HOW CAN WE ENCOURAGE HEALTHY WEIGHTS AMONG AMERICA’S YOUTH?

A REPORT ON COMMUNITY FORUMS FOCUSED ON CHILD OBESITY IN NORTHERN COLORADO

CENTER FOR PUBLIC DELIBERATION

FORT COLLINS, CO: 11.17.2008
LOVELAND, CO: 10.16.2008
“HOW CAN WE ENCOURAGE HEALTHY WEIGHTS IN YOUTH”

CHILD OBESITY IN NORTHERN COLORADO

FORUM FACILITATORS: ELENA ULYANOVA, RENEE OCTAVIANO, ALICIA REHN

REPORT COMPLIED BY: ELENA ULYANOVA, RENEE OCTAVIANO, ALICIA REHN, & MARTÍN CARCASSON

PROJECT COMPLETED UNDER THE DIRECTION OF MARTÍN CARCASSON

TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>3</td>
</tr>
<tr>
<td>What is Deliberation?</td>
<td>3</td>
</tr>
<tr>
<td>Information on Participant’s Demographics</td>
<td>4</td>
</tr>
<tr>
<td>Overview of the Process</td>
<td>5</td>
</tr>
<tr>
<td>Information on Participant Demographics</td>
<td>5</td>
</tr>
<tr>
<td>Interpretation and Analysis of Data</td>
<td>5</td>
</tr>
<tr>
<td>Overall Summary</td>
<td>5</td>
</tr>
<tr>
<td>The Role of Schools</td>
<td>6</td>
</tr>
<tr>
<td>The Role of Parents</td>
<td>6</td>
</tr>
<tr>
<td>The Role of Children</td>
<td>6</td>
</tr>
<tr>
<td>The Role of the Community</td>
<td>7</td>
</tr>
<tr>
<td>Working Together</td>
<td>7</td>
</tr>
<tr>
<td>Key Barriers</td>
<td>7</td>
</tr>
<tr>
<td>Key Tensions to Consider</td>
<td>7</td>
</tr>
<tr>
<td>Suggestions for Moving Forward</td>
<td>8</td>
</tr>
<tr>
<td>Table 1: Key themes from Discussion Notes</td>
<td>9</td>
</tr>
<tr>
<td>Table 2: Summary of Survey Answers</td>
<td>10</td>
</tr>
<tr>
<td>Table 3: Summary of Prioritized Survey from Fort Collins Forum</td>
<td>10</td>
</tr>
<tr>
<td>Appendix: Raw Data from Surveys and Discussions</td>
<td>11</td>
</tr>
<tr>
<td>Participant Data for Post-Forum Surveys</td>
<td>11</td>
</tr>
<tr>
<td>Discussion Notes from Loveland Forum: Group A</td>
<td>13</td>
</tr>
<tr>
<td>Discussion Notes from Loveland Forum: Group B</td>
<td>15</td>
</tr>
<tr>
<td>Discussion Notes from Fort Collins Forum: Group A</td>
<td>18</td>
</tr>
<tr>
<td>Discussion Notes from Fort Collins Forum: Group B</td>
<td>19</td>
</tr>
</tbody>
</table>
INTRODUCTION

Childhood obesity is a problem that is increasingly prevalent in the United States. And while Colorado and Larimer County comparatively have lower rates than nationally, the trend is nonetheless troubling. The number of obese or overweight children has been steadily increasing over the last 20 years. According to the Colorado Physical Activity and Nutrition Coalition, more than one-third of premature deaths in Colorado are associated with obesity. Diseases such as high blood pressure, high cholesterol and type 2 diabetes may stem from obesity and contribute to these deaths. But where does the responsibility lie? Children, parents, schools, and communities struggle with such difficult choices. When parents are overworked, schools are underfunded, and government has many other pressing concerns, it is difficult to decide where to turn when wanting to implement change.

As part of a national project with partners in four other states, the Colorado State University Center for Public Deliberation (CPD) and The Coalition for Activity and Nutrition to Defeat Obesity (CanDo) sponsored two community forums in the fall of 2008 in Loveland and Fort Collins on the topic of childhood obesity. The purpose was to gather the community together to discuss this difficult issue in a respectful, productive environment, with a focus on considering possible actions at various levels to address the growing problem. The information from this report will be utilized by CanDo in their planning for both the Loveland and Fort Collins areas.

WHAT IS DELIBERATION?

Deliberation is an approach to politics in which citizens, not just experts or politicians, are deeply involved in community problem solving and public decision making. Working with trained facilitators who utilize a variety of deliberative techniques, citizens come together and consider relevant facts and values from multiple points of view; listen to one another in order to think critically about the various options before them and consider the underlying tensions and tough choices inherent to most public issues; and ultimately seek to come to some conclusion for action in the form of a reasoned public judgment.

The practice of deliberation is the cornerstone of democratic and community politics. Deliberation connects people, even those with conflicting interests, in a way that allows them to make decisions and act in regard to problems or challenging circumstances. Deliberation can also reveal new possibilities for action that individuals alone did not see before.

Particularly relevant to this topic, deliberation also supports a broad range of actions or solutions for community issues. Deliberation is critical to the notion of “democratic governance,” which assumes that problems necessitate government policy action, but are also beyond the power of government. Community issues such as growing obesity require action at multiple levels, including the individual, family, institutional, community, and policy levels. The broad-based discussions that deliberative events spark help communities discover and weigh all the various options before them.

The CPD, founded in 2006, is dedicated to enhancing local democracy through improved public communication and community problem-solving. The organization coordinates and hosts numerous events in Northern Colorado communities. Community issues forums focus on local and national issues, including various workshops tied to public participation and civic engagement. Student associates from Colorado State University are trained as non-partisan facilitators and conveners and focus on helping the public unite and address critical issues in a more effective manner. For more information on the CPD, contact Martin Carcasson at (970) 491-5628 or cpd@colostate.edu.
OVERVIEW OF THE PROCESS FOR THE CHILD OBESITY FORUMS

Both forums utilized a “National Issues Forum” style of deliberation (visit www.nifi.org for more information). Such forums gather participants in small groups of 20 or less led by an impartial facilitator for roughly a two hour discussion. As they arrived, participants were provided a copy of the NIF discussion guide Weighing the Options: How Can We Encourage Healthy Weights Among America’s Children? (additional copies are available, email the CPD at cpd@colostate.edu). After a brief introduction to the topic, participants introduced themselves and discussed their particular reasons for attending the forums. This “personal stake” session helps establish the importance of the topic and the many motivations people have concerning the issue. Participants were then led through discussions of three “approaches” to the issue as laid out in the discussion guide. The three approaches as explained in the issue book were as follows:

**APPROACH 1: Expect personal responsibility for fitness.**
The crux of the problem is that our children are not getting the education and supervision they need in order to be fit and healthy. Eating and exercise habits established during childhood have lifetime consequences. Adults need to play a stronger role in guiding young people to choose healthy foods and include enough physical activity in their daily lives. Parents and teachers need to be good role models and make healthy lifestyles a top priority.

**APPROACH 2: Invest in overall child well-being.**
The crux of the problem is that we focus too much on children’s weight as the primary concern, rather than as a symptom of other issues. For many, food is a source of comfort during difficult times, which can lead to a pattern of overeating as a way to cope with emotions. For others, the lack of affordable, healthy food is an ongoing cause of worry and poor health. The media contributes to the problem by promoting unattainable body images. Investing in the overall well-being of children is the best way to help them maintain healthy weights.

**APPROACH 3: Change our culture to encourage fitness.**
The crux of the problem is that our society bombards children and families with opportunities to eat more and do less. Fast foods, electronic pastimes, less gym time, and multi-car families have all contributed to the problem of obesity. We need to drastically change our home, school and community environments to restore a healthy balance between the calories we eat and the calories we burn. Advertisers need to become part of the solution by promoting healthier food options, especially to young audiences.

Each approach was discussed for about 20 minutes, with a facilitator leading and additional CPD students capturing the discussion on easel paper, which was posted on the walls as the conversation developed. The exact notes from each discussion are available at the end of this report. A final “reflections” session concluded the evening, as participants were asked their overall thoughts about moving forward. It was at this point of the discussion that we tried to zero in on some commonly held beliefs about childhood obesity. Also during this portion, we discussed which actions would most likely be successful in bringing about real change as well as the feasibility of those possible changes. To conclude, participants were given five dot stickers and asked to put those stickers next to the ideas/comments that they feel are most fundamentally important to the discussion. Participants also completed written surveys at the end of the forum to capture additional insights. The raw data from all the surveys are also included in this report.

The Loveland forum was held at Loveland High School on October 16th. The Fort Collins forum was part of a larger event, the CPD’s Fall 2008 Community Issues Forum, at the Fort Collins Hilton on November 17th. The latter event brought over 100 participants together, with many from a class
of CSU seniors. Those participants were given the option of four different topics, and 28 chose this topic for their forum. Once all people had chosen their topic, they preceded to smaller breakout rooms. Because of the large number of people that chose this topic, they were once again split in to two groups. The discussion followed the same format as the Loveland Forum, except that an additional survey was provided to the participants asking them to rank a list of potential actions that were developed from the Loveland forum.

---

**INFORMATION ON PARTICIPANT DEMOGRAPHICS**

Participants all completed a “post-survey” questionnaire that included demographic information. Eighteen participants attended the Loveland forum. All were female, mostly in the 27-44 age range. Many participants were in nutrition or nursing, others include: education, non-profit organizations, an engineer tech, a graduate student, psychology, stay at home mom, and marketing. An elementary school student attended as well. Twenty-six participants attended the Fort Collins forum. Twenty were CSU students, and six community members. Most were 26 or under, with three 27-44, two 45-64, and one over 65. 9 were male, and 11 female.

---

**INTERPRETATION AND ANALYSIS OF DATA**

*Overall Summary*

Overall, the forums revealed that most participants agreed that a significant problem existed. The two questions in the post-discussion survey that focused on the extent of the problem received the highest agreement overall. 94% of the participants either agreed or strongly agreed that “Young people are not getting the guidance they need to choose healthy foods and get enough exercise,” and 90% agreed or strongly agreed that “Too many children and teens in our community are overweight” (see Table 2). It was also clear that participants supported a broad cross-section of solutions, with a particular focus on the role of parents and the importance of schools. It seemed clear from the discussions that participants realized that there was no simple solution to the issue, thus a multi-pronged approach that involved schools, family, and community would be necessary. Certainly many agreed that schools have a heavy burden with this issue—including the three key issues of educating about nutrition and fitness, providing time and space for exercise and activity, and providing healthy meals—but many also agreed that schools cannot address the issue on their own. Parents and the community must also be involved, and they must find ways to help the schools with these tasks. Participants also identified a number of barriers or key concerns with addressing this issue, particularly regarding the need to help low-income families.

This report provides a wide variety of data from the two forums, including the raw data from the surveys as well as the discussion notes from the four breakout sessions. Table 1 presents an analysis of the some of the key themes from the discussion notes, sorted by the number of “dots” each theme garnered, as well as the number of different times a comment connected to that theme was expressed in one of the forums. Table 2 provides a summary of the answers to ten survey questions that were answered at the end of the discussions. Table 3 provides the data from an additional survey provided to the Fort Collins participants that asked them to rank order their top three choices from a list of nine actions. The appendix to this report then provides the full data on the surveys and the notes from all four breakout discussions.

This analysis provides some overall commentary on the data, focusing on several key aspects of the issue.
The Role of Schools

The role of schools in addressing this issue was clear from the discussions and surveys. Schools connect with this issue in many ways, particularly in three key areas: (1) educating students (and indirectly their families) about nutrition and health, (2) providing opportunities for safe and affordable fitness and activity, and (3) providing healthy food options throughout the day. In general, participants believed schools could do more in all three areas. That being said, participants also understood that schools are asked to do too much already, so parents and the community were expected to help schools with these tasks, and some participants expressed concern with the lack of funding schools receive to accomplish all they are asked to achieve.

When the Fort Collins participants were asked to prioritize potential actions from a list of nine, the top three choices all specifically involved actions for schools to perform. The top choice by far was for schools to “increase nutrition standards and mandate a daily P.E. requirement,” the second choice was to “increase schools communication with parents through newsletters, emails, health fairs, and parents’ groups,” and the third choice was, “increase schools responsibility by encouraging partnerships between schools, and public and private sectors that provide funding and opportunities for sports activities and other after-school programs.” When participants in both forums were asked if schools should spend more time on these issues even if that meant less time for other subjects, 80 percent agreed or strongly agreed to spend more time on educating about nutrition, and 78 percent agreed or strongly agreed to spend more time on fitness and activity (Table 2). The need for more time for PE or recess was the fourth most common theme of the discussions, and the general need for more education about nutrition was the second most common theme (Table 1).

One issue the participants certainly struggled with was the issue of food in schools. Many called for providing healthier options and reducing unhealthy options, but others had concerns that unless social norms are changed, adjusting those options will not have much of an impact. Students simply do not choose the healthy options, and if unhealthy options are not available at school, they will bring them with them or acquire them at nearby restaurants or convenience stores. Some expressed concern of the cost and waste of unused healthier options, which tend not to have as long of a shelf-life. Others expressed concern with the focus on unhealthy foods for celebrations and fundraising. It seems clear that both the supply and demand issues surrounding healthy and unhealthy food options at schools are issues that warrant further discussion, particularly among students themselves.

The Role of Parents

While schools received the most attention in terms of the survey asking participants to prioritize actions, parents were certainly a significant part of the conversation. Comments concerning the need for parents to play a key role were the most often cited and supported comments in the discussion (Table 1). In particular, participants supported the notion that parents need to be better educated about the issue in order to help their children. Participants more often discussed the need to educate and equip parents in this area, rather than the need for parents to simply take responsibility. As mentioned above, the need to increase communication from schools to parents on this issue was the second most preferred action (Table 2), and the notion that schools must educate parents about nutrition and obesity was the seventh most common theme in the discussions. Participants seemed to understand the difficulty parents face with this issue, particularly low-income parents, and thus were focused on helping them rather than blaming them.

The Role of Children

Much of the discussion focused on schools and parents, and less so on children themselves. Perhaps the strongest message focused on children was the need to make nutrition and fitness “fun”
or “cool.” One of our primary suggestions below would be to gather children together and focus on how to do exactly that. Overall, the message received from the forums was the need to provide children with more positive options (more nutritious food and safe, affordable fitness options) and less negative options (less junk food and less television/video games), as well as more motivation and incentives for them to choose the former over the latter.

**The Role of the Community**

Though less often expressed, several participants also emphasized the need for the community as a whole to be involved in this issue, particularly in terms of helping the schools and parents with their tasks. Suggestions were made to have volunteers or businesses sponsor after-school activities or special programs focused on fitness or nutrition. Helping low income families participate was a particularly strong concern. Restaurants were called upon to offer healthier options.

**Working Together**

An interesting recurring theme was the need for the different key players to work together and the inherent connections many expressed. Participants understood that lessons at school were not enough unless parents reinforced them at home, as well as that parents cannot do the job alone considering how much time children spend at school during the day. The need for schools to help educate and motivate parents was a strong theme, and the notion that children could educate their parents and improve household nutrition was also mentioned.

**Key Barriers**

Participants discussed a number of barriers or issues that make this issue difficult to address. The third most common theme from the discussions, for example, was concern with the ability for some to pay for activities or healthy food (Table 1). Many were concerned that low-income families have a much more difficult time with these issues, and that additional assistance is necessary. While some disputed the point, many assumed that healthy foods are more expensive and less convenient, which disproportionately may impact low income families. Sports and other active after schools activities also often carry a significant price tag that makes it difficult for some to participate. Many called for programs to help low income students participate fully and have more access to quality food.

Several participants also expressed concern with the ability of schools to address these issues based on lack of funding and pressure to perform on assessments that tend not to focus on nutrition or fitness (see the 8th theme on Table 1). Many felt that recess or PE were being cut back to do budget or time concerns, and that providing healthy food at school often has higher costs. In particular, some participants explained that providing healthy food at school was unrealistic because it did not last as long, and students simply do not chose those options.

Another recurring concern involved safety. When participants suggested children walk or ride their bike to school, and spend more time outside being active, others mentioned concerns with the safety of their children. This was not a particularly strong theme, however, as many participants felt that our community already provides safe and affordable recreational opportunities for youth (question 5, table 2), and remarked on our community’s many parks and trails.

**Key Tensions to Consider**

One of the primary outcomes of deliberation is the identification of key tensions or tough choices that emerge from the discussion. Difficult issues often have key underlying tensions that must be identified and directly addressed in order to move forward. The key tensions observed in the
discussions on childhood obesity focused around the interconnections between nutrition and fitness on one side, and convenience, time, safety, and cost on the other. Considering the growing economic problems, many families will be faced with increased difficulties concerning time and money. Many also believe that people often turn to comfort food in times of stress, which again is likely to increase due to the economy. The dominant assumption is that fitness and nutrition are more time and money intensive, and thus may be considered luxuries that are de-emphasized during difficult times. Others disagree with that assumption, however. Examining ways in which these tensions can be negotiated or transcended in thus an important issue moving forward. Many suggestions point to addressing these tensions, such as promoting healthy, inexpensive, and convenient foods and providing more safe and inexpensive activity options.

Another overriding tension that seems evident from the discussion but was not explicitly discussed to much of a degree was simply the optimal use of school time. On the survey, participants were asked if they would support additional time spent on nutrition and fitness “even if” that meant less time for other subjects. A majority agreed (80 and 78 percent, respectively). Participants were not pressed, however, on what subjects could be reduced to make room on the curriculum. The CPD has held separate forums focused on civic education and STEM education (Science, Technology, Engineering, and Math), and at those events participants also supported increased focus on those subjects. The tension, of course, lies in the fact that there is only a finite amount of time in a school day. If presented with specific choices among nutrition, fitness, literacy, civic education, STEM subjects, art, music, etc., what subjects take precedence? Are nutrition and fitness once again considered a luxury that doesn’t hold up to the others?

A last tension surfaced at times concerning self-esteem, as some participants were reluctant to put too much emphasis on weight, feeling it would only increase the pressure on unhealthy children and the negative attention they may receive from classmates. Targeting specific children or having a health component tied to grades or evaluations was met with some resistance. Of the ten questions provided on the survey, the question focused on requiring overweight children to spend more time in physical activity in school received the least support of all, with only 31% of the participants either strongly agreeing or agreeing with the idea (Table 2).

Suggestions for moving forward

First, we must emphasize that these two initial forums were only attended by a total of forty-four individuals. Many of the participants, particularly at the Loveland forum, were also connected to the issue through their work. As a result, the data presented here cannot be considered representative of the community. In particular, few K-12 students attended, with one elementary student attending the Loveland forum, and a couple high school students were a part of the Fort Collins forum. One primary suggestion moving forward, therefore, would be to take the ideas and themes identified here and “test” them to other, broader audiences, particularly youth. Hearing the youth struggle with these issues and examine potential ways to overcome the tensions would likely be very enlightening.

In terms of suggestions for actions, the data shows the most support for improvements in schools and for finding ways to help educate and motivate parents. We imagine schools are already doing many of the things suggested in the forums, with assistance from many community organizations, but nonetheless improvements could certainly occur. Identifying “best practices” among schools in the three key areas identified and helping to spread those practices would likely be beneficial. Lastly, finding innovative ways to communicate with parents the how and why of nutrition and fitness is perhaps the clearest suggestion to emerge from the forums.
### Table 1: Key Themes from Discussion Notes

<table>
<thead>
<tr>
<th>Key Themes</th>
<th>Mentions</th>
<th>Dots</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents must play a key role</td>
<td>16</td>
<td>27</td>
</tr>
<tr>
<td>Need more information/education on nutrition overall</td>
<td>10</td>
<td>19</td>
</tr>
<tr>
<td>Concern for impact on low income / ability to pay for activities or healthy food</td>
<td>16</td>
<td>16</td>
</tr>
<tr>
<td>School - increase PE/Recess</td>
<td>13</td>
<td>14</td>
</tr>
<tr>
<td>Need for increased activity overall</td>
<td>5</td>
<td>12</td>
</tr>
<tr>
<td>More after school activities</td>
<td>8</td>
<td>11</td>
</tr>
<tr>
<td>Schools should educate parents about nutrition &amp; obesity</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>School funding concerns (lack of funding for healthy options, PE, etc.)</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>School – need to start early</td>
<td>2</td>
<td>10</td>
</tr>
<tr>
<td>Make fitness/nutrition fun/cool</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>Need to balance school/home impact</td>
<td>7</td>
<td>6</td>
</tr>
<tr>
<td>Concerns with safety (v. outside activities)</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>School food/cafeteria improvements</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>Need for community/volunteers to be involved</td>
<td>9</td>
<td>5</td>
</tr>
<tr>
<td>Need to address media</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>Concern over unhealthy promotions (i.e. teachers selling candy</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Vs. Video games</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>Need to change culture/social norms overall</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>Use incentives/rewards</td>
<td>9</td>
<td>2</td>
</tr>
<tr>
<td>Need more healthy options for food</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>Concern over vending machines</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Concern over unhealthy celebrations</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Restaurants to blame</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Concern for impact on self-esteem</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>Need less unhealthy options for food</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>School - Increase nutrition as curricular matter</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Better health leads to better grades</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Vs. convenient stores</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Better health leads to less HC costs; Prevention &gt; treatment</td>
<td>2</td>
<td>0</td>
</tr>
</tbody>
</table>
### Table 2: Summary of Survey Answers

Survey Answers Sorted by the % of answers of either “Strongly Agree” or “Agree”

<table>
<thead>
<tr>
<th>Statement</th>
<th>% Agreement</th>
</tr>
</thead>
<tbody>
<tr>
<td>2) Young people are not getting the guidance they need to choose healthy foods and get enough exercise.</td>
<td>94</td>
</tr>
<tr>
<td>1) Too many children and teens in our community are overweight.</td>
<td>90</td>
</tr>
<tr>
<td>8) We should develop more programs to help educate parents about healthy diets.</td>
<td>90</td>
</tr>
<tr>
<td>7) We should spend more time in school for educating about nutrition, even if that means less time for other subjects.</td>
<td>80</td>
</tr>
<tr>
<td>6) We should spend more time in school for fitness and activity, even if that means less time for other subjects.</td>
<td>78</td>
</tr>
<tr>
<td>3) Overeating as a way to cope with emotions is a significant problem for many overweight children and teens.</td>
<td>68</td>
</tr>
<tr>
<td>12) We should increase funding for counseling and mental health programs in schools.</td>
<td>68</td>
</tr>
<tr>
<td>4) Hunger is still a problem among children and families in Colorado.</td>
<td>65</td>
</tr>
<tr>
<td>11) We should significantly increase funding for food stamps, school lunches, and summer meal programs to help lower-income residents have healthier diets.</td>
<td>64</td>
</tr>
<tr>
<td>5) Our community does not provide enough safe and affordable recreational opportunities for youth.</td>
<td>54</td>
</tr>
<tr>
<td>9) We should have a junk food tax</td>
<td>41</td>
</tr>
<tr>
<td>10) Overweight children should be required to spend more time in physical activity in school.</td>
<td>31</td>
</tr>
</tbody>
</table>

### Table 3: Summary of Prioritized Survey from Fort Collins Forum

<table>
<thead>
<tr>
<th>Prioritized Survey Item</th>
<th>1st Choice</th>
<th>2nd Choice</th>
<th>3rd Choice</th>
<th>“Points”</th>
</tr>
</thead>
<tbody>
<tr>
<td>3) Increase schools nutrition standards and mandate a daily P.E. requirement.</td>
<td>14</td>
<td>4</td>
<td>2</td>
<td>52</td>
</tr>
<tr>
<td>5) Increase schools communication with parents through newsletters, emails, health fairs, and parents’ groups</td>
<td>5</td>
<td>9</td>
<td>3</td>
<td>36</td>
</tr>
<tr>
<td>2) Increase schools responsibility by encouraging partnerships between schools, and public and private sectors that provide funding and opportunities for sports activities and other after-school programs</td>
<td>3</td>
<td>5</td>
<td>5</td>
<td>24</td>
</tr>
<tr>
<td>1) Increase school’s responsibility through nurses and health care personnel that provide risk screenings, physical exams, and physical activity guidelines</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>10</td>
</tr>
<tr>
<td>4) Increase food standards for programs funded through federal funds: enforce standards through more stringent licensing and certifications</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>10</td>
</tr>
<tr>
<td>9) Preventative Health Care: health insurers should provide for pediatric care, obesity screenings, health interventions, counseling, and nutrition.</td>
<td>0</td>
<td>3</td>
<td>4</td>
<td>10</td>
</tr>
<tr>
<td>6) Fund affordable parenting classes for the community through some sort of tax increase, such as the State Income Tax</td>
<td>2</td>
<td>0</td>
<td>3</td>
<td>9</td>
</tr>
<tr>
<td>7) Allow schools more independence, away from regulations, so they can explore their own solutions</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td>8) Obesity should be categorized as a disease by health insurance providers</td>
<td>1</td>
<td>0</td>
<td>2</td>
<td>5</td>
</tr>
</tbody>
</table>
APPENDIX: RAW DATA FROM SURVEYS AND DISCUSSIONS

PARTICIPANT DATA FROM POST-FORUM SURVEYS

1) Too many children and teens in our community are overweight.

<table>
<thead>
<tr>
<th></th>
<th>Loveland</th>
<th>Fort Collins</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>9 (50%)</td>
<td>9 (28%)</td>
<td>18 (36%)</td>
</tr>
<tr>
<td>Agree</td>
<td>9 (50%)</td>
<td>18 (56%)</td>
<td>27 (54%)</td>
</tr>
<tr>
<td>Not Sure/Depends</td>
<td>0 (0%)</td>
<td>3 (9%)</td>
<td>3 (6%)</td>
</tr>
<tr>
<td>Disagree</td>
<td>0 (0%)</td>
<td>2 (6%)</td>
<td>2 (4%)</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
</tr>
</tbody>
</table>

2) Young people are not getting the guidance they need to choose healthy foods and get enough exercise.

<table>
<thead>
<tr>
<th></th>
<th>Loveland</th>
<th>Fort Collins</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>11 (61%)</td>
<td>8 (25%)</td>
<td>19 (38%)</td>
</tr>
<tr>
<td>Agree</td>
<td>5 (28%)</td>
<td>23 (72%)</td>
<td>28 (56%)</td>
</tr>
<tr>
<td>Not Sure/Depends</td>
<td>2 (11%)</td>
<td>1 (3%)</td>
<td>3 (6%)</td>
</tr>
<tr>
<td>Disagree</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
</tr>
</tbody>
</table>

3) Overeating as a way to cope with emotions is a significant problem for many overweight children and teens.

<table>
<thead>
<tr>
<th></th>
<th>Loveland</th>
<th>Fort Collins</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>7 (39%)</td>
<td>5 (16%)</td>
<td>12 (24%)</td>
</tr>
<tr>
<td>Agree</td>
<td>7 (39%)</td>
<td>15 (47%)</td>
<td>22 (44%)</td>
</tr>
<tr>
<td>Not Sure/Depends</td>
<td>4 (22%)</td>
<td>9 (28%)</td>
<td>13 (26%)</td>
</tr>
<tr>
<td>Disagree</td>
<td>0 (0%)</td>
<td>3 (9%)</td>
<td>3 (6%)</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
</tr>
</tbody>
</table>

4) Hunger is still a problem among children and families in Colorado.

<table>
<thead>
<tr>
<th></th>
<th>Loveland</th>
<th>Fort Collins</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>6 (33%)</td>
<td>8 (22%)</td>
<td>14 (26%)</td>
</tr>
<tr>
<td>Agree</td>
<td>5 (28%)</td>
<td>16 (44%)</td>
<td>21 (39%)</td>
</tr>
<tr>
<td>Not Sure/Depends</td>
<td>5 (28%)</td>
<td>9 (25%)</td>
<td>14 (26%)</td>
</tr>
<tr>
<td>Disagree</td>
<td>1 (6%)</td>
<td>2 (6%)</td>
<td>3 (6%)</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>1 (6%)</td>
<td>1 (3%)</td>
<td>2 (4%)</td>
</tr>
</tbody>
</table>

5) Our community does not provide enough safe and affordable recreational opportunities for youth.

<table>
<thead>
<tr>
<th></th>
<th>Loveland</th>
<th>Fort Collins</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>8 (44%)</td>
<td>3 (9%)</td>
<td>11 (22%)</td>
</tr>
<tr>
<td>Agree</td>
<td>6 (33%)</td>
<td>10 (31%)</td>
<td>16 (32%)</td>
</tr>
<tr>
<td>Not Sure/Depends</td>
<td>3 (17%)</td>
<td>11 (34%)</td>
<td>14 (28%)</td>
</tr>
<tr>
<td>Disagree</td>
<td>1 (6%)</td>
<td>6 (19%)</td>
<td>7 (14%)</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>0 (0%)</td>
<td>2 (6%)</td>
<td>2 (4%)</td>
</tr>
</tbody>
</table>
6) We should spend more time in school for fitness and activity, even if that means less time for other subjects.

<table>
<thead>
<tr>
<th></th>
<th>Loveland</th>
<th>Fort Collins</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>12 (67%)</td>
<td>13 (42%)</td>
<td>25 (51%)</td>
</tr>
<tr>
<td>Agree</td>
<td>3 (17%)</td>
<td>10 (32%)</td>
<td>13 (27%)</td>
</tr>
<tr>
<td>Not Sure/Depends</td>
<td>3 (17%)</td>
<td>7 (23%)</td>
<td>10 (20%)</td>
</tr>
<tr>
<td>Disagree</td>
<td>0 (0%)</td>
<td>1 (3%)</td>
<td>1 (2%)</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
</tr>
</tbody>
</table>

7) We should spend more time in school for educating about nutrition, even if that means less time for other subjects.

<table>
<thead>
<tr>
<th></th>
<th>Loveland</th>
<th>Fort Collins</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>11 (61%)</td>
<td>8 (26%)</td>
<td>19 (39%)</td>
</tr>
<tr>
<td>Agree</td>
<td>4 (22%)</td>
<td>16 (52%)</td>
<td>20 (41%)</td>
</tr>
<tr>
<td>Not Sure/Depends</td>
<td>3 (17%)</td>
<td>5 (16%)</td>
<td>8 (16%)</td>
</tr>
<tr>
<td>Disagree</td>
<td>0 (0%)</td>
<td>2 (6%)</td>
<td>2 (4%)</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
</tr>
</tbody>
</table>

8) We should develop more programs to help educate parents about healthy diets.

<table>
<thead>
<tr>
<th></th>
<th>Loveland</th>
<th>Fort Collins</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>12 (67%)</td>
<td>17 (59%)</td>
<td>29 (62%)</td>
</tr>
<tr>
<td>Agree</td>
<td>6 (33%)</td>
<td>7 (24%)</td>
<td>13 (28%)</td>
</tr>
<tr>
<td>Not Sure/Depends</td>
<td>0 (0%)</td>
<td>3 (10%)</td>
<td>3 (6%)</td>
</tr>
<tr>
<td>Disagree</td>
<td>0 (0%)</td>
<td>2 (7%)</td>
<td>2 (4%)</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
</tr>
</tbody>
</table>

9) We should have a junk food tax

<table>
<thead>
<tr>
<th></th>
<th>Loveland</th>
<th>Fort Collins</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>5 (30%)</td>
<td>7 (26%)</td>
<td>12 (27%)</td>
</tr>
<tr>
<td>Agree</td>
<td>2 (12%)</td>
<td>4 (15%)</td>
<td>6 (14%)</td>
</tr>
<tr>
<td>Not Sure/Depends</td>
<td>5 (30%)</td>
<td>7 (26%)</td>
<td>12 (27%)</td>
</tr>
<tr>
<td>Disagree</td>
<td>3 (18%)</td>
<td>6 (22%)</td>
<td>9 (20%)</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>2 (12%)</td>
<td>3 (11%)</td>
<td>5 (11%)</td>
</tr>
</tbody>
</table>

10) Overweight children should be required to spend more time in physical activity in school.

<table>
<thead>
<tr>
<th></th>
<th>Loveland</th>
<th>Fort Collins</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>4 (22%)</td>
<td>1 (3%)</td>
<td>5 (10%)</td>
</tr>
<tr>
<td>Agree</td>
<td>4 (22%)</td>
<td>6 (20%)</td>
<td>10 (21%)</td>
</tr>
<tr>
<td>Not Sure/Depends</td>
<td>0 (0%)</td>
<td>7 (23%)</td>
<td>7 (15%)</td>
</tr>
<tr>
<td>Disagree</td>
<td>5 (28%)</td>
<td>11 (37%)</td>
<td>16 (33%)</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>5 (28%)</td>
<td>5 (17%)</td>
<td>10 (21%)</td>
</tr>
</tbody>
</table>

11) We should significantly increase funding for food stamps, school lunches, and summer meal programs to help lower-income residents have healthier diets.

<table>
<thead>
<tr>
<th></th>
<th>Loveland</th>
<th>Fort Collins</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>6 (33%)</td>
<td>9 (29%)</td>
<td>15 (31%)</td>
</tr>
<tr>
<td>Agree</td>
<td>7 (39%)</td>
<td>9 (29%)</td>
<td>16 (33%)</td>
</tr>
<tr>
<td>Not Sure/Depends</td>
<td>1 (6%)</td>
<td>11 (35%)</td>
<td>12 (24%)</td>
</tr>
<tr>
<td>Disagree</td>
<td>3 (17%)</td>
<td>1 (3%)</td>
<td>4 (8%)</td>
</tr>
</tbody>
</table>
12) We should increase funding for counseling and mental health programs in schools.

<table>
<thead>
<tr>
<th></th>
<th>Loveland</th>
<th>Fort Collins</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>6 (33%)</td>
<td>10 (31%)</td>
<td>16 (32%)</td>
</tr>
<tr>
<td>Agree</td>
<td>7 (39%)</td>
<td>11 (34%)</td>
<td>18 (36%)</td>
</tr>
<tr>
<td>Not Sure/Depends</td>
<td>5 (28%)</td>
<td>10 (31%)</td>
<td>15 (30%)</td>
</tr>
<tr>
<td>Disagree</td>
<td>0 (0%)</td>
<td>1 (3%)</td>
<td>1 (2%)</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
</tr>
</tbody>
</table>

DISCUSSION NOTES GROUP A

10.16.2008 LOVELAND, CO

*(numbers in parenthesis indicates the value/agreement dots each statement received)*

**DISCUSSION NOTES FROM APPROACH 1:**

1. Need for positive terms
2. Be active with children
3. Need for kids to take responsibility
4. Benefits of walking but people continue to drive
5. Safety is an issue and creates a need for community building
6. “Family Challenge” – a contest among a family- like TV’s “The Biggest Loser” (1)
7. Rewards and punishments – feasibility?
8. Singing kids out – self esteem vs. responsibility
9. Barriers (1 dot): distance to school; socioeconomic; safety of walking; time; comfort
10. Walking school-bus – enlisting the community to work together (2)
11. “Controlling Parents” as a concern – just make healthy choices available
12. Mixed messages – unhealthy snacks/ rewards (1)
13. Little time to eat at school – salad bar as alternative
14. “Sometimes” foods should not be lunch staples – regulation
15. Variations between home and school – need for food education
16. Education about “how” we eat - “sometimes food” regulation

**DISCUSSION NOTES FROM APPROACH 2:**

**INVEST IN OVERALL CHILD WELL-BEING**

1. May high risk kids be targeted – confidentiality?
2. Educate parents to address their attitudes and behaviors
3. Community gardens – leads to kids being invested in foods (1)
5. Impact of media on self esteem and body image
6. Kids **DO** try – but leads to frustration and peer issues
7. Emphasize “health” over “weight” (1)
8. “Health” can be more inclusive than just “weight”
9. Dietician – Nutrition in school curriculum
10. Finding successful models are already out there (1)
11. Where to target? Pre-K, Parents?
12. Overweight but undernourished kids and adults
13. Families rarely eat together – need to encourage this
14. Role of snack time
15. Lower income families and the unavailability of healthy options
16. Opportunities to educate children and parents (4)
17. Education, gardening and the appreciation of healthy options
18. Community gardening programs
19. Field trips, Farmer’s Markets
20. S.H.A.R.E. programs – churches, community
21. Society/media – unreasonable expectations
22. Emphasis on health NOT on the problem
23. What is healthy? How do we define?
24. Overweight but undernourished
25. Numbers and states spur awareness
26. Free programs available for teachers to use
27. How can we catch the issue early? Target parents at the hospital level and educate from the beginning
28. Issue of addressing the parents of young children – self esteem of parents at hand
29. Families lack “eating time” together – create “around the table”
30. Media- making the issue more of a public campaign
31. Federal restrictions continue the problem, ex: snacks must be given after 3 hrs. in preschool

**DISCUSSION NOTES FROM APPROACH 3:**

**CHANGE OUR CULTURE TO ENCOURAGE FITNESS**

1. Schools attempting to address: for example: taking soda out of schools
2. P.E. and recess left behind in place of other things
3. How do we get P.E. back? Fit it in, possibly by starting early (1)
4. After school sports (4 dots)
   a. more affordable
   b. wide variety
   c. older, high school kids can volunteer – senior program involvement
   d. can be simple
   e. liability? Solve through parent forms
5. Do kids learn serving sizes? Nutrition classes
6. Funding use money from vending machines to replace with healthy choices
7. Need for “culture change” teachers selling soda, replace with healthy choices (2)
8. Lack of P.E. in connection with funding may interfere with curriculum
9. Lack of involvement from students with age progression
10. Pressure for teachers to meet the standards of “No child left behind”
11. Academic performance in connection with proper nutrition
12. Need for the availability of larger markets with a variety of food options in smaller areas
13. Discretionary funds
14. Parent education – Lunch program
15. Implementation of organized programs Activity based (1)
16. Not “one size fits all” when considering likeability of activities
17. Healthy snacks
18. Availability of safe places to play – opening up the gym for kids (1)
19. “Kids Café” – good or bad? Kids may be eating too much
20. P.E. being left out- healthy activity time is lacking
21. Physical activity can also take place in the classroom
22. Less competitive after school sports broaden range of participants
23. ...Again, liability/safety issues with expansion of programs (time issues also)
24. Consumption through vending machines can be altered by product options, i.e. Vitamin Water
25. What really limits physical education? Funding?
26. Student attitudes may push against healthy lifestyles in school
27. Convenience stores too conveniently located to schools
28. Planning health foods with kid activities doesn’t inhibit their choice of activity.
29. Video games can involve exercise with new technology.

DISCUSSION NOTES REFLECTIONS:
1. Walking school-bus
2. Approach 3: Culture based change
3. Incorporation of fitness and nutrition
4. Family focus – work together
5. Balance – parents and teachers, consider whether it is advantageous to engage in a conversation
6. School nurses - information sent home to parents
7. Problems of confidentiality cut off action
8. Implementation at a city level
9. Diabetes – occurring more frequently and at a younger age
10. Educating students
11. Action groups – support and sustain
12. Desire for children to be involved in healthy alternatives – ex: offering kids a gold star (non-food based incentive) if they walk to school. Then other kids will want to join- domino effect
13. The “Walking School Bus” is healthy and safe
14. A balance between nutrition and fitness
15. Health data can be collected and given to parents
16. Legal system roadblocks outside help form coming into schools
17. Not just a school problem but a problem for the larger community
18. An issue for child and parent and community
19. Education is key
20. Kids can influence parents food choices
21. Starts small – support and sustain
22. Trend towards kids’ greater awareness of health/environment
23. Incentives are necessary

CHILD OBESITY DISCUSSION NOTES GROUP B
10.16.2008 LOVELAND, CO

DISCUSSION NOTES FROM APPROACH 1:
EXPECT PERSONAL RESPONSIBILITY FOR FITNESS
1. Negative Connotations
2. Under privileged have disadvantage
   - Community should help provide
3. Mix the of the three
   - But, students are in school for most of the day (1)
4. Make curriculum more physically active
5. School programs to encourage but parents need to talk to their kids as well (5)
   - Bike to school week had good turn out
- Make it fun!
6. Need to make it easier for schools
7. Must change social norms as well as individual behavior
8. Need expectations for schools – but must be balanced with home
9. Organizations need to help under-resourced kids who are traditionally more overweight (2)
10. Children must find activity fun – and have adult encouragement, community must create opportunities
11. Concern over activity fees and ability to pay
12. Support school policy change, increase physical activity (3)
13. Schools and parents working together, too much burden on teachers (3)
14. Weight/BMI on report cards
   - competition between kids positive?
   - helpful to parents
15. Improved test scores correlated to healthier environment

**DISCUSSION NOTES FROM APPROACH 2: INVEST IN OVERALL CHILD WELL-BEING**
1. Concern with self-image and eating disorders associated with increased conservation
2. Economic issues might override health/exercise priorities (4)
   - Should we increase funding?
   - Specific nutrition standards
3. Currently, unhealthy cafeteria foods offered
4. Education nutrition → real life, healthy choices (1)
5. Even with healthy options (for food) no one chooses it
   - limit choices to only healthy ones (1)
6. More hands on education, ie. School farms (2)
7. Beyond lunch: vending machines, etc. (1)
8. “Competitive Foods”
   - Need to Focus on Social Norm
   - Celebrations
9. School can consolidate unhealthy celebrations (1)
10. Too many loopholes in USDA regulations
    - Vending Machine Placement
11. Encourage bring a lunch
    - Responsibilities
    - Educating Parents
12. Food Stamps- People who are eligible are not participating
13. Food Bank
    - Available but not taking advantage of it
    - User Friendly/Comfort Food
14. Don’t know what is really healthy
    - Time issues

**DISCUSSION NOTES FROM APPROACH 3: CHANGE OUR CULTURE TO ENCOURAGE FITNESS**
1. Restaurants need to make better choices (1)
2. Better Choices at convenience stores
   - Kids stop before school
3. Encourage School programs such as bike library (1)
4. Find a way to make eating healthy “cool” (1)
   - Parents teach
5. What as our community done?
6. Make food fun for kids (1)
   - Have kids help cook
7. Family Focused farmers market (2)
8. Great community bike trails and recreation facilities
9. After school activities must be both fun and affordable (2)
10. Create base camp after school
11. HeadStart soccer program
    - Non-profit involvement (1)
    - expand these programs, increase funds (1)
12. Local business Involvement (1)
    - Businesses can volunteer employee work time to children’s programs
    - Fee waivers for school sports
13. Barriers to scholarships
14. Ask government to make kids sports free
15. School board or voluntary
16. Not enough state funding for education (1)
17. Children involved in sports get higher grades
18. State requires only 30 minutes per week
19. Teachers do not have P.E. background
20. More movement involved in education
21. Not about the money for educators

**DISCUSSION NOTES FROM REFLECTIONS:**

1. Trade-offs
   - Literacy etc
2. Focus on teaching kids how to learn
3. Not more important, but equally important
4. Ways to change behavior
   - Educate
   - Policy
   - Marketing
   - Need to put the emphasis on why people exercise
5. Culturally re-prioritize to make being healthy a priority (3)
6. Need to have a living wage
   - Diverse economy
7. Materialistic culture needs to be simplified
   - This will naturally lead to being healthier
8. Less convenience food
   - Need to make more time for food
9. Fruits and Veggies are the real convenience food!
10. Willing to support community
11. Multi-factorial approach : schools, family, government etc. (3)
12. Schools could support/promote kids well-being
    - Ex. bike/walk to school day (kids receive OJ and snack if they do)
13. Help kids make healthy choices
14. Parent-Organization partnerships
15. Must take into consideration underprivileged children (1)
16. Make physical education a priority
17. Preventative cost is lower than funding a solution to a problem that has already occurred (1)
18. Non-traditional community member involvement
19. Education children/community about consequences of unhealthy lifestyle choices
20. Ask kids what they want to do (1)
21. Make exercise fun!
22. Encourage volunteers to host recreational activities
23. Parental responsibility
24. Show restaurants how to market healthy options
25. Find people’s motivation for eating unhealthy

CHILD OBESITY DISCUSSION NOTES GROUP A
11.17.2008 FORT COLLINS, CO

*(number indicates the amount of value/agreement dots each statement received)*

**DISCUSSION NOTES FROM APPROACH 1:
EXPECT PERSONAL RESPONSIBILITY FOR FITNESS**

**Approach 1 Appreciations**
- Personal responsibility is important (biking, walking, active lifestyle) (7)
- Emphasis should be on children
- Public and Private entities should be involved
- Encourage responsibility at a young age, in schools, etc. (3)
- Incentive programs in schools (2)
- Teacher involvement (1)
- Generate competitive sports options for more children (2)
- Healthy Kids Program (4)
- Parents’ responsibility is key element (7)
- Buy things to help teach good habits, ie: avoiding video games, etc. (2)
- Parents need to take responsibility, lack of time not $ (4)
  - The State/Government have no right to say what individuals should do with my body (1)
  - Government can provide information

**Approach 1 Concerns**
- Parents may not have the time/money/knowledge to help the problem
- Difficult to teach good “habits” when the parents may not know they good habits themselves
- Might be more difficult for the “working poor” to afford the “good” food or after school sports, etc.
- Personal responsibility AFTER education

**DISCUSSION NOTES FROM APPROACH 2:
INVEST IN OVERALL CHILD WELL-BEING**

**Approach 2 Appreciations**
- Parents should be made aware of existing social/community organizations (4)
- Government involvement won’t solve problem—education can help (6)
- P.E. was a great experience—influence on tech.
- Physical activity will increase students’ concentration, and good grades
- Low income students may only have P.E for fun

**Approach 2 Concerns**
- labeling could be detrimental to the child’s health
- Not “This is you will do, but let’s deliberate on what’s beneficial to each school/ district/community
- Limited social role; more within the family structure
physical activity
• Responsibility to decide how to approach this issue should be done at a district/school level.
• Schools should send information to parents (and provide low cost options) (4)
• Restaurants should provide info, but it all comes down to money (tension)
• It all comes down to education (7)

DISCUSSION NOTES FROM APPROACH 3:
CHANGE OUR CULTURE TO ENCOURAGE FITNESS

<table>
<thead>
<tr>
<th>Approach 3 Appreciations</th>
<th>Approach 3 Concerns</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Obesity should be defined as a disease (2)</td>
<td>• How do you define “bad” food when regulating food</td>
</tr>
<tr>
<td>• Business incentives</td>
<td>• Keep it at a small scale: schools, etc.</td>
</tr>
<tr>
<td>• Taking soda out of schools</td>
<td>• Schools don’t really have the money to support these programs</td>
</tr>
<tr>
<td>• We live in a super-sized culture (comes down to the culture and the individual)</td>
<td>• Parents have to step up- no funding anywhere else (1)</td>
</tr>
<tr>
<td>• Make healthy options fun (1)</td>
<td>• Healthy food (at schools) is more prep time making it an unrealistic solution</td>
</tr>
<tr>
<td>• Make sure we are getting information out there (3)</td>
<td>• Shouldn’t just be centered on food- Cut down on the video games</td>
</tr>
<tr>
<td></td>
<td>• Might not be able to re-culture</td>
</tr>
<tr>
<td></td>
<td>• It’s still an individual responsibility/choice.</td>
</tr>
<tr>
<td></td>
<td>• We are asking too much from community organizations/ institutions</td>
</tr>
<tr>
<td></td>
<td>• Where is the money coming from</td>
</tr>
</tbody>
</table>

DISCUSSION NOTES FROM REFLECTIONS:

- Focus on the well-being of the child
- Active lifestyle should be the focus
- Video games over stimulate, don’t let children just be kids
- Comprehensive approach would avoid creating the “other” individuals, because of natural weight/ body types, etc.

CHILD OBESITY DISCUSSION NOTES GROUP B
11.17.2008 FORT COLLINS, CO

*(number indicates the amount of value/agreement dots each statement received)*

During the Fort Collins forum, the discussions and notes for each approach was split between “appreciations” and “concerns” with the approaches.
DISCUSSION NOTES FROM APPROACH 1:
EXPECT PERSONAL RESPONSIBILITY FOR FITNESS

Approach 1 Appreciations

• Providing parents with resources to make healthy choices. Example: “Healthy Weights” (1)
• Parents play lead role in enforcement. Example: Making money decisions. (3)
• Parents can simply ask what their children are eating. (1)
• Parents can and do model. Example: Smaller portions
• Reward with healthy food

Approach 1 Concerns

• Lack of education in the family unit needs to be addressed. (1)
• How do we address the media influence? (2)
• Parents can not be the only part of the solution. (2)
• This approach does not address the culture of food. (1)
• How do we deal with the lack of time because of two working parents? (4)
• Kids are much busier these days with little time for nutrition and exercise. (2)

DISCUSSION NOTES FROM APPROACH 2:
INVEST IN OVERALL CHILD WELL BEING

Approach 2 Appreciations

• Promoting “eating until you’re full” instead of clean plate club (3)
• Extra-curricular activities can promote better overall health, but eating more unhealthy food is not good (1)
• Overall health includes time “in between” or time to slow down (2)
• Promoting activity everyday from very young (5) - Recess should be used as a tool/reward

Approach 2 Concerns

• Sometimes it can be a good thing to reward children with food, especially athletes
• not enough to just address emotions
• If parents keep certain foods from kids, kids will want them more
• Lack of education in schools for students to know how to make healthy lifestyle choices later in life (1)
• Parents and kids are too busy or lazy – it is hard to find a medium (4)
• Societal pressures may be overwhelming
• Heightened awareness of free health programs is needed (1)
• There is not enough funding for health programs, sports are expensive (1)

DISCUSSION NOTES FROM APPROACH 3:
CHANGE OUR CULTURE TO ENCOURAGE FITNESS

Approach 3 Appreciations

• Video games keep kids inside and inactive
• Money is given to schools by vendors who

Approach 3 Concerns

• Unhealthy snacks/foods provide money for schools – healthy foods don’t sell at schools
want to sell unhealthy food (1)
- Fear of safety – parents are scared of letting their children go outside because of crime and the news scares parents (2)
- Recess/activity is cut short because of an ever increasing schedule/curriculum that doesn’t leave time for “fun” (7)
- P.E. /Art/Music are all competing for time and funding (3)

because of competition and expire before they can be sold (1)
- Parents are concerned with safety and need to be convinced that it is safe for their children to be outside (2)
- TV/media is influential in the “fear” (2)
- People would need to be taught healthy activities and norms at a very young age, before age of 10 (7)
- P.E. is considered a specialty course, ranked last in importance of requirements
- There may be a stronger impact if the threat of death at a young age was stressed (i.e. examples such as “vein age” an obese child’s veins compare to that of a 45 year old).

DISCUSSION NOTES FROM REFLECTIONS:
- Increased communication between schools and parents can be very effective. (1)
- Parent groups can help parents become more involved. (2)
- Increased nutrition standards at schools very effective. (6)
- Schools need to be funded better. (5)
- Strong academic focus makes it difficult for schools to do anything else.
- Turn off the T.V. (3)