

K-12 Case Study

Health guidelines: It's tough keeping up

By Nanci Hellmich and Rita Rubin

.....5

Student extension

.....8-9

Corresponding National Standards

NPH-H.9-12.3 Reducing Health Risks : Students will demonstrate the ability to practice health-enhancing behaviors and reduce health risks. (NASPE)

NPH-H.9-12.7 Health Advocacy Students will demonstrate the ability to advocate for personal, family, and community health. (NASPE)

NL-ENG.K-12.7 Evaluating Data: Students. . .gather, evaluate, and synthesize data. . . (NCTE)

Obesity is the target

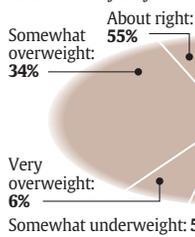


By Suzy Parker, USA TODAY

USA TODAY Snapshots®

Fatter than they think

The CDC found 56.4% of American adults overweight in 2000. Currently, Americans themselves say they are:



Source: Gallup Poll By Mike Spector and Marcy E. Mullins, USA TODAY

Don't blame the individual. Every part of society must join the fight against fat, experts say.

By Nanci Hellmich
USA TODAY

What if you lived in a world in which your boss handed you a bonus if you lost 20 pounds, or gave you extra time off if you took daily walking breaks? What if every time you bought a Twinkie or a soda you had to pay an extra tax, and the

Cover story

money paid for public awareness campaigns on better nutrition? What if your company offered free fruits and vegetables in the cafeteria and charged extra for chips, fries and other fatty foods?

These tactics might sound drastic to some, but they are the types of strategies needed to help the USA curb an epidemic of obesity, experts say.

AS SEEN IN USA TODAY LIFE SECTION, THURSDAY, MAY 8, 2003, 1-2D

Top weight-loss researchers and consumer advocates are calling for a war on obesity similar to the war on smoking. They say the nation's weight problem needs to be attacked on numerous fronts, as smoking has been for the past few decades.

The potential cost is billions of dollars, and opposition to many measures will be stiff, but the changes could save hundreds of thousands of lives, experts say.

Both tobacco and obesity are deadly. In the USA, cigarette smoking causes an estimated 440,000 deaths a year; an estimated 300,000 deaths a year are associated with extra weight and obesity. About 65% of Americans weigh too much, which puts them at a greater risk of heart disease, diabetes, arthritis and most types of cancer.

"At first glance, all these changes seem daunting, but 30 years ago no one could have imagined that smoking would be banned in most public places, that there would be very high taxes on cigarettes and that states would have successfully sued tobacco companies," says Kelly Brownell, director of the Yale University Center for Eating and Weight Disorders.

"Things changed with tobacco, and things are beginning to

change with food and activity," says Brownell, co-author of *Food Fight: The Inside Story of the Food Industry, America's Obesity Crisis & What We Can Do About It*. The book is due in September.

Changing the environment to fight obesity will be addressed today and Friday at a national food policy meeting in Washington, D.C., sponsored by the Consumer Federation of America.

The topic also was discussed at a recent meeting of the non-profit Partnership to Promote Healthy Eating and Active Living.

This country needs to make major changes involving all aspects of society— businesses, schools, institutions, the public and the government, some experts say.

Everybody needs to work together, says John Peters, head of Procter & Gamble's Nutrition Science Institute. "We're not going to solve the obesity problem if we're playing in different sandboxes."

Michael Thun with the American Cancer Society says: "We have to stop blaming the individual. Obesity is a result of the combination of the individual choices we make and the setting

Figuring your body mass index

Body mass index is a measure of weight in relation to height. Anyone with a BMI of 25 or more is considered overweight. People who have a body mass index of 30 or more (a BMI of 30 is roughly 30 pounds over a healthy weight) are considered obese. BMI has some limitations: It can overestimate body fat in people who are very muscular, and it can underestimate body fat in people who have lost muscle mass, such as the elderly.

- Healthy weight
- Overweight
- Obese

Source: National Institutes of Health

		Weight													
		120	130	140	150	160	170	180	190	200	210	220	230	240	250
Height	4'6"	29	31	34	36	39	41	43	46	48	51	53	56	58	60
	4'8"	27	29	31	34	36	38	40	43	45	47	49	52	54	56
	4'10"	25	27	29	31	34	36	38	40	42	44	46	48	50	52
	5'0"	23	25	27	29	31	33	35	37	39	41	43	45	47	49
	5'2"	22	24	26	27	29	31	33	35	37	38	40	42	44	46
	5'4"	21	22	24	26	28	29	31	33	34	36	38	40	41	43
	5'6"	19	21	23	24	26	27	29	31	32	34	36	37	39	40
	5'8"	18	20	21	23	24	26	27	29	30	32	34	35	37	38
	5'10"	17	19	20	22	23	24	26	27	29	30	32	33	35	36
	6'0"	16	18	19	20	22	23	24	26	27	28	30	31	33	34
	6'2"	15	17	18	19	21	22	23	24	26	27	28	30	31	32
	6'4"	15	16	17	18	20	21	22	23	24	26	27	28	29	30
	6'6"	14	15	16	17	19	20	21	22	23	24	25	27	28	29
	6'8"	13	14	15	17	18	19	20	21	22	23	24	25	26	28

AS SEEN IN USA TODAY LIFE SECTION, THURSDAY, MAY 8, 2003, 1-2D

Businesses, schools can help fight the fat

we live in. The measures that produce the greatest benefit are the ones that change the environment."

In 1955, 57% of men and 28% of women smoked cigarettes, he says. But after decades of education campaigns, higher taxes on cigarettes, limitations on where people are allowed to smoke and a shift in the social attitude about smoking, those numbers decreased dramatically. As of 2001, 25.5% of men and 21.5% of women smoked cigarettes, Thun says.

Encourage more walking

Much can be learned from the anti-smoking campaign, but that effort involved changing only one behavior. Controlling weight is a complex issue with lots of different behaviors.

People need to make specific changes, and then they need the right environment to make those changes, says James Hill, director of the Center for Human Nutrition at the University of Colorado Health Sciences Center in Denver.

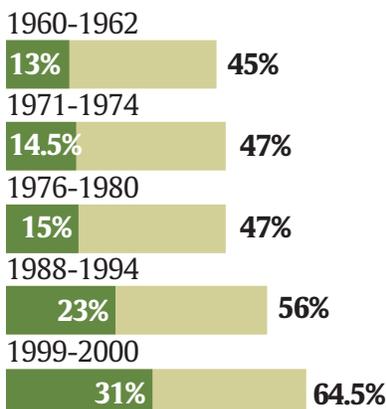
Hill and others launched the "Colorado on the Move" program last fall to get people to walk an additional 2,000 steps, or about one more mile, each day. They would like folks to do even more on a gradual basis. Residents of Colorado and several other states and cities are wearing electronic step counters to keep track of how much they move.

On average, people in the USA are gaining 1 to 2 pounds a year, and that

Living larger than ever

The percentage of adults ages 20-74 who are overweight or obese¹ has climbed over the years:

The percentage who are obese also has increased:



1 - Overweight is roughly 10 to 30 pounds over an ideal weight. Obesity is roughly 30 pounds over an ideal weight.
Source: National Health and Nutrition Examination Survey

By Robert W. Ahrens, USA TODAY

could be stopped if they walked those extra 2,000 steps, which burn roughly 100 calories, Hill says. "It would be a tremendous victory if we could get people to stop the weight gain."

Businesses, schools and other institutions could help. Hill is pushing for companies to provide places for people to walk and to encourage employees to take walking breaks. Companies also could offer incentives, such as extra days off or bonuses to people who meet their weight-loss, walking or healthy-eating goals, he says.

Teach portions

This country needs to launch a massive public education campaign around the "eat less" message, says Marion Nestle, chair of the department of nutrition and food studies at New York University. "There is no reason we can't have one, but we never have."

A vital aspect of that campaign would be to teach people about proper portion sizes. "It's something nobody understands," says Nestle, author of *Food Politics: How the Food Industry Influences Nutrition and Health*. People need roughly 2,200 to 2,500 calories a day, and they may eat 1,500 calories at lunch.

Many people say they don't have a fighting chance to control their weight in a society that serves cookies the size of saucers and muffins as big as softballs.

Servings are big because that's what people want, says Peters of P&G. "Here's the problem as I see it: Our American view of value right now is stuck in the 'more for less' domain. We went from little servings of french fries to now you get a shovelful of fries."

The food industry has an important role in reshaping the way Americans think about portions, he says. Peters believes companies could help people rethink the value question, possibly putting more emphasis on the experience of eating instead of on convenience and quantity. Restaurants and fast-food chains need to create places where the environment is delightful so people are willing to pay more money for smaller portions.

Start a junk-food tax

One idea that has been hotly debated for several years is called the Twinkie tax, junk-food tax or the food tax.

Michael Jacobson, executive director of the Center for Science in the Public Interest, a Washington, D.C.-based consumer group, Kelly Brownell of Yale and others have suggested adding a small tax on high-calorie foods such as sugary soft drinks, candy and some snack foods. Money from the tax ideally would be used to fund programs to improve diet and activity, possibly even for a public education campaign on eating less and reducing portion sizes. The taxes wouldn't be high enough to discourage consumption of those products.

AS SEEN IN USA TODAY LIFE SECTION, THURSDAY, MAY 8, 2003, 1-2D

"Some states already collect \$1 billion annually from such extra taxes on soft drinks and/or candy, but the money isn't earmarked for improving nutrition or activity," Jacobson says. "The money simply goes to roads, schools and other state projects."

But some take issue with this tax. Jim McCarthy of the Snack Food Association says it's difficult to determine which foods would be taxed, and it would be unfair to those that are. He says any tax would create the most financial hardship for the poor.

Sean McBride of the National Soft Drink Association agrees. "We're opposed to these taxes because it's unfair to single out our products."

Jacobson says an easier idea to implement might be to have cafeterias at government offices, businesses, hospitals and other places lower the price of salads, fruits and vegetables or even give them away — and make up the lost revenue by charging more for hot dogs, fries, burgers and other such foods.

Offer after-school games

Many people would like to see more supervised after-school games and sports for kids at parks, playgrounds, community centers and school lots.

It sounds like a good idea, but it's hard to put into practice. James Sallis, professor of psychology at San Diego State University, and colleagues tried getting after-school programs that included soccer, basketball and aerobic-dance classes at 12 California middle schools, but they had a difficult time getting funding to pay people or finding volunteers to supervise the activities.

Sallis says communities could make better use of park and recreation programs by having staff from those centers go to schools to offer activities at

the end of the day. "It would have the biggest effect on the poor and minority kids who are most at risk of obesity."

Other ideas being discussed include banning junk-food ads during kids' TV programs, offering healthier snacks and drinks in vending machines in schools, building more sidewalks and walking trails, giving insurance breaks to people who maintain a healthy weight, giving government vouchers to lower-income people so they can buy treadmills and other exercise equipment, and letting food stamps be worth more when they are used to buy fruits and vegetables.

"We are going to write the future history of the American diet now."

— Marion Nestle,
New York University

No one believes any of these changes will be easy to make.

"In the '80s, the public health community mustered the courage to say 'Tobacco is the enemy, and we're going to do something,'" says Jacobson of the Center for Science in the Public Interest.

Opposition mostly came from representatives in states where the tobacco industry was strong. But with food, politicians in every corner of the country are involved, Jacobson says. For that reason, he says, it may be easier to encourage physical activity than to try to discourage people from eating unhealthy foods.

Taking sides

Brownell of Yale University says that food companies and lobbying groups representing industries such as snacks,

soft drinks and sugar may resist many proposals. "On one side of the fence are public health crusaders, and on the other side of the fence are the food companies," he says. "And the question is, where does the government fit in? I think the government is more on the side of the food companies."

In the middle are people whose taste preferences and activity habits are deeply ingrained, he says.

"We're not on opposite sides," says Gene Grabowski of the Grocery Manufacturers of America, the trade group that represents brand-name food companies. "We want the same things. We want long-term solutions to the obesity problem. But we don't think banning foods or taxing them out of existence will really work. We believe the solution lies in providing good information to parents and their kids so they can make smart choices among the variety of foods that are available."

Obesity is a challenging problem, Jacobson says, because "of human nature — our indulgence in sloth and gluttony." He believes that Americans may just wait for a medication to be developed to help them lose weight.

Others are more optimistic. "Small changes will make huge differences," says Nestle of New York University. "Something as simple as putting lights in stairwells will encourage people to use them. Healthy snacks could be offered in vending machines."

This is an exciting time, Brownell says. "We are at this amazing, interesting crossroads. We are going to write the future history of the American diet now."

"We have the opportunity to be courageous and make changes that will benefit the entire nation, or we can accept the status quo and continue down the road to ruin."

AS SEEN IN USA TODAY NEWS SECTION, MONDAY, JUNE 16, 2003, 1-2A

Health guidelines: It's tough keeping up

Exercise, blood pressure, obesity: The standards keep changing. One weight warrior's lament: 'I don't pay attention anymore.' Such resignation concerns doctors.

By Nanci Hellmich and Rita Rubin
USA TODAY

Milwaukee mother Linda Blake-DeLeo'n, 33, has struggled for years to do what the federal government advised: exercise for at least 30 minutes a day. But when a new set of standards last fall raised the bar to an hour a day, she felt like hanging up her walking shoes and cracking open a gallon of ice cream.

She's also battling unsuccessfully to control her high blood pressure. So what happens? Medical experts set the country's blood pressure goals lower than ever.

She resents that these guidelines keep changing and that the bar for what constitutes good health keeps going up. "It's very discouraging," says Blake-DeLeo'n, who figures she's about 40 pounds overweight.

After a hard day selling classified ads and running four children around, all she wants to do in the evening is sit. "Some days I can't even find time to do 15 minutes of exercise, let alone an hour," she says. "I walk into my bedroom and see that treadmill and think, 'I can't do it today.'"

Like Blake-DeLeo'n, many Americans feel they're losing the numbers game when it comes to their bodies. They say it's too hard to make the lifestyle changes necessary to conform to the ever-stricter definition of healthy. Consider:

- ▶ Not long ago, a blood pressure of 130/85 was normal. But just last month, new guidelines from the government's National High Blood Pressure Education Program shoved 45 million Americans from the security of the normal range into a new "prehypertension" category. The new normal? A blood pressure below 120/80.

- ▶ The government has told people for several years to aim for at least 30 minutes of activity most days of the week. Then last fall, the National Academies' Institute of Medicine issued recommendations advising an hour of moderate activity a day for weight control. Only about a third of Americans even met the lower standard.

- ▶ People used to be either diabetic or not diabetic. Last year, though, new government guidelines labeled a chunk of seemingly healthy people as "prediabetic" and at an elevated risk of diabetes.

- ▶ Until 1998, a 5-foot-5 woman who weighed 164 pounds was considered normal. Then the official body mass index (weight/height) criteria changed, and all of a sudden she was considered overweight if she weighed 150 pounds. The guidelines labeled another 29 million people as overweight. Now, almost 65% of Americans weigh too much.

- ▶ Most people already find it difficult to eat three or more servings of vegetables and at least two of fruit a day. Now the government is revising its Food Guide Pyramid — new guidelines are due in 2005 — and some nutrition experts are pressuring health officials to recommend even more fruits and vegetables.

Listen to doctors and patients, and you quickly get the sense that these moving health targets are raising the level of tension between the preachers of good health and their congregations. But the stakes are clearly high: New estimates on obesity say the malady costs the nation \$93 billion in annual medical bills.

Guideline authors say new research — not a desire to torture people — prompted such revisions. Some folks, though, view these goals as impossible dreams.

Dave Barnett, 55, a sales productivity consultant and author in Dallas, is skeptical of the guidelines. "The longer I live and see these cycles and always-changing guidelines, the more cynical I get. I don't pay any attention anymore. How could you? Only the neurotic and obsessive-compulsive pay attention to this stuff."

It's just too hard to meet most of these standards, especially the exercise and weight ones, he says.

"You could run from Dallas to Detroit and not burn enough calories to maintain your weight," says Barnett, who is 40

Cover story

AS SEEN IN USA TODAY NEWS SECTION, MONDAY, JUNE 16, 2003, 1-2A

pounds overweight and describes himself as having a "healthy paunch."

He says meeting all these guidelines is impossible for many people, except perhaps the wealthy. "Look, Oprah has a personal trainer and personal cook. What have I got? Hamburger Helper."

Doctors say they're hearing things like this in their practices.

"People blame the messenger," says George Blackburn, associate director of the division of nutrition at Harvard Medical School. "They blame their parents, the doctors, the environment, fast-food restaurants, anybody but themselves."

The fact that the rules have changed over the years gives them extra fuel for their arguments. "They say, 'Can't you guys get the information straight? Here you go again changing a guideline. We just get to point X and you change the rules so now we're not healthy. It's your fault,'" he says.

Reach for the 'brass ring'

But Blackburn and other doctors say people have to get a grip on how important these things are if they want a long, healthy life, and they should start with small changes. "It doesn't matter how far up the brass ring is; you've got to get up on the merry-go-round and start reaching."

Some even wonder why we need these guidelines anyway. For a nation of chubby couch potatoes, we're living longer than ever. Over the past century, life expectancy jumped 30 years to age 74 for men and 80 for women, thanks to progress in treating diseases and public health measures to prevent them, such as clean water and childhood immunizations.

"If we weren't in the middle of this obesity epidemic, we'd be living even longer and suffering from fewer chronic diseases," says Tim Byers, a professor in the department of preventive medicine

at the University of Colorado School of Medicine in Denver. He is co-chair of the American Cancer Society's cancer prevention guideline committee.

Many people just ignore the rules of good health. "The general public doesn't pay as much attention to these guidelines as we think," Byers says. "We

probably isn't going to make much of a difference to patients who have been hovering around 160/90, says Vincenza Snow, an internist in Philadelphia.

On the other hand, Snow says, "you're going to see patients who have really been working hard. Maybe they've reached 130 over 80 and are feeling pretty good about it. And then this comes around and bursts their bubble."

In some cases, the doctor isn't going to argue. David Lubin, a family-practice physician in Tampa, says: "The longer you practice, the sooner you go 'Hmmp. I'm not going to change my ways.' I've been in practice 27 years. It's hard for me to change conceptually what I do."

But many doctors say they need guidelines to hold up as ideals to patients.

"As more evidence becomes available on what's necessary for good health, we have to deal with it," says Robert Bonow, president of the American Heart Association and chief of the division of cardiology at Northwestern University Medical School. "Goals are goals. Not everyone can achieve every one of them. These should be things people aim for. We are trying to steer toward a healthier society, and we realize we are swimming upstream."

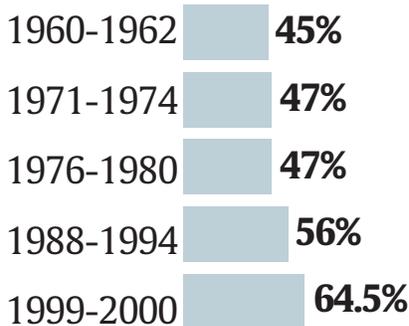
And many people, like Bill Paprota, 52, an attorney in Overland Park, Kan., say the standards serve a purpose. "They give us broad parameters, and you can gauge with your doctor where you fall. You want to know what the experts are thinking so you can go to your doctor and ask halfway decent questions. Knowledge is power."

But, says Paprota, who maintains a healthy weight and exercises regularly: "I hope they don't keep changing the rules so everyone has high blood pressure."

Thomas Stone, 50, of Cincinnati is a trim 6-foot-2, 170 pounds, but that didn't stop him from developing high blood pressure a few years ago. Stone says he

Tipping the scales

Adults 20 to 74 who are overweight or obese:



Source: National Health and Nutrition Examination Survey

By Julie Snider, USA TODAY

issue a guideline, and we think the world is going to change by next Tuesday, but it doesn't."

And some patients find doctors with a sympathetic ear. Take Steven Woolf, a primary-care doctor, who says he has to prioritize his patients' health problems.

"It's already a difficult enough challenge for patients to lose a few pounds, to adopt a regular exercise program," says Woolf, a professor of family practice at Virginia Commonwealth University and a member of the U.S. Preventive Services Task Force. "Those are things we were focusing on already. Calling it prehypertension doesn't make it any easier."

Calling a blood pressure of 120/80 prehypertension instead of normal

AS SEEN IN USA TODAY NEWS SECTION, MONDAY, JUNE 16, 2003, 1-2A

has controlled it fairly well with medication, but he acknowledges that the new hypertension guidelines have gotten him to think about exercising more.

"I think, ultimately, these numbers will force me to be more diligent," Stone says.

One day at a time

Blackburn advises patients to take one day at a time. He tells them: "Today is the day you have to have some control. Yesterday is history, and tomorrow is a mystery, but today you are this number, and you want to make it better."

He has patients aim for a 5% to 10% weight loss, since studies show that people who lose as little as 5% to 6% of their weight (only 10 to 12 pounds for someone who weighs 200 pounds) experience significant improvements in their blood pressure, cholesterol and blood-sugar levels. Then they can aim for another 5% and another 5% and so on, he says.

"With weight loss, 10% goes a long way toward looking good and feeling good; however, the key is keeping it off," Blackburn says. "There are no points for taking it off. The points are for keeping it off."

Many of the goals can be achieved with the same rather simple lifestyle changes, says Bonow of the heart association. For example, exercise and eating fruits and vegetables and less saturated fat can help control blood pressure, obesity and cholesterol and lower the risk of heart disease.

Patients are overwhelmed

General internist Linda Stern says many of her patients at the Philadelphia Veterans Affairs Medical Center have all but given up on their health. Their lives are too overwhelming to worry about anything else. Sometimes she asks patients to tell her about a typical day, and they break down in tears.

"People just have too much stress in their lives. We all have too many balls in the air," Stern says. "They are working hard. They come home exhausted."

Working with a "unique" population at the VA, however, Stern uses patients' service background to remind them how they felt when they were "in fighting shape" and lighter on their feet.

Blake-DeLeo'n, the working mother in Milwaukee, says the difficult part about exercising is forcing herself to get on the treadmill. "It's a mind thing. Once I get started, I like it."

Exercising is one of the hardest things to motivate people to do, and the recent change in numbers has discouraged people, says John Foreyt, director of the Behavioral Medicine Research Center at Baylor College of Medicine in Houston.

He has spent years studying motivation and believes the drive to be physically active is low among people in the USA. "They say, 'We don't have the time. We work two jobs, and we're dead tired when we get home.'"

It's hard to go home and put on your jogging clothes and go jogging, Foreyt says. It's easier to swing by a fast-food restaurant and watch TV or a movie. "Many people have simply given up."

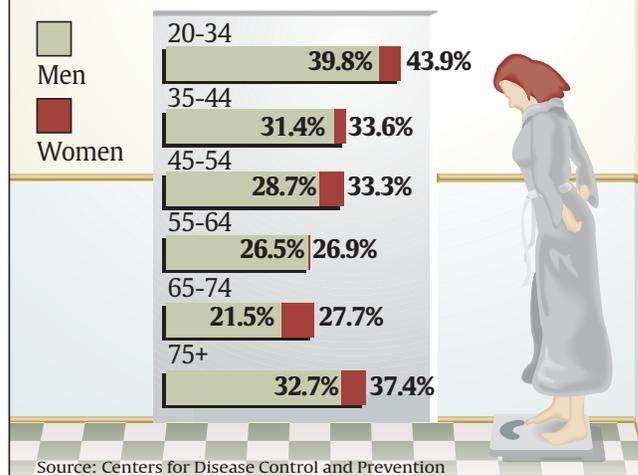
If there were one guideline Byers of the cancer society wishes people would take seriously, it is the original federal guideline to do at least 30 minutes of moderate activity most days of the week. It can be done in 10- to 15-minute increments. Any activity is better than none, and more is better than a little, he says.

"Of all the behaviors that are health related, physical activity is by far the most important. It's strongly protective for heart disease, diabetes and some types of cancer, and regular physical activity is essential for a lifetime of weight control."

USA TODAY Snapshots®

More women are at healthy weight

Percentage of men and women considered to be at a healthy weight, by age group:



By Robert W. Ahrens, USA TODAY

DISCUSSION QUESTIONS: Obesity is the target

Which of the ideas mentioned in the article do you think would be most effective at helping people maintain a healthy weight? How many deaths a year are associated with smoking? With obesity? How has the war on tobacco changed life for the typical American? Is obesity an individual or a societal problem? Why? How could businesses and schools help fight the battle of the bulge? What could the food industry do to encourage people to eat healthier?

STUDENT EXTENSION: Cause & Effect

Name: _____

Date: _____

DIRECTIONS: Fill in the chart below with one simple action that you, your family, school, etc. could take to help you maintain a healthy weight, stay in shape and/or make your world a healthier place to live. Finally, predict the impact

each action would have after it had been implemented for one year. Is your answer to the question '*Is obesity an individual or a societal problem?*' still the same? Does every part of society need to join the fight against fat? Explain.

	ACTION	IMPACT
Me		
Family		
School		
Neighborhood		
City		
State		
Nation		

DISCUSSION QUESTIONS: Health Guidelines: It's tough keeping up

Why have many Americans become discouraged with the federal guidelines for healthy living? According to experts, why are the standards being changed? Do you agree that it's "impossible" for many Americans to meet these guidelines? In your opinion, are such guidelines necessary? Why are doctors and other medical professionals in favor of them? According to Tim Byers, a professor at the University of Colorado School of Medicine, of all the health-related behaviors, which is most important? Why?

STUDENT EXTENSION: Food pyramid

Name: _____

Date: _____

DIRECTIONS: Imagine that you were asked to help experts update the Food Guide Pyramid. It is currently divided into six categories of recommended daily servings: 6-11 breads/cereals/pastas; 2-4 fruits; 3-5 vegetables; 2-3

meats/beans/nuts; 2-3 dairy; fats/oils/sweets-to be eaten sparingly. How would you modify or change the pyramid's categories and recommended servings? What types of foods should Americans be eating more of? Less of?

