

Pennsylvania makes inroads into reducing child obesity

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Pennsylvania school districts set goals and improved snacks and a la carte offerings to meet federal legislation for reducing childhood obesity, but opportunities for physical activity did not improve in most schools, according to Pennsylvania nutritional scientists.

"Pennsylvania was one of the few states to collect and analyze plans to ensure that they addressed childhood obesity," said Elaine McDonnell, projects coordinator, Project PA. Project PA, a collaboration between Penn State's Department of Nutritional Sciences and the Pennsylvania Department of Education, Division of Food and [Nutrition](#), partners with schools and their communities to provide sound nutrition education and to promote children's healthy eating behaviors.

The Child Nutrition and Women, Infants, and Children Reauthorization Act of 2004 required that all local education agencies develop wellness policies to address [childhood obesity](#) by the start of the 2006-2007 school year. Each school district had to create at least one goal to improve wellness in each of several categories: nutrition education, [physical activity](#), availability of nutrition guidelines to students, and other school-based activities to address student wellness.

Pennsylvania's multifaceted approach included mandatory training sessions for all school food service directors and [financial incentives](#) to schools that adopted state-created nutrient standards for a la carte food items.

The researchers surveyed superintendents from 499 Pennsylvania school districts. Nearly all schools complied and worked with the state to formulate plans that would in some way target obesity.

Nearly 75 percent of respondents reported improvements in food available through vending machines and in a la carte offerings -- most often chips, cookies, and other snack food. Also, more than half of the school districts reported that nutrition education at their schools had improved as a result of the Child Nutrition Program legislation.

"Prior to the legislation, many people saw a la carte food as a factor contributing to obesity rates because it is not regulated like the National School Lunch Program," says Claudia Probart, associate professor of nutritional science.

Physical activity opportunities, however, were less likely to be implemented, even though that area was a major focus of the legislation. Only 13 percent of schools reported children had increased opportunities for physical activity beyond physical education classes.

In most schools, food service directors were in charge of new policies for the legislation. These directors typically only manage the National [School](#) Lunch Program in their schools, so policies on physical activity or nutrition curriculums were out of their area of authority.

Other weak points of compliance with the legislation included measurement of the effectiveness of the wellness policies and limited consequences for not meeting stated goals. Districts appear to need additional assistance in this area, as only 24 percent reported having written plans for assessing their implementation activities.

Provided by Pennsylvania State University

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