

The Minnesota Department of Health Childhood Obesity Taskforce Experience

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Background

- An agreement between the Commissioner of Health and a Minnesota Senator
- Per the request of the Commissioner of Health the Task Force on Childhood Obesity was convened in June 2006

The Charge of the Task Force

- Determine the number of children who are currently obese and set a goal, including measurable outcomes for the state in terms of reducing the rate of childhood obesity
- Make recommendations on how to achieve this goal, including, but not limited to, increasing physical activity; exploring opportunities to promote physical education and healthy eating programs; improving the nutritional offerings through breakfast and lunch menus; and evaluating the availability and choice of nutritional products offered in public schools

The Charge of the Task Force

The initial request focused on education and school environments

For example, the Minnesota Department of Education; the Minnesota Nurses Association; the Minnesota School Food Service Association; and the Minnesota School Administrators Association

Broadening the Scope of the Task Force

The 2005 Institute of Medicine report
*Preventing Childhood Obesity:
Health in the Balance*

- Healthcare
- Parents/Families
- Government
- Media and Industry
- Education
- Worksites
- Community organizations

Final Task Force Members & Chairs

Chairs: Allina Hospitals and Clinics and the American Heart Association

- **Action for Healthy Kids Minnesota**
- **BlueCross BlueShield of Minnesota**
- **General Mills**
- **Health Partners**
- **Minnesota Council of Health Plans**
- **Minnesota Department of Education**
- **Minnesota Department of Health**
- **Minnesota Department of Human Services**
- **Minnesota Dietetic Association**
- **Minnesota Local Public Health Association**

Final Task Force Members & Chairs (cont)

- Minnesota Medical Association
- Minnesota Parks and Recreation
- Minnesota School Administrators Association
- Minnesota School Nutrition Association
- New Horizon Academy
- MDH Office of Multicultural and Minority Health
- School Nurse Organization of Minnesota
- University of Minnesota
- University of Minnesota Children's Hospital

Structure within MDH

- **Advisory Team**
- **Planning Team**
- **Staff Person to the Task Force**

Overview of Meetings

3 meetings

- June 2006
- July 2006
- October 2006

June 2006 Meeting

- **Review of available data**
The Institute of Medicine's *"Health in the Balance"* and *"Progress in Preventing Childhood Obesity"* Reports; The Community Guide; Center for Weight and Health, Berkeley; CDC; NIH...
- **Formation of workgroups**
Self-selected into workgroups
Paired workgroups in order to encourage larger discussions
- **Initial identification of key recommendations and areas of need**

Task Force Workgroups

Workgroups were asked to develop evidence-based recommendations for their topic area as well as to create corresponding objectives and list strategies stating how those objectives could be achieved

Method for Identifying Recommendations

Format

- **Recommendation**

E.g. Eliminate health disparities in obesity and its complications

- **Objective**

E.g. Promote community-based partnerships and programs to address social, economic, and environmental barriers that contribute to the increased obesity prevalence in certain populations

- **Strategy**

E.g. Improve access to and affordability of fruits and vegetables for low-income populations, through supermarkets, farmers' markets, and community gardens

July 2006 Meeting

Building consensus

Focus areas common to all 5 workgroups

- Encourage healthy eating habits
- Increase physical activity
- Create healthy environments
- Increase monitoring and measurement

October 2006 Meeting

- **Large group discussion and review of each recommendation**
- **Opportunities for partnerships**
- **Individual organization's plans to promote the Task Force recommendations**

Areas of Agreement

- **Assure school and childcare environments support good nutrition and physical activity**
 - Development of state nutrition standards**
- **Integrate obesity prevention and treatment into health care systems**
 - Patient weight monitoring and counseling**
 - Education materials and tools for health providers**

Areas of Agreement

- **Need for obesity public health surveillance system**
Statewide, population-level data
- **Worksite wellness programs with family-centered focus**
Parents, teachers and other mentors are role models

Areas of Controversy

- **Measuring heights and weights in schools**
- **Increasing expectations of schools with fewer resources**
 - Academic performance, health and social concerns**
- **The role of parents and families**
- **Framing the obesity epidemic when speaking with or about children and youth**

Recommendations

- **Government**
- **Education: Schools & Childcare**
- **Industry and Media**
- **Community Organizations & Worksites**
- **Healthcare**
- **Parents and Families**

Recommendations

Government

- Advocate for and initiate legislation and policies that contribute to healthy lifestyles and reduce overweight and obesity
- Convene and connect stakeholders interested in obesity prevention
- Support public health surveillance systems, program evaluation and research to track obesity trends and develop best practices
- Eliminate health disparities in obesity and its complications

Recommendations

Education: Schools & Childcare

- Support measurement systems to track and monitor student health progress
- Implement a coordinated school health approach to obesity prevention
- Assure that childcare environments support good nutrition and age-appropriate physical activities

Recommendations

Industry and Media

- Implement age-appropriate marketing messages and practices that promote healthy food and activity patterns for children and youth
(Packaged Food and Beverage)
- Improve availability of healthy food choices in cafeterias and restaurants
(Restaurant and Food Service Industry)
- Promote physical activity and healthy eating throughout the media
(Media)

Recommendations

Community Organizations & Worksites

- Implement proven programs and initiatives that promote physical activity and good nutrition in community settings
- Implement effective worksite wellness programs with a family-centered focus

Recommendations Healthcare

- Advocate for and incorporate prevention and treatment of obesity in the healthcare system
- Establish body mass index as a vital sign
- Support data collection systems in the clinical setting to monitor patients and track trends in obesity
- Encourage healthcare providers to address healthy weight behaviors with patients
- Promote and provide support for breastfeeding

Recommendations

Parents and Families

- **Key role in reducing childhood obesity**
- **Strategies for encouraging parents and families to adopt healthier lifestyles across each sector**

Accessing the Recommendations

The recommendations of the Task Force on Childhood Obesity can be accessed at:

www.health.state.mn.us/divs/hpcd/chp/obesity

Future Efforts

Minnesota State Plan on Obesity

Seek federal funding for obesity

Coordinate with other state efforts

- **Steering committee of key partners**
- **Determine baseline**
 - Review existing obesity data and sources, identify gaps and future surveillance needs**
- **Partner with summits and conferences**
- **Prioritize best practices, assess resources and plan for technical assistance and action**

Questions?

Contact Information

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(MDH) Taskforce Experience
Martha Roberts, MPH & Wendy Hanson, MPH***

- **Is information provided so that you could organize a taskforce and lead organizations toward a solution?**

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- **Did you learn to work toward obtaining consensus of diverse opinions to prioritize recommendations?**

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- **Will the recommendations lead to resolution of the childhood obesity epidemic?**