

CALIFORNIA OBESITY PREVENTION PLAN
A Vision for Tomorrow, Strategic Actions for Today
Suggestions for CHDP Providers

The California Department of Health Services (CDHS), in response to a mandate by the legislature, created a strategic *Plan* to guide statewide response to the obesity crisis in the state. The *Plan* was made public in September.

There is no single cause or simple cure for this epidemic. The *Plan* addresses the issue based on three principal factors:

1. **California's Current Health Status** – Poor nutrition and inactivity are causing serious health problems – including type 2 diabetes, heart disease, stroke, and cancer – now, and if left unchecked will lead to worsening conditions in the future.
2. **Competing Environmental Forces** – Choices that lead to poor nutrition and inactivity are often more available, affordable, and convenient than healthier options.
3. **Fragmented, Uncoordinated Efforts** – Many actions are being taken by government, industry, voluntary, and philanthropic sectors, but without concordance.

The Summit on Health, Nutrition and Obesity, lead by Governor Schwarzenegger, spent a year developing the *California Obesity Prevention Plan*, as a part of the "Governor's Vision for a Healthy California." The *Plan* will serve as a guide for each sector of society to take part in creating the **shift to healthy eating and active living**. It identifies recommendations for action for all sectors to make sustainable changes in physical activity and food environments. The strategic actions are organized under these four goals:

Goal 1: Ensure state level leadership and coordination that reaches into communities across the state.

Goal 2: Create a statewide public education campaign that frames healthy eating and active living as California living.

Goal 3: Support local assistance grants and implement multi-sectional policy strategies to create healthy eating and active living community environments.

Goal 4: Create and implement a statewide tracking and evaluation system.

The *California Obesity Prevention Plan* is meant to serve as a springboard for government, business, voluntary and philanthropic sectors to convert fragmentation into collaboration and synergy, to carefully align and invest resources, and to create a shared response to a societal crisis. To read more about the *Plan* go to: www.dhs.ca.gov/CAObesityPrevention/.

Suggestions for CHDP Providers

The American Academy of Pediatrics, as well as the Institute of Medicine, recommend BMI screenings as an important first step in identifying “at risk” for overweight and overweight children and adolescents.

The **CHDP program recommends BMI screening and documentation on the PM 160 “Comments Section” for children age two years and older as a part of routine CHDP health assessments.** In addition, providers are encouraged to screen and counsel patients (and parents) about obesity, nutrition and exercise. It will be necessary for the entire family to make healthy lifestyle changes, not just the child.

These approaches from the AMA have been successful with patients:

- ✓ For a precise BMI on children age two years and older, perform the BMI calculation. Use the following link to find the tools you need to calculate the BMI. (http://www.cdc.gov/nccdphp/dnpa/growthcharts/bmi_tools.htm)
- ✓ Make it a priority to recognize patients who are overweight and convey to them, and the parent, that the condition is a predictor of health problems. Emphasize that poor diets and sedentary lifestyles are risk factors just like smoking.
- ✓ Approach obesity as any other chronic condition and put together a treatment plan. It can involve specific diet and exercise suggestions or can be a referral to a specialist, a hospital dietician or to a commercial weight-loss program.
- ✓ Focus patient attention on portion control and replacing dense, fatty foods with lower calorie, high fiber- and water-rich foods that allow them to eat enough to feel full. (www.mypyramid.gov)
- ✓ Encourage patients who are not active to establish the habit of walking five or ten minutes daily – and then build on progress. Encourage parents to be active with children.

For specific examples on **how to start a dialog with patients/parents about weight**, see the insert, *Communicating with Patients*, developed by medical staff at Kaiser Permanente.