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**Excerpts and Summary of the 33rd Hunger and Nutrition Forum
Wednesday, June 11, 2003 12:00PM –1:30PM
Trinity Lutheran Church, Fresno**

**Sponsored by Fresno Metro Ministry
Supported by**

**California Dept. of Health Services Cancer Prevention
and Nutrition Section, by USDA
MAZON: A Jewish Response to Hunger
California Food Policy Advocates**

The following is a summary of the reports made at the forum compiled by Phoua Moua and Carey Berend.

**Focus: Follow-up to Childhood Obesity
Stakeholders' Roundtable**

Edie Jessup: Welcome to the 33rd Community Hunger and Nutrition Forum, and today's forum is a follow up to the California Health Collaborative Roundtable on the epidemic of childhood obesity. The tables organized by child age group. We also have a table for families and one for cultural and health disparities issues. You're welcome to sit anywhere, but if you can find a seat at a table that is of interest to you or where you work that would be great.

My name is Edie Jessup, and I am the coordinator of the Fresno Metro Ministry Hunger and Nutrition Project, and my assistant is Phoua Moua.

Fresno Metro Ministry is a nonprofit organization working in social justice areas of healthcare access, access to food and nutrition, and cross-cultural diversity. You all have a packet in front of you, and there will be some more materials that will arrive here with Catherine Quinn which we will pass out to you.

The packet includes the agenda for the Forum today, the worksheet that we hope to work on today and can be left as an individual and group to head us toward a coordinated look at the environment of obesity in our children here in Fresno County. It is indeed an epidemic. We have a number of statistics and so forth that supports that. The problem from my perspective is that this is something that we have self-created, and not necessarily by intention but by ignoring issues that are really critical. The impact on children here in Fresno County and throughout the United States is huge. It hurts me to know that **kids are developing type 2 diabetes, which is adult onset diabetes, at very young ages and being diagnosed in our elementary schools with lifelong**

health issues because of poor nutrition, and I think that looking at obesity as poor nutrition is really critical. It's important that we educate our community that that is what it is. It hurts me that there are children out at Valley Children's Hospital that are having to have surgery because their bones are breaking at 8 years old because of the weight that they are carrying. This is not a light thing, and what has happened is our whole environment is contributing to this problem. Instead of being overwhelmed I am hoping that we're gathered together here with great interest and great care and are going to look for ways that we can begin to change that whole environment here in Fresno and create a place where our kids are healthy and growing up strong.

Also included in the packet are presentations that were made at the roundtable in case you were not there. There are statistics, information and recommendations in them. Our flier that we have been distributing for quite some time is in there, "Why Feeding Children is as Important as 1, 2, 3" to the point that children use food differently than adults do and we must address this and that core to this is that **the extent of poverty in Fresno County is a huge contributor to the obesity epidemic because of folks' access or non-access to food.** We've included a page of Internet resources on this topic and hope that you will be able to utilize that as you work with your constituencies. There is also a list of ongoing task groups that Fresno Metro Ministry is hosting. Please contact us if you are interested in any of those, particularly the Child Nutrition Task Group which I'm hoping will evolve into a steering committee to help keep in contact with all of you and make some plans for us as we move along.

There is a summary and evaluative comments from Hunger Action Day which was May 12. Fresno Metro Ministry took a busload of folks up to Sacramento to talk to their legislators about the issues of hunger that they are experiencing here in Fresno. It was very exciting this year, and I have put the comments for you to think of some of the issues that we are still addressing. Also, there is a packet that is a summary of our last forum which was on Community Food Assessment. This summer we are beginning with a pilot project with Barrios Unidos and the southeast area of Fresno. We're very excited about doing that and having some good information to take to our local legislators. There is a profile of poverty, hunger, and food assistance in Fresno County produced by California Food Advocates, and we are the regional office for California Food Policy Advocates and greatly utilize their research and statistic ability. There is a 2003 state legislative agenda on healthier school meals for our children included which will let you know what some of the legislation that is currently before the legislature. There is a clip for Juan Esparza's column this last week. There's a flier about the 4th of July celebration of our diversity event on the morning of the 4th of July. Hope you will attend. There is a blue sheet. If you could pull this out it should be the last sheet in your packet, which is an evaluation of today's event, and if you could please leave that on the table that would be wonderful.

Eddie Jessup: We have an item on the agenda just around Fresno County update in the current budget impact on food security, and that will just be a passing comment by me. We know that the County as well as the State are involved in serious budget cuts at this point in time, and I guess that I would say watch your paper. The impact, I'm

afraid, is a decrease in services for those that need it most. I would also encourage you to encourage your legislators to not only cut the budget but also to look at revenue so that a decrease in services doesn't happen and that those who are most vulnerable are not the ones that are impacted alone.

Is there anything from the County? This is the first month of the rollout of the new EBT card. There is some information in the back that Henry Lopez (Fresno County HSS-ET&A) has brought about EBT and where and when people can apply for food stamps. It's very helpful when they bring information forward as to what the issues are that they're facing and as a way for folks to get enrolled in food stamps, which is about the best nutrition program for low-income people that there is, and we hope that the rollout will mean that more people will begin to utilize food stamps here in Fresno County. **We still think that it's about two-thirds of the people eligible in Fresno County for food stamps are not utilizing food stamps**, and that means that they are missing a reliable way to put healthy food on their table. **If those two-thirds were enrolled in food stamps that would mean close to \$2 million calculated by the USDA number that would come in from the federal level to Fresno County to be spent with local retailers and local farmers.** It's really critical that we begin to look at this program with the high unemployment and the chronic need that is here in Fresno County.

Participant question: Where does the two-thirds figure come from?

Eddie Jessup: That is a really good question. It actually comes from the county, anecdotally from the county, and it's partly based on demographic poverty level. That is really the fundamental base of it.

Participant comment: The welfare department (**unintelligible**) somehow.

Eddie Jessup: Yeah. It really is primarily based on poverty rate information that you would be eligible if your income were, I mean, and that's a gross, because it's more complicated than that, but grossly if the number of people at the level eligible for food stamps were utilizing them that's what the two-thirds...

Participant comment: That's compared to the numbers that are on.

Eddie Jessup: That's right. Compared to the number that is on. And our county has attempted very hard to expand use of food stamps. They are woefully understaffed to actually accomplish enrolling everyone. This is a really key issue.

Participant comment: That's kind of an angle too because of all the staffing it's the one place in the county everything is paid by the feds.

Eddie Jessup: Well, that's also more complicated than you know. There are some real issues that the county has and they need public support for them because many things that have happened that would better the situation for folks applying for food stamps are not being funded by the state or the money is...it's a complicated issue. There is some

federal administrative money, but there are years where it has not caught up with what needs to happen in order to administer the program. So what has happened in our county in this budget issue has had to leave job slots that would deal with all of this unfilled.

Participant question: Is that one of the issues that we're on here?

Edie Jessup: Yeah, this is one of the issues that we are on, and on Thursday the 19th we have our monthly meeting with the County and anyone is welcome to come to that. The County updates us on what issues they are dealing with and we have an opportunity to talk to them about issues that we are seeing in terms of low-income clients, and that has been ongoing for a number of years and it's a very helpful meeting both ways. So being conscious of that is critical.

Now, I'd like to introduce **Catherine Quinn from the California Health Collaborative**. She has summary information here that resulted from the Obesity Conference.

Catherine Quinn: Thank you, Edie. Edie's passing around a written summary of the stakeholders' roundtable that was held on May 29th. Some of you were present for that event, some of you helped plan that event, and I don't want to take a lot of your valuable time together today to go through all of the details. Quickly, it was a spontaneous and informal activity started with some inter-organizational dialogue and then it was let's invite some more folks and we did. Did you know they're doing this and these guys are doing that? And it mushroomed into a wonderful, though very crowded, gathering of folks that were interested in, committed to, some long having been providing activity and resource in the areas relevant to childhood obesity and overweight. I have had the pleasure of reviewing the participant input forms and the evaluations of that event, and clearly the thing that was most valuable to all that were able to come was that opportunity to connect with all the different entities throughout Fresno County that are very interested in identifying what we can do either within our own organizations or, more exciting, what we can do collectively to move forward on this agenda. **This truly would not have happened if it hadn't been for the Latino Center for Medical Education and Research at UCSF Fresno, the University of California Cooperative Extension, Edie and Metro Ministry and the Hunger and Nutrition Project were instrumental, First Five was very involved in planning and also picked up the tab for lunch, and the Children's Institute at Fresno State joined us, and the Fresno County Interagency Council adopted this event as their first collective effort in responding to what they had identified as problematic in the Interagency Council report card that was just published.**

I can see in your packet that Edie has put together some data that very much, I think, communicates the recentness of the epidemic in obesity. I also want to point out something I learned from Edie and from **Sue Fenske. It's that poverty and food insecurity and obesity and overweight are not in any way mutually exclusive.** In fact, there can be a synergistic effect, and so don't for a moment, because I'm sure most of you are keenly aware of the challenge of poverty in our geography, especially

Fresno County, that in no way has insulated our population from the epidemic of obesity and overweight. The California Health Information Survey that I'm sure many of you are familiar with now gives us county-specific data relevant to the incidence of childhood obesity and overweight that we did not heretofore have except for the very observant collections of information on the part of school nurses and some other entities or WIC or Head Start has been pretty good at collecting data, but when you look at **Fresno County as an isolated geographical area 29.1% of our children in the ages of 0 to 11 are overweight, and truly as far as our adolescents 48.2% of our adolescents age 12 to 17 are classified as overweight**, and of course much smaller percentages are considered obese. I point this out because **the incidence of overweight in children in Fresno County is much higher than the national rate. In fact, it's double the national rate.** Some of this may be an outgrowth of data collection and timeliness of data. We're dealing with 1999 data for the national, and we're looking at 2001 data for Fresno County specific, so maybe if we had 2001 data we might not be leading the pack so tremendously. One can only hope.

Participant comment: (Unintelligible) we lead the whole county, though, double the childhood obesity.

Catherine Quinn: Right now the rate in Fresno County is double what the national rate is.

Participant comment: (Unintelligible) if the national rate is just behind it means the whole country is double.

Catherine Quinn: Yes. So I don't know whether I hope you're right or wrong.

Participant comment: Yeah, right. **(Unintelligible)** So it's not just United States. It's Japan and other countries.

Catherine Quinn: Oh, I didn't know that. I thought it was our own claim to fame.

Participant comment: No.

Catherine Quinn: Well, that, I think, underscores the thing that I have learned from some of you and that is the harsh reality that poverty, obesity, and overweight are not in any way mutually exclusive. Moving on, though, knowing that Edie's only giving me a few minutes...

Participant comment: Just one more comment. It's McDonald's 99-cent hamburger, you know, so **(unintelligible)**.

Participant comment: You made a reference to a newsletter or a Fresno....

Catherine Quinn: Data relevant to Fresno County?

Participant comment: Yeah.

Catherine Quinn: It's the California Health Information Survey, which is the largest gathering of health information on the population that basically has ever taken place in the world. They have this on almost all counties. Some counties the population is so much smaller that they cannot release some of the data on a county-by-county basis.

Edie Jessup: In your packet there is some of this information, and next month in July **Stefan Harvey, the assistant director for the Center for Public Health Advocacy** who has done childhood obesity research by assembly district so we can go to Sarah's office and tell her, and Raphael is here informing himself about this. It is by assembly, so we have some place to go with some recommendations we might have.

Participant question: And it's in the packet how to get a hold of California Health Information Survey?

Edie Jessup: Yeah, it should be in there. Yes.

Catherine Quinn: Because the bulk of the data is available to regular folks like us. There are some other levels of data that you can access through an approved research endeavor, but it's not all that difficult. You can pull up all sorts of interesting things on children and adults and adolescents county by county.

Continuing on that and then wanting to get to the closing points, our adolescents are, of course, also much higher than the national rates that are in the data that you have, **in Fresno County we're triple the national rate for the adolescents ages 11 to 17**, so this is something that don't for a moment think that we're in any way immune to. In addition to the summary memo that we prepared for our co-conveners to give you a sense of what happened on May 29th we also had, despite the crowd and despite the fact that it was a short agenda because we didn't realize that there were this many kindred spirits ready to get moving on the issues and challenges of childhood obesity, we still were able to seek out a little bit of breakout group dialogue, and as part of that process each one of the groups came up with a lot of suggestions for interest areas, areas of activities, some specific recommendations as far as activities, and we're still trying to distill that into something that we can carry forward for everyone to have a chance at reviewing this more thoughtfully than the time and crowd would allow on May 29th. So it would be inappropriate for me to come to you now and state that this or that was clearly ranked the highest priority by these 90 folks that gathered in a room for 75, but I will point out a few of the interest areas and then close by pointing out the input document that we'd love for you to address if you can.

Some of the areas that truly filtered to the top, but this is not an exclusive list, there are definitely was some consensus about the feasibility of establishing some kind of a communication network. The idea of a virtual or electronic network was discussed so folks could access calendars, on-line directories, and bibliography resource relevant to the Fresno County area. There was clearly

support relevant to the need for community-based participatory research, and literally the examples I'm giving you are at the bottom of page 3 of the memo that hopefully you've received. **And then with that was the research and evaluation on prevention and treatment for overweight and obesity, the development and dissemination of best practices.** There clearly was need for community-based activity, and the listing of ideas, suggestions, and interests was so lengthy that truly just to capture the spirit of it I've listed a few for your review. **Highlighted was connecting communities and neighborhoods and identifying focal points to engage more effectively in social marketing, things like family walks, having long-term commitments from our lay leaders, a food policy council, urban planning, giving us better environments for maintaining physical activity, and then, of course, the ever-present challenge to remain culturally responsive.** There were many flip-chart sheets of **the need to ensure that schools provide healthy foods and beverages on school campuses and at school events** and the examples are lengthier than I chose to list out. There was clearly an identified need to bring back or increase physical activity in the schools. **There were many iterations of the feasibility of collaborating amongst all school partners, and then very much in response to Edie's very dynamic presentation there was truly consensus about the value of policy advocates asking parents and kids what they need and listening to the answers.** So again, not wanting to misrepresent the folks that gathered on the 29th we did not have the parents and the children there to tell us what made sense and what didn't make sense, so it's only a first step.

What I'm leaving you with, and I will leave it to Edie as to how much of it you can squeeze into your breakout, is a form that at the very top asks if you would like to provide your name and, most importantly, your e-mail address. We will see to it that you receive further communications from the group about anything we may or may not do in the future, and that's yet to be decided by all the partners, not by our organization. Beneath that I've re-listed the 15 activities that were identified by the Surgeon General as national priorities for immediate action, and we'd love to see, as a way of thinning down into the realm of feasibility, if you were forced to choose only five which five do you think are most immediately needed in our geography in Fresno County. Behind that is truly a transcription of what everyone came up with on the 29th for your review, and these are things that folks already suggested so you might want to review that as you discuss and come up with suggestions today. Thank you.

Edie Jessup: Thank you so much for spearheading this and beginning to raise the awareness here in Fresno. I would like for each of you now, we're going to roll on for about a half hour to work at your tables. You should utilize the blue sheet in your packet as a guide toward looking at a continuum. We're really going to put these things together. If you would utilize whatever your table topic or table area is to think about issues of what we need to do here in Fresno with an emphasis on low-income folks. Many of us have the ability to go to the market and choose what we need to eat, and we are making choices. **There are people who do not have choices to make, and certainly our kids in school are offered what is on campus primarily to eat.** Those of you who are working with the family topic I think that this is critical and I'm certainly

glad there are folks from the food pantry sector here because that is directly where low-income people get their food, and we know that some people think that Fruit Loops isn't necessarily food and is maybe not the most nutritious thing that folks could be eating. So if you would look at that, if you would look beyond even schools themselves within your group. I know that **Susie Bartlett** here, works with Golden Valley Girl Scout Council and we have kids who are involved in voluntary organizations, and it's important what we are looking at what the situation is for them. Those for childcare, Head Start area, also have that cut out for them. How can we work with daycare arenas so that we can impact the kind of food and the kind of health and nutrition that kids are getting? And all of this has a price tag on it for folks. So if you'd really spend the time with your neighbors looking at these issues and making notes. If somebody could be the scribe for the group that would be helpful and we'll put them up and do a quick report back from here. I'm hoping that we can have a steering committee, perhaps, from each of these group areas that can begin to meet. My desire would be to change the environment in Fresno and change the access of the kinds of food folks have available for them to eat so they can be healthy. So let's do that. Introduce yourselves if you don't know the people at your table.

(Pause for group discussions.)

Table spokesperson: (Unintelligible) state legislature and government to sign it and also may include medical providers for children or their families and WIC programs.

Eddie Jessup: Thank you. Who's the reporter here? Okay. Please say your name.

Table spokesperson: My name is **Beth Aarondale**, and for 0 to 5 for the first one we wanted to know what people in the network, all of us, what each of us do so that we can direct questions. For example, a central location such as a website for those of us who are on the web where we can gather information about what other agencies do provide and refer questions to that agency or people who need help. Also, the representative from Assembly Member Reyes asked that agencies that are being cut financially need to contact their representative. He said that more often they get calls from people who complain about their taxes being raised, and he said if your budgets are being cut to call your representative. Second question, who needs to address this? We said agencies, schools, and parents. The third question, **priority actions, more education, to create a central area or resource of referral information, and local groups and agencies need to connect and share at a local level.**

Eddie Jessup: Thank you. That was the 0 to 5 and childcare. This is the high school group.

Table spokesperson: Hi. I'm **Phyllis Preciadio**. So ours is the adolescent group. What more do we need to know? We need some means to track legislation. We need for the schools to give us what their policies are in terms of nutrition and physical activity and what are they doing. We need to know how many vending machines and what their contents are for each high school. Who needs to address this? We need to include

such organizations as Project Lean, which looks at high school students and works with them to empower them in addressing this issue themselves. We need to target the school board, our assembly members, state legislators, community leaders, individuals. We need to get to the media. We need the media to start addressing this issue; T.V., radio, newspaper. **Priority actions, we need to look at it from both ends. We need to look at the families on one end. At the same time we need to be looking at legislators. We need to really target from both extremes who are the decision makers.** Basically, it's committed members, leaders from various organizations. **We need to have a multicultural, multi-organizational interagency committee that's developed and take this to the streets now.** I mean, this is something we know is a problem yesterday, and we really need to have some commitment. **We need to have people who say, yes, we're going to look at this and we're going to do something now, but we need to make sure we include everybody, that the families are as represented as the state legislators.**

Eddie Jessup: Thank you. Middle school?

Table spokesperson: Susan Bartlett. One of our first areas that we felt we didn't really have enough knowledge about was part of obesity is lack of physical movement, and we don't know the level of physical activity of both the elementary and middle schools. We felt part of the problem was that particularly by the time a child gets to junior high they've either personally categorized themselves as either athletic or non-athletic and move accordingly, and we need to somehow change that pattern of behavior. And part of it is due to the pattern and participation in competitive sports. We need to figure out a way that kids can be challenged more physically and develop the image or perception that everyone is capable athletically. And this affects their self-image, so this kind of goes into, kind of hits on all five. We felt the need to have a look at fundraising. Most fundraising for school-age children is selling candy of various sorts. We thought that maybe if you go back a couple of generations you find that civic organizations like Kiwanis Club or Rotary Club used to actually raise money for children's activities, and maybe if we could get them to do the fundraising, and not selling candy. And instead, not just put it into competitive sports but put it into activities that get the kids into motion that aren't necessarily competitive. The question of healthcare availability came up. We decided between pooling our information that it was available. The problem is there's not enough time for proper follow-up and that it's a family issue that needs to be addressed by the entire family, not just targeting the child. We need to have a campaign to maintain healthy weight, and it needs to be a positive campaign. **One idea was to have a speakers' bureau to go out to community groups, churches, schools, volunteer groups, political groups, cultural groups, and that the carryover to that would be when they have a dinner or an awards program that they kind of walk the talk and serve a well-balanced meal like we did today.** Also, sometimes seemingly unrelated activities will bring to the forefront problems that kids are having. For example, the blood bank might go to a high school and kids that were athletes were not allowed to give blood because if they had high blood pressure to that point they didn't know they had it, so if we just get

everyone in the community aware of the problem maybe we can all tackle it from different vantage points.

Edie Jessup: Thank you. Okay, this group is?

Table spokesperson: Okay, we're representing the cultural and ethnic groups. **We've come into the collaboration, the state and federal and local CBOs for education of obesity, to have more outreach programs and the collaboration to seek more awareness for children, and also for the parents involved, and we also have some research to be done in correlation of breastfeeding through the health worker.** Laurie, would you like to elaborate on this?

Laurie Misaki: What I had in mind with this one was I have data around breastfeeding rates for Fresno County that appear to look a lot like the obesity rates, but I do not have any research to say that there is a correlation.

Edie Jessup: That means that those children who were not breastfed correlates to the obesity rates, is what you're saying?

Laurie Misaki: Correct. Yes. There isn't anything that says because the children were not breastfed that's why they became or they were more at risk for obesity, but some general research out there says that those children who are breastfed are less likely to be obese as adults or have type 2 diabetes. But I don't have anything specifically for this county.

Table spokesperson: The other issues that we touched on are the minority issues, the cultural myths that carries, the different ethnic groups in terms of the factors for breastfeeding and not breastfeeding. It could be anywhere between **(end of side A)** from different cultures. I think by educating everybody about being on the same page in collaborating I think we'd be able to eliminate all that. **Education, I think, is number one for everybody to eliminate this issue, and also establish a guideline so as not to borderline being prejudiced to somebody that's obese through being born with it, through genetic that it's passed on through to their children.** So if we have guidelines to eliminate that by educating everybody, the parents, the kids and all these, I think that barriers would eliminate all that. **There also should be more collaboration between the CBOs and state. Everybody concerned should all be on the same page.**

Edie Jessup: Thank you.

Table spokesperson: Thank you, Edie. **Christina Ledesma** with First Five Fresno County. Briefly and to the point, what more do we need to know? I think really finding what are the behavioral and environmental beliefs and attitudes with regards to families' awareness level regarding obesity and its related health problems. Who needs to address this? By age, environment, really acknowledge the parents or the primary caretakers, acknowledge and respect their role as parents. Well, also having a support system in terms of the schools, medical providers, and the City Council policymakers.

As some of the other groups have stated, getting assembly members involved with supporting the family unit as a whole. What priority actions must be taken? Our group thought that perhaps education outreach, parent advocacy also through policy. By whom? **Of course, the primary decision makers would be the parents, but also supporting them through the areas that were just mentioned. Actually, the next steps that we'd agreed on were to involve the families as the parents' and families' informed discussions or meetings to discuss nutrition and the obesity and poverty issues that are faced by many families here in Fresno County, so consumer involvement.**

Edie Jessup: Thank you very much. Did we talk to everyone? I want to thank you. First of all, please leave your evaluations. If you are willing to be on a steering committee that will pursue some of the actions that we have talked about and particularly will help convene some of the stakeholders that are not here at the table, and by that I mean kids in the schools, having some focus groups and talking to them about what the issues are for them, convening parents and convening folks that are impacted, looking at the whole healthcare issue of this, but I think that we need that input from people as to what some of the barriers are for them and what some of their perceptions are.

The last thing that I would say is the one thing that is kind of hanging over all this is the whole social environment that is contributing to the fact that we no longer eat the way we should. My favorite quote from one of our forums previously from a Southeast Asian mother was, "The schools are teaching my children to eat poorly." Now, I'm not sure if it's the schools, but that is where kids are and where we have become so not thoughtful as to have pizza every day as an option for kids and that they have been taught to eat that through the media and through our society as to what we have access to is really something that we can do something about, and I hope that you will join me in pursuing this and we will be convening again. Please contact me if you want to be on the steering committee or leave me a note next to your name on the table. You can leave your notes on your table discussions. We will compile them and get them to you via your names on the list.

I want to thank you very much for this beginning that we have made now in two venues, one with the health collaborative work and now this, and I hope that we can move forward. Thank you, very much.