



**TO: Members of the Food Policy Council:
All interested parties**

DATE: August 13, 2019

RE: Food Policy Council Meeting Minutes

Attendance:

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1. Presentation by Helena M. Roura, Stony Brook University, graduate student. Please see Attachment I for summary

2. Feedback

- a. → Health class should started in Pre-k
 - i. → Teach kids how to cook
 - ii. -Limiting Home Ec. Departments

- b. → Does School district have a summer feeding program? -- YES
 - i. → Kids are only 16% of their meals at school
 - ii. → Every school district is reviewed by state and federal laws

- c. → USDA has Team Nutrition
 - i. -Which this district is a part of
 - ii. -Resources are tremendous
- d. → District Wellness Program should be reopened
- e. → Fuel up to play
 - i. -Benefit sports team can benefits
- f. → Peer Mentoring has a lot of Potential
 - i. -More effective to start a little bit younger
 - ii. -Younger kids are more open to discussing possibilities
- g. → New York Obesity has decreased
 - i. -The rate is dropping from kids
 - ii. -Obesity grants are difficult to obtain
- h. → USDA has changed the whole outlook the look at schools and policy
 - i. -School lunches have benefited
 - ii. -USDA is crucial component
 - iii. -School Lunch should not be separate budget
- i. → Address the food access
 - i. -Understand what people are eating
 - ii. -Helping people apply for SNAP benefits
 - iii. -Higher needs in PACA
 - iv. -Start out as a pilot
- j. → Garden
 - i. -Work on garden at Middle School
 - ii. -Teaches the kids nutrition (gives them access)
- k. → Hobart
 - i. -Backpack program -- blessings in a Backpack (K-5)
 - ii. -Island Harvest has one but is very expensive
 - 1. -Needs a substantial amount of money
 - 2. -1,200 kids

Attachment I

From: Helena M. Roura, Stony Brook University
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To: Suffolk County Food Policy Council

1. INTRODUCTION

1.1 Statement of the Problem

- The Obesity Pandemic is ubiquitous and persistent in the United States, and abroad.
- According to the Centers for Disease Control (CDC), nearly one in five school aged children and young people in the US has obesity.

1.2 Background Context/ Impacted Population

- Studies suggest that the citizens of Mastic, Mastic Beach and Shirley are in a health crisis (Northwell Health).
- William Floyd High School is in Mastic Beach and has been reported as having 42% of students classified as overweight or obese (ibid).

1.3 Scope of the Problem

- The scope and severity of the problem has resulted in this community suffering from “territorial stigmatization,” a term used to describe economically deprived areas further marginalized through social exclusion and discredited reputations. (Eichberg, p. xi-xii).
- Social Determinants of Health
- Food desert/ Food swamp

1.4 Objective

- It is my objective to institute a nutritional intervention in an academic setting at William Floyd High School and to develop sustainable remedies vis-à-vis improved policies for the disadvantaged youth living in the Mastic-Mastic Beach-Shirley community.

1.5 Significance

- The planned approach for my policy intervention is significant to public health because data suggests that school-based interventions hold the most promise as foundational archetypes for affecting real change for children and adolescents who are plagued with obesity and its comorbidities (Veugelers and Fitzgerald, 2011).

1.6 Hypothesis

- I would predict that the peer-mentored intervention group will have significant positive outcomes in relation to their weight, BMI and overall contentment.

1.7 Synthesis of Existing Research

- Studies suggest that social support is an effective protective factor for youth because it shields them from some of the negative consequences of obesity. (Puhl, Peterson & Leudicke, 2012 and Smith, Petosa & Shoben, 2018).
- Existing data suggests that the peer-mentoring approach builds and sustains social networks regarding support, trust, and a sense of psychological safety while modeling positive behaviors for younger children and adolescents (Smith et al., 2018).

1.8 What Has Been Done So Far

- Students in the William Floyd School District will enjoy free breakfast and lunch during the upcoming school year (WFSD, 2019).

1.9 Call to Action

- The adolescents of Mastic, Mastic Beach and Shirley are doomed to face their parents' poor health outcomes if we do not act and enrich scholastic policies.

2. POLICY

2.1 The Current Policy

- The NHES provide a framework for teachers, administrators, and policy makers in designing or selecting curricula, allocating instructional resources, and assessing student achievement and progress (CDC, 2019).

3. POLICY RECOMMENDATION:

3.1 Amend the current health education policy so that students in 9th grade at William Floyd High School can have an enhanced health class entitled: The Healthy and Fit for Life Program, with improved curricula, that meets every day of the school year.

3.2 Intervention Description

- The intervention is described as a scholastic nutritional education program for adolescents in grade 9 inhabiting the food desert/food swamp of the William Floyd School District which encompasses the towns of Mastic, Mastic Beach and Shirley.
- The intervention will be an enhanced health class aptly named *The Healthy and Fit for Life* program that meets every day of the school year and involves assorted activities for mentors to interact with adolescent participants including discussion-based lessons, and alternating days of experiential learning to include recipe ideas, meal-prep and physical activity.
- Team building
- Mentors will receive credit for community service, and elective credits toward graduation requirements.
- Possibility of an AP Public Health elective

3.3 Performance Metrics: Biometric Data

- The biometric data will be utilized to compute BMI
- Worksheets: Meal and exercise journals

3.4 Performance Metrics: Psychosocial Data

- Weekly topics by the way of social-support (daily questionnaires), self-regulation of physical activity, environmental determinants (family/ home/ neighborhood), and psychosocial determinants (emotional states), will be recorded.

3.5 Policy Alternative:

- If the William Floyd High School Board of Education does not approve this intervention to include meeting on each day of the school year, it is recommended that this Enhanced Health Class meets at least **three times a week**, Monday-Wednesday-Friday.
- This option may produce some, but not all, of the much-needed improvements that this intervention hopes to achieve for these at-risk adolescents.

3.6 Equity and Human Rights

- All participants will be treated equally; HIPPA, IRB

3.7 Funding

- The following agencies may be involved as regulatory or funding sources: The National Institute of Child Health and Human Development, The US Department of Education, NYS Dept of Education

3.8 Cost

- It is beyond the scope of this proposal to determine the cost of this intervention at this time. A meeting with the William Floyd School District Board of Education would set the stage for expenditures

4. LIMITATIONS

4.1 Self-Reported Data

4.2 Generalizability

4.3 Peer Pressure

4.4 Sample Size

5. RECOMMENDATION

- Amend the current health education policy so that students in 9th grade at William Floyd High School can have an enhanced health class entitled: **The Healthy and Fit for Life Program, with improved curricula, that meets every day of the school year.**

6. CONCLUSION

- With a goal in mind for the advancement of public health, this intervention is predicted to strengthen the existing body of knowledge.

7. STONY BROOK UNIVERSITY MPH PRACTICUM

Thank you