Nutrition Education Opportunities in School Based Health Centers

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The role of good nutrition in building healthy students

Healthy eating and physical activity are linked with:

- Academic Success
- Health and Well-being
- Risk for Obesity
- Risk for Chronic Conditions (e.g., osteoarthritis)
- Risk for Chronic Diseases (e.g., cancer)
Obesity
Not just an adult concern anymore…

Conditions Seen in Children
- High Cholesterol
- Type 2 Diabetes/Impaired Glucose Tolerance
- High Blood Pressure
- Social Problems and Poor Self-Esteem
- Sleep Disturbances
- Orthopedic Problems
Percentage of U.S. Children and Adolescents Classified as Obese, 1963–2008*

*95th percentile for BMI by age and sex based on 2000 CDC BMI-for-age growth charts.


Source: NCHS. Health, United States, 2010: With Special Feature on Death and Dying. Hyattsville, MD. 2011
Academic Achievement

Academic performance
• Class grades
• Standardized tests
• Graduation rates

Education behavior
• Attendance
• Drop out rates
• Behavioral problems at school

Students’ cognitive skills and attitudes
• Concentration
• Memory
• Mood
Inadequate nutrition is a health-risk behavior associated with poor academic achievement:

- Participating in school breakfast or lunch programs was associated with improvement in grades, standardized test scores and school attendance.

- After adding specific nutrients* missing from students’ diets, academic performance improved.
  *Fruits, Vegetables, Dairy products

http://www.chronicdisease.org/?page=SchoolHealthPubs&hhSearchTerms=%22do+health+and+education+agencies%22
# Healthy Eating and Academic Achievement

<table>
<thead>
<tr>
<th>Dietary Behavior/Issue</th>
<th>Related Academic Achievement Outcomes</th>
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| Participation in the School Breakfast Program (SBP)                                   | • Increased academic grades and standardized test scores  
• Reduced absenteeism  
• Improved cognitive performance                                                                                                                |
| Skipping breakfast                                                                     | • Decreased cognitive performance                                                                                                                                       |
| Lack of adequate consumption of specific foods (fruits, veg, dairy)                    | • Lower grades                                                                                                                                                        |
| Deficits in specific nutrients                                                        | • Lower grades  
• Higher rates of absenteeism and tardiness                                                                                                                   |
| Insufficient food intake                                                               | • Lower grades  
• Higher rates of absenteeism  
• Repeating a grade  
• Inability to focus                                                                                                                                         |
# Physical Activity and Academic Achievement

<table>
<thead>
<tr>
<th>Physical Activity Practice</th>
<th>Related Academic Achievement Outcomes</th>
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</thead>
<tbody>
<tr>
<td>Students who are physically active</td>
<td>• Have better grades, better school attendance, and better classroom behaviors</td>
</tr>
<tr>
<td>Higher physical activity and physical fitness levels</td>
<td>• Improved cognitive performance</td>
</tr>
<tr>
<td>More participation in physical education class</td>
<td>• Better grades, standardized test scores, and classroom behavior</td>
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<tr>
<td>Time spent in recess</td>
<td>• Improved cognitive performance and classroom behaviors</td>
</tr>
<tr>
<td>Participation in brief classroom physical activity breaks</td>
<td>• Improved cognitive performance, classroom behaviors, and education outcomes</td>
</tr>
<tr>
<td>Participation in extracurricular physical activities</td>
<td>• Higher GPAs, lower drop-out rates, and fewer disciplinary problems</td>
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Dietary Guidelines for Americans 2015-20: A Focus on Healthy Eating Patterns

- Consume a healthy eating pattern that accounts for all foods and beverages within an appropriate calorie level.

- A healthy eating pattern includes:
  - A variety of vegetables (from all sub-groups)
  - Fruits, especially whole fruits
  - Grains, in which half are whole grains
  - Fat-free and low fat dairy (including milk, yogurt, cheese and fortified soy beverages)
  - A variety of protein foods (including seafood, lean meats & poultry, eggs legumes, nuts, seeds, and soy products)
  - Oils

- A healthy eating pattern limits:
  - Saturated fats and trans fats, added sugars, and sodium
Dietary Guidelines for Americans and MyPlate: Key Recommendations

- **Consume more:**
  - fruit
  - vegetables
  - whole grains
  - low-fat or fat-free dairy

- Increasing consumption of these food groups will help supply these “nutrients of concern”:
  - calcium
  - potassium
  - vitamin D
  - fiber
US Consumption Compared to MyPlate

U.S. consumption in relation to MyPlate food group recommendations, 2011

Percent

140
120
100
80
60
40
20
0
Meat
Grains
Vegetables
Dairy
Fruit

MyPlate recommendations¹

Note: Rice data were discontinued and thus are not included in the grains group.
¹Based on a 2,000-calorie diet.
Schools Role in Obesity Prevention: California Results
Survey by Field Research Corporation on behalf of Kaiser Permanente

- 89% adults favor the new USDA school nutrition standards
- 90% parents feel nutrition education is highly important
- 78% adults endorse extending new standards beyond mealtime

9 out of 10 parents say K-12 schools should play a role in reducing obesity in their community

http://share.kaiserpermanente.org/article/survey-americans-expect-schools-to-lead-in-preventing-
Review of Community-Based Childhood Obesity Prevention Studies

American Academy of Pediatrics

Published July 12, 2013
“With this persuasive evidence about the relationship between health-risk behaviors and academic achievement, it is imperative that leaders in education and health act together to make wise investments in our nations school-age youth...”
CDC’s School Health Guidelines

1. Policies and Practices
2. School Environments
3. Nutrition Services
4. Physical Education and Physical Activity
5. Health Education
6. School Health Services
7. Family and Community
8. School Employee Wellness
9. Professional Development
Nutrition Services: School Meals
Building Blocks for Healthy Children report by IOM

- Access to nutritious, low-cost meals
- Support growth and development
- Foster healthy eating habits
- Safeguard children’s health
- Based on Dietary Guidelines for Americans
- Increase availability of key food groups
Nourish to Flourish

Food insecurity and being overweight are two of the biggest crises facing America’s kids today. But they don’t need to be. The solution lies in understanding the facts.

Food insecure
16 million kids

Overweight
23 million kids

The Reality of Being Overweight and Food Insecure
They are linked.

Did you know?

The National School Lunch Program was created in 1946 "as a measure of national security, to safeguard the health and well-being of the nation's children."

Source: National School Lunch Act, Section 2, Public Law 396, 79th Congress, June 4, 1946
Current National School Lunch Program nutrition standards are based on the 2010 Dietary Guidelines for Americans. We are currently in a reauthorization period and anticipate potential changes based on the newly released 2015-20 Dietary Guideline.
School cafeterias can help influence healthy food choices

Healthy choice is the easy choice
Nutritious foods are appealing
Includes student involvement

SLM of CA
Health Education

Implement health education that provides students with the knowledge, attitudes, skills, and experiences needed for healthy eating and physical activity.
Nutrition Education Defined

“Any combination of educational strategies, accompanied by environmental supports, designed to facilitate voluntary adoption of food choices and other food and nutrition related behaviors conductive to health and well-being and delivered through multiple venues.”

Contento, Nutrition Education: Linking Research, Theory, and Practice, 2nd ed. 2010, p14
Dairy Council of California
Healthy Eating Made Easier®

Dairy Council of California started in 1919 with a mission of “educating the public about the food value of dairy products.”

Cause: To elevate the health of children and parents in CA through the pursuit of healthy eating habits and lifelong values for milk and milk products.
Dairy Council of California: Experts in Nutrition Education

Registered Dietitian Nutritionists, research specialists and education experts put the pieces together to integrate nutrition into health.

Classroom Programs

Nutrition Education Resources

Dairy Council of California’s research-based print programs and online tools promote healthy behaviors throughout multiple stages in life.
Nearly 2.5 million students receive nutrition education programs from Dairy Council of California each year.

89% of eligible California elementary schools use our programs. More than 1,700 schools taught our nutrition programs at every grade level last year.

4.2 million adults + parents are educated by Dairy Council of CA including 1.5 million parents through school programs.

Dairy Council of California educates more than 400,000 students in 700 schools through our Mobile Dairy Classroom program.

Dairy Council of California helps build healthy communities by working with 7,500 schools, 55,000 teachers, 4,000 community leaders and organizations such as California Department of Education, California Dietetic Association, California Parent Teacher Association, California WIC, First5, UC Cooperative Extension and California School Nutrition Association.

Based on 2013-2014 data.
Effective Nutrition Education Program in K-12 Schools

Nutrition Promotion
- Posters
- Bulletin Boards
- Newsletters
- Marketing

Food Literacy
- Taste Testing
- Planning
- Purchasing
- Cooking
- Food Safety

Classroom Nutrition Education
- USDA Dietary Guidelines for Americans
- Based on health education standards
- Part of a comprehensive health education program
- Integrates nutrition knowledge and skills
- Encourages experiential learning
- Assesses knowledge, skills and behaviors
- Engages family and community
- Incorporates the physical environment
- Aligns to Common Core State Standards
Nutrition Education Evaluation Results

Knowledge of food groups
Nutrient-rich food choices
Physical activity

Extra foods
High sugar beverages
Screen time
Top reason why teachers teach nutrition: What 2,084 teachers say

- 29.3% believe it’s a vital topic left out of standard curriculum
- 24.8% have a passion for nutrition and health and want to pass on to students
- 12.9% nutrition ties to curriculum but offers variety
- 20% have seen the results of students eating better, practicing healthier habits
- 10.4% have seen the results of students being well nourished and doing better in school
What teachers are saying about nutrition education

I see them making healthier choices in the lunch line, such as making sure they get their fruits and vegetables.

1st grade teacher
Helen L. Dollaham Elementary

I am happy to report my students are making much better choices in the lunch line.

4th grade teacher
Peabody Charter School

I love when their parents tell me that they are being served too much of something.

Kindergarten teacher
Walnut Park Elementary

I had two former students come back and report that they were now eating healthy because I had taught them how and why.

Kindergarten teacher
Westminster Avenue Elementary
Support from your local Community Nutrition Advisor

A Dairy Council CNA can help:

- strengthen classroom/cafeteria connections.

- provide professional development/education needs related to healthy eating from all food groups.

- Help support action of local school wellness policies.

- Provide nutrition resources to support your education efforts.
Partnership Overview

For the 2015-2016 school year, Dairy Council of California and the California School-Based Health Alliance (CSHA) have partnered to bring nutrition education, tools, resources and support to school-based health centers (SBHCs) throughout California.
Nutrition Education Needs of SBHCs

- Comprehensive, flexible, individualized and youth-friendly
- Skills-based
  - Most common identified needs: label reading, portion control, cooking healthy meals, and shopping in food deserts and corner stores.
- Considers traditional food and eating practices and includes appropriate language and cultural resources
- Relevant to the low-income individual
- Includes parent education and involvement
Nutrition Education Toolkit
HealthyEating.org/SchoolHealth

Online resources
Print resources
Turnkey presentations
Posters and healthy eating messaging
Professional development
Stay Connected:
Nutrition Connections Newsletter

from Occasional to Ubiquitous to Opportune

As recently as 30 years ago, most adults snacked only once a day or not at all. Now both the number of adults snacking and the number of snacks eaten have increased. Two-thirds of adults snack 2 or more times a day, and some report consuming 4 or more snacks daily.

According to market research, more than a third of millennials reported snacking more compared to a year ago, with 26- to 30-year-olds indicating 3 or more snacking occasions per day. Snacking by teens has also increased, with 83 percent of adolescents eating at least one snack on any given day. Children consume about 3 snacks per day, comprising more than 27 percent of their calories and consisting mostly of desserts and sweetened beverages.

Rather than defining snacks by time of day and/or by type of sweet or salty treat, distinctions between meals and snacks are now blurred. Foods can be eaten as snacks or alongside main meals since food manufacturers have made it easier for consumers to decide for themselves whether a food is a meal or snack by not pigeonholing products into defined categories through packaging, portion size or type of ingredients.
Messages to help Build Support for this Movement

- Healthy students are better learners
- Schools can influence eating and physical activity behaviors
- Healthy, successful students help build strong communities
- All students deserve the opportunity to be healthy and successful
Questions?

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