

HEALTHY CHICAGO

TRANSFORMING THE HEALTH OF OUR CITY

CHICAGO DEPARTMENT OF PUBLIC HEALTH

POLICY BRIEF

April 2013

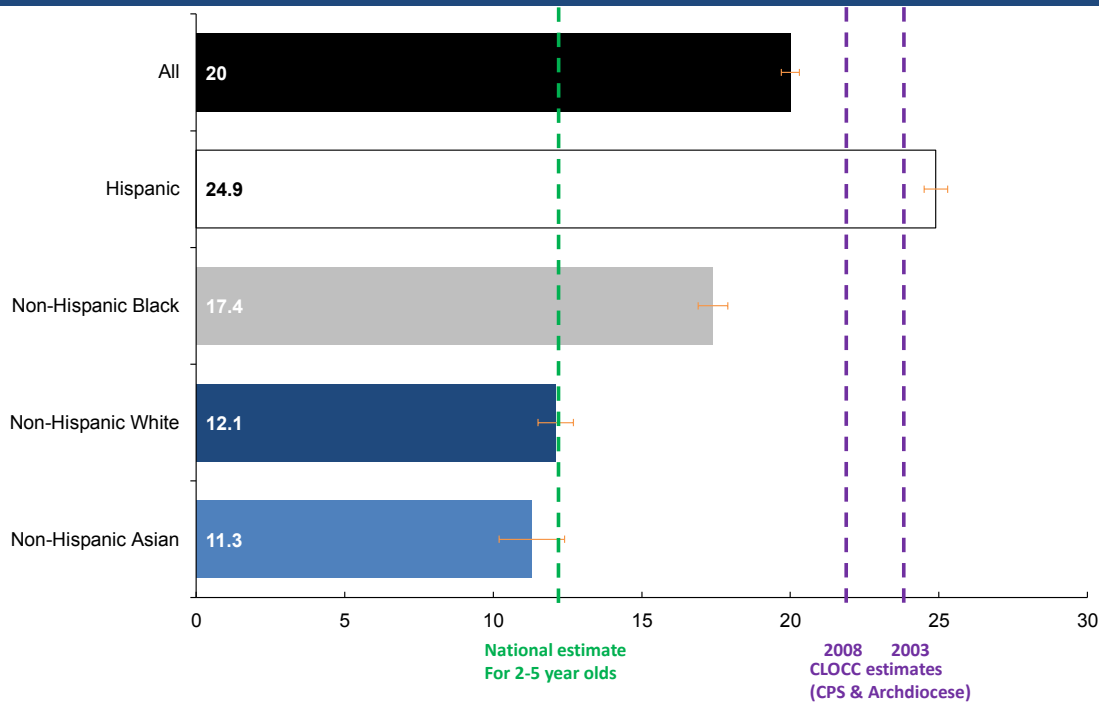
IMPROVING HEALTH AND WELLNESS OF STUDENTS

INTRODUCTION: REVERSING THE CHILDHOOD OBESITY EPIDEMIC

After decades of struggling with a super-sized childhood obesity problem, some cities and states are showing glimmering signs of hope.¹ Recently, the Robert Wood Johnson Foundation (RWJF) released a report with recent data from New York City, Philadelphia, Mississippi and California showing lowered obesity rates. New York City and Philadelphia saw declines of 5.5% and 4.7%, respectively.²

Chicago is also among the first large cities to show decreasing childhood obesity rates.³ Studies by the Consortium to Lower Obesity in Chicago Children (CLOCC), Chicago Public Schools (CPS), and the Chicago Department of Public Health (CDPH) show that less young children are obese than in recent years. In 2003,

TABLE 1: ADJUSTED ESTIMATES OF OBESITY PREVALENCE AMONG CHICAGO PUBLIC SCHOOL STUDENTS IN KINDERGARTEN



Orange bars denote 95% confidence limits (i.e., the margin of error associated with each estimate).



24% of Kindergarten-aged children were obese compared to 2008, when 22% of Chicago Public Schools Kindergartners were obese. In 2011, the rate dropped even further to 20%.⁴

These changes should come as no surprise. From the family dinner table to national campaigns like *Let's Move!*, America is fighting the childhood obesity epidemic. Policy changes implemented in communities – and especially in schools – that create healthier food environments and promote physical activity for children have been at the heart of these success stories. This trend is so important it warrants repeating – it is policy change, not individual interventions, that is effectively reversing the upward trend of childhood obesity. In Philadelphia, where nutrition standards and healthy corner store initiatives have been in place for years, one researcher noted that even children in a control group saw a drop in obesity rates simply because the changes are so pervasive.⁵

A 2012 report by the Institute of Medicine issued five recommendations for accelerating progress in obesity prevention: (1) make physical activity a part of daily life; (2) make healthy food and beverage options available everywhere; (3) market healthy living through eating and physical activity; (4) expand the role of employers and health care professionals in obesity prevention; and (5) make schools a focal point for obesity prevention.⁶ These recommendations for success are being implemented through policies and environmental changes in Chicago, as well as cities like New York and Philadelphia.



In Chicago, great strides are being made to improve the school food environment and increase physical activity in our public schools. The *Healthy Chicago Agenda*, the City's first comprehensive plan for public health, addresses 12 key priority areas to improve Chicagoans' health, including obesity prevention. *Healthy CPS*, a component of the *Healthy Chicago Agenda* is led by CPS and CDPH and focuses on environmental and policy changes that make healthy foods and beverages and physical activity within the reach of every child.

IMPROVING NUTRITION IN CHICAGO PUBLIC SCHOOLS

The cities featured in RWJF's report (New York and Philadelphia) were noted for their strong efforts to control school food environments. A recent study of school meal standards across the country concluded that nutrition standards based on current knowledge of food science correspond to lower rates of obesity in students.⁷ This is especially important because students consume more than half of their daily calories at school.⁸

Healthy Chicago strives to make healthy food and beverages available everywhere and focuses efforts on schools by implementing strict nutrition standards. For example, in 2011, CPS adopted nutrition standards for reimbursable school meals (*i.e.*, the breakfast program and lunch program) that exceed United States Department of Agriculture (USDA) Healthier School Challenge gold standard, impacting over 400,000 students at 680 schools.^{9,10} By the beginning of the Fall 2013 semester, CPS will have implemented strong nutrition standards for snacks and beverages sold on campus, also known as "competitive foods."¹¹

The negative impact of the wide availability of unhealthful snacks and beverages in schools has been well-



documented by research, which is why the Institutes of Medicine recommends that the sale of competitive foods in schools be limited.¹² Foods and beverages in schools have a significant impact on children's diets and weight.¹³ Approximately 40% of students purchase at least one competitive food throughout the school day, with higher consumption in secondary schools than elementary schools.¹⁴

CPS has a history of making healthy snacks available to students, starting with a healthy vending policy in 2004. Recently, the Chicago Board of Education passed the Healthy Snack and Beverage Policy that sets strong standards for competitive foods. The policy strengthens the vending policy, promotes healthy fundraising and celebrations, prohibits food as a reward, and bans the sale of unhealthy foods by vendors on school property.¹⁵ These new nutrition standards already adopted in Chicago are above the 95th percentile when measuring the strength of nutrition standards for competitive foods among U.S. schools districts.¹⁶

The USDA recently proposed new rules, that if adopted, would significantly increase nutrition standards for competitive foods in schools throughout the country. If the proposed USDA rule is adopted, with only minor technical changes, CPS will easily meet or exceed the USDA's new rules.

CPS has continually improved nutrition standards grounded in the premise that good health is essential for good learning. Healthy students are more likely to attend school regularly and are better able to focus while in school than their less healthy counterparts. Schools are uniquely positioned to facilitate and reinforce healthful eating behaviors by eliminating sugary drinks and high energy density foods from the selection of foods offered on the school campus.¹⁷ Moreover, there is a growing consensus that schools should not be in the business of making money by putting unhealthy food in the mouths of children. Our schools have an educational mission to prepare students for a lifelong learning, success, and health. That mission must include teaching and modeling healthier behaviors in schools.

INCREASING PHYSICAL ACTIVITY AND ENHANCING P.E. IN CHICAGO PUBLIC SCHOOLS

Nationwide, less than half of children and only 8% of adolescents meet physical activity recommendations of 60 minutes of moderate to vigorous physical activity daily. Only 4% of elementary schools, 8% of middle schools and 2% of high schools offer daily Physical Education (P.E.) class.¹⁸

Expanding the quantity and quality of P.E. classes is an important part of comprehensive strategies to promote physical activity among school aged children.¹⁹ After a systematic and comprehensive review of all available evidence, Centers for Disease Control and Prevention's Task Force on Community Preventive Services recommended school-based, enhanced P.E. as an effective method of increasing physical activity and physical fitness. CDC also recommends students engage in at least 60 minutes of physical activity each day. Moreover, the U.S. Department of Health and Human Services has identified improving daily P.E. as a national health objective, aiming to increase the number of schools scheduling daily P.E., the proportion of students participating, and the number of students who are physically active for at least 50% of the time.²⁰

Chicago Public Schools seeks to enhance their P.E. programs through evidence-based improvements (i.e., policy and systems changes that seek to increase lesson time; provide more training for physical education teachers; and enhanced, standardized lesson plans that increase moderate to vigorous physical activity).^{21, 22}



Currently, a committee of P.E. specialists are assisting with developing curriculum, assessments, and trainings to ensure that all students receive high quality physical education.²³

COMMUNITY-BASED INITIATIVES TO PREVENT OBESITY

Although children spend a great deal of time in school, they also spend time in their neighborhoods, where they are exposed to corner stores, fast food, and other restaurants selling unhealthy food and sugary drinks. Therefore, it is vital to include the community to fully create healthy food environments. The Institute of Medicine recommends that the food and restaurant industry change their offerings to provide healthy options for kids. Children eat as much as 25% of their daily calories from fast food and other restaurants. Of the kids' meals available at chain restaurants, 97% fail to meet nutrition standards based on Dietary Guidelines for Americans and well over half exceed the recommended amount of calories per meal and sodium per day for children.²⁴ While some healthy options are available, the overall calorie content of meals has increased and children are automatically served fries and sodas most of the time.^{25,26} One recommended solution is posting calorie counts. With the passage of the Affordable Care Act, a uniform national calorie labeling policy will be established by U.S. Food and Drug Administration (FDA) for chain restaurants and similar retail food establishments with 20 or more locations.²⁷ The FDA to date has not issued such regulations.

Although information is empowering, it does not necessarily change the food environment. Policies are needed to increase the number of healthy options available and make sure those options are affordable. *Healthy Chicago* serves as a roadmap for setting policies that support healthy food environments for children. Since the unveiling of this agenda, the City and partners have made a great deal of progress on community food policies. The Chicago Park District passed a vending policy requiring that vending machines sell healthy snacks and limiting the calories, fat, sodium, and sugar per serving. A similar policy has also been implemented for all vending machines in City-owned or operated buildings. Standards have been issued for nutrition, and physical activity and screen time, in child-care settings, impacting more than 20,000 children. To increase the availability of fresh food, the City launched Healthy Produce Carts, embarked upon an initiative to bring new grocery stores to underserved communities, and is developing a corner store initiative to encourage healthier food options within these settings. In addition, Chicago is opening new farmers markets that accept SNAP (Supplemental Nutrition Assistance Program) benefits.²⁸

Access to physical activity outside of the school setting also impacts childhood obesity levels. To increase these opportunities, Chicago Public Schools is partnering with the Chicago Park District to offer physical activity at park facilities for 150,000 students. Another promising strategy from the Physical Activity Guidelines is promoting active transportation through supportive policies and enhancements to the built environment.²⁹ These efforts make it safer and more appealing for kids to walk and bike to school or other places in the community. Chicago Public Schools will implement *Safe Routes to School* training as well as provide assistance with traffic calming and safety measures near schools.³⁰

DISPARITIES PERSIST, POLICY IS THE SOLUTION

Although recent progress is encouraging, the obesity epidemic continues to impact children. As illustrated in



Table 1, disparities exist, especially among Hispanic and Black children. These disparities are of paramount concern to CPS where the public school student population is made up of 87% low-income households, with 45% Hispanic and 42% Black students. Policy is one way to be sure that interventions have an impact on all students. Policy efforts in Philadelphia demonstrated declines for African American boys and Hispanic girls.³¹ Studies of school meal standards show that they have an impact on student weight outcomes, especially for students that receive free and reduced lunch.³² Changes to the built environment are promising because they offer an opportunity for physical activity to all youth, regardless of whether they are able to participate in programs or their socioeconomic status.³³

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