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# Testimony Healthy Kids Healthy New Mexico Building a Fit Future

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Thank you Senator Bingaman for the opportunity to testify at this hearing "Confronting Childhood Obesity: Creating a Roadmap to Healthier Futures."

It is particularly appropriate that this hearing is taking place here in Santa Fe, New Mexico. The state has recognized the growing incidence of childhood obesity among its citizens and has initiated some exciting and promising measures to stem the increase. The innovative approach the state is using may not only help New Mexico's children but may well be a model for others to follow.

As you and the committee well know, childhood and youth obesity is a growing public health epidemic in our nation and in New Mexico. Nearly one-quarter of New Mexico's high school students (24.4%) and its 2-5 year olds (26.3%) who participate in the WIC program are overweight or obese. Far more American Indian and Hispanic high school students are overweight or obese compared to White non-Hispanic students. In 2007, 32.4% of American

<sup>&</sup>lt;sup>1</sup> Currently there is no statewide system in place in New Mexico to collect weight related data on children from Kindergarten through eighth grade.

Indians and 26.0% of Hispanic high school students were overweight or obese compared to 18.6% of White non-Hispanic students.<sup>2</sup>

Childhood obesity rates continue to grow and occur at younger ages. Obesity rates for New Mexico's children ages 2-5 years participating in the WIC program increased by nearly 30% in just seven years going from 9.0% in 2000 to 12.7% in 2007 (WIC data).<sup>3</sup> Further, New Mexico's youth fare worse than youth in other states. New Mexico ranks 10<sup>th</sup> highest in youth obesity rates compared to other states (Trust for America's Health, 2008).<sup>4</sup>

Increases in childhood obesity have resulted in dramatic increases in youth-onset diabetes. No longer do we call Type II diabetes adult-onset because of its alarming rates in our youth – a phenomenon that rarely existed a generation ago. Overweight and obese children are more likely to be overweight adults and suffer from chronic diseases, such as heart disease, certain cancers and diabetes (Dietz, 1998). Some health experts have predicted that this generation of children will be the first in our nation's history destined to have a shorter life than its predecessor.

Paradoxically, food insecurity and obesity go hand in hand. A major factor in this seemingly contradictory connection is that families experiencing food insecurity have limited incomes and are thus likely to purchase cheaper, higher fat or calorie-dense foods to satiate appetite and stretch food dollars. Such nutritious foods as fresh fruit and vegetables are often beyond their financial means to purchase. Low-income families often have limited access to affordable and quality retail food stores. Some who experience food insecurity may also store fat more efficiently than others in order to conserve energy for times of food deprivation. Other New

<sup>&</sup>lt;sup>2</sup> New Mexico Department of Health and New Mexico Public Education Department (2007). *New Mexico Youth Risk and Resiliency Survey*, Santa Fe, New Mexico.

<sup>&</sup>lt;sup>3</sup> New Mexico Women Infants and Children Nutrition Program provided the statistics.

<sup>&</sup>lt;sup>4</sup> Trust for America's Health (2008). F as in Fat: How Obesity Policies are Failing in America. Washington, DC

<sup>&</sup>lt;sup>5</sup> Dietz, W. (1998). Health Consequences of Obesity in Youth. *Pediatrics*, 101(3) Suppl:518-525.

Mexico groups identified as being at greatest risk for obesity are Hispanic and Native Americans, those living on annual incomes of \$10,000 or less, non-college graduates, people with disabilities, and those living in the Northwest and Southeast quadrants of the state (NMDOH, 2006).<sup>6</sup>

Research consistently shows that healthy eating behaviors and regular physical activity decrease the risk for childhood obesity, youth-onset diabetes, increased risk for chronic diseases and a lower quality of life. Unfortunately New Mexico's youth fare poorly in terms of eating healthfully and being physically active. According to the state's 2007 Youth Risk and Resiliency Survey<sup>7</sup> only 17.9% of students eat five or more daily servings of fruits or vegetables. Only 28.0% of New Mexico high school students drink three or more glasses of milk a day. In terms of physical activity more than one-half (56.4%) of students do not meet recommended levels of either moderate or vigorous physical activity.

## **Building a Fit Future**

Recognizing the growing obesity epidemic among children and youth, Governor Bill Richardson charged the state's Health and Human Services (HHS) Cabinet Secretaries to establish the New Mexico Interagency Council for the Prevention of Obesity. Created in the fall of 2006, the DOH-lead Interagency Council is charged to 1) build greater alignment across state programs to create sustainable, consistent, and collaborative efforts and messages that increase physical activity, improve nutritional well-being, and prevent obesity; 2) partner with the private sector to strengthen and support obesity prevention efforts; 3) build community-wide obesity prevention programs; and 4) develop policies for obesity prevention. Currently, Interagency

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<sup>&</sup>lt;sup>6</sup> New Mexico Department of Health. (2006). The New Mexico Plan to Promote Healthier Weight: A Comprehensive Plan to Reduce Obesity, Overweight, and Related Chronic Diseases.

<sup>&</sup>lt;sup>7</sup> New Mexico Department of Health and New Mexico Public Education Department (2007). *New Mexico Youth Risk and Resiliency Survey*, Santa Fe, New Mexico.

Council voting members represent more that 40 state programs (see Appendix A for complete listing) across the following eight state departments:

Aging and Long Term Services Department;

Children, Youth and Families;

Department of Agriculture;

Department of Health;

Department of Transportation;

Energy and Natural Resources, Division of State Parks;

Human Services Department; and the

Public Education Department.

The Indian Affairs Department recently agreed to become a member. In addition, the Interagency Council has five affiliate (non-voting) member organizations: the New Mexico Healthier Weight Council, NMSU Cooperative Extension Services, NM Food and Agriculture Policy, Envision, and American Heart Association.

# **Interagency Council's Key Accomplishments in 2008**

# Building Consistent and Collaborative Messages and Programs

Interagency Council members agreed to focus their nutrition and physical activity messages and programming on the behavior changes recommended by the *Expert Committee on the Assessment, Prevention and Treatment of Child and Adolescent Overweight and Obesity* (January 25, 2007). The recommendations focus on the following 9 behaviors:

Increase physical activity to 1 hour a day;

Limit TV and other screen time to 2 hours a day;

Eat 5 or more fruits and vegetables a day;

Drink fewer sweetened beverages;

Eat breakfast daily;

Limit eating out at restaurants, especially fast food restaurants;

Encourage family meals;

Limit portion size; and

Promote infant breastfeeding.

The State Nutrition Action Program (SNAP), which represents public and private state and local agencies involved in food security issues, joined the Interagency Council's effort by

agreeing to focus its messages and programming on the above 9 behavior outcomes. One of the results was that the NM Human Services Department established these behavior outcomes as the state's focus for its 2009 Food Stamp Nutrition Education program.

Building consistent messages and programming across public efforts is important. But this alone is not enough to counter the more than \$12 billion spent annually by industry in marketing directed to kids and billions more directed to adults.

The Interagency Council is also working to identify state and federal regulatory and administrative barriers to building collaborative efforts among publicly-funded programs. USDA alone has more than a dozen nutrition and food assistance programs which are administered in at least five different New Mexico Departments. This administrative fragmentation, compounded by regulatory restrictions, has the unintended negative consequence of making it harder to effectively build obesity prevention collaborative efforts. For example, the Food Stamp Nutrition Education program supports nutrition education programs for low income families focusing on the U.S. dietary guidelines. While its goals are laudable, the regulations make it near to impossible to tap this stream of revenue to address the specific issue of obesity. This is but one of many possible examples for which the Interagency Council is well-suited to address. Addressing Gaps in the Continuum of Nutrition and Physical Activity Efforts

Recognizing the need to improve school lunches, the Interagency Council worked closely with the New Mexico Public Education Department to develop and apply for a two year \$200,000 USDA Team Nutrition grant. PED was awarded the grant in September 2008. The grant provides for the development of kid-friendly healthy school meals' recipes, technical assistance to school cafeteria staff to learn how to purchase and prepare healthier school meals, educational and promotional materials to motivate students to make healthier school meal

options, and provide materials to parents and classroom teachers to support students' efforts in making healthier choices in and outside of school.

The Team Nutrition grant is also a good example of how Interagency Council members can share resources to strengthen programs and reduce duplication. While PED leads the Team Nutrition effort, DOH was asked to take the lead in the development of a webpage. DOH was in the process of developing a Healthy Kids New Mexico webpage and many of the elements proposed in the Team Nutrition grant were already part of the DOH design. It was quickly decided that it made no sense to develop two similar websites, one at DOH and one at PED.

Sharing resources across programs and eliminating duplication are extremely important, especially now as federal, state and local governments face huge budgetary shortfalls. However, this is not the time to reduce or eliminate spending on effective obesity prevention programs. The long run health costs to cope with a nation of obese children growing up into obese adults will far exceed funds spent now in prevention. Beyond the financial cost, there is an enormous human cost. These children face a dim future of premature death, physical ailments, and a lower quality of life. Cutting funds now would be truly a case of being penny wise and pound foolish. Building Community-wide Obesity Prevention Initiatives

Under the leadership of DOH, the Interagency Council is piloting a community-wide childhood and youth obesity prevention initiative in Las Cruces. The Interagency Council was awarded a \$100,000 one-year grant from the National Governors Association for start-up funding. The focus of the initiative is best captured in a *Las Cruces Sun-News editorial* (April 29, 2008): "If we want to be a healthy Las Cruces, it starts with healthy kids; and if we want healthy kids, it starts with a healthy Las Cruces."

# Healthy Kids – Las Cruces: Building a Fit Future One Community at a Time

Healthy Kids – Las Cruces aims to create and sustain public and private efforts to build healthy environments that motivate children, youth and families to eat healthier, be more physically active, and achieve healthy weights. It is a local and state collaborative effort of nearly 50 local leaders representing government, education, healthcare, human and social services, agriculture, non-profit and faith-based organizations, academia, foundations and businesses and state leaders representing the Interagency Council.

Healthy Kids – Las Cruces focuses on building healthy environments in five community settings reaching children and youth where they are: in schools, restaurants (the food system), the healthcare system; the built environment; and families and community. Below is a brief description of the overall aim and key first year accomplishments in each setting.

Schools: The aim is to motivate Las Cruces students to make healthy food choices and increase physical activity in the classroom, cafeteria and school at-large. Key accomplishments include: 1) increasing the number of Las Cruces (LC) elementary schools participating in monthly fresh fruit, vegetable and grain tastings; 2) increasing the number of LC elementary schools using the *Cooking with Kids* curriculum during school and in after school programs; 3) the creation of edible school gardens in two LC elementary schools; 4) the promotion of healthy snacks and non-food rewards in schools; 5) increasing the number of LC elementary schools holding recess before lunch; 6) increasing the number of LC elementary schools requiring Physical Education for 30 minutes, three times a week; and 7) piloting a half credit health class in one LC high school.

<u>Food System:</u> The aim is to increase access to a nutritious, affordable and seasonal food supply and to provide point of purchase nutritional information on foods offered in schools and

chain restaurants. Key accomplishments include: 1) holding weekly cooking demonstrations in the Income Support Division's waiting room; 2) exploring the availability and cost of a healthy food market basket in low-income neighborhoods; 3) working with the LC Farmers' Market Coordinator to encourage local producers to sell their produce at local farmers' markets; 4) creating a community garden in the Mesquite Historic District; and 5) exploring ways to assist consumers make informed food choices at chain restaurants.

Healthcare System: The aim is to increase obesity prevention and treatment healthcare services. Key accomplishments include: 1) providing a half day best practices obesity prevention training session to more than 70 pediatricians, nurses, school-based health center staff and other health care personnel; 2) developing walking paths on hospital and medical facility properties; and 3) conducting the Healthy Eating Active Lifestyle (HEAL) program by the LC public health regional office to empower at risk or obese children and youth to make healthier choices.

Built-Environment: The aim is to improve "walkability" in Las Cruces. Key accomplishments include: 1) developing more than a dozen new walking trails for the LC community; 2) receiving state funding for a Safe Routes to School program (SRTS) in three schools; 3) conducting a LCPS district wide parent survey to determine concerns and needs for the establishment of a SRTS program in their child's school; 4) conducting an inventory of bike racks at schools; and 5) testifying before the LC City Council on creating a built environment that promotes healthy lifestyles.

<u>Families and Community</u>: The aim is to increase opportunities and support for community activities that motivate children, youth and families to be more physically active and make healthy food choices. Key accomplishments include: 1) The LC Mayor's Fitness and Nutrition 5.2.1.0.Challenge. It challenges elementary students to eat 5 or more fruits and

vegetables a day, watch 2 hours or less of TV and other screen time, get 1 hour or more of physical activity a day, and drink zero sodas and other sweetened beverages; and 2) the creation of a Healthy Kids New Mexico webpage designed to provide parents, teachers and community organizations with fun-filled activities, lesson plans, recipes and useful tips to assist elementaryage children make healthy food choices and increase physical activity. The website address is: healthykidsnm.org.

Conlee Elementary School: Conlee Elementary is the initiative's flagship school for SY 2008-2009. Nearly a dozen new programs are being implemented this school year (See Appendix B for a complete listing of programs). Not only is the initiative adding new programs during the school day but also outside of school. A key to its success is bringing in multiple community organizations to promote and support healthy eating and active lifestyle behaviors.

A good example of this is the Conlee Elementary Fall Family Fiesta that was held last month. Sponsored by *Healthy Kids – Las Cruces* roughly 425 people participated. Las Cruces Mayor Ken Miyagishima opened the event announcing his Fitness and Nutrition 5-2-1-0 challenge. The Mayor is calling on elementary students to eat at least five servings of fruit and vegetables a day, spend no more than 2 hours a day watching TV or playing videos, get at least 1 hour of exercise a day, and eliminate soda from their diet — for three straight weeks. Throughout the day there were numerous physical activities, food and nutrition events sponsored by more than 2 dozen community organizations. The Las Cruces Police Department and Las Cruces Fire Department provided activities that included a bike rodeo, K-9 demonstration, Identi-child, and blood pressure checks. 203 flu immunizations were provided to both children and adults. The school garden was dedicated with past, present and future students planting flowers in the garden along with encouragement to parents and community members to assist with the garden

throughout the year. Two Conlee Elementary students won new bikes provided by the City of Las Cruces Public Service Department and another student won a year long free admission pass to the New Mexico State Parks.

Despite NGA funding ending last month, DOH, the City of Las Cruces, the Las Cruces Public School District, community leaders and the Interagency Council have agreed to continue and expand *Healthy Kids – Las Cruces*. Local and state leaders met on October 22, 2008 and developed the second year action plan. Building sustainability was certainly a goal of the initiative and in thinking about what made sustainability a reality there are at least three key structural elements.

High-level State Leadership: The Interagency Council reports to the Health and Human Services Cabinet Secretaries and the Director of the Interagency Council resides in the Office of the Secretary, DOH. This gives the director authority to move across divisions and bureaus in DOH and across different Health and Human Services Departments. The result is a unified vision for Healthy Kids New Mexico and an increased number of collaborative efforts and sharing of resources across public programs to motivate children and youth to make healthy food choices, increase physical activity and achieve healthy weights.

A Strong Local and State Collaborative: While the Interagency Council established a framework and process for Las Cruces leaders to develop *Healthy Kids – Las Cruces*, the actual implementation plan was and continues to be locally-driven. In December 2007, DOH convened a two-day meeting with a diverse group of nearly 50 local and state leaders to develop an obesity prevention five year vision, goals, and action plan. On the first day local leaders developed a draft of a *Healthy Kids* implementation plan and on the second day presented the plan to state leaders. Together state and local leaders set priorities for the first year and committed their

agencies or groups to work on specific parts of the action plan. As a result of the strong state-local collaborative, DOH Secretary Alfredo Vigil along with three other NM Cabinet Secretaries were joined by the Las Cruces Mayor Ken Miyagishima, the Las Cruces Public Schools Superintendent Stan Rounds, state legislators and numerous community leaders to launch the *Healthy Kid – Las Cruces* initiative in April, 2008.

A Coordinating Mechanism: The success of implementation is in many ways due to the work of DOH's public health regional office in Las Cruces. Ray Stewart, the Las Cruces public health regional director dedicated resources and staff time to build, support and coordinate the community-lead activities identified in the first year action plan. The Health Promotion Team in the regional office has become the nerve center tracking the progress of activities, keeping groups on task, building cooperation and synergy across groups, and at times providing staff or resources to activities requiring additional support.

# Conclusion

A roadmap to healthier futures remains largely uncharted and we in government may be missing a vital piece of the puzzle. We know the problem, we lack a clear solution. Part of the solution may lie in taking a social entrepreneurial approach. Governments tend to look at problems programmatically. Thus we tend to tackle obesity through agencies such as USDA and CDC. Even when we build collaborative efforts, we tend to frame solutions from traditional nutrition and health perspectives. But obesity is only one part of a quality of life issue in a modern industrial society. If we step back and look at the larger picture we may find ways to connect fighting the rising tide of obesity with other efforts aimed at improving life. Take, for instance, the new Federal government's efforts to increase the number of bicycle paths and pedestrian walkways. This has been viewed as a means of bettering the environment by reducing

our carbon footprint. A social entrepreneur might further suggest adopting the model of some European cities which are providing free use of bicycles. These two ideas would not only be good for the environment but if more people have easy access to bicycling to work or school, they will become fitter and reduce our health care costs.

The road to reversing childhood obesity trends is long. We shouldn't expect changes over night. It took decades to reach this obesity epidemic. This insidious problem grows slowly, just like our personal weight gain, and it will take years to change the culture of our communities and our nation so that physical activity and healthy eating is a social norm. A norm in which our children have an equal chance of making healthy choices as unhealthy choices.

Thank you.

# **Appendix A:** The New Mexico Interagency for the Prevention of Obesity

As part of Governor Richardson's priority to reverse the increasing rates of obesity in New Mexico, the state's Health and Human Services (HHS) Cabinet Secretaries established the New Mexico Interagency for the Prevention of Obesity. Created in the fall of 2006, the DOH-lead Interagency is charged to 1) build greater alignment across state programs to create sustainable, consistent, and collaborative efforts and messages that increase physical activity, improve nutritional well-being, and treat and prevent obesity; 2) partner with the private sector to strengthen and support the Governor's obesity prevention priority; and 3) develop policies for obesity treatment and prevention.

Currently, Interagency voting members represent more that 40 state programs across eight state departments. Members include:

DOH: Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), WIC Fit Families, Get Healthy Together, WIC Fit Kids = Happy Kids, WIC Farmers' Market Program, Commodity Supplemental Food Program, Coordinated Approach to Child Health (CATCH), Kitchen Creations, National Dance Institute – "Hip to be Fit," Fruits & Veggies: More Matters, Children's Medical Services, Public Health Clinics, School-based Health Centers, Community Health Councils, LEND, and Senior's Local Motion;

PED: National School Lunch, National School Breakfast, Special Milk, Summer Seamless School Feeding, Fresh Fruit & Vegetable Program, Healthier US Schools, Physical Education, before & after school physical and nutrition programs, School Districts Wellness Policy, Nutrition Competitive Foods Rule, and Health Education and Physical Activity Standards;

HSD: Food Stamp Program, Food Stamp Nutrition Education Programs (ICAN, Kids Cook, and Cooking with Kids), Food Distribution Program, Food Banks, Medicaid, and NM Hunger Task Force;

CYF: Child and Adult Care Food Program & Summer Service Food Program;

ALT: Nutrition Services Incentive Program (NSIP), Senior Olympics and Farmers' Market Pilot.

DA: Farmers' Markets, Farms to School Program, and Taste the Tradition Program;

DOT: Safe Routes to School; and

SP: New Mexico State Parks.

In recent months, the Interagency added five affiliate (non-voting) organizations: the New Mexico Healthier Weight Council, NMSU Cooperative Extension Services, NM Food and Agriculture Policy, Envision, and American Heart Association.