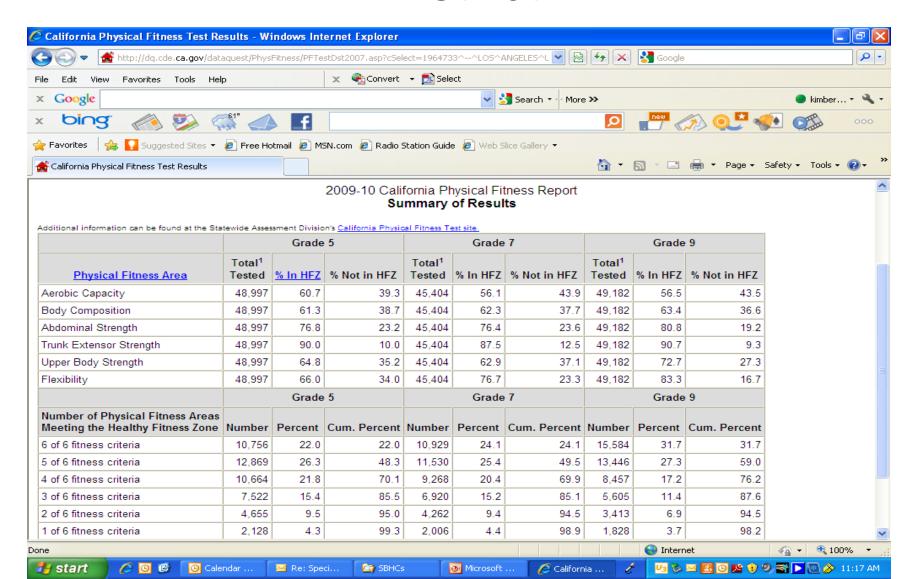
- LAUSD is the 2nd largest school district in the nation
- 640,000 K-12th grade students enrolled
- Schools can play a significant role in obesity:
 - Assessment
 - Management
 - Prevention



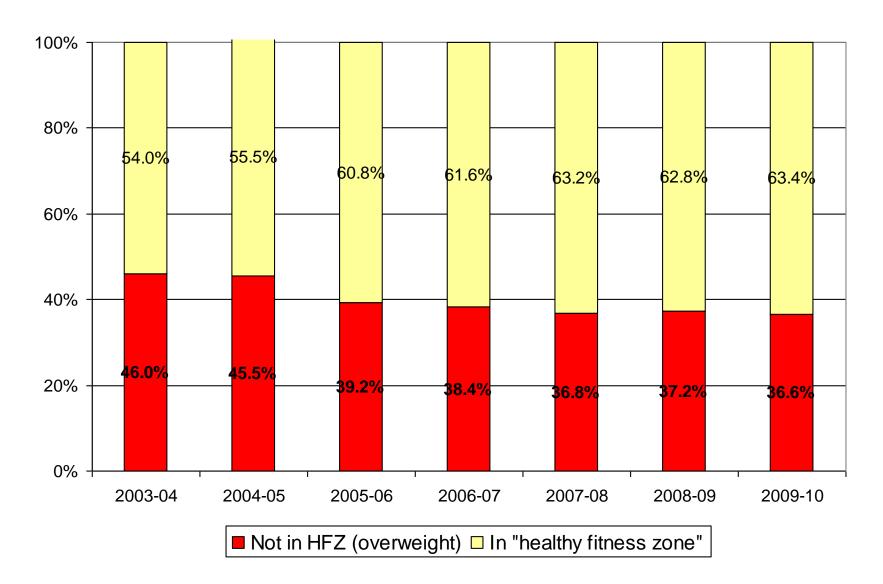
Assessment via Physical Fitness Testing-- www.cde.ca.gov/ds



Physical Fitness Summary by District

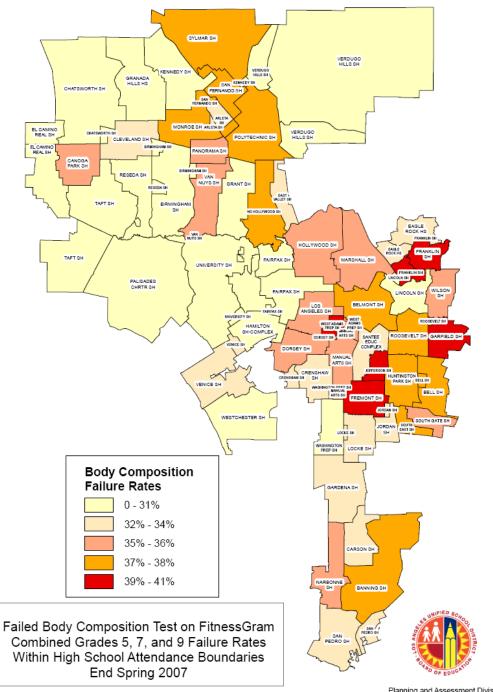


Assessment results from the 9th grade body composition testing- LAUSD (2003-10)



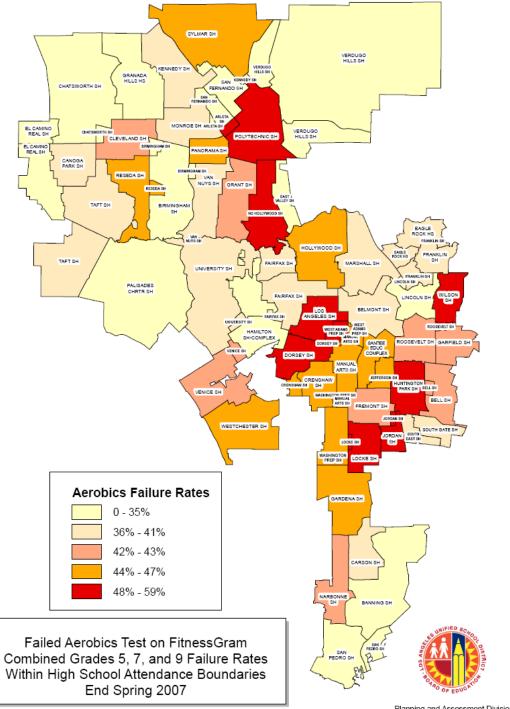
Assessment

Body Mass Index by high school complex



Assessment

Aerobic **Fitness** by high school complex



Planning and Assessment Division

What impact does obesity have on schools?

- Health problems, increased absences:
 - Asthma
 - Orthopedic problems
 - Hypertension and diabetes
- Mental health problems
 - Low self esteem
 - Depression
- School performance
 - Lower academic achievement
 - Compromised arousal if sleep problems (apnea)

Management: What can schools do?

- Assess
- Refer
- "Treat"



Referral and treatment

- Student Medical Services

 Nutritionist
- Medical programs

 PowerPlay, Kids-N-Fitness, Kid Shape, KP Kids...
- PCP or Medical Home
- But...
 - Low follow-up rates
 - High attrition
 - Other barriers (time, money, transportation)



Wellness Centers in LAUSD

- 13 new wellness centers
- Serving students, families and community
- Focused on health and prevention
- Place-based: working on health issues in context of community



Final Exterior Render - 10.18.2010

Prevention

- Population health focus
 - Policies
 - Systems
 - Programs



Nutrition policies enacted

- LAUSD resolutions:
 - Healthy Beverages (Soda ban): K-12, effective Jan 2004
 - Obesity Prevention (Junk food ban): K-12, effective
 July 2004
- SB 677 (Ortiz, 2003) Healthy beverages/soda ban: K-8, effective July 2004
- Wellness Policy 2006
- Cafeteria Improvement Motion 2006



Physical Activity and PE

- Physical education: mandated at 200-400 minutes every 2 weeks
- District faces:
 - lack of teacher training in physical education,
 - lack of time in the scheduled day,
 - lack of adequate space, equipment, facilities
- Consider after-school programs, integration of physical activity into curriculum and dedicated funding



Obesity Prevention Programs

- Students for Nutrition and Exercise (SNaX)
 - Pilot and RCT of school-based obesity prevention program
 - Water pilot and intervention
 - Community-basedParticipatory Research
 - Use existing LAUSD policy as guide







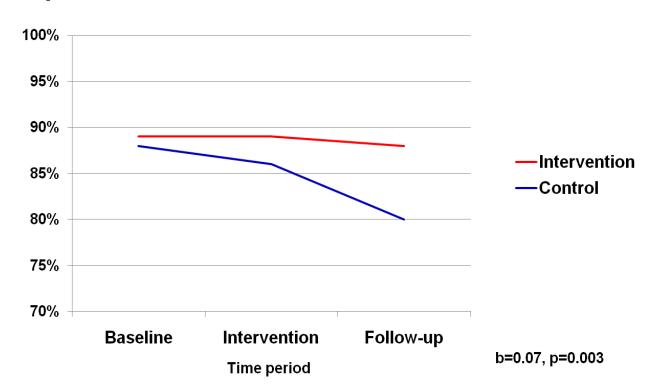
SNaX Intervention

- School environmental changes
 - Food signage/posters, point-of-sale nutritional information, free chilled water, additional fruit and vegetable options
- Social marketing
 - Peer leader club, lunchtime handouts, taste tests
- School-wide multimedia marketing
 - Posters, handouts, announcements, parent takehome activities, physical activity posters, video



Cafeteria Options

Proportion of fruit served in school cafeteria





Peer Leader Club and Asthma Education Programs

- Peer-to-peer learning
- Advocacy and leadership skills
- Consider combining curricula
- Consider opening to all types of children and youth (not just those affected)







Schools and good health

- >99% of children and adolescents attend school
- School has the most influence on their lives of any social institution, besides the family
- "Schools not only teach our children to read and write, but also to take care of their bodies and minds. Schools are really ideal places to promote good health because most young people are in school five days a week during most of the school year."

 -- Tommy Thompson, former U.S. Secretary of Health and Human Services