Act 1220 of 2003: An Act to create a child health advisory committee; to coordinate statewide efforts to combat childhood obesity and related illnesses; to improve the health of the next generation of Arkansans; and for other purposes. *Act 201 of 2007 and Act 719 of 2007 amend Act 1220 of 2003.

This is the Act 1220 Coordinators report highlighting the work of programs resulting from Act 1220 of 2003 and those that amended the act. This report is an overview of work for May of 2022 - June of 2023.



By:

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Childhood obesity is a complex health issue which impacts the health of children in a variety of ways that lead to the decline in both physical and psychological health and has immediate and long-term effects. According to the <u>Centers for Disease Control and Prevention</u> (CDC), children who are obese are more likely to have or experience:

- High blood pressure and high cholesterol, which are risk factors for cardiovascular disease;
- Increased risk of impaired glucose tolerance, insulin resistance, and Type 2 diabetes;
- Breathing problems such as asthma and sleep apnea;
- Joint problems and musculoskeletal discomfort;
- Fatty liver disease, gallstones, and gastro-esophageal reflux (i.e., heartburn);
- Psychological problems such as anxiety and depression;
- Low self-esteem and lower self-reported quality of life;
- Social problems such as bullying and stigma.

According to the Arkansas Center for Health Improvement Year 19 Report, 43.0% of Arkansas students are overweight and obese down from 44.0% in the previous CHAC report. In addition to this, 70-80% of children who have obesity are likely to become adults with obesity. Children that become adults with overweight and obesity are more likely to have more severe risk factors for heart disease, Type 2 diabetes, and multiple types of cancer when compared to those without obesity from childhood to adulthood.

According to the CDC, research shows a strong connection between healthy behaviors and academic achievement. CHAC previously endorsed the CDC's Whole School, Whole Community, Whole Child (WSCC) model to promote positive health behaviors and lessen negative behaviors. The CDC also found that evidence-based, well-coordinated, and strategically planned school health programs and services-which account for the individual, family, school, and community-are necessary for closing the academic achievement gap as well as addressing the childhood obesity epidemic. Addressing the complexity of childhood obesity requires examining factors such as:

- Genetics.
- Metabolism-how the body changes food and oxygen into energy it can use.
- Eating and physical activity behaviors.
- Community and neighborhood design and safety.
- Short sleep duration.
- Negative childhood events.

The <u>CDC's Whole School, Whole Community, Whole Child</u> model for Coordinated School Health takes into account that it is easier to learn healthy behaviors earlier in life rather than changing behaviors as an adult. This model also acknowledges the unique position schools are in to aid children in establishing life-long healthy behaviors. In this model there are ten (10) opportunity areas to address childhood obesity. The 10 areas are:

- 1. Physical education and physical activity.
- 2. Nutrition environment and services.
- 3. Health education.
- 4. Social and emotional school climate.

- 5. Physical environment.
- 6. Health services.
- 7. Counseling, psychological, and social services.
- 8. Employee wellness.
- 9. Community involvement.
- 10. Family engagement.

Since 2003, the members of CHAC have worked to develop recommendations to address issues, policies, and legislation related to school health. The members of the CHAC continue to support improved school health policy, program components, and are available to provide support to legislators and policymakers as they seek to address issues and develop policies to support schools. The CHAC now meets the second Thursday of each month in a public meeting. The following report addresses the legislative and policy changes occurring in Arkansas since May of 2022 and the support provided for the implementation of the nutrition and physical activity standards; professional development provided to schools staff regarding physical activity and nutrition; outreach by the CHAC; and progress of the Coordinated School Health Program.

ACT 1220 of 2003 created the Child Health Advisory Committee to make nutrition and physical activity standards and policy recommendations to the State Board of Education (BOE) and the State Board of Health (BOH) to combat childhood obesity in public schools, grades K-12 and monitoring the progress of implementation of Act 1220 and the Coordinated School Health Program.

The following is a summary of the activities of the committee.

In accordance with Act 1220 of 2003 and the amending act, the CHAC met monthly-with the exception of October 2022, sent required media alerts, maintained updated website content, and maintained representation of the required organizations throughout the year. The following is a brief overview of the work of the CHAC.

- By March of 2023 the *Allowable Competitive Foods/Beverage- Maximum Portion Size List* was reviewed, updated as needed, and transmitted to ADE, DESE Child Nutrition Unit for distribution to all school districts/schools via Commissioner's Memo for the upcoming school year.
- The CHAC reviewed the Assessment of Childhood and Adolescent Obesity in Arkansas Year
 19 (Fall 2021-Spring 2022) December 2022 report.
- The CHAC reviewed the Arkansas Center for Health Improvement's Body Mass Index Program page.
- The CHAC reviewed legislative bills:
 - o SB88
 - o <u>SB172</u>
 - o SB308
 - o HB1157 (Act 101)
 - o HB1161 (Act 128)
 - o HB1315 (Act 286)
 - o <u>HB1323</u>

- o HB1343
- o HB1393 (Act 290)
- o <u>HB1643</u> (Act 737)
- o <u>SB 477</u> (Act 656)
- o <u>SB 479</u> (Act 657)
- The CHAC hosted Kathy McFetridge-Rollins (State Board of Education), Nell Smith (Arkansas Department of Human Services, TEFRA), Dr. Michael R. Thomsen (UAMS, Center for the Study of Obesity) as guest presenters.
- The CHAC began reviewing all previous recommendations approved by the State Board of Health and State Board of Education to assess for gaps of implementation.
- CHAC New Member Orientation was provided to new organizations representation.

The following is a summary of the activities of the Act 1220 Coordinators (State Health and Wellness Coordinator(s)):

- Regarding the requirement for nutrition and physical activity goals and objectives be included in annual school planning and reporting process:
 - o In 2022 the district and school level School Health and Wellness Improvement plan required by state mandates and Arkansas Education Accreditation standards were noted to be submitted at a lower rate than previous year for districts at 90%, while school plans were submitted at an increased rate of 93%.
- In the 2022/2023 school year, There were 300+ participants registered for the meeting, with over 271 in attendance at the peak of the meeting.
- Technical assistance provided by the School Health Services staff at ADH and ADE was provided directly to 165 school personnel on School Wellness Committees, School Wellness Policy, School Health Index, School Health and Wellness Priority Planning.
- In collaboration with Arkansas Center for Health Improvement, Body Mass Index State Report was developed.
- In collaboration with Arkansas Center for Health Improvement, Body Mass Index District and School level reports were developed and made accessible through an online dashboard.
- In the 2022/2023 school years the Student Wellness Advocacy Group (SWAG) Program had 10 schools, and 285 instances of students engaging in health education training through ADH partnerships. There were additional 848 instances of students participating in Student Wellness Advocacy Group activities with more than 2,671 non-SWAG member participants/attendees. The pre/post assessment indicates participants gained confidence and knowledge related to health and advocacy training topics.
- Facilitated the Child Health Advisory Committee meetings each month. Including presentation of the The Rules Governing Nutrition and Physical Activity Standards and Body Mass Index (BMI)
 Protocols in Arkansas Public Schools, Maximum Portion Size List, The Rules Process, Wellness Policy, and legislation related to nutrition, physical activity, CSH, and BMI.

The following is a summary of the activities of the Community Health Nurse Specialists (CHNS), and Community Health Program Specialists (CHPS):

- The CHPS/CHNS provided essential health education in four (4) primary domains in relation to Act 1220 and the amending legislation. The training and education in these domains has also aided educators in receiving their mandated professional development at no or very low cost.
 - o Tobacco/Nicotine
 - o Injury and Violence Prevention
 - o Wellness and
 - o General WSCC related education (or Hometown Health Improvement)
 - The attendees are divided into 19 years or older and under 19.
 - The total number of participants based on these groups were:
 - 10,164 19 years or older
 - 53,745 under 19
- At tobacco/nicotine prevention trainings, there were 2,548 attendees 19 years or older and 26,610 attendees under the age of 19.

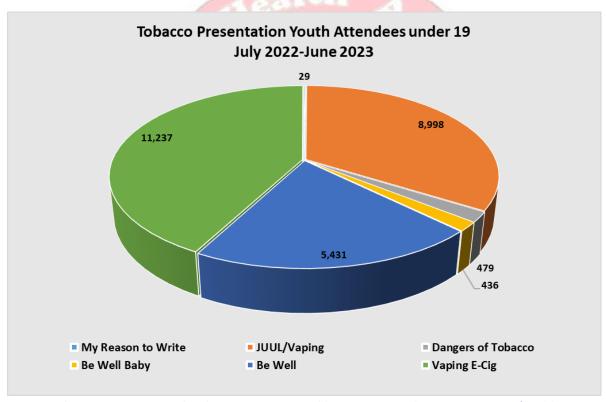


Figure 1. Tobacco Presentation Youth: <u>Arkansas Hometown Health Improvement Arkansas Department of Health</u>

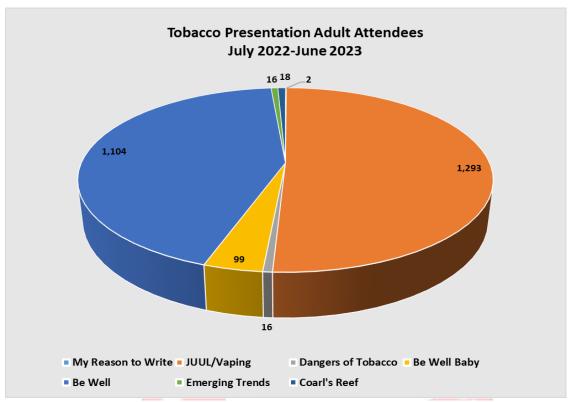


Figure 2. Tobacco Presentation Adults: Arkansas Hometown Health Improvement Arkansas Department of Health

• At injury and violence prevention trainings, there were 2,762 attendees 19 years or older and 5,925 attendees under the age of 19.

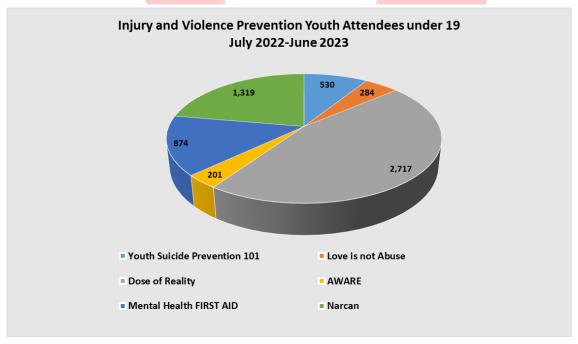


Figure 3. Injury and Violence Prevention Youth: Arkansas Hometown Health Improvement Arkansas Department of Health

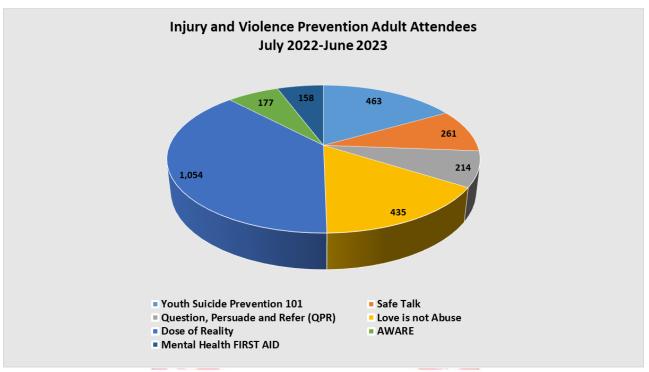


Figure 4. Injury and Violence Prevention Adults: <u>Arkansas Hometown Health Improvement Arkansas Department of Health</u>

• At wellness trainings, there were 2,041 attendees 19 years or older and 4,565 attendees under the age of 19.

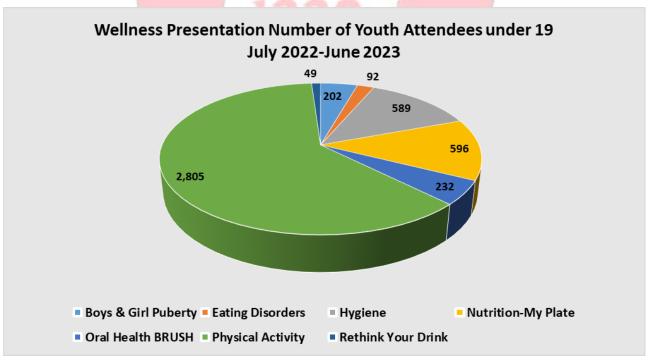


Figure 5. Wellness Youth: Arkansas Hometown Health Improvement Arkansas Department of Health

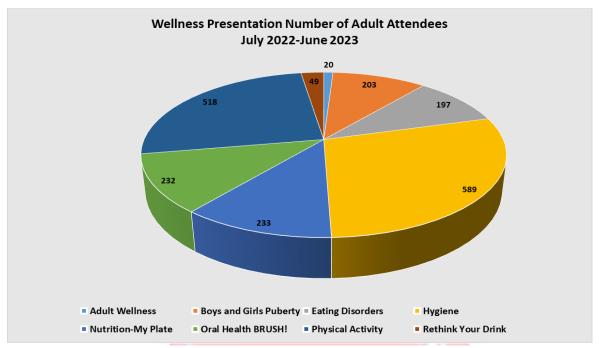
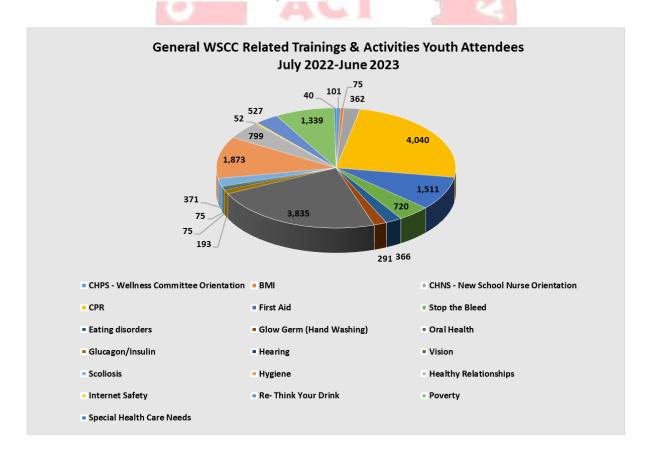


Figure 6. Wellness Adults: Arkansas Hometown Health Improvement Arkansas Department of Health

• At general WSCC related trainings and activities, there were 2,813 attendees 19 years or older and 16,645 attendees under the age of 19.



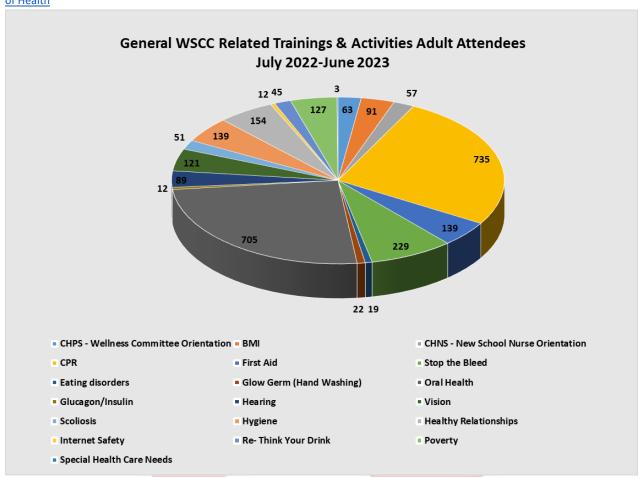


Figure 7. General WSCC related trainings and activities youth: <u>Arkansas Hometown Health Improvement Arkansas Department</u> of Health

Figure 8. General WSCC related trainings and activities adults: <u>Arkansas Hometown Health Improvement Arkansas Department of Health</u>

The following is a summary of the activities of the Coordinated School Health Program:

- Hosted 10 professional development training sessions with 1,419 attendees. Of these trainings,
 7 were conducted virtually and 3 were held in-person.
 - o In 6 of 10 post-training surveys, 93.6% of trainees reported strong understanding of the information/concepts presented in the training.
 - Evaluations for 6 of 10 trainings indicated 96.2% reported an increase in confidence in their ability to improve school health because of the training.
- A statewide coalition meeting was held for stakeholders across Arkansas.
- The program identified 276 school health coordinators.
- The program identified 270 school health councils.
- School Health Index was the focus of three (3) trainings with 189 total attendees.
- Of the six (6) priority schools, all six were using the School Health Index to assess policies, practices, and programs.
- The program website was utilized for updates and had a total of 361 users.
- Technical assistance was provided:

- 18 instances to priority LEAs (LEAs provided funding through the CDC DP18-1801 Health Schools Grant)
 - 17 different health topics
- o 103 instances of technical assistance were provided to non-priority LEAs.
 - 23 different school health topics
 - At least 69 different LEAs had one instance.

In 2023 the Coordinated School Health Program applied for and was awarded the five (5) year School-Based Interventions to Promote Equity and Improve Health, Academic Achievement, and Well-Being of Students (CDC-RFA-DP-23-002).

The following regulatory changes were followed by the CHAC due to their relationship to student health and the adoption of the Whole School, Whole Community, Whole Child (WSCC) model of health and education.

Regulatory Changes 2022-2023

Act 101: An Act to Require Public School Districts and Open-Enrollment Public Charter Schools to Provide Information to Public School Students Regarding Water Safety Education Courses and Swimming Lessons; and for Other Purposes.

Act 128: An Act to Create the Support for Pregnant and Parenting Students Act; and for Other Purposes.

Act 286: An Act to Create the Seizure Safe Schools Act; and for Other Purposes.

Act 290: An Act to Create Mental Health Awareness Week in Public Schools; and for Other Purposes.

<u>Act 737</u>: An Act to Require Automated External Defibrillators at Certain School-Sponsored Sporting Events and on Campuses of Institutions of Higher Education; and for Other Purposes.

Resources

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 - https://bmi.achi.net/BMIContent/Documents/220222A Year 18 (2020-21) Arkansas BMI Report FINAL.pdf
- Assessment of Childhood and Adolescent Obesity in Arkansas Year 19 (Fall 2021-Spring 2022)

 December 2022. Retrieved June 2023. https://achi.net/wp-content/uploads/2023/02/221229A-FINAL-2021-22-Arkansas-Student-BMI-Report.pdf
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 https://www.healthy.arkansas.gov/programs-services/topics/child-health-advisory-committee
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- Healthy Schools Year 5 Evaluation Arkansas Department of Education (2021-2022). <u>Division of Elementary and Secondary Education Offices Learning Services School Health Services Coordinated School Health (CSH) (arkansas.gov)</u>
- Rockenbach, J. (2015). Child Health Advisory Committee Report 2015. Retrieved from files.
- State School Health and Wellness: https://www.healthy.arkansas.gov/programs-services/topics/state-school-health-and-wellness
- To Allow The Contents Of A Teacher Preparation Program To Include Certain Content That Pertains To Evidence-Based-Trauma-Informed Classroom Instruction Within Its Curriculum, HB1343, AR, 2023, HB1343 Bill Information Arkansas State Legislature
- To Amend the Definition of A Noninstructional Duty To Include The Supervision of Students During Recess, SB172, AR, 2023, <u>SB172 as engrossed on 03-29-2023 17:04:53</u> (state.ar.us)

- To Amend The Distributions From The General Revenue Fund Account; And To Transfer Revenues To The Restricted Reserve Fund To Be Used To Address Food Insecurity And Health Needs, SB479, 2023, SB479 as engrossed on 03-29-2023 16:35:59 (state.ar.us)
- To Create Child Mental Health Screening Programs In Schools and Child Care Facilities For Children From Birth To Nineteen Years Of Age, HB1323, AR, 2023, <u>Bill Drafting Template</u> (state.ar.us)
- To Create A Means By Which Students Who Qualify For Reduced-Price Meals At School Receive Free Meals At School, SB308, AR, 2023 SB308 as engrossed on 03-09-2023 09:24:50 (state.ar.us)
- To Create A Means By Which Students Who Qualify For Reduced-Price Meals At School Receive Free Meals At School, SB477, 2023 SB477 as engrossed on 03-30-2023 17:07:10 (state.ar.us)
- To Create The Seizure Safe Schools Act, HB1315, AR, 2023, HB1315 as engrossed on 02-27-2023 11:42:57 (state.ar.us)
- To Create The Support For Pregnant and Parenting Students Act, HB1161, AR, 2023, HB1161 as engrossed on 02-16-2023 11:34:04 (state.ar.us)
- To Define Healthcare Provider Regarding Student Athlete Concussion Education, SB88, AR, 2023, Bill Drafting Template (state.ar.us)
- To Require Public School Districts and Open-Enrollment Public Charter Schools To Provide Information To Public Schools Students Regarding Water Safety Education Courses and Swimming Lessons, HB1157, AR, 2023, HB1157 as engrossed on 01-30-2023 09:49:01 (state.ar.us)
- Whole School, Whole Community, Whole Child (WSCC). (2019, May 29). Retrieved May 3, 2023, from https://www.cdc.gov/healthyschools/wscc/index.htm.