

Nevada BMI Summary Report and Recommendations



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BMI Summary Report and Recommendations

BMI Report

According to the CDC, “American society has become 'obesogenic,' characterized by environments that promote increased food intake, nonhealthful foods, and physical inactivity.”¹ The obesity issue touches people in all socioeconomic groups, partly due to the paradox that “nonhealthful foods” are often less expensive than healthful foods.

One way Nevada is addressing these issues is by examining childhood body mass index via the collection of the height and weight of students in Nevada.

- Assembly Bill 191, passed during the 2009 Legislative Session calls for the collection “*of the height and weight of a representative sample of pupils enrolled in grades 4, 7 and 10 in the schools within the school district.*”
- It also indicates “The Legislative Committee on Health Care shall, during the 2009-2010 interim, examine issues related to the weight and health of children, including, without limitation, any information reported to the State Health Officer pursuant to NRS 392.420, as amended by section 1 of this act. The Committee may identify programs, practices and studies to address the needs of children in this State related to maintaining a healthy weight.

Two years of data have been received by the State Health Division. A complete analysis has been done on the first year of data. The first year was collected during the 2007-2008 school year, which included 14 counties: Carson City, Churchill, Clark, Elko, Esmeralda, Humboldt, Lander, Lyon, Mineral, Nye, Pershing, Storey, Washoe, and White Pine. This resulted in over 18,000 records.

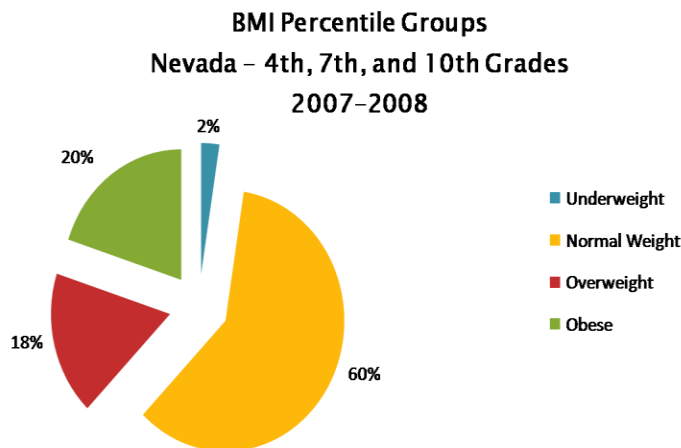
Overall Nevada shows a slightly higher prevalence of obesity than the national data reflects from 2006.

- According to the data collected, statewide, 18% of 4th, 7th, and 10th graders are overweight and 20% are obese.
- Clark County also shows nearly 18% of 4th, 7th, and 10th graders are overweight, but shows a slightly higher prevalence of obesity at 22%.
- Washoe County has a similar prevalence of overweight, but slightly lower percentage of obesity at 18%.

Nevada State Health Division

BMI Summary Report and Recommendations

- Statewide, just over 2% of students are underweight.
- In Clark County, approximately 3% of students are underweight, while slightly less than 2% of students in Washoe County are underweight.
- Most of the other counties show similar variations. For the other counties, additional years of data are needed to calculate more reliable statistics.



The second year of data for school year 2008 – 2009 is currently being evaluated. This data set includes 14 counties: Churchill, Clark, Douglas, Elko, Esmeralda, Humboldt, Lander, Lyon, Mineral, Nye, Pershing, Storey, Washoe, and White Pine.

Recommendations

The CDC indicates - “Policy and environmental change initiatives that make healthy choices in nutrition and physical activity available, affordable, and easy will likely prove most effective in combating obesity.”¹ Research suggests that we can help prevent childhood overweight and obesity by encouraging healthy eating habits, remove calorie-rich foods, limiting sugar sweetened beverages, help kids stay active, and reducing intake of saturated fat.²

The Nevada State Health Division recommends the following initiatives to reduce obesity among our youth:

- Implement a Statewide School Wellness Rating System.
- Web Educational Modules on Nutrition and Physical Activity for daycare providers, school teachers, and healthcare providers.
- Improve limits on sugar sweetened beverages and whole milk consumption in daycares through the QRIS.

BMI Summary Report and Recommendations

- Re-visit the 2006 State Obesity Plan – evaluate former plan, and establish a new 5 year plan.

Statewide School Wellness Rating System

A statewide rating system would allow Nevada to evaluate the implementation level of the School Wellness Policy established in 2005. Although this policy was put in place, schools have implemented these measures to different degrees. The Department of Education is currently recording the schools adherence to the State Wellness Policy through a self report the school submits. But there are no measures in place for assisting schools or informing them of where they stand in regards to compliance. Currently we have had 40% of the schools report to the Department of Education on their wellness policy adherence. This reporting system can be utilized more effectively by collaborating with the Nevada State Health Division; Fitness and Wellness Council; and Department of Education to reinforce adherence to the Statewide School Wellness Policy through a Rating System.

It is our recommendation that we strengthen the adherence to the Statewide School Wellness Policy by:

- Implementing a State Wellness Rating System that incorporates positive reinforcement. The rating system would recognize the top 5 schools (elementary, middle, and high school) that are adhering to the Wellness Policy on a high level via awards, media recognition, and small monetary incentive (\$500 - \$1,000).
- Every school that submits information would receive a progress report of strengths and weaknesses in regards to the policy, and include state resources to assist in addressing their weaknesses.
- The Fitness and Wellness Council website could be used as a catalyst for disseminating the information for the areas of improvement – providing tips and information on how to improve their rating score.
- This endeavor could move forward with legislation requiring schools to report on their wellness policy adherence through the rating system.

By implementing and publicizing a Statewide Wellness Rating System, we can empower schools to make improvements towards nutrition and physical activity on their own in order to receive annual recognition for their efforts towards wellness. We will also have the opportunity to compare the BMI report data with the school ratings to see if there is a correlation between the level of wellness policy implementation and the BMI scores of their school.

BMI Summary Report and Recommendations

Web Educational Modules – Nutrition and Physical Activity

The development of educational modules on nutrition and physical activity for daycare providers, school teachers, and healthcare providers will reach key leaders throughout the state that impact our youth on a daily basis. The Nutrition Module will increase one's understanding of how calories, carbohydrates, fats, proteins, and fiber impact one's weight, learning ability, and behavioral actions. This increased education and understanding could lead to daycare providers offering healthier food options for the children, school teachers advocating for healthier snacks in class, as well as educating their own students; and for healthcare providers to educate parents on the importance of good nutrition and exactly what that entails. The Physical Activity Module will increase one's understanding of how physical activity creates a healthier body and mind, which can result in increased learning, improving behavior, and decreased BMI scores.

The combination of these two web based modules will be able to reach professionals across the state which will maximize the impact. A knowledge based quiz will be taken at the end of each module to ensure knowledge retention and implementation.

Daycare Quality Rating System

This initiative has the potential to impact up to 943 licensed child-care facilities approximately 37,000 children and their parents. Child care centers contribute to the problem of serving sugar-sweetened beverages to children, which can be in the form of carbonated soft-drinks, sports drinks, flavored sweetened milk, and fruit drinks. This higher daily caloric intake has been associated with higher risks of obesity. The intended effect is to decrease the daily caloric intake for children. The children in turn will become healthier, decreasing the risk of obesity, early onset diabetes, and other chronic diseases. To assist in accomplishing this initiative, the NSHD can coordinate with the Head Start State Collaboration Office, which supports nutritional and social services for preschoolers and their families. Barriers that have been identified include the time it takes for child care licensing regulations to move forward and also to overcome opposition by the child care industry. To overcome these barriers, we can work towards educating parents on the Silver State Stars QRIS (Quality Rating Improvement System) for child care centers. Obtaining information about child care centers that limit sugar-sweetened beverages and serve low-fat milk, can allow parents to make informed decisions about which child care facilities are choosing appropriate healthy foods as well as proper

BMI Summary Report and Recommendations

portion sizes. This becomes a voluntary way of changing the manner child care facilities operate and serve beverages to children.

2006 Obesity Plan

Nevada currently has a State Obesity Plan that was established in 2006. Although a plan was developed, this plan has been put off to the side. It is the recommendation of the NSHD to revisit this plan, make obesity a priority area for our state, evaluate where we have come from since 2006, and create a new 5 year obesity plan. If this recommendation were to be adopted, the state would have to put forth sound messages that support an initiative to reducing obesity. The BMI data that is currently being collected through 2015 will be supporting data to assist in showing we are meeting our goals among our youth.

Conclusion

The Obesity Plan for Nevada and Center for Disease Control both highlight that in order to reduce overweight and obesity among our children, we need to have nutrition, quality health education, quality physical education, and the opportunity for physical activity. The Nevada Wellness Policy was implemented to give schools a benchmark for addressing nutrition and physical activity issues that can result in obesity among children. These recommendations support the National and State suggestions for decreasing obesity, and provide initiatives to reduce obesity among our youth, which is being tracked by the BMI data collection. During these hard times our focus should be on messages, strategies, and educational avenues that empower entities to improve their health and the health of others.

1. Centers for Disease Control and Prevention. Overweight and Obesity, retrieved from <http://www.cdc.gov/obesity/index.html> on March 10, 2010.
2. Centers for Disease Control and Prevention. Healthy Weight, retrieved from <http://www.cdc.gov/healthyweight/children/index.html> on March 10, 2010.
3. Nevada Department of Education. (2005). Statewide School Wellness Policy, retrieved from http://wellness4you.nv.gov/WellnessPolicies/FinalWellnessPolicy_2_.pdf on March 10, 2010.