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February 17, 2022

The Honorable Vanessa E. Atterbeary
Chair, House Ways and Means Committee
131 House Office Building
Annapolis, MD 21401

RE: HB 573 - School Wellness and Recess Grant Program - Establishment

Dear Chair Atterbeary and Committee Members:

The Maryland State Advisory Council on Health and Wellness (the Council) is submitting this letter of support for House Bill 573 (HB 573) titled, "School Wellness and Recess Grant Program - Establishment." HB 573 creates the School Wellness and Recess Grant Program (the Grant Program) to support schools in building strong, comprehensive written wellness policies that address the Centers for Disease Control and Prevention's Whole School, Whole Community, Whole Child (WSCC) model and engaging students in regular physical activity during the school day.

The Council extends its support for HB 573, as it seeks to encourage students of all ages and abilities to participate in regular physical activity during the school day and provides financial support to help schools create healthier climates for their students and staff.

The WSCC model is a student-centered framework for addressing health in schools. It promotes evidence-based policies and programs to create a healthy school climate across ten component areas, including physical education and physical activity, nutrition environment and services, social and emotional climate, and employee wellness.¹ Research suggests that comprehensive school wellness policies can significantly reduce the risk for adolescent obesity and promote student health.²

Obesity in childhood raises the risk for diabetes, cardiovascular disease, and breathing problems.³ In 2020, the obesity rate among Maryland 10-17 year olds was estimated at nearly 17 percent.⁴ Regular physical activity can improve cardiovascular, muscular and bone health and reduces the risk for chronic diseases like hypertension, diabetes, obesity and heart disease.

¹ Centers for Disease Control and Prevention: CDC Healthy Schools. Whole School, Whole Community, Whole Child (WSCC). <https://www.cdc.gov/healthyschools/wsc/index.htm>.

² J. Edward Coffield, Julie M. Metos, Rebecca L. Utz, Norman J. Waitzman, A. (2011). Multivariate Analysis of Federally Mandated School Wellness Policies on Adolescent Obesity. *Journal of Adolescent Health* 49(4): 363-370. <https://www.sciencedirect.com/science/article/abs/pii/S1054139X11000140>.

³ Centers for Disease Control and Prevention (2021). Childhood Obesity Causes and Consequences. [https://www.cdc.gov/obesity/childhood/causes.html#:~:text=Children%20who%20have%20obesity%20are%20more%20likely%20to%20have%3A&text=High%20blood%20pressure%20and%20high,as%20asthma%20and%20sleep%20apnea](https://www.cdc.gov/obesity/childhood/causes.html#:~:text=Children%20who%20have%20obesity%20are%20more%20likely%20to%20have%3A&text=High%20blood%20pressure%20and%20high,as%20asthma%20and%20sleep%20apnea;); retrieved 7 January 2022.

⁴ Robert Wood Johnson Foundation (2020). State of Childhood Obesity: Maryland. <https://stateofchildhoodobesity.org/states/md/>; retrieved 7 January 2022.

The U.S. Department of Health and Human Services recommends young people aged 6-17 years participate in at least 60 minutes of physical activity daily, however just one in five Maryland children meet that recommendation.^{5,6}

Over the years, many public health, medical, and educational authorities have called on schools to give greater attention to the provision of physical activity for students. It has often been recommended that physical education and physical activity programs be expanded. For several decades, professional organizations have indicated that the provision of “quality, daily physical activity” should be a standard to which schools aspire.⁷⁻¹⁴

The Council agrees with the following statements about the benefits of regular physical activity as they relate to the passage of HB 573. Participation in regular physical activity:

- Improves academic achievement, including grades and standardized test scores;¹⁵
- Reduces the risk of overweight, diabetes, and other chronic diseases;
- Helps children feel better about themselves;
- Reduces the risk for depression and the effects of stress;
- Helps children prepare to be productive, health members of society; and
- Improves overall quality of life.¹⁶

The Council seeks to ensure effectiveness of the Grant Program established in HB 573 in supporting the promotion of healthy school climates and engaging all students in regular physical activity. The Council respectfully requests two amendments to clarify the intent of the Grant Program: 1) the Council suggests amending the purpose of the school wellness portion of the Grant Program (page 3, line 2) to state schools will have and implement strong, comprehensive, and written wellness policies. The implementation of wellness policies is critical to their success and funds from the Grant Program would significantly support local school districts in implementing strong wellness policies; and 2) the Council suggests amending the purpose of the recess portion of the Grant Program (page 3, lines 5-7) to encourage students in prekindergarten through grade 12 to participate fully in regular physical activity during the school day, including recess for elementary-age students. Recess is not commonly part of the daily schedule in middle and high school, however it is important for middle and high schools to create opportunities for students to participate in daily physical activity.

⁵ U.S. Department of Health and Human Services. Physical Activity Guidelines for Americans, 2nd edition. Washington, DC: U.S. Department of Health and Human Services; 2018.

⁶ National Survey of Children’s Health (2020).<https://www.childhealthdata.org/browse/survey/results?q=8538&r=22>; retrieved 7 January 2022.

⁷ American Heart Association. Exercise (physical activity) and children: American Heart Association scientific position. Available at: www.americanheart.org/presenter.jhtml?identifier=4596. Accessed August 1, 2006.

⁸ American Academy of Pediatrics. Physical fitness and activity in schools. *Pediatrics*. 2000; 105: 1156–1157

⁹ Fletcher GF, Balady G, Blair SN, Blumenthal J, Caspersen C, Chaitman B, Epstein S, Sivarajan Froelicher ES, Froelicher VF, Pina IL, Pollock ML; Committee on Exercise and Cardiac Rehabilitation of the Council on Clinical Cardiology, American Heart Association. Statement on exercise: benefits and recommendations for physical activity programs for all Americans. *Circulation*. 1996; 94: 857–862

¹⁰ Centers for Disease Control and Prevention. Comprehensive School Physical Activity Programs: A Guide for Schools. Atlanta, GA: Centers for Disease Control and Prevention, US Dept of Health and Human Services; 2013:22–25.

¹¹ Centers for Disease Control and Prevention and SHAPE America —Society of Health and Physical Educators. Strategies for Recess in Schools. Atlanta, GA: Centers for Disease Control and Prevention, US Dept of Health and Human Services; 2017.

¹² Centers for Disease Control and Prevention. School health guidelines to promote healthy eating and physical activity. *MMWR Recomm Rep*. 2011;60(RR–5).

¹³ SHAPE America. Guide for Recess Policy. Reston, VA: SHAPE America; 2016.

¹⁴ Murray RC, Ramstetter C, Devore M, et al. The crucial role of recess in school. *Pediatrics*. 2013;131(1):183–188.

¹⁵ Centers for Disease Control and Prevention. The association between school-based physical activity, including physical education, and academic performance. Atlanta, GA: U.S. Department of Health and Human Services; 2010.

¹⁶ Ballard K, Caldwell D, Dunn C, Hardison A, Newkirk, J, Sanderson M, Thaxton Vodicka S, Thomas C Move More, NC's Recommended Standards For Physical Activity In School. North Carolina DHHS, NC Division of Public Health, Raleigh, NC; 2005.

The Council respectfully urges this Committee to approve HB 573 as a critical public health measure to reverse alarming trends in physical inactivity and obesity in youth, and encourages the aforementioned amendments for bill clarity. We strongly believe HB 573 merits consideration and approval as it seeks to increase the number of opportunities for physical activity in all of Maryland's schools.

Sincerely,

A handwritten signature in black ink that reads "Jessica Kiel". The signature is written in a cursive style with a long, sweeping underline that extends to the left.

Jessica Kiel, M.S., R.D., Chair, State Advisory Council on Health and Wellness