Tackling Childhood Obesity:
A Case Study in Maternal and Child Health Leadership

Women’s and Children’s Health Policy Center
Johns Hopkins Bloomberg School of Public Health
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Prepared by
Treeby Brown

For
The Women’s and Children’s Health Policy Center
Department of Population, Family and Reproductive Health
Johns Hopkins Bloomberg School of Public Health
615 N. Wolfe Street
Baltimore, MD 21205
Tel: 410-502-5450
Fax: 410-502-5831
www.jhsph.edu/wchpc

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Introduction
This case study takes place in a mid-size Southern state that is attempting to address childhood obesity in the face of financial, legislative and bureaucratic challenges. Among the strengths of this state are steady economic growth in a few metropolitan areas, a solid public university system, and the election of a popular governor. At the same time, the state is facing a number of challenges: unwelcome publicity because of its childhood obesity rank, schools in rural areas faced with a large migrant population, and urban school districts faced with high rates of poverty. The Medicaid budget has increased 30% in five years, forcing cuts in other programs.

To date, the state’s attempts to address childhood obesity have been scattered and largely unsuccessful. State legislators representing districts where the University and state capital are located recently attempted, unsuccessfully, to mandate assessment and reporting of elementary school students’ BMI. Rural legislators are particularly resistant, feeling that the reporting would reflect poorly on the families in their communities without offering real assistance. At the local level, a variety of modestly-funded, sparsely-staffed get-fit/ healthful eating programs are targeted towards grade schoolers in select urban school districts, but rarely are tailored to reach Latino families or other immigrants.

The Case
Gloria Browning has been Director of the Division of Children’s Health in the Family and Community Health Section of a Health Department in a mid-size Southern state for five years. Trained as a social worker, she has a reputation as a hard worker, creative thinker, and supportive leader with particular skill in collecting, interpreting and using data to improve programs. In one month, she will assume the position of Director of the Community Health Section when Dr. Helen Fielding, a pediatrician and well-known public health advocate, retires after 30 years of service in the department. Dr. Fielding has a high profile in the public health community in the state and a very close working relationship with the State Chapter of the American Academy of Pediatrics (AAP). She is known for her strong views and her relentless determination in budget and legislative matters.

Recently the State was ranked in the top twentieth percentile for numbers of children classified as clinically obese. Governor Thad Miller is particularly concerned about the unflattering statistic, not to mention the pressure the problem is putting on the Medicaid budget. He wants the Health Department to develop a results-oriented plan that he can tout at an upcoming meeting of the National Governor’s Association where he serves on the Health Task Force.

The first challenge facing Gloria will be responding to a Request for Proposal (RFP) from the U.S. Department of Health and Human Services’ Maternal and Child Health Bureau for approximately $100,000 in grant funding to address the issue of childhood obesity. The application is due in 2 months, shortly after Dr. Fielding retires. Among the requirements in the grant application is an action plan for collaboration between the Departments of Health and Education, with sign offs on the final plan from the state chapter of the AAP and the state PTA. Since the grant requires that the intervention activities take place in the school setting, the buy-in of the Education Department is particularly critical. Specifically, the grant application guidance requires that the action plan describe how the state will evaluate proposed activities, show the extent to which expected results are achieved, and include the process and outcome measures that the state will use to monitor and evaluate the project (including data from both the Behavioral Risk Family Surveillance System and the school food program).
The Players

EDUCATION:
- State Commissioner of Education (George Livingston) and city and county school superintendents.
  - Pressed to find new ways to inject more instruction into an already packed school day.
  - In several school districts, a highly transient student population, many of whom speak English as a second language, makes effective instruction more challenging. Recess is often sacrificed for test preparation. The school districts that are struggling to meet NCLB requirements have the highest numbers of children who are obese or at-risk of becoming obese.
  - Ray Johnson, superintendent for the largest urban school district in the state, Central City, has said: “We are concerned about our kids’ health, but tell me, where is the money and the time to address yet another problem?”
- Chairman of the State School Boards Association (Donald Harris) chairs a school board in the western, more rural part of the state, and is skeptical of approaches that shed unflattering light on school districts while offering little real help. His major concern is raising test scores.
- Parent and leader of the State PTA (Sharon Cresser)
  - Has three children who attend highly regarded public schools in an affluent county.
  - She is highly supportive of efforts to address childhood obesity, but she thinks the solution is in voluntary pre/after-school sports programs and is hesitant to measure BMI or put additional responsibilities on parents.

THE MEDICAL COMMUNITY:
- The state chapter of the American Academy of Pediatrics (AAP) has enjoyed a close working relationship with Dr. Fielding and the Division of Community and Family Health, collaborating on a variety of issues including child health insurance, Medicaid reimbursement, and health standards for child care facilities. This collaboration has been high-level and closed-door, often involving just Dr. Fielding and the AAP chapter chair.
- The new chair of the state chapter, Bill Lyons, is enthusiastic, but he has yet to work on a long-term initiative. He is concerned about the lack of evidence-based practice approaches to address childhood obesity.

NUTRITIONISTS IN PUBLIC HEALTH:
- Nearly all the local health departments have nutritionists on staff, but they work primarily with the mothers and young children who qualify for the WIC program. They have little additional time to devote to school nutrition and have few connections with school nutrition staff.
- Some of the more affluent school districts, including Greendale County, have hired child nutrition consultants to help with nutrition education and occasional screening and referrals for eating disorders, but their influence is limited.
- Anna Alva, director of child nutrition services for the Community Health Section and primary oversight of the WIC program, has a strong nutrition background and significant experience in dealing with high-risk populations, but little contact with her colleagues in the Department of Education, particularly Suzanne Childs, who is Section Chief for Child Nutrition Services.

SCHOOLS OF PUBLIC HEALTH:
- Eastern State University, located in the state capital, has a School of Public Health program. The school employs Mary Owens, a well-known nutritionist from Boston, whose work has primarily focused on adults. Ms. Owens conducted pioneering research in the Boston area but has yet to connect with the local and state health community on any significant projects.
The First Meeting
Dr. Helen Fielding, the retiring section Director, planned and led the initial planning meeting two weeks ago. As incoming Section Director, Gloria Browning attended but did not help plan the hastily and loosely formed agenda. The goal of the meeting was to agree on a basic strategy to address childhood obesity in the state. Unfortunately, the invitations were sent out only 8 days ahead of time, and participants did not receive an agenda until they attended the meeting. The agenda itself included only four items: 1) introductions of participants, 2) description of the grant requirements, 3) discussion of the problem, and 4) next steps.

Due to the last minute notice, the Education Department was able only to send the Commissioner’s deputy, Sandra Ivey; the Section Chief for Child Nutrition Services, Suzanne Childs, was participating in long-planned site visits with regional staff. Luckily, Superintendent Ray Johnson, invited by the Education Department, was able to attend at the last minute. Other participants included State AAP Chapter Chair Bill Lyons, Anna Alva, Director of Child Nutrition Services in the Health Department, Sharon Cresser with the State PTA, and Mary Owens from the University. Donald Harris, Chair of the State School Boards, was unable to attend.

After initial introductions and a brief discussion of the grant requirements and deadlines, Mary Owens made a brief presentation on the problem of obesity, using adult data. After the presentation, AAP Chair Bill Lyons decried the lack of evidence-based practices for tackling childhood obesity, leading to an unproductive discussion about both the causes of childhood obesity (parental behavior, TV and video games, reduction in physical activity, school lunches and vending machines, the fast food industry, media messages) and strategies to address the issue. Lyons raised State PTA President Sharon Cresser’s ire when he said that “weight control is the parent’s, not the pediatrician’s, responsibility” and that he doesn’t see a role for doctors beyond noting BMI during well-child visits. Anna Alva acknowledged the problems but said she cannot commit her nutritionists to more time beyond the WIC program.

Dr. Fielding insisted that stricter nutritional standards for school and more physical education time are the best solutions. Fielding blamed the Education Department for not funding school breakfast programs throughout the state, angering Sandra Ivey, who was skeptical about how $100,000 spread across the state could allow schools to do much of anything. Central City Superintendent Ray Johnson said schools simply don’t have the energy or the facilities to add yet another program. Because of the lack of time to prepare for the meeting, neither the Health Department nor the Education Department had a sense of what is currently going on in the state or if any model programs already exist. The meeting ran one hour over schedule and concluded with a whimper as the various participants begged off for other appointments and gave only lukewarm commitments to attend another meeting.

What Next?
Shortly after Gloria returned to her office, she received a call from Sandra Ivey, who threatened to pull out of the collaboration. Ivey said she felt blind-sided by the meeting, which “appeared to be simply an opportunity to make it look like educators don’t care about children’s health.” Gloria apologized to Sandra and insisted that the next meeting would be better.

After hanging up, Gloria put her head in her hands and tried to brainstorm about her next steps. The next meeting is slated to take place in a month, which only leaves about three weeks after that to write and submit the application and gather letters of support. Participants must agree on an approach at this next meeting if the state wants to pursue the funding, which the Governor is insisting they do. Gloria Browning’s leadership—and job—are on the line.