

2018 TRI-COUNTY HEALTH SYMPOSIUM

2018-2023 Tri-County Health
Improvement Plan:
Overview of
Obesity, Nutrition and Physical Activity

Margaret Peck and Carolyn Lindstrom

GET SOCIAL!





#healthytricounty



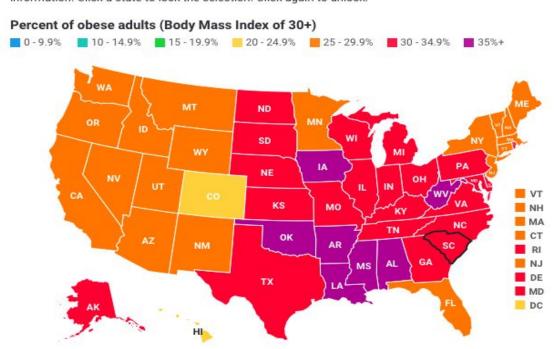
GOAL

GOAL: Reduce obesity in children and adults in the Tri-County through creating environments that promote healthful nutrition and regular physical activity.

South Carolina has the 10th highest adult obesity rate in the nation, and the 17th highest obesity rate for youth ages 10 to 17. South Carolina's adult obesity rate has steadily increased over the last two decades from 12.0% in 1990 to 21.1% in 2000 and 34.1% currently.

Adult Obesity Rate by State, 2017

Select years with the slider to see historical data. Hover over states for more information. Click a state to lock the selection. Click again to unlock.

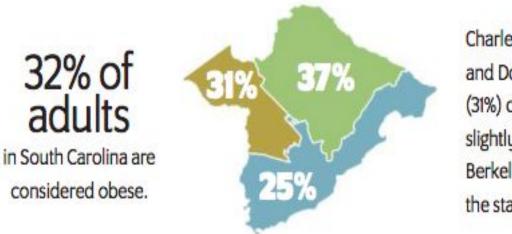




GOAL

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More than one-third of U.S. adults are obese¹⁸ as are 17% of children and adolescents aged 2–19 years.¹⁹



Charleston (25%)
and Dorchester
(31%) counties fared
slightly better, but
Berkeley exceeded
the state at 37%.20



GOALS

GOAL: Reduce obesity in children and adults in the Tri-County through creating environments that promote healthful nutrition and regular physical activity.

Stakeholders will connect with and utilize successful national, state and local resources:

Examples of Key Resources for Obesity, Nutrition & Physical Activity:

- Centers for Disease Control and Prevention (CDC)
 - Weight Management
 - Nutrition
 - Physical Activity
 - Breastfeeding
- Charleston Moves
- Choose My Plate
- Healthy Kids Eat Well, Get Active
- Let's Go! SC
- Let's Move
- Traillink SC



GOAL

GOAL: Reduce obesity in children and adults in the Tri-County through creating environments that promote healthful nutrition and regular physical activity.

- Obesity, physical inactivity and poor diet are leading causes of chronic disease and premature death.
- More than 1 in 3 adults in the Tri-County are obese.
- The nutritional and physical environment has a strong influence on people's healthy habits.
- ONPA strives to create environments conducive to both access to and information about (1) fruit and vegetable intake (2) participation in regular physical activity (3) water intake and (4) the practice of breastfeeding.



RECOMMENDATION 1: Increase fruit and vegetable consumption. By 2023, increase affordable fruit and vegetable access by 10% for all adults and children.

- 1.1a: Identify community access points
- 1.1b: Promotion of community fruit and vegetable access points
- 1.1c: Support improved connectivity to fruit and vegetable access points
- 1.2: Education of the benefits and use of fruit and vegetable consumption
- 1.3: Increase access to fresh fruits and vegetables in PreK-12 public schools
- 1.4: Increase access to fruits and vegetables in food assistance programs

RECOMMENDATION 2: Increase regular physical activity By 2023, increase access to safe and affordable opportunities for all adults and children to participate in regular physical activity by 10%.

- 2.1: Increase number of open community use facilities (School Outdoor facilities)
- 2.2: Advocate for safer active living routes and opportunities
- 2.3: Educate community on the active living opportunities in the community



RECOMMENDATION 3: Promote water intake for adults and children.

By 2023, increase marketing of water intake by 5%.

- 3.1: Promote water intake in the community
- Encourage schools to have water drinking campaigns and water drinking policies.
- Indicator: Promotional materials and media coverage viewership metric



RECOMMENDATION 4: Promote breastfeeding friendly practices in our community as a means to reduce adult obesity.

By 2023, increase locations promoting breastfeeding friendly practices by 5%.

- 4.1 Promote breastfeeding friendly practices in the community.
- 4.2: Promote education for existing breastfeeding support providers regarding connection between breastfeeding and adult obesity.



GROUP DISCUSSION

What questions or feedback do you have?

What additional opportunities do you see for TCHIP implementation specific to Obesity, Nutrition & Physical Activity?





SPOTLIGHT PROVIDER



Boeing Center for Children's Wellness



Docs Adopt School Health Initiative in Tri-County Schools



Boeing Center for Children's Wellness

Mission

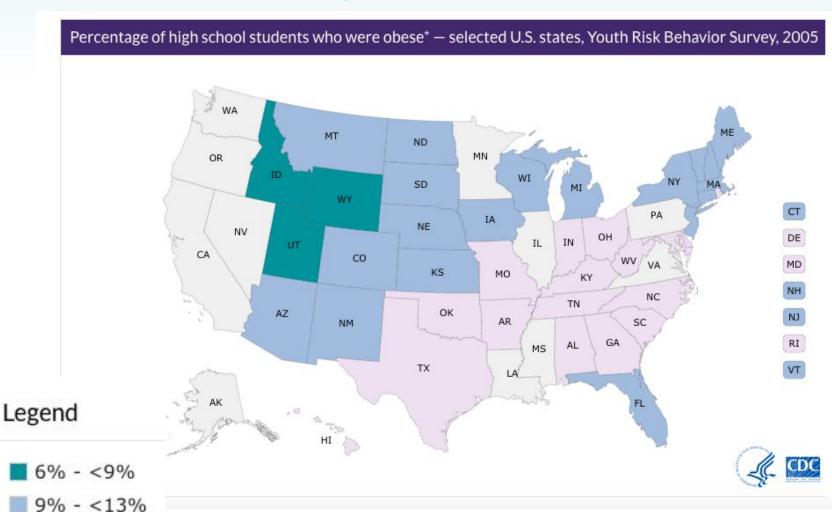
The MUSC Boeing Center for Children's Wellness addresses children's health and development from birth through adolescence. In partnerships across the state, we are working to instill a culture of wellness and prevent obesity such that each child is healthy, succeeds in school and thrives in life.





Childhood Obesity- 2005

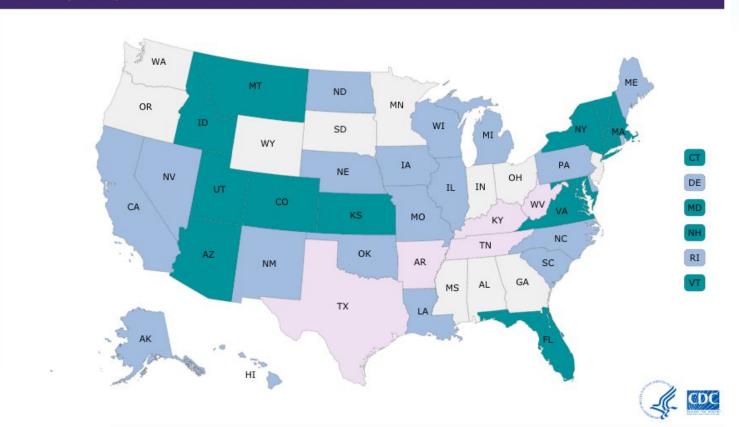
13% - 16%





Childhood Obesity- 2017

Percentage of high school students who were obese* — selected U.S. states, Youth Risk Behavior Survey, 2017



Legend

- 9.5% <13.6%
- **13.6% <17.6%**
- 17.6% 21.7%

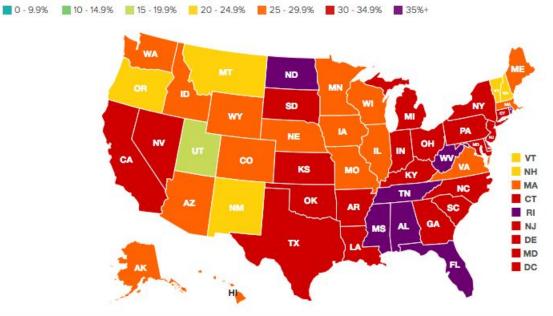


Childhood Overweight & Obesity in SC

Overweight & Obese Children 10-17, 2016

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Combined overweight and obese rates, children ages 10 to 17







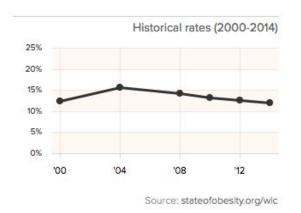
Source: Data Resource Center for Child & Adolescent Health

Childhood Overweight & Obesity in SC



Current obesity rate (2014)

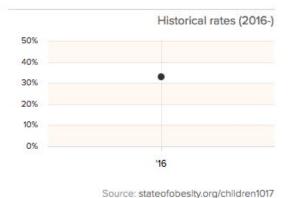
Rank among states (2014)



10- to 17-year-olds*

Combined overweight & obesity rate (2016)

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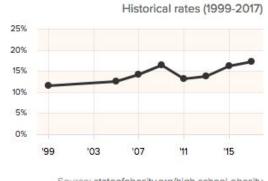


High school students

Current obesity rate (2017)

Rank among states (2017)

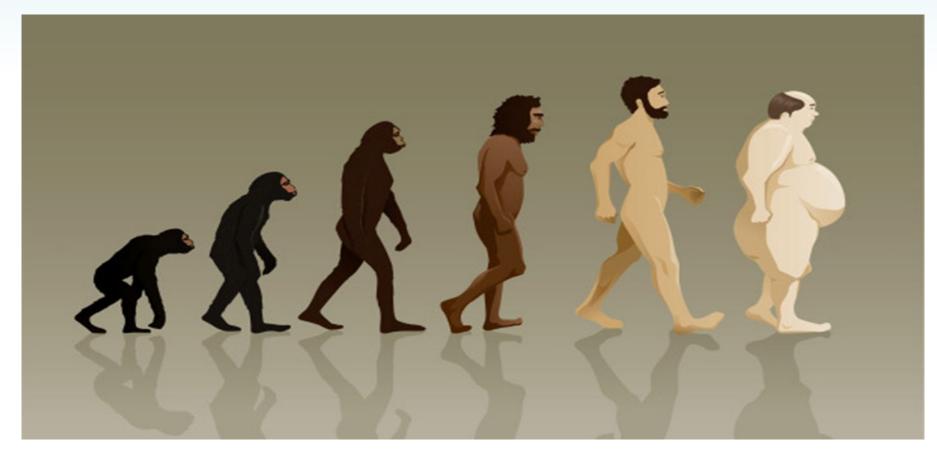




Source: stateofobesity.org/high-school-obesity



How did we get here...



Obesity is a recent phenomenon; today normal human behavior results in unhealthy weight gain. Therefore effective intervention must address the "obesogenic" environment.



THE PHYSICAL INACTIVITY CYCLE

EARLY CHILDHOOD

ADOLESCENCE

ADULTHOOD













30% of children are obese Misses school 2 days higher than average

Lower test scores

US\$ 2,741 per year higher health care costs

1 week per year of extra sick days taken

5.3 million premature deaths/yr. due to inactivity

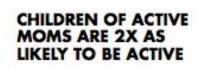
PRESCHOOLERS
WITH INACTIVE
PARENTS ARE FAR
LESS LIKELY TO
BE ACTIVE

2X AS LIKELY TO BE OBESE AS ADULTS



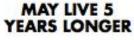
PHYSICAL ACTIVITY







Saves up to US\$ 2,741 per year in health costs





Reduced risk of heart disease, stroke, cancer, diabetes



Up to 1/10th as likely to be obese



40% higher test scores



Less likely to smoke, become pregnant



more likely to go to college



EARLY CHILDHOOD

Why Schools:

> 95% children in schools

Large portion of daily food and exercise occurs at school

Ideal setting to teach about healthy lifestyle

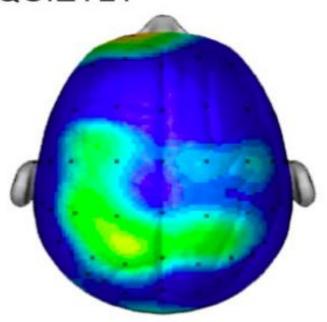
Can enhance academic performance and behavioral improvements

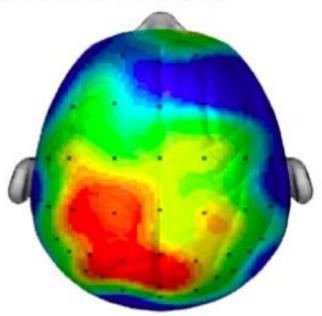


Average composite of 20 students brains taking the same test

BRAIN AFTER SITTING BRAIN AFTER 20 QUIETLY







Healthy Eating and Academic Achievement

Dietary Behavior/Issue	Related Academic Achievement Outcomes
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	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

CDC, Healthy Kids. Successful Students. Stronger Commun<u>ities</u>. Improving Academic Achievement though Healthy

Eating and Physical Activity



Whole School, Whole Community, Whole Child Model



Docs Adopt School Health Initiative

Docs-Adopt©

- Matches physicians and healthcare professionals with individual schools
- Healthcare professionals join wellness committee
- No clinical services



School Wellness Checklist©

- Action guide for implementing evidence-based strategies to improve overall school health environment
- Basis of an annual contest that leads schools to improve nutrition and increase physical activity
- Qualifying schools receive monetary award to use towards wellness projects of their own choosing



School Wellness Checklist

- Getting Started
- 2. Nutrition
- Physical Activity
- 4. Stress Management
- Establishing a Wellness Culture
- 6. Employee Connections
- Sustainability

- Must log at least one point in each category
- Minimum of 50 points
- At least 3 wellness committee members
- Minimum of 4 wellness committee meetings



2018-2019 Timeline

- Wellness Checklist Contest starts September
 - Wellness Committee meetings begin
 - Usernames and Passwords for online checklist
- Wellness Leader Training
 - Held each Fall
- Wellness Focus Group
 - Held each Spring
- Checklist due Friday, APRIL 12th at Noon
 - Verification process
 - Prize Patrol to top three schools in each district
 - May awards celebration and winner announced



Award Structure

50-70 points > \$250

71-100 points > \$350

101-150 points -> \$500

151-200 points > \$750

201+ points > \$1000



Award Structure

- Grand Prize Winner
 - Additional \$1000
- Second Place Winner
 - Additional \$500
- Third Place Winner
 - Additional \$500



Getting Started

- Become a member of your school wellness committee
- Attend school wellness committee meetings
- Assist with updating School Health Plan



Healthy Schools Program





Getting Started

- Encourage health professionals and community involvement in wellness committee
- Be Healthy Moments with Dr. B









Post nutrient information for students and staff to see







School gardens



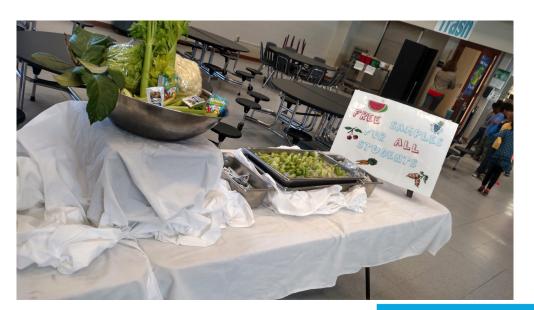








 Assist school with hosting fresh fruit and vegetable tastings





Hold a Water Drinking Campaign







Nutrition



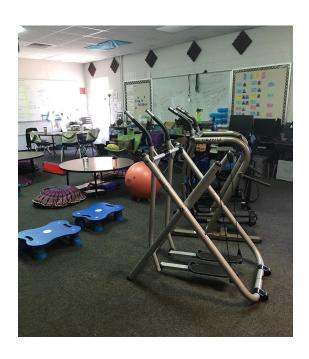






"Hello, I am h.v.m.a.n."

Action Based and Kinesthetic Learning







Brain Break



- Encourage students to participate in community physical activity events
- Help organize Walk/Bike to School Days
- Assist with before or after school walk/run clubs















- Open Community Use
- Joint Use Agreements
- Recreational Agreements



OPEN COMMUNITY USE

Open community use refers to schools allowing free community access to tracks, fields, courts, playgrounds, or other outdoor recreational facilities before or after school hours.

Open community use can increase community access to places to be physically active. In addition, opening schools' outdoor facilities can assist in eliminating health disparities that exist in the state^{x,0}. Many individuals cannot afford to pay for recreational facilities or their community does not have a nearby park or recreational area^{x,0}. Opening schools' outdoor recreational facilities can help all South Carolinians, regardless of income level, engage in more physical activity. Open community use increases the opportunities for youth, adults, seniors, and families to be active, which, combined with good nutrition, is an important step toward improving health.

Benefits of Open Community Use

- Increases access to safe, affordable, and convenient places for physical activity^{10, 11}.
- · Decreases children's sedentary behavior12.
- Improves family and community engagement with the school!
- Increases safety and decreases vandalism of facilities!

Other Types of Facility Use Agreements

In addition to open community use, school facilities can be open for public use in a number of different ways.

 Shared Use/Joint Use Agreements: When government entities, private organizations, or non-profits partner to open access to school property and/or facilities for community use.

Example: An afterschool program uses the local middle school track during the week for their program.

Recreational and Non-recreational Agreements: When a school district allows third parties to host group programs and activities on school property, sometimes in exchange for paying a fee.

Example: The local parks and recreation department hosts T-ball games at the local elementary school's baseball diamond.



Stress Management

- Provide relaxation area for staff
- Encourage stress relief programs for students AND staff
- Set up massages and guest speakers for staff







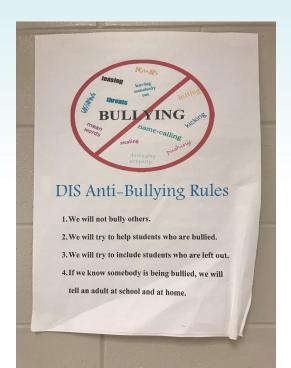




Stress Management











Establishing a Wellness Culture

- School level Wellness Policies
 - Non food rewards
 - Birthday parties
 - Celebrations
 - Water Drinking
 - Physical Activity
 - Breastfeeding





Wellness Culture

- Create a lactation room
- Start a healthy student incentive program
- Send home wellness newsletter to parents



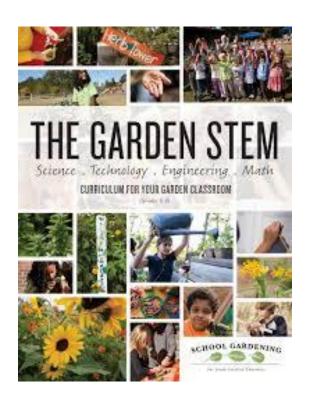






Establishing a Wellness Culture

Nutrition/physical activity is the focus of a STEM related project OR arts and creative writing project







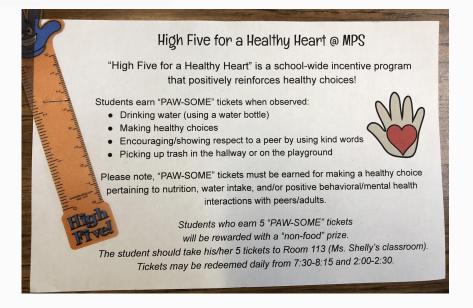
Establishing a Wellness Culture











Employee Connections

- Weight Management Program
- Staff incentive program that encourages healthy choices
- Staff Wellness Library
- Health Screenings







Sustainability

- Grant Opportunities
- Wellness Fundraisers
- Additional Community Partnerships and Sponsors







Tri-County Community Partners

- Action for Healthy Kids
- American Heart Association
- Clemson Extension
- College of Charleston
- DHEC
- Eat Smart, Move More
- Girls on the Run
- Green Heart
- KidsFit Action Based Learning

- Lowcountry Food Bank
- Lowcountry StreetGrocery
- Molina Healthcare
- MUSC Heart Health
- MUSC Safe Kids
- MUSC Telehealth
- Summerville YMCA
- The Dairy Alliance
- Tiger Corner Farms



Breastfeeding Friendly Child Care



- The SC Breastfeeding Friendly Child Care Designation recognizes child care facilities that promote, protect, and support breastfeeding.
- Trainings provided by SCPITC ITS 2.5 hours of professional training credits (CCCCD)
- Free to any interested licensed child care program
- SC currently has 20 designated programs!



Breastfeeding Friendly Child Care

A partnership between SC Program for Infant and Toddler Care, SC Department of Social Services Division of Early Care and Education, MUSC Bedring Center for Children's Wellness, and SC Women Infant and Children Program Created by Indiana Perinatal Network. For more information visit w.w.SCPTC.org.

- Breastfeeding Friendly Child Care designation modeled after Baby Friendly Hospital Initiative
- Partnership with DSS Division of Early Care and Education
- Train child care providers to encourage moms to get help when needed, support and advocate breastfeeding, offer on-site breastfeeding and pumping, be the mother's cheerleader, etc.



Why Be Breastfeeding Friendly in Child Care?

- Babies: Breastfed babies have less risk of obesity, type 2 diabetes, asthma, ear infections, diarrhea, vomiting, colic, and Sudden Infant Death Syndrome (SIDS).
- Mothers: Breastfeeding lowers a mom's risk of breast and ovarian cancer, enhances the bond with her baby, and speeds recovery from childbirth.
- Child Care: Being breastfeeding friendly may lead to better daily attendance, healthier children, higher parent satisfaction, and more public recognition.
- Everyone: Breastfeeding- friendly child care helps everyone by improving breastfeeding rates, leading to healthier people in South Carolina.

The Ten Steps to Breastfeeding-Friendly Child Care were adapted from the Carolina Global Breastfeeding Institute (CGBI) at UNC-Chapel Hill and the designation process from the South Carolina Program for Infant and Toddler Care (SCPITC).

BCSD Changes in School Environment

BCSD Wellness Highlights

BCSD Wellness Highlights



Berkeley County School District, 2017-18

83%

of schools had stress relief programs for students



90%

of schools had kinesthetic desks/chairs in classrooms



70%

of schools had weekly wellness morning announcements



73%

of schools held health screenings for employees



67%

of schools held water drinking campaigns



77%

of schools held healthy school fundraisers





Charleston County District, 2017-18

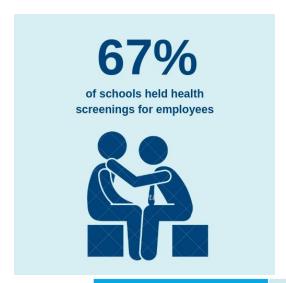
71% of schools had kinesthetic desks/chairs



69%
of schools had gardening projects

78% of schools had stress relief programs for students

60%
of schools had weekly wellness morning announcements



69%
of schools held healthy school fundraisers



Dorchester School District Two, 2017-18

88%

of schools had stress relief programs for students



100%

of schools had kinesthetic desks/chairs in classrooms



83%

of schools held healthy fundraisers



79%

of schools served or promoted locally grown foods



100%

of schools completed the Smarter Lunchroom Assessment



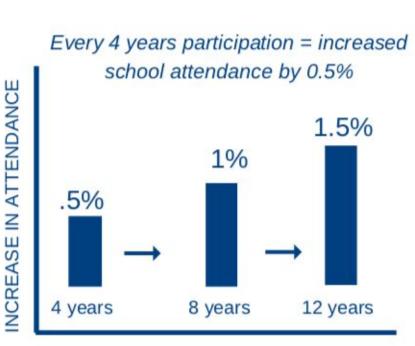
88%

of schools applied for a wellness related grant

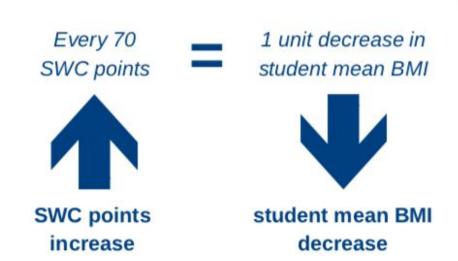




South Carolina Outcomes



YEARS OF PARTICIPATION



Wellness Checklist Resources

Website:

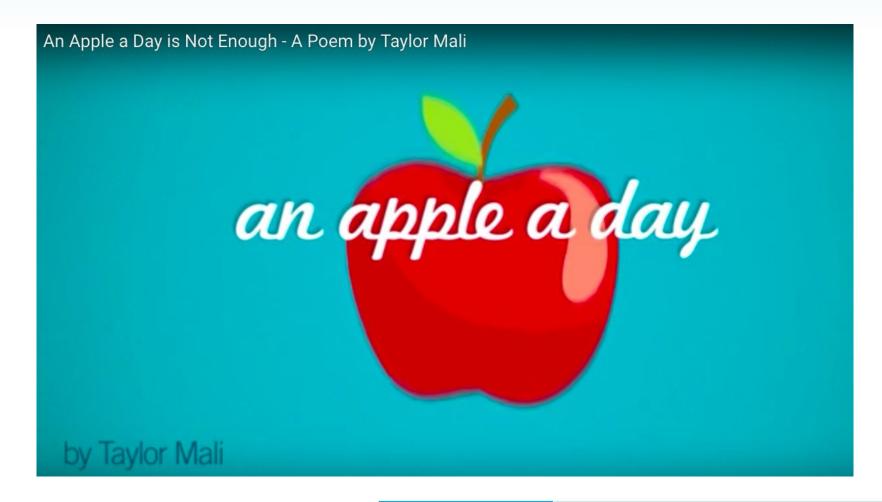
musc.edu/leanteam

School Wellness Checklist Contest →
Wellness Checklist Resources

Bccw.musc.edu



An Apple a Day is Not Enough





Contact Us

Carolyn Lindstrom

clindst@musc.edu

843.452.9757

leanteam@musc.edu



References

- ASCD, & Centers for Disease Control and Prevention. (2014). Whole School Whole Community Whole Child: A Collaborative Approach to Learning and Health. Alexandria, VA: ASCD.
- Centers for Disease Control and Prevention. (2017). School Health Index: A Self-Assessment and Planning Guide.
- Donnelly, J., Hillman, C., Castelli, D., Etnier, J., Tomporowski, P., Lambourne, K., & Szabo-Reed, A. (2016). Physical Activity, Fitness, Cognitive Function, and Academic Achievement in Children: A Systematic Review. *Medicine & Science in Sports & Exercise*, 48(6), 1197-1222.
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- Local School Wellness Policy Implementation Under the Healthy, Hunger-Free Kids Act of 2010, 81 Fed. Reg. 50151 (July, 29, 2016) (to be codified at 7 C.F.R. pts. 210 & 220).
- Lewallen, T. C., Hunt, H., Potts-Datema, W., Zaza, S., & Giles, W. (2015). The Whole School, Whole Community, Whole Child Model: A New Approach for Improving Educational Attainment and Healthy Development for Students. *Journal of School Health*, 85(11), 729-739. doi:10.1111/josh.12310
- South Carolina Department of Education. (2017). South Carolina Standards for Health and Safety Education.
- USDA National School Lunch Program and School Breakfast Program: Nutrition Standards for All Foods Sold in School as Required by the Healthy, Hunger- Free Kids Act of 2010, 81 Fed. Reg. 50131 (July 29, 2016) (to be codified at 7 C.F.R. pts. 210 & 220).



Mission

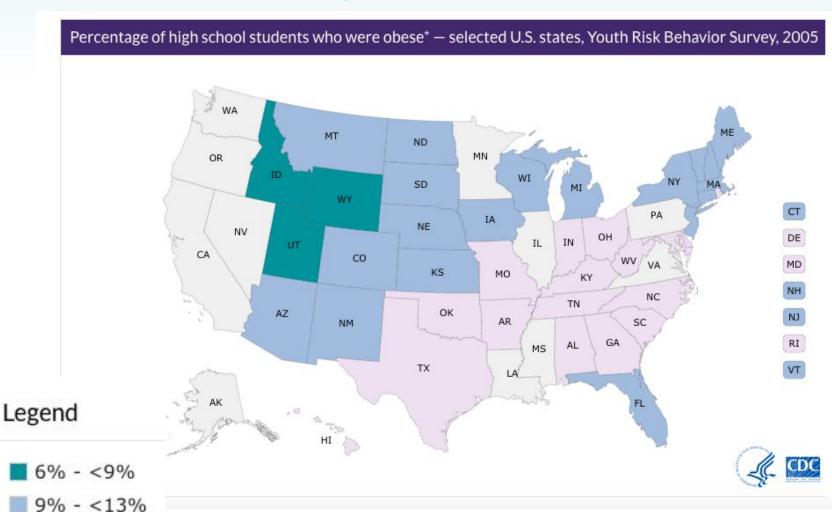
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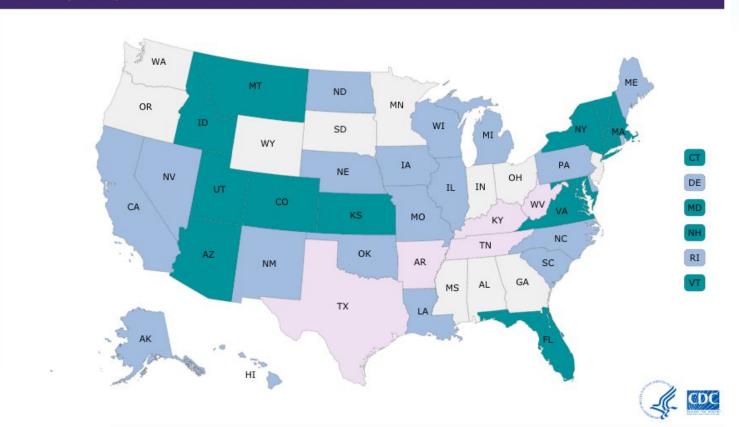
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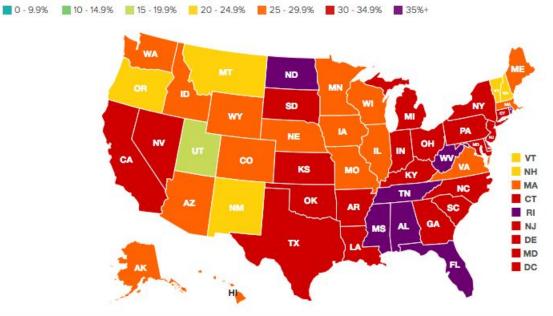


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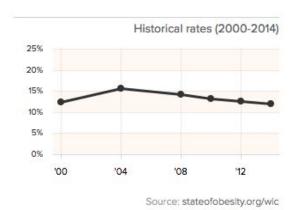
Source: Data Resource Center for Child & Adolescent Health

Childhood Overweight & Obesity in SC



Current obesity rate (2014)

Rank among states (2014)



10- to 17-year-olds*

Combined overweight & obesity rate (2016)

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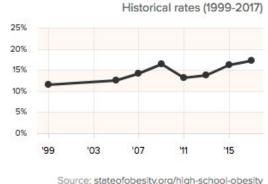
Source: stateofobesity.org/children1017

High school students

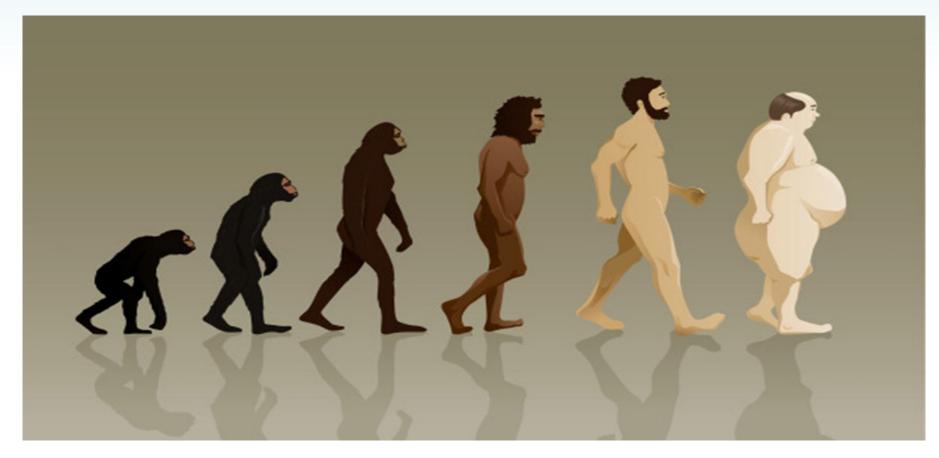
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How did we get here...



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THE PHYSICAL INACTIVITY CYCLE

EARLY CHILDHOOD

ADOLESCENCE

ADULTHOOD





30%

of

children

are obese



Misses school 2 days higher than average



Lower

test

scores

US\$ 2,741 per year higher health care

costs



1 week per year of extra sick days taken



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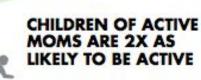
PRESCHOOLERS
WITH INACTIVE
PARENTS ARE FAR
LESS LIKELY TO
BE ACTIVE

2X AS LIKELY TO BE OBESE AS ADULTS



PHYSICAL ACTIVITY







Saves up to US\$ 2,741 per year in health costs



MAY LIVE 5

YEARS LONGER

risk of heart disease, stroke, cancer, diabetes



Up to 1/10th as likely to be obese



40% higher test scores



Less likely to smoke, become pregnant



15% more likely to go to college





Why Schools:

> 95% children in schools

Large portion of daily food and exercise occurs at school

Ideal setting to teach about healthy lifestyle

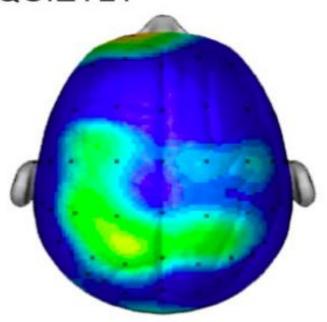
 Can enhance academic performance and behavioral improvements

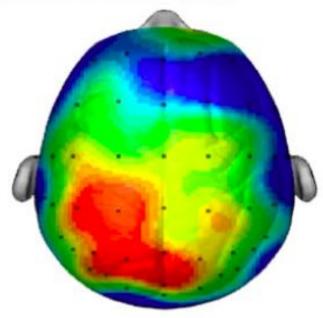


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BRAIN AFTER SITTING BRAIN AFTER 20 QUIETLY

MINUTE WALK





Healthy Eating and Academic Achievement

Dietary Behavior/Issue	Related Academic Achievement Outcomes
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CDC, Healthy Kids. Successful Students. Stronger Commun<u>ities</u>. Improving Academic Achievement though Healthy

Eating and Physical Activity



Whole School, Whole Community, Whole Child Model



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101-150 points \$500

151-200 points > \$750

201+ points > \$1000



Award Structure

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Getting Started

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- Attend school wellness committee meetings
- Assist with updating School Health Plan



Healthy Schools Program





Getting Started

- Encourage health professionals and community involvement in wellness committee
- Be Healthy Moments with Dr. B



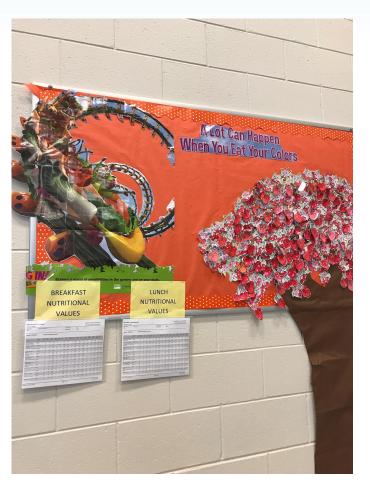






Post nutrient information for students and staff to see





School gardens



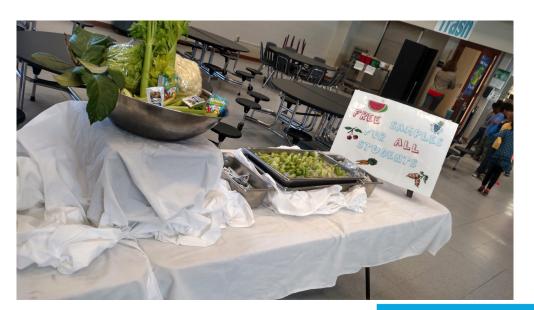








 Assist school with hosting fresh fruit and vegetable tastings





Hold a Water Drinking Campaign









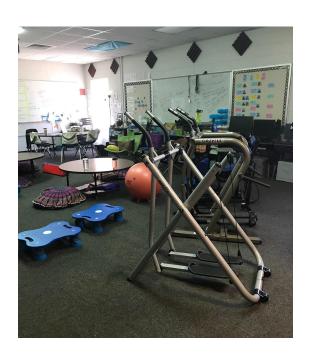






"Hello, I am h.v.m.a.n."

Action Based and Kinesthetic Learning







Brain Break



- Encourage students to participate in community physical activity events
- Help organize Walk/Bike to School Days
- Assist with before or after school walk/run clubs















- Open Community Use
- Joint Use Agreements
- Recreational Agreements



OPEN COMMUNITY USE

Open community use refers to schools allowing free community access to tracks, fields, courts, playgrounds, or other outdoor recreational facilities before or after school hours.

Open community use can increase community access to places to be physically active. In addition, opening schools' outdoor facilities can assist in eliminating health disparities that exist in the state^{5,0}. Many individuals cannot afford to pay for recreational facilities or their community does not have a nearby park or recreational area^{5,0}. Opening schools' outdoor recreational facilities can help all South Carolinians, regardless of income level, engage in more physical activity. Open community use increases the opportunities for youth, adults, seniors, and families to be active, which, combined with good nutrition, is an important step toward improving health.

Benefits of Open Community Use

- Increases access to safe, affordable, and convenient places for physical activity^{10, 11}.
- · Decreases children's sedentary behavior12.
- · Improves family and community engagement with the school'.
- · Increases safety and decreases vandalism of facilities!

Other Types of Facility Use Agreements

In addition to open community use, school facilities can be open for public use in a number of different ways.

 Shared Use/Joint Use Agreements: When government entities, private organizations, or non-profits partner to open access to school property and/or facilities for community use.

Example: An afterschool program uses the local middle school track during the week for their program.

Recreational and Non-recreational Agreements: When a school district allows third parties to host group programs and activities on school property, sometimes in exchange for paying a fee.

Example: The local parks and recreation department hosts T-ball games at the local elementary school's baseball diamond.



Stress Management

- Provide relaxation area for staff
- Encourage stress relief programs for students AND staff
- Set up massages and guest speakers for staff







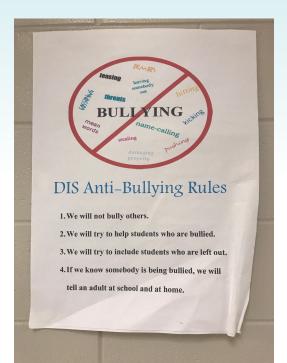




Stress Management











Establishing a Wellness Culture

- School level Wellness Policies
 - Non food rewards
 - Birthday parties
 - Celebrations
 - Water Drinking
 - Physical Activity
 - Breastfeeding





Wellness Culture

- Create a lactation room
- Start a healthy student incentive program
- Send home wellness newsletter to parents



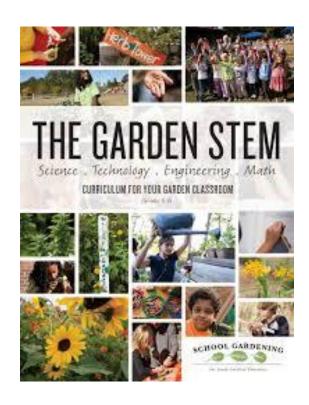






Establishing a Wellness Culture

Nutrition/physical activity is the focus of a STEM related project OR arts and creative writing project







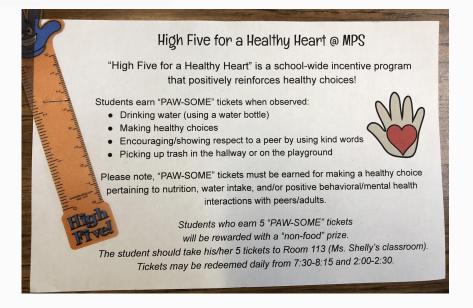
Establishing a Wellness Culture











Employee Connections

- Weight Management Program
- Staff incentive program that encourages healthy choices
- Staff Wellness Library
- Health Screenings







Sustainability

- Grant Opportunities
- Wellness Fundraisers
- Additional Community Partnerships and Sponsors







Tri-County Community Partners

- Action for Healthy Kids
- American Heart Association
- Clemson Extension
- College of Charleston
- DHEC
- Eat Smart, Move More
- Girls on the Run
- Green Heart
- KidsFit Action Based Learning

- Lowcountry Food Bank
- Lowcountry Street Grocery
- Molina Healthcare
- MUSC Heart Health
- MUSC Safe Kids
- MUSC Telehealth
- Summerville YMCA
- The Dairy Alliance
- Tiger Corner Farms



Breastfeeding Friendly Child Care



- The SC Breastfeeding Friendly Child Care Designation recognizes child care facilities that promote, protect, and support breastfeeding.
- Trainings provided by SCPITC ITS 2.5 hours of professional training credits (CCCCD)
- Free to any interested licensed child care program
- SC currently has 20 designated programs!



Breastfeeding Friendly Child Care

A partnership between SC Program for Infant and Toddler Care, SC Department of Social Services Division of Early Care and Education, MUSC Boding Center for Children's Wellness, and SC Women Infant and Children Program. Created by Indiana Perinatal Network. For more information visit www.SCPTC.org.

- Breastfeeding Friendly Child Care designation modeled after Baby Friendly Hospital Initiative
- Partnership with DSS Division of Early Care and Education
- Train child care providers to encourage moms to get help when needed, support and advocate breastfeeding, offer on-site breastfeeding and pumping, be the mother's cheerleader, etc.



Why Be Breastfeeding Friendly in Child Care?

- Babies: Breastfed babies have less risk of obesity, type 2 diabetes, asthma, ear infections, diarrhea, vomiting, colic, and Sudden Infant Death Syndrome (SIDS).
- Mothers: Breastfeeding lowers a mom's risk of breast and ovarian cancer, enhances the bond with her baby, and speeds recovery from childbirth.
- Child Care: Being breastfeeding friendly may lead to better daily attendance, healthier children, higher parent satisfaction, and more public recognition.
- Everyone: Breastfeeding- friendly child care helps everyone by improving breastfeeding rates, leading to healthier people in South Carolina.

The Ten Steps to Breastfeeding-Friendly Child Care were adapted from the Carolina Global Breastfeeding Institute (CGBI) at UNC-Chapel Hill and the designation process from the South Carolina Program for Infant and Toddler Care (SCPITC).

BCSD Changes in School Environment

BCSD Wellness Highlights

BCSD Wellness Highlights



Berkeley County School District, 2017-18

83%

of schools had stress relief programs for students



90%

of schools had kinesthetic desks/chairs in classrooms



70%

of schools had weekly wellness morning announcements



73%

of schools held health screenings for employees



67%

of schools held water drinking campaigns



77%

of schools held healthy school fundraisers





Charleston County District, 2017-18

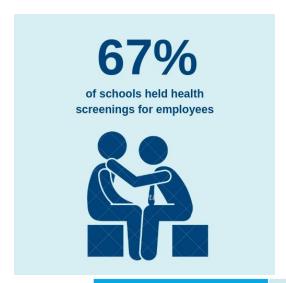
71% of schools had kinesthetic desks/chairs



69%
of schools had gardening projects

78% of schools had stress relief programs for students

60%
of schools had weekly wellness morning announcements



69%
of schools held healthy school fundraisers



Dorchester School District Two, 2017-18

88%

of schools had stress relief programs for students



100%

of schools had kinesthetic desks/chairs in classrooms



83%

of schools held healthy fundraisers



79%

of schools served or promoted locally grown foods



100%

of schools completed the Smarter Lunchroom Assessment



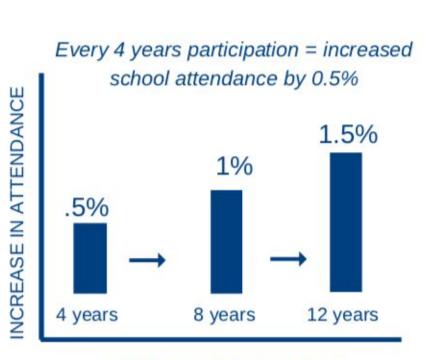
88%

of schools applied for a wellness related grant

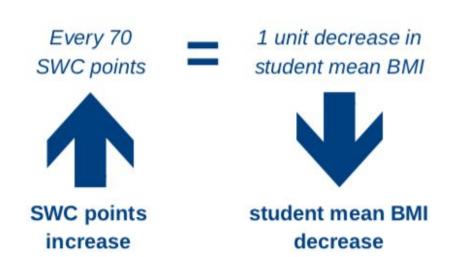




South Carolina Outcomes



YEARS OF PARTICIPATION



Wellness Checklist Resources

Website:

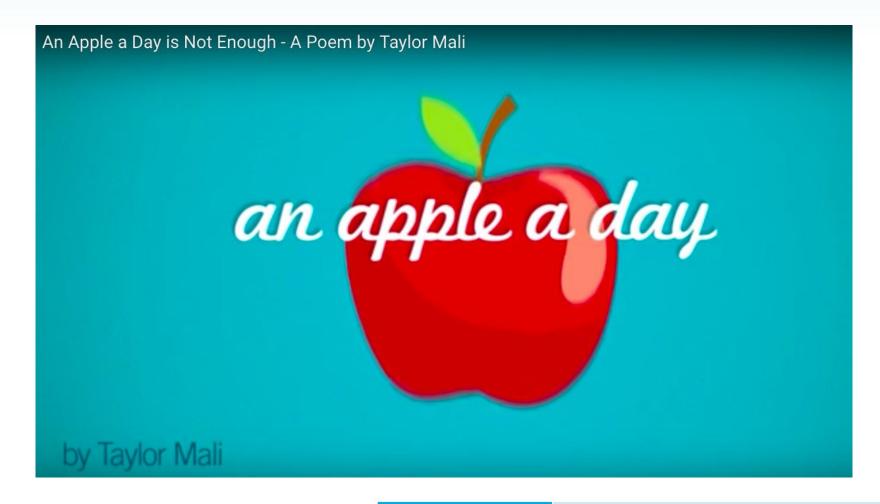
musc.edu/leanteam

School Wellness Checklist Contest →
Wellness Checklist Resources

Bccw.musc.edu



An Apple a Day is Not Enough





Contact Us

Carolyn Lindstrom

clindst@musc.edu

843.452.9757

leanteam@musc.edu



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JOIN US!

Commitment

Participate in one meeting per month

Volunteer 4-6 hours per month (meetings & independent efforts)

TCHIP Workgroup Meetings

4th Friday every other month 12-2pm

Next meeting: Jan 25th, 2019

ONPA Next Meeting

Friday, November 16, 2018



JOIN US!

Tri-County Stakeholders; ONPA Members (April 2018)

Berkeley County School Districts

Breen Consulting

Charleston County Park and Recreation Commission

Dorchester School District Two

Eat Smart Move More Charleston Tri County

Healthy Plate Cooking

Lowcountry Food Bank

Lowcountry Local First

MUSC Boeing Center for Children's Wellness

MUSC Children's Health

SC Department Health and Environmental Control

Lowcountry Region

Safe Kid's Charleston Coalition (MUSC)

YMCA Summerville



Collectively we can and will make this happen!





Our Health, Our Future

The Tri-County Health Improvement Plan 2018-2023

Berkeley | Charleston | Dorchester



PRESENTER CONTACT INFO

Margaret Peck
Healthy Plate Cooking
info@HealthyPlateCooking.com

Carolyn Lindstrom

MUSC Boeing Center for Children's Wellness

<u>clindst@musc.edu</u>



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