

**The Children and Families Subcommittee of the Senate Health,
Education, Labor, and Pensions Committee
July 23, 2008**

**Testimony to Support School Based Health Care to address Childhood
Obesity**

*University of Michigan, Regional Alliance for Healthy Schools (RAHS)
HealthPlace participant representative
Jonathan Miller*

Good afternoon. My name is Jonathan Miller. I am currently a college student exploring my options. Two years ago, my life was very different. At 385 lbs, I was quiet, I never thought about my weight, the risks or dangers of obesity. Nor did I see the potential risk to my health. I remember in one class I had to sit in the back of the room on a bench, because I couldn't fit in the desk. I was living in a cycle I did not know how to break.

Today, I am self confident and outgoing. So far, I have lost 137 lbs. I have more choices now. I can go to an event and not worry about fitting in the seats; I can buy clothes at more than one store. I have broken the cycle of obesity, but I did not do it alone.

Two years ago, when I was a senior at Stone High School in Ann Arbor, Michigan, I signed up for the nutrition group on a dare with a friend. The Nutrition and Physical Activity Program was offered by HealthPlace. HealthPlace is the school based health center. I remember being weighed before the group began and told that I weighed more than the scale could actually measure. The scale could only go up to 350 lbs. I was shocked, surprised and scared.

The program consisted of weekly group meetings and 2 exercise classes every week. There were a variety of exercise classes. From Pilates to yoga, kickboxing aerobics and belly dancing, we had many options to choose from. These were activities I had never thought I would try, and the next thing I knew, I was taking a yoga class! Having the class in the school, at the SBHC, made a big difference. While I had to make adjustments with my classes and assignments, I found that I was more energetic and willing to do the work. Having more energy and using the endorphin rush from the exercise made me more productive and the day more enjoyable. As we all know, it's easy to do things when you feel good.

The group meetings provided peer support. We could discuss nutrition, try new foods, and explore our personal strengths. HealthPlace is a place of trust, where I felt safe enough to delve into uncomfortable issues. Having this resource available in the school was instrumental – it was a vital first step in getting me to understand the health implications of my weight. We also discussed different community exercise options. In fact, based on this information, I applied for and received a scholarship from the local YMCA. This scholarship provided me with a teen membership which allowed me to use the YMCA for exercise. I spent many miles on the treadmill.

I stayed with the nutrition group for the entire year and also started meeting individually with staff at the SBHC for nutrition counseling. This one-on-one counseling helped me track my progress. Personally, weighing in only once a month or every other month was most helpful, because I didn't want to become obsessed with weighing myself. I wanted to feel the difference in my being—my body and my health. The counseling also helped with teaching me about the principle of “small changes”. I used to believe in order to lose weight, one would have to take extreme measures (for example; extreme dieting, exercise machines from TV commercials, shakes, pills, and things of that nature). These are also known as quick fixes. Instead, I learned a metaphor for taking life one step at a time. I made my first change by switching from soda to water, without changing everything in my diet. Later, I started bringing my own lunches to school; this was my own way of practicing portion control.

I am still practicing these main exercise and nutrition principles today. I continue to make small changes towards a healthier lifestyle. I am more loving to myself. I am not criticizing myself as often as I used to. When I make choices, I think about what will take me in a positive direction, instead of a negative one. I've learned I have the power to make good things happen. Thanks to HealthPlace I realized the amazing potential that was in me this entire time.

Thank you for having me here to tell my story. I am honored to speak to your Committee. But it's not just my story; I'm very concerned about what's going to happen to my generation if this problem is not addressed. This generation must break the cycle of childhood obesity, but we can't do it alone. If every student had access to a SBHC, like I did, they too could have a safe place to begin this life transformation. I was able to address my nutrition and the mental barriers to losing weight simultaneously. I'm not sure I could have been as successful in my efforts without having these services offered in the same place, where I spend the majority of my time – at school. Thank you.

**Testimony to Support School Based Health Care to address Childhood
Obesity**

University of Michigan, Regional Alliance for Healthy Schools (RAHS)

Bethany van Helden, MS, RD

- Childhood obesity is No. 1 health concern for kids in 2008 according to a report released this July by the University of Michigan C.S. Mott Children's Hospital National Poll on Children's Health, topping smoking and drug abuse. Childhood obesity was ranked third in 2007.
- School based health centers are uniquely positioned to provide direct physical, mental and preventive health care where students spend most hours of the day.
- University of Michigan has 3 school based health centers in Ann Arbor and Ypsilanti. These sites serve student populations composed predominantly of low income families. A chart review in 2005 showed that about 35% of all our students were overweight and about 20% were obese.
- The Nutrition and Physical Activity Program was developed in 2006 for our school based health centers and a Registered Dietitian was hired to facilitate individual counseling, walking clubs and fitness classes.
- The Nutrition and Physical Activity Program follows guidelines developed by the AMA, CDC and HRSA. It is a replicable model program to address child obesity.
- Weight loss is not a performance target for the program, behavior modification and lifestyle change is the goal of the program. Research based goals include: eat 5 servings of fruits/vegetables a day, drink no more than 1 sugary drink a day, exercise at least 60 minutes a day, and no more than 2 hours of "screen time" a day.
- During the 2007-2008 school year, 90 students participated in individual counseling with the dietitian, out of those students 50 decreased their Body Mass Index (BMI) and 21 maintained their BMI, meaning a total of 78% of participants stopped gaining weight with intervention.
- During the 2007-2008 school year, 133 middle and high school students participated in a weekly walking club, an easily implemented program increasing access to physical activity.
- Also, during the 2007-2008 school year, the Nutrition and Physical Activity Program was recognized for innovative practice by the National Kidney Foundation of Michigan and the Michigan Association of Health Plans.