



**Position Paper:**  
**PARTNERS FOR HEALTHY LIFESTYLES**

Childhood obesity is one of the most serious public health challenges of the 21<sup>st</sup> century. The CDC reports that obesity among children aged 6 to 11 has more than doubled in the past 20 years and that the rate among adolescents aged 12 to 19 has more than tripled. New York State is experiencing an epidemic of childhood obesity with one in four children either overweight or obese. These children have higher rates of obesity-related diseases, like diabetes, cancer, and cardiovascular disease; require more frequent and expensive medical care; and are likely to stay obese into adulthood. Yet obesity and related diseases remain largely preventable.

The fundamental causes of childhood obesity are a trend towards increased intake of energy-dense foods that are high in fat and sugars, but low in vitamins, minerals and other healthy micronutrients, and a trend towards decreased levels of physical activity. Conversely, healthy diets and adequate physical activity\* are key to the promotion and maintenance of good health throughout one's lifetime, and as such, must be a high public health priority for parents, educators, and policy and law makers.

Establishing healthy behaviors among young people has proven more effective, and often easier, than efforts to change unhealthy behaviors already established among adults. At present, only 18 percent of American adults follow all three of the most important cardiovascular disease prevention measures: not smoking, maintaining a healthy weight, and exercising regularly. In 2006, the United States spent more than any nation in the world on health care, and improving the health of its citizens would yield considerable economic benefit to our nation. It is easier and less costly to keep children healthy than to fix preventable health problems later in life.

Parents play an important role in a child's life as nurturers, teachers and role models. They control most food choices at home and their support encourages their children to be more physically active. Furthermore, when parents themselves model a healthy lifestyle, their children are more likely to perceive it as the norm for their own development.

As learning environments where children spend at least one-third of their day, schools also play a very important role in modeling healthy behaviors. Research shows that well-designed, well-implemented school programs can effectively promote students' physical activity and healthy eating. It has been found that, when given the option, students will buy and consume healthful foods and beverages, thus setting the stage for a lifetime of healthy nutritional habits. *In addition to the personal health advantages for students, schools that provide access to good nutrition and opportunities for physical activity benefit through improved academic performance, school attendance and student mood.* (Role of Schools in Reducing Obesity-[www.nasbe.org](http://www.nasbe.org))

In supporting parents' efforts to ensure their children's health, school policies and programs should foster the adoption of healthy diets and physical activities through changes in environment, behaviors and instruction. Aside from healthy school foods, schools should provide students with daily physical education and access to safe, appropriate facilities and equipment. Recognizing that schools play an integral part in child development, in 2004 the federal government passed a law requiring local school wellness policies, with implementation effective as of 2006. An effective school wellness policy is a working document, developed and implemented by school personnel, food service providers, students and parents. It should be reviewed and assessed annually, and by including all stakeholders, creates a critical partnership for the promotion of healthy lifestyles.

As *Partners for Healthy Lifestyles*, home, school, and community should work to ensure that:

- School health programs create conditions that are conducive to health and help students develop the knowledge and skills needed to make informed decisions and practice healthy behaviors.
- The school food services environment (school cafeteria, a la cart foods, snack bars, vending machines) provides foods and beverages that are high in vitamins, minerals and other healthy micronutrients and low in fat, free sugar, cholesterol, sodium and calories; follow science-based nutritional standards for school foods and beverages; and comply with national dietary guidelines for school-aged children. NYSPTA advocates the passage of legislation with the following key components:

- age-appropriate science-based standards that are periodically reviewed by health experts;
  - sufficient time to eat breakfast and lunch;
  - food or beverage never used as incentives or rewards;
  - additional funding for school meal programs and expansion of the USDA Fresh Fruit and Vegetable Program, as per NYS Council on Food Policy recommendations that school meal programs serve more fruits, vegetables, whole grains and low-fat dairy products;
  - a recess period for all elementary school children; no withholding of recess as means of discipline;
  - establishment and implementation of nutrition and physical education competencies and strict standards of accountability;
  - adequate funding so that all school districts can offer healthy foods and beverages.
- Healthy fundraisers are encouraged by school wellness policies and school/community activities.
  - Physical education and/or sports classes are provided and maintained for all students, grades K-12, according to NYS Education Department regulations:
    - All pupils in grades K-3 shall attend and participate in physical education on a daily basis for 120 minutes per week. Students attending half-day kindergarten should meet half the requirement.
    - All pupils in grades 4-6 shall attend and participate in physical education not less than three times per week for 120 minutes per week.
    - All pupils in grades 7-12 shall attend and participate in physical education for not less than three times per week in one semester, and not less than two times per week in the other semester 90 minutes per week.
    - A variety of physical education classes is offered to accommodate each student's age, gender, interests, and needs. They should be enjoyable and developmentally appropriate and promote fair play and maximum participation of all students. With such physical activity, students develop the confidence and skills for lifelong physical fitness.
    - The undertaking or withholding of physical activity is not used as punishment.
    - Recess is a regularly scheduled period within the elementary school day that allows for unstructured physical activity, play, and social and cognitive development. Recently many school districts have eliminated recess due to safety concerns and the need for increased time for academic instruction ("No Child Left Behind" constraints).
  - Safety programs--like Safe Routes to School--are developed through the collaborative efforts of local PTA councils and units, community groups, municipalities, transportation services, and traffic planners in order to create safe areas for cycling and walking; to advocate for policies promoting safe walking and cycling to and from school and community recreational facilities; and to create public awareness campaigns about student walking/cycling activity.
  - Communities offer a variety of extracurricular activities that enhance student participation and increase opportunities for cooperation among schools, students, parents and community organizations. Parents, educators, and community members who participate in physical activities with children model good behavior and can build positive adult-child relationships.

Children will acquire healthy habits by consuming a diet of nutritional foods, increasing physical activity, and limiting the amount of time spent in sedentary activities like watching TV or playing video games. Yet to develop such habits, children must hear consistent messages from home and school. Effecting changes in children's dietary habits and patterns of physical activity will therefore require the combined efforts of many stakeholders, public and private. As partners in advocacy, parents, educators, and community members must teach and model the habits and behaviors of healthy living and must advocate to law and policy makers at all levels for the adoption and funding of policies and programs to promote healthy lifestyles. Our goal must be that our children will live what they learn: to become healthy, active citizens.

- \* According to U.S. Dept. of Health and Human Services Physical Activity Guidelines, children and adolescents should engage in at least 60 minutes daily of moderate and/or vigorous physical activity (aerobic, muscle-strengthening, and bone-strengthening activities).

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