National Indian Health Board



May 11, 2010

A Summary of American Indian and Alaska Native Provisions in the White House Task Force's Report on Childhood Obesity "Solving the Problem of Childhood Obesity Within a Generation"

### **Background**

First Lady Michelle Obama and President Barack Obama have raised the profile of childhood obesity in the United States. First Lady Michelle Obama is leading an initiative called Let's Move!, to solve the problem of childhood obesity in the United States within a generation. Earlier this year, President Obama convened a White House task force composed of Federal officials to examine how federal policies could affect childhood obesity. Today, the task force released its report.

The National Indian Health Board provided recommendations to the White House and to the task force on items to consider so the report and subsequent policy developments are relevant and accessible for AI/AN communities, who suffer from high rates of obesity, including childhood obesity. It is clear from the final report that many of NIHB's recommendations were included.

This document includes a summary of the report's provisions regarding American Indian and Alaska Natives (AI/AN) and tribal specific recommendations included in the report. The full report is available on www.nihb.org.

## **Summary of the Report**

In the report, the White House Childhood Obesity Task Force examines the problem of childhood obesity, as well as makes recommendations to address and solve the problem within a generation. The report is based on four priority areas set forth by President Obama including: empowering parents and caregivers; providing healthy food in schools; improving access to healthy, affordable foods; and increasing physical activity.

The task force incorporated specific policy recommendations for Indian Country to ensure that Tribes and AI/AN youth are affected by policy initiatives and have access to Federal programs and funding. The report also stresses the importance of including tribal and Bureau of Indian Education schools when making changes to school nutrition programs.

The report acknowledges that role of culturally appropriate, and traditional foods can play an important part of reducing childhood obesity in Indian Country. In addition, the report raises the issue of access to nutritious foods and safe environment for recreation.



Finally, there are many policy recommendations that are not specific to AI/AN communities, but could have an impact in Indian Country. These provisions are not included in this document, but the National Indian Health Board will continue to examine and analyze these policy recommendations on childhood obesity.

# **Indian Specific References:**

## Race/Ethnic Disparities:

The report demonstrates that childhood obesity is more common among certain racial and ethnic groups, and is particularly common among American Indian and Alaska Native children. The report cites that 31% of AI/AN four year olds are obese, twice the rate among white or Asian children. This rate was the highest of any racial or ethnic group.

## How Does Obesity Affect our Health?:

Obesity increases the risk of chronic diseases such as heart disease and diabetes. The report cites a study that found more than 75% of children ages 10 and over with type 2 diabetes were obese, and that type 2 diabetes among AI/AN communities were particularly high.

#### What Can We Do?:

Funds have already been invested to combat childhood obesity, including \$373 million for prevention strategies supporting community based interventions in all 50 states and 25 communities in urban, rural, and tribal areas.

## **Breastfeeding:**

The report examines the rate of breastfeeding among various racial and ethnic groups, including AI/AN women (69.9%). Breastfeeding is believed to have a positive impact to preventing childhood obesity for numerous factors.

#### Obesity Treatment:

The task force recommends federally-funded and private insurance plans cover services necessary to prevent, assess, and provide care to overweight and obese children. The task force states that the Indian Health Service covers these services and has proposed an initiative on early identification and treatment of childhood and adult obesity in primary care in the President's Fiscal Year 2011 budget request.

#### Key Questions for Future Research:

The task force discusses the need for additional scientific research to strengthen prevention strategies for childhood obesity. The task force includes the need to examine effects of targeted strategies focused on subpopulations at elevated obesity risk, including tribal populations.

#### <u>Increasing Resources for School Meals:</u>

The report recommends investing in healthier meals at schools means investing in better foods and modernized preparation and service equipment. The report acknowledges that Federal, Tribal and state governments each share costs for meal programs and each have a role in supporting meal improvements.



#### Connect Schools to Local Growers:

The task force recommends increasing opportunities for schools to purchase foods from local farm cooperatives. The report recommends that the USDA, the Bureau of Indian Affairs and the Bureau of Indian Education at the Department of the Interior should also collaborate to increase local, traditionally appropriate foods in Tribally-controlled school meal programs, such as bison and salmon.

#### Other Food in Schools:

In order to increase nutrition in schools, the local schools must work with Federal, Tribal and states governments to reshape food policies.

### **Increasing Nutrition Education:**

A recommendation is put forth in the report to increase the availability of nutrition education, and that teachers in local schools can produce interdisciplinary approaches to nutrition education. The Bureau of Indian Education and other entities could also expand their partnership to include nutrition education.

## School Districts Should Implement Strong Local School Wellness Policy:

The report recommends that school districts develop wellness policies. The report recommends additionally that Tribes can work with the National Indian Education Association and the National Indian School Board Association to develop an effective school wellness policy that reflects Tribal values and culture.

### Access to Healthy, Affordable Food:

The report examines "food deserts", or places that lack convenient access to affordable and healthy food. Communities on reservations often lack public transportation to supermarkets and long distances exist between an individual's home and the supermarket. This makes it difficult for individuals to access food, even motivated individuals.

#### Encourage Communities to Promote Efforts to Provide Fruits and Vegetables:

The task force recommends providing incentives to purchase and sell local native-grown produce to Indian schools and communities.

## Increase the Number of Safe and Accessible Outdoor Spaces for Play:

The task force recommends increase tribes' access to funding and strengthening capacity to compete for funding to increase use of and access to parks and open space in low-income neighborhoods and communities.

### Support Federal Investments of Outdoor Recreation Venues:

The report recommends Federal land management agencies to work with state, Tribal and local agencies to promote and ensure access to a range of youth-appropriate activities on public lands and waters.

#### **Conclusion:**

The NIHB will continue to monitor and analyze childhood obesity developments within the Federal government. For more information, visit <a href="www.nihb.org">www.nihb.org</a> or contact Dennis Worden at <a href="dworden@nihb.org">dworden@nihb.org</a>.

