

GOVERNOR'S COUNCIL ON
PHYSICAL FITNESS

1500 Northwest 49 Street
5th Floor Auditorium
Fort Lauderdale, Florida
November 14, 2007
9:34 a.m. - 3:34 p.m.

APPEARANCES

Shannon Miller, Chair

Carlos Castresana

Dr. Karen J. Dowd

Thomas D. Epsky

Dr. Javier Garcia-Bengochea

Robert M. Kesier

William J. Montford

Dr. Don Rapp

Dr. Dorothy Richardson

Mary B. Rumberger

Julie A. Ryczek

Dr. Judith L. Schaechter

Sheila A. Sheridan

Dr. Ana Viamonte Ros

Amy J. Young

1 (The meeting was called to order by Shannon Miller at
2 9:45 a.m. and the following proceedings were had:)

3 MS. MILLER: If everyone could have their
4 seats. Thank you.

5 I want to welcome everyone to the Governor's
6 Council on Physical Fitness Fort Lauderdale
7 meeting. I'm going to call the meeting to order.

8 Good morning everyone and thank you for all
9 your hard work and support to all of the council
10 members. This has been a wonderful journey and
11 we're not done yet. We have a big couple of
12 days, today and tomorrow.

13 I want to thank Keiser University for
14 providing us with meeting space today and
15 tomorrow. We have national, state and local
16 representatives to provide us with final
17 testimony today before we deliberate on the final
18 recommendations to the state plan of action.

19 We've undertaken a major endeavor over the
20 last four months and I'm very proud to be a part
21 of what we have accomplished so far and what we
22 plan to accomplish in the future.

23 For those of you who have not heard, on
24 November 8 professional surfer and Florida native
25 Kelly Slater was appointed to the council as an

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1 honorary member. Kelly has won eight world
2 titles. His first was at the age of 20, making
3 him the youngest person to ever win a title.
4 Kelly was not able to be with us today, but has
5 said that he is honored to be a part of this
6 important work that the council is doing. So we

7 welcome him.

8 At this time I'm going to go ahead and turn
9 the meeting over to Jenny Helfenfinger.

10 MS. HEFELFINGER: Good morning. I'm going
11 to go ahead and call role. When I call your
12 name, please say: Here, present.

13 Derrick Brooks, chair?

14 Shannon Miller, co-chair?

15 MS. MILLER: Here.

16 MS. HEFELFINGER: Dave Andreychuk?

17 Rocco Baldelli?

18 Joshua Butler?

19 Jennifer Capriati?

20 Monty Castevens?

21 MR. CASTEVENS: Here.

22 MS. HEFELFINGER: Carlos Castresana?

23 MR. CASTRESANA: Here.

24 MS. HEFELFINGER: Karen Dowd?

25 MS. DOWD: Here.

1 MS. HEFELFINGER: Thomas Epsky?
2 MR. EPSKY: Yes, ma'am.
3 MS. HEFELFINGER: Dr. Javier
4 Garcia-Bengochea?
5 MR. GARCIA-BENGOCHEA: Here.
6 MS. MILLER: Bob Griese?
7 Ken Griffey, Jr.?
8 Nancy Hogshead-Makar?
9 Robert Keiser?
10 MR. R. KEISER: Here.
11 MS. HEFELFINGER: Kezarrick McCorvery?
12 Bill Montford?
13 MR. MONTFORD: Here.
14 MS. HEFELFINGER: Shaquille O'Neal?
15 Don Rapp?
16 MR. RAPP: Here.
17 MS. HEFELFINGER: Dot Richardson?
18 MS. RICHARDSON: Yes.
19 MS. HEFELFINGER: Mary Rumberger?
20 MS. RUMBERGER: Here.
21 MS. HEFELFINGER: Julie Ryczek?
22 MS. RYCZEK: Here.
23 MS. HEFELFINGER: Judy Schaechter?
24 MS. SCHAECHTER: Here.
25 MS. HEFELFINGER: Corey Simon?

1 Kelly Slater?

2 Ana Viamonte Ros?

3 Amy Young?

4 MS. YOUNG: Here.

5 MS. HEFELFINGER: Thank you.

6 I'm going to make a few housekeeping
7 requests. I would like to ask the audience as
8 well as council members to please turn off all
9 cell phones, put them on vibrate or silent and
10 all BlackBerrys. And also to please not have any
11 on the table since it does interfere with the
12 microphone and all the audio recording for the
13 speakers.

14 Today we have a very tight agenda. We know
15 we've asked you to provide a lot of information
16 in a very short period of time. We'd like to ask
17 you to please try to stick with your time frame
18 and there will be time for questions. We have
19 built in a little time after for that. We do
20 appreciate you being here providing that
21 information to the council.

22 Also to remind everybody that we will have a
23 public comment section in the afternoon today as
24 well as tomorrow. If you are in the audience and
25 you're wanting to provide public comment or

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1 public testimony, anyone is welcome. You need to
2 sign one of the public comment cards which are at
3 the registration table.

4 Catherine, who do you have in charge of the

5 public comment today?

6 CATHERINE: Rachel Duerr.

7 MS. HEFELFINGER: We have 20 minutes
8 allocated for that. Please sign in by 2:30 today
9 if you want to speak for the public comment
10 section.

11 Also, please be advised if you're providing
12 comments as well as providing testimony today
13 that the council is focusing on developing the
14 state plan of action and is looking for
15 information in the best practice.

16 The meeting is being videotaped. And just
17 to remind everyone, this is an open meeting
18 comprised with everyone in the Sunshine. A
19 scheduled open meeting format, either in person
20 or over the phone. And all of the information
21 from today's meeting as well as the prior
22 meetings can be found on our Web site at
23 www.HealthyFloridians.com. Meeting minutes,
24 agendas and presentations can all be found there.

25 At this time I will turn it back to Madam

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1 Chair.

2 MS. MILLER: At this time I'm pleased to
3 have Belinda Keiser our Chancellor of Public
4 Relations and Student Advancement for Keiser
5 University address us for a welcome.

6 MS. KEISER: Thank you, ladies and

7 gentlemen, and welcome. On behalf of the 12,500
8 students and 2,200 team members that make up
9 Keiser University, we welcome you to our campus.

10 We want you to know how very, very thrilled
11 we are at the work you're doing on behalf of
12 Florida and all Floridians. And we thank our
13 wonderful Governor for making this such a high
14 priority and by executive order forming the
15 council.

16 I've had the honor of being able to go to
17 several of your meetings and I have to tell you
18 that I am really impressed with the work that
19 you've done. So if there is anything at all we
20 can do to be of assistance, we would love to.

21 I would like to share with you that the
22 Governor had a great deal of leadership and
23 vision when he appointed my former high school
24 principal, Bill Montford, as your chair. So,
25 folks, it's very much a homecoming for me. If

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1 there is anything we can do to make your visit
2 more comfortable, anything at all, please let us
3 know.

4 And welcome to all the members in the
5 audience and public. Thank you.

6 MS. MILLER: Thank you, Belinda. And thank
7 you to all of your staff. It's been wonderful,
8 great accommodations today. We appreciate that.

9 First up today, let's see if Matthew Singer

10 is here. He is not here.

11 We're going to go to Lisa Creswell, are you
12 here today? Wonderful. We're going to hear from

13 Lisa Creswell.

14 Lisa Creswell is the Florida Health Alliance
15 Director for the American Heart Association. She

16 will be addressing the council today in her

17 capacity as chair of Action for Healthy Kids

18 Partnership, one of 50 state teams dedicated to

19 increasing physical activity and improving

20 nutrition in schools. Thank you.

21 MS. CRESWELL: Thank you, Madam Chair. And

22 thank you, Council members, for inviting me today

23 to speak with you. It's a great honor and I

24 would like to also commend you on your dedication

25 and the hard work you have been doing. I know

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1 it's no easy task. And I've been very impressed

2 with your dedication.

3 So this morning I would like to go over

4 three main areas. One, I just want to briefly

5 let you know what Action for Healthy Kids is.

6 Two, I would like to tell you a little bit

7 about what we've been doing here in Florida.

8 And then finally I would like to share with

9 you a few recommendations that we've been looking

10 at for the executive order and thoughts that our

11 group had for you.

12 Action for Healthy Kids is a national
13 grassroots organization that was founded by the
14 former U.S. Surgeon General David Satcher. We
15 focus specifically on physical activity and
16 nutrition in the schools. I am going to go
17 quickly through -- several of these are slides,
18 but I did want you to have them in your packet
19 for review.

20 There are about 9,000 team members across
21 the nation. We have 300 here in Florida with an
22 executive committee that represents government,
23 nonprofit, education and parents. We've been
24 able to bring in nearly \$30,000 in grants for the
25 state of Florida on various programs that relate

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1 to nutrition and activity, and we are continuing
2 to always seek that funding. The national
3 organization has a new resource available for us
4 so we continue to try to bring that into the
5 state of Florida.

6 Specifically one of the areas that we
7 focused on in the recent couple of years was the
8 Federal Wellness Policy requirement. We provided
9 training both before this review and afterward
10 looking at development implementation and
11 evaluation of those policies. We've presented to
12 some of the school leadership, which was a big
13 success reaching some of those. Often we feel
14 like we're preaching to the choir, but we were

15 able to talk to principals, superintendents,
16 school board members at a couple of conferences
 17 last year.

18 As far as some of our recommendations, we
19 would really love to serve as a resource for you.
20 We bring together, one of our collaborations, we
21 are able to bring together a lot of different
22 groups that are experts in various areas.

23 The National Action for Healthy Kids has
24 some amazing resources on their Web site; most of
25 them are free. They even ranked them to let you

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1 know what the best programs are available.

2 We would like you to encourage schools to
3 take advantage of some of the free programs that
4 are out there, such as being on the Healthy
5 Wellness Challenge that encourages parents and
6 kids to work together, and it incorporates
7 physical activity. If you have a rope and some
8 tennis balls you can do it. It's a very
9 easy-to-implement kind of a game. And then
10 Recharge, a school program; there are a lot of
11 great things already out there we would be happy
 12 to tell you about.

13 Another key portion that we are feel very
14 strongly about is the recognition criteria.
15 There are some very well developed ones out
16 there, too, are ranked of a healthier generation.

17 Healthy Schools Program is a free program that
18 any school can participate in and has a wealth of
19 wonderful support and information.

20 The Florida Coordinated School Health,
21 School Help Education Consortium Group, and I was
22 at their meeting last week, they developed some
23 recognition criteria at the district level.

24 There was some discussion last week at the
25 meeting, well, is this council the appropriate

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1 one to put those forward because there was some
2 talk that some of those recommendation because
3 they cover the eight areas of coordinated school
4 health, might be outside the physical fitness
5 purview.

6 But as we discussed it further, we really
7 felt like the whole child is important. So we
8 can't have a child that is just going to eat well
9 and be physically active if they're not safe, if
10 they have emotional distress and those kinds of
11 issues. I would encourage you to look at those.

12 And, finally, I did want to go through a few
13 items from the executive order that we discussed
14 as far as the proper implementation of PE every
15 day for K through 5. We developed a letter for
16 our schools and superintendents, along with
17 Dr. Montford's superintendent association,
18 letting them know about many of the great action
19 helping community resources, as well as the State

20 Coordinated School Health Resources.

21 The correlation between PE and academic
22 achievement is what Action for Healthy Kids is
23 focused on. And they do several reports. And
24 their first one, it's called the Learning
25 Connection, and it's free and available on the

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1 Action for Healthy Kids Web site, so I do
2 recommend that.

3 As far as the possibility of every school
4 district maintaining an independent fitness
5 advisory panel, that might be something that
6 could be a subcommittee under the SHAC, the
7 School Health Advisory Committee, because that is
8 an existing group that is statutorily mandated in
9 every district. Some are more active than
10 others. But rather than creating another new
11 group, that could be an appropriate house for
12 that.

13 Finally, with the community roadway and
14 transportation getting pedestrian activity, they
15 felt the board has provided millions of dollars
16 to every state. Florida has \$30 million between
17 now and 2009. It's kind of a use it or lose it
18 situation. There is a committee that is working
19 on that, but I want to make sure that you know
20 that that group is out there. We hear a lot
21 about unfunded mandates, but that is an area we

22 do hope you fund and we would love to see that
23 funded properly.

24 The final point I'll make here, going back
25 to my powerpoint, is that health does need to

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1 become a part of the culture and it needs to be a
2 top down. We're very fortunate to have a
3 Governor who appointed the council and who is a
4 personal role model for this. But we would like
5 to see the department of education and our
6 superintendents and principals and school board
7 leadership to have those people really embracing
8 this as part of what is going to be best for our
9 children. Thank you very much.

10 MS. MILLER: Thank you, Lisa. Are there any
11 questions from the council?

12 Thank you. I believe Matt Singer is here.

13 We're going to ask Matt to come on up.

14 Matthew is the co-chairman of the
15 Legislative Advisory Teen Council, who is part of
16 the Legislative Advisory Teen Council team that
17 went on to the capital last year to lobby for
18 Early Obesity Prevention legislation.

19 MR. MATT SINGER: Hello, everybody. I'm
20 Matt Singer. I'm co-chairman of the Legislative
21 Advisory Teen Council. Before we begin I would
22 like to thank you for the time you set forth so
23 that I could put the recommendations that the
24 Legislative Advisory Teen Council has put

25 together and hopefully aid the Governor's Council

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1 in reaching its ultimate goals in physical
2 fitness and obesity prevention in Florida.

3 First, I would like to give you a brief
4 overview of the Legislative Advisory Teen
5 council. Our mission is to serve as advocates
6 for issues which are important to teens. And the
7 unique aspect of our council is that it is
8 completely comprised of teenagers, student
9 athletes from private and public schools across
10 South Florida.

11 The role of each member is a two-dimensional
12 phase. First, each member has a personal
13 responsibility to remain physically fit while
14 maintaining their academics. Secondly, it's each
15 member's responsibility to their community in
16 promoting physical fitness.

17 The importance of our work. The Teen
18 Council has already achieved a number of goals.
19 Last spring three of the teen council members and
20 myself went up to the capital. We helped in the
21 passage of the PE bill mandating an additional
22 150 minutes per week of physical education, K
23 through 5.

24 Additionally, I would like to think that we
25 influenced Governor Crist's executive order

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4 the mentor and student by members of the
5 Governor's Council. Presentation of a plaque at
6 the school would be an example of such a thing.

7 And that's all I have for you today. In
8 conclusion, I would like to congratulate the
9 Governor's Council on their success thus far and
10 thank them on their efforts, and additionally I
11 would like to thank Governor Crist himself for
12 his support, and the Teen Council is here for
13 whatever you need us for. Thank you.

14 MS. MILLER: Thank you, Matt. Would you
15 like to take some questions from the council?

16 MR. MATT SINGER: Any questions?

17 MS. RYCZEK: I see the mentoring. Because
18 the mandated minutes were K through 5, are you
19 looking at the mentoring starting at the high
20 school and coming down, being at each school?
21 Give me a picture of what you're doing with like
22 high school or middle school.

23 MR. MATT SINGER: Potentially what we are
24 planning on doing is having the high school
25 students mentor younger kids, so there is more of

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1 a big brother attitude toward the K through 5.
2 So the younger students that are having problems
3 with their weight can look up to a more older
4 student. And some of the research we put
5 together shows that if you get into the habit of

6 being overweight, especially obese at the age
7 around 11 or 10, then it increases your chances
8 of almost over double being overweight for the
9 rest of your life. We need to get at the middle
10 school or elementary level.

11 MS. RYCZEK: So, you're talking about the
12 high school and the coaches and then coming to
13 the middle school or elementary --

14 MR. MATT SINGER: Right.

15 MS. RYCZEK: -- areas and then in the
16 district, each district adopting it throughout
17 the state of Florida?

18 MR. MATT SINGER: Right. And the good thing
19 about this is that there is no requirement to be
20 part of the Legislative Advisory Teen Council to
21 be a mentor rather through the system that we had
22 an idea for. The coach at each individual school
23 could use their best leaders on each team and
24 tell them that here's a kid, you know, some of
25 our younger grades that need help.

20

1 MS. RYCZEK: How about as the community
2 service credit to go to their high school
3 graduation?

4 MR. MATT SINGER: Exactly.

5 MS. RYCZEK: So it's a win-win situation.

6 MR. ROBERT KEISER: It doesn't have to be at
7 high school or a school for instance. I know of
8 a kid who is overweight and he works out at my

9 gym. I've been working with my trainer to get
10 him eating better and looking healthier. So he
11 can be in the community, someone you know. It
12 doesn't necessarily have to be with a coach at
13 the high school.

14 MS. RYCZEK: But the community service
15 points -- credits --

16 MR. MATT SINGER: If it was through the
17 school, then it would count for the community
18 service credit.

19 MS. RYCZEK: And they need that for the
20 graduation to go on to college. That's a
21 wonderful idea.

22 MR. MONTFORD: Tell me again, what areas do
23 you cover, your advisory council?

24 MR. MATT SINGER: The Advisory Council is
25 part of the Broward Days program. We have

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1 representatives across Broward County and all of
2 Fort Lauderdale, Pembroke Pines.

3 MR. MONTFORD: So you're from Broward
4 County?

5 MR. MATT SINGER: Yes.

6 MR. MONTFORD: Do you have a similar group
7 in Palm Beach and Dade or anywhere in this area?

8 MR. MATT SINGER: What we're planning to do
9 on our next trip up to Tallahassee like we did
10 last spring is to put together a statewide

11 council. But right now there is only one in
12 Broward.

13 MR. MONTFORD: Your legislative council, do
14 you work directly with your local delegations
15 similar in what you do here?

16 MR. MATT SINGER: We have. When we went up
17 to Tallahassee we talked to representatives of
18 the appropriate districts and we also had
19 meetings here in Broward.

20 MR. MONTFORD: How do you determine what
21 issues your council will undertake and address,
22 the health issues, physical fitness is great to
23 put --

24 MR. MATT SINGER: You mean who sets our
25 agenda?

22

1 MR. MONTFORD: Yes. Do you have other
2 issues like sportsmanship?

3 MR. MATT SINGER: Yes. We like to deal with
4 the multidimensional part of physical fitness,
5 not only staying physically fit, but we think the
6 whole aspect of being a student athlete includes,
7 obviously, being academically fit as well and
8 character.

9 MR. MONTFORD: Congratulations. You're a
10 good role model.

11 MR. ROBERT KEISER: We advocate all of the
12 people on the board have decent GPAs. And our
13 student athletes, when we mentor, we talk to them

14 about the essentials of being a good student and
15 also working out and being more well-rounded.

16 MR. EPSKY: Matt, I notice it's part of your
17 recommendation that you have a recognition
18 criteria that you would like implemented. And I
19 notice our last speaker in her presentation has
20 as part of the line for a healthier generation.
21 What kinds of recommendations are you looking at?

22 MR. MATT SINGER: For recognition?

23 MR. EPSKY: Yes.

24 MR. MATT SINGER: We are thinking of having,
25 when a student is being mentored, successfully

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1 loses his weight, changes his lifestyle habits,
2 then we would have one of the members of the
3 Governor's Council, let's say, for example, Shaq,
4 come in and present a plaque, do something to
5 motivate them and their peers to continue that
6 process. That's a type of recognition we will be
7 aiming towards.

8 MS. MILLER: Any other questions for Matt?

9 MR. MATT SINGER: Before I leave I would
10 like to say on page 41 of the Broward Days book
11 you have, there is information about the
12 Legislative Advisory Teen Council if you want any
13 further information.

14 MS. MILLER: Thank you very much.

15 MR. MATT SINGER: Thank you.

16 MS. MILLER: Next up we're going to hear
17 from Elly Zanin and Dr. Valerie George about the
18 program Commit 2B Fit.

19 Elly Zanin has been a physical education
20 specialist for Broward schools for 18 years. And
21 prior to that taught middle school physical
22 education in Broward County.

23 Dr. George is a research associate professor
24 at Florida International University. She's
25 currently a program evaluator for Commit 2B Fit.

24

1 Thank you.

2 MS. ZANIN: Thank you, Madam Chair, Council
3 members. I lost my physical education outside
4 voice when I went into the office and I need this
5 now.

6 What I'm going to show you very briefly is a
7 program that was created in partnership with
8 Broward County schools and Beasley Marketing
9 Group which is KISS Country radio. It's a media
10 company.

11 We know you know the facts about childhood
12 obesity. We're told not to give you any of
13 those, but I would like to show the position that
14 we have. We have found research and actually
15 implementation of this program, the key is to
16 prevent it at multiple levels. We really do
17 believe. We're in our third year of Commit 2B
18 Fit. We really do believe that it has to begin

19 in the schools, go into the home and involve the
20 community and be at the workplace. It's trite
21 but true: It takes a village to raise a child.
22 It takes a village to have a healthy child.
23 Our mission: We're dedicated to effecting
24 positive changes in children by encouraging
25 increased physical activity and better nutrition.

25

1 We provide a fully integrated school, family and
2 community supported program. Commit 2B Fit
3 educates and motivates children to create
4 habits -- that's the important thing -- to create
5 habits that will lead to a healthier, longer
6 life.

7 Components of Commit 2B Fit. We're going to
8 do this very quickly. I gave you a folder with
9 these in it. This is a student planner or
10 student agenda. This is the foundation of the
11 Commit 2B Fit program. When we designed Commit
12 2B Fit, we did not want to add another labor to
13 what teachers were going to have to do. We
14 wanted to integrate into what was already
15 happening in the schools. The schools were
16 already using a student planner. So we said, we
17 did some research, talked to administrators and
18 facilitators, if you open any of the pages that
19 show the calendar, we ask, while the students are
20 planning their academic day -- if you look here

21 on the left side of the page, language arts,
22 math, science, social studies, which is very
23 important, putting their spelling words in, their
24 reading assignments -- could they at the same
25 time --

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1 MS. MILLER: Excuse me. If you could move
2 closer to the mike.

3 MS. ZANIN: -- could they at the same time
4 be planning their nutrition for the day and their
5 physical activity for the day? Just as important
6 as their math is and their reading, and it
7 certainly is, so is their nutrition and their
8 physical activity. This is the foundation of the
9 Commit 2B Fit program.

10 The students do this every day. They do
11 goal setting with the assistance of the classroom
12 teacher and the physical education teacher. The
13 physical education teacher actually drives this
14 program in the school -- in the entire school,
15 but the classroom teacher sees the kids every
16 day. They're the ones that reinforce it day
17 after day. It's a great collaboration between
18 physical education and the classroom teacher.

19 At the back of the agenda is a student
20 training guide. It's a self-pacing guide that
21 they can walk themselves through. But at the
22 beginning of the training guide is a pledge. The
23 kids take a pledge to Commit 2B Fit. As you know

24 if you write things down or sign your name to it,
25 you're much more likely to achieve those goals

27

1 than if you just think about it. Students sign
2 their name and they Commit 2B Fit.

3 When they do that we give them this
4 necklace, that I'm proud to wear, and a charm
5 that says Commit 2B Fit. Several times
6 throughout the school year if the students are
7 diligent in trying to eat healthier and be more
8 physically active, they can earn another charm.
9 It says Commit 2B Fit on one side and something
10 else on the other. For example, the charm the
11 kids got this year says Miami Dolphins on the
12 back. The third charm will say the Joe DiMaggio
13 Hospital. These are people that are involved and
14 sponsors of the program. As part of the program

15 we also give these --

16 MS. GEORGE: Excuse me, I don't want to
17 interrupt you, but I just want to mention, if you
18 look in the planner, also a very important part I
19 think, is all the information, educational
20 information on nutrition and physical activity.
21 So that the planner serves as a place where the
22 students have to set a goal and keep track of
23 what they're eating and what physical activity
24 they're doing. But it's also providing daily
25 information so easily, a teacher can talk about,

1 okay, what does aerobic mean? That's on
2 September 3. And so there is a stepping-off
3 point for continued discussion. And the planner
4 is chock-full of that kind of information. So
5 it's also in and of itself a little bit of
6 curriculum. It's quite comprehensive.

7 MS. ZANIN: Now we also give the classroom
8 teacher what we used to call Recess Solutions.
9 And now that we have the 150-minute program, the
10 classroom teachers can use this to meet the 150
11 minutes. That is called Pied Piper Tunes Belt,
12 which is a belt that teachers can use to take
13 kids out fitness walking to music and it's for
14 kids, which is a plug, and Spoga4kids, yoga that
15 they can use in the classroom.

16 Bank Atlantic is a sponsor of the program.
17 They give Bank Atlantic bucks, which is a dollar
18 that we give to the schools to give to the
19 students catching them doing something good.
20 They have a kid power account they can put --
21 it's an actual dollar that they can spend, they
22 can go into their bank account. At the end of
23 the year the children could have 40 or \$50 for
24 living a healthier lifestyle.

25 We have community and media support. On

1 KISS radio we have radio vignettes. About once
2 an hour you will hear a Commit 2B Fit message

3 which is really an educational message.

4 In Publix supermarkets, if you live locally,
5 I'm sure you've seen the Commit 2B Fit posters
6 and stands with brochures in them that we change
7 every month. The parents can pick up those
8 brochures and it has healthy tips. They'll be
9 seeing one for the holidays, healthy holiday
10 tips. How to pack a healthy lunch.

11 Again, now we're reaching the parents. And
12 we have the visibility in the community and then,
13 of course, we have the corporate support.

14 How does it work? Making it a commitment?
15 We send a letter home. We notify the parent what
16 the program is all about. The students take the
17 pledge. They get the necklace and the charm.

18 The kids now feel like they're in a special
19 group, a member of an elite group. This is a
20 visible sign to everyone that sees it. That
21 child has made a commitment to be fit.

22 Physical activity. Of course we want the
23 kids to be moderate to vigorous every day.
24 Where? Physical education of course. Physical
25 education is the cornerstone of physical

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1 activity. Children have to be taught how to be
2 physically educated to be confident and competent
3 skillful movers and that's the physical activity.

4 Interestingly enough, I just got this

5 magazine, this periodical, yesterday in the mail.

6 It's a Journal of Physical Education and
7 Recreation from the American Alliance. This
8 article says and I'll read very quickly:
9 Strategies for physical activity promotion beyond
10 the physical education classroom. There is just
11 a limited amount of time for physical education.
12 Students cannot reach the recommended 60 minutes
13 of daily physical activity. That's by an
14 athlete. To make up the difference, physical
15 educators need to help promote, facilitate and
16 model opportunities for students to be active
17 outside of class.

18 That's exactly what Commit 2B Fit does.

19 That just came out yesterday.

20 Nutrition, as Dr. George said, there is
21 information in the planner and we give the
22 schools lots of resources, Web sites. This one
23 in particular, where if the classroom teacher
24 wants to go beyond what is in the planner, then
25 they have resources that they can do that as

31

1 well.

2 I went to Broward County Parks and I said to
3 them: Would you take what you're already doing,
4 you don't have to change a thing, but would you
5 take some of your activities and call them Commit
6 2B Fit? We want to be branded in Broward County,
7 and they embraced the idea. Now if you drive

8 around Broward County you will see banners on the
9 sides of fences in the parks: "Commit 2B Fit. It
10 Starts In Parks."

11 Last year Broward County government put this
12 sign that you see: "Commit 2B Fit. It Starts in
13 Parks," on 10 city buses that drove around Fort
14 Lauderdale for six weeks with that sign on them.
15 Every piece of metered mailed that went out from
16 Broward County government had that stamp on it:

17 "Commit 2B Fit. It starts in parks."

18 So we have it in the schools. The planner
19 goes home. The parents check that planner. They
20 want to know what the homework is. We have it in
21 Publix. We have the media announcements. Now
22 the city buses have it. It's in the parks.

23 My God, Elly, it's everywhere. That's the
24 idea. We want wherever you turn, wherever you
25 look, you're reminded of the message: Commit 2B

32

1 Fit. It's becoming part of the culture in

2 Broward County.

3 Dr. George.

4 DR. GEORGE: First of all I would like to
5 tell you I was able to share the results of

6 Commit 2B Fit at the International Society for
7 Behavior, Nutrition and Physical Activity in Oslo

8 in June and the reception was incredible.

9 The problem there obviously is not as grave

10 as it is here in reference to obesity, but there
11 is great concern. When I showed them the planner
12 and the concept, they are very, very interested.

13 This is my third year of evaluating Commit
14 2B Fit. I would like to share some of the
15 results from last year. We found, according to
16 the third grade evaluation, 73 percent of our
17 students reported they eat more fruits and
18 vegetables because of Commit 2B Fit, 70 percent
19 reported they are more physically active and 75
20 percent of the students said that because of the
21 planner, that helped them to remember to be more
22 active and to eat more fruits and vegetables.

23 In addition, 25 percent of the fourth
24 graders that we evaluated and fifth graders that
25 we evaluated said they increased their physical

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1 activity to more than four days per week. So
2 even over one year of time, a quarter of the
3 students had an increase in the amount of
4 physical activity.

5 The other important piece of the puzzle is
6 that we saw that 95 percent of the students at
7 the end of the program had a positive attitude
8 toward being physically active and making healthy
9 food choices.

10 If you look at some of the models we use in
11 understanding behavior change, we know that
12 changes in attitude are preliminary to actually

13 creating behavior changes. I think that's very
14 important.

15 Now what happened with the teachers? As I
16 was going through this process of evaluating the
17 program, I was doing something called process
18 evaluation to see whether or not the things were
19 being done in the classroom. And we found that
20 yes they are. They were using the plans.
21 Students were participating. But the thing that
22 really surprised me was that 75 percent of the
23 teachers said that they had increased their
24 physical activity and 80 percent of the people
25 said they were eating healthier because of Commit

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1 2B Fit. So just the fact that they were using
2 this tool and helping their students, reminding
3 students to set goals, was having an impact on
4 them.

5 So, now we go to that other level. We think
6 of different levels when we are talking about an
7 implementation of the program. The personal
8 level following interactive thinking, the school
9 level and, finally, within the community and then
10 ultimately we are here creating a policy. We see
11 this with Commit 2B Fit.

12 The other piece of the puzzle that I thought
13 was amazing was the response of the parents, and
14 that was 50 percent of the parents said they had

15 discussed the goals the students were setting in
16 the planner with their children. And that the
17 parents said it had changed, I think it was 75
18 percent of the parents said that they had -- I'm
19 sorry, 60 percent of the parents said that having
20 physical activity and food goals in the planner
21 motivated their kids. And 70 percent reported
22 that Commit 2B Fit had helped the family in
23 making healthier food choices. That blew me
24 away. That was invaluable. I've never see
25 results like that.

35

1 So, for me, what Commit 2B Fit does is it
2 works very well with the recommendations of the
3 150 minutes of physical activity per week in our
4 schools, but it also works well with the
5 strategic wellness plan of Broward County
6 schools. I think that this is a comprehensive
7 approach to creating change in the community with
8 all the elements that Elly has talked about and
9 all the levels that we need to approach in order
10 to make a successful implementation and see
11 changes in our community.

12 Thank you very much.

13 MS. MILLER: Thank you. Do we have any
14 questions from council?

15 MS. SCHAECHTER: First, Dr. George, and I've
16 used the planner, help me understand the
17 denominators a little bit more. In other words,

18 these are the kids that actually made the
19 commitment, not all third graders in the school?

20 And in particular, the parents, what kind of
21 response rate did you get?

22 DR. GEORGE: Actually for the teachers that
23 we -- the students we evaluated and their
24 parents, we targeted one specific school in order
25 to get the parents, we got a very good response

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1 rate. I was surprised. We had over a 50 percent
2 response rate, which is very high. It's very
3 difficult to get parents to sign things to come
4 back to the schools and complete questionnaires.
5 I think it was because the kids were enthusiastic
6 about it.

7 I went into the school as an evaluator too.
8 I talked with teachers and parents and they were
9 excited about things.

10 Do you have another question?

11 MS. SCHAECHTER: It's the student who makes
12 the commitment. Not all students within the
13 schools are participating; is that right?

14 DR. GEORGE: Actually, most of the students
15 are, yeah. Very rarely do we get a letter back
16 from a parent saying we don't want our child to
17 participate.

18 MS. SCHAECHTER: It's an opt out program.

19 DR. GEORGE: It's an opt out. It is really

20 a rare thing.

21 MS. SCHAECHTER: Once you have your
22 principal and teachers.

23 A question about your budget and funding
24 sources, please.

25 MS. ZANIN: Exactly. To answer your

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1 question, the partnership, with the Beasley
2 Marketing Group, I'm the program side of it;
3 they're the business side of it. They go out and
4 raise all the sponsorship dollars for this
5 program.

6 Small changes can make a big difference is
7 our motto. Aetna has come on board as a sponsor
8 as well.

9 We give this program free of charge to third
10 grade in any Broward County school, public school
11 that wants it. We have 138 elementary schools,
12 114 are participating in the program. We also
13 have it in 20 fourth grades because they are,
14 quote, our evaluation schools for this year.

15 In Palm Beach County and I don't know if
16 this will be addressing that, but we have Commit
17 2B Fit, a pilot in eight schools. Last year
18 third grade, this year they expanded it to third
19 and fourth grade.

20 MS. SCHAECHTER: In dollars and cents, what
21 does that mean for a school of what size? What
22 does that mean in Broward County for all of third

23 grade?

24 MS. ZANIN: It costs approximately, for all
25 third grade of over 20,000 students, about

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1 \$210,000. It breaks down to approximately 12 to
2 \$15 per student.

3 MS. RYCZKE: I have a question. Again,
4 agendas are our Bibles as a parent as well as a
5 teacher. But do you have age appropriate,
6 because if you are looking at elementary K
7 through 5, maybe K through 2 and 3 through 5, so
8 that the little ones can read it.

9 Again, when you are talking about layers, I
10 say another brick in the wall for the teachers.
11 This is wonderful. But I would like to see maybe
12 a difference for K through 2 and 3 through 5, and
13 middle schools, you all have to have your
14 agendas. It's right there.

15 But, again, you have to razzle-dazzle these
16 kids and make it new every year and make it
17 exciting. We have all of these facts and details
18 but third grade is a great springboard. This is
19 age appropriate and their readability of it,
20 because if they can't read it...

21 I love the pictures. And the teachers are
22 going to love it as well because it's right here.
23 It's also incorporating the character education
24 as well as some curriculum that we don't have

25 time for. We do have to use these daily.

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1 But that's something -- and also you talk
2 about public. What about private schools? Is it
3 available for the private schools? Because our
4 PTA, I mean, we have these. But it's just black
5 and white, nothing on it. No color. This is
6 wonderful because it's exciting. Our PTA pays
7 for it. We get the money out of the PTA. So we
8 have to have these. I just want to see it
9 changed yearly.

10 MS. ZANIN: Thank you. Right. Gosh. What
11 do I say first? Yes, we know. Yes, we agree.

12 We are also looking for -- this program was
13 started by a handful of key people, believe me,
14 who are working very hard. Dr. George is one of
15 these. Yes, she's a paid evaluator but she goes
16 way above and beyond what we pay her for.

17 We know we need a K-2 and we will get there.
18 We are always looking for grant dollars and more
19 sponsorship dollars to do that. We desperately
20 need to get it in middle schools.

21 MS. RYCZEK: These sponsorships, wow, these
22 are the big dollar sponsorship people. I mean,
23 that's wonderful. Or the PTA or fund raising or
24 what can we do to bring the funds in?

25 MS. ZANIN: Exactly. It didn't take us long

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1 to figure out we did not want to be in the

2 planner business. So we have contracted with
3 Premiere Business. They have about 75 percent of
4 the planner business across the country. And
5 they have a sales force that goes out into the
6 schools. So for private schools, we are hoping
7 that they will do that. Because we don't do
8 that, we don't want to do that. We have a
9 nonprofit, a 50123, Commit 2B Fit, Inc., we make
10 very little back on the planner, but whatever we
11 do, it goes back into the program to continue to
12 support it.

13 But, yes, we need to get to private schools.
14 Absolutely. I would like to talk to these teen
15 gentlemen about how we might do some
16 collaboration. I love the mentoring aspect. We
17 have been thinking about that. I think there is
18 a lot of networking that could happen with a
19 program like this.

20 MS. MILLER: Last question.

21 MR. RAPP: Did I hear you right, that the
22 children sign a contract in a sense?

23 MS. ZANIN: Yes, they sign a pledge.

24 MR. RAPP: Do the parents, are the parents
25 involved in signing anything?

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1 MS. ZANIN: That was brought up. That's a
2 very interesting concept. Not yet, but we're
3 hearing it again. So I think it's something that

4 we need to do. Let me tell you, we did, out of
5 necessity, we created this, it's an eight-week
6 journal for adults. We are trying to get this
7 home as a companion piece to this where the
8 parents take the pledge, Commit 2B Fit. They get
9 the same necklace the kids do. This little thing
10 is a powerful incentive. You would be surprised.
11 So, yes, this is our parents' link. We are going
12 to take that step. Thank you.

13 MS. MILLER: Last question, Karen. And
14 after that we might be able to pursue more
15 questioning during the subcommittee breakout.

16 MS. DOWD: Elly, just for clarification, is
17 it accurate that Commit 2B Fit is not a
18 substitute for a physical education program
19 offered by a certified physical education
20 teacher, but rather it augments existing programs
21 and expands it into another part of the school
22 day and after school?

23 MS. ZANIN: Absolutely, yes. I am adamant.
24 I am the physical education curriculum specialist
25 for Broward schools and we do a daylong training

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1 in Commit 2B Fit, with teams of classroom
2 teachers and physical education teachers. I'm
3 adamant that physical education has to drive this
4 train, because without that we won't have
5 physically educated kids.

6 MS. MILLER: Thank you very much.

7 Next up we're going to hear from Steve
8 Bonino, the Food Service Director of Palm Beach
9 County School Districts. He will discussing the
10 wellness promotion policies for Palm Beach.

11 MR. BONINO: Before I get started I just
12 want to commend Elly and Dr. George and I think
13 Mary is sitting here somewhere, what a great
14 program. I've seen a lot of programs come across
15 my desk. This is probably the least invasive,
16 most effective program that I have seen. We have
17 been very successful in eight schools. We plan
18 on expanding it to 16 schools next year.

19 You all are very insightful with your
20 questions because they are the same questions
21 that we have asked and talked to Elly about. And
22 they are very open-minded to expand this program
23 and to look at every avenue. In my opinion, the
24 sky is the limit with this.

25 Wow. What a group. It's my pleasure to

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1 have the opportunity to present to you today in
2 looking at this Governor's Council; it is just
3 one more positive step in the right direction to
4 promote physical fitness and sound nutrition
5 practices among all Floridians and that's our
6 goal as well. I'll look forward to a long
7 successful and supportive partnership.

8 Some of you may know that on June 30, the

9 president signed the child nutrition

10 authorization of 2004 into law.

11 MS. MILLER: We need to have you speak into
12 the mike.

13 MR. BONINO: Because of our public law, it's
14 mandatory for every school district to create and
15 implement a wellness policy. The law, although
16 unfunded and with very little direction, requires
17 districts have a minimum to create a policy
18 encompassing and encouraging four goals.

19 Those goals were nutrition, education,
20 physical activity, other school based activities
21 and nutrition standards. Again, I just wanted to
22 let you know that Commit 2B Fit fits very well
23 into a couple of these particular goals.

24 In Palm Beach County we've had a very
25 successful year. New public law; writing policy;

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1 developing a task force, much like this one;
2 collaborating more closely with internal and
3 external partners has allowed us to be a more
4 credible partner for our mantra of improving
5 student performance.

6 I believe that you all have a copy of our
7 CV, of our wellness promotion policy, the
8 progress report for the past year. And I will
9 not take the time to share the details of the
10 report. It's been submitted to you for your
11 review, at your convenience.

12 However, I will share with you what I have
13 learned and what I believe is or should be the
14 next course of action. In other words, where do
15 we go from here?

16 In my capacity as school food service
17 director and the superintendent designee to lead
18 the charge for the districts wellness initiative,

19 I have learned a great deal in a very short
20 period of time. For instance, nothing is more
21 crucial than awareness. It is proving to be the
22 facilitator of positive change for us and
23 everybody that I speak to.

24 Next we are a generation that has succumbed
25 to the effects of improper time and stress

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1 management. Everything done in moments notice.

2 One meeting after another. Too much to a
3 accomplish with too little time or resources,
4 human or financial. A community centered around
5 convenience. Which means we do not take the time
6 to think and/or make the right choices in a lot
7 of cases. We are modeling this for our children
8 and encouraging them to become the next
9 generation to fall prey to this silent killers.

10 The school day is a perfect example of this.

11 With that is required academically, we are now
12 removing and compressing necessary components

13 from the wellness of our children: Health

14 education, physical education and activity, the
15 arts and now a strong move, a trend if you will,
16 to reduce and sometimes eliminate the meal
17 periods. And this is proving to be a grave
18 mistake.

19 So this is my issue. Lunch is being
20 compressed from the school day at an alarming
21 rate. Children not being given enough time to
22 receive and consume their meal. Therefore, they
23 are making choices of convenience rather than one
24 of nutritional integrity.

25 Imagine a child who did not eat breakfast

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1 before or at school, has to go to lunch just to
2 find out that there is not enough time to receive
3 a meal. No nutrition. No proper nutrition all
4 day. Can we expect this child to perform
5 academically or other wise? Is this same child
6 depending on a vending machine for nutrition?
7 What about after school interests, sports, work,
8 play, homework and others? Again, what can we
9 expect from this child?

10 Currently there are situations occurring
11 where a school has over 2,000 students and one
12 35-minute lunch period. And this is happening
13 more often than not. This travesty happens
14 because it's allowed to happen. The umbrella of
15 interpretation strikes again.

16 The Code of Regulations to the USDA states:

17 Schools are be encouraged, that's encouraged, to
18 provide sufficient lunch periods that are long
19 enough to give all students enough time that are
20 long enough to provide them to be served and to
21 eat their lunches.

22 Frankly, this language is not good enough.
23 No teach. No consequences. No repercussions.

24 I implore all of you to consider this your
25 challenge. Appropriately scheduled meal times.

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1 The nutritional barrier is outlined in section 3
2 item J of your executive order and should be
3 highly considered as a recommendation for your
4 state plan of action.

5 Again, decompress the meal times based on
6 the realistic, well defined regulated formulas.
7 This is what right for the health of our children
8 and their future. I do believe that the public
9 school system is by far the best vehicle and in
10 the best situation to solve this problem and
11 those issues that have lead to the epidemic of
12 childhood obesity.

13 I look forward to strengthening my capacity
14 as a positive role model and encouraging others
15 to do so. Together we can solve this issue and
16 others that negatively affecting our children and
17 our community.

18 Thanks that again for the opportunity to

19 present to you.

20 MS. MILLER: Thank you. Any questions from
21 the council?

22 MS. SCHAECHTER: Director Bonino, thank you.
23 I've had the opportunity to the speak with your
24 staff before. I think it's wonderful what you're
25 doing in Palm Beach. Can you tell me what you

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1 believe is the minimum amount of time necessary
2 for lunch and if you could also comment on the
3 times we've provided. In other words, here in
4 Broward County the 9:45 lunch break or the 2:30
5 lunch break?

6 MR. BONINO: Let me start with the first
7 question. It's going to be the time for schools
8 is going to be different at every single school.
9 The reason I say that is because when the schools
10 were developed, you may have a school that is 25
11 years old, you may have a brand new school. That
12 25 year old school may only have two or three
13 serving lines with a dining capacity of 3, 4 or
14 500. So if you have 1,800 students, you have to
15 work backwards into that computation to figure
16 out how much time you need for the children to be
17 able receive and consume their meal.

18 There are a lot of new schools in Palm Beach
19 County now that have upwards to 8 to 10 serving
20 lines. Dining room capacities that have the
21 ability to hold and seat 600, however when you

22 have a population of 2,400 students and you're
23 trying to bring all of those students into that
24 area -- first of all, it's against fire code to
 25 be able to do that.

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1 Secondly you have a lot of kids, probably
2 two-thirds of that population that are not even
3 going to take the time to come down to the
4 cafeteria because it's too congested.

5 So when you put together a formula, and
6 we've done so in Palm Beach County, that looks at
7 school individually based on the demographics and
8 the logistics of the employment and area and
 9 space utilized.

10 MS. SCHAECHTER: You won't answer my
 11 question?

12 MR. BONINO: I will say this, that it takes
13 probably, they need somewhere between 8 to 12
14 minutes to be able to get through the line and
15 receive their lunch. They should be given at
16 least 20 minutes to consume their lunch. But
17 again, applying that to a formula is going to be
 18 the case.

19 MS. SCHAECHTER: Thank you.

20 MS. RYCZEK: I have a very quick question
21 and I agree with you that elementary and high
22 school, it depends on the time. And I know, I've
23 been when a child hasn't eaten. I've talked to

24 them and I understand that.

25 I love the 30 minutes and again elementary

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1 level, but from personal experience, high school,
2 my son goes to school very early in the morning
3 and they get out and then don't have to have
4 quote/unquote, lunch. And it does work, but they
5 have little carousels or kiosks. But my focus is
6 on breakfast. I would like to see some time put
7 in for breakfast, because, you're right, if they
8 don't eat a nutritionally sound breakfast, it's
9 not working.

10 So do you see it coming to having any times
11 for breakfast or maybe a cart coming around to
12 serve?

13 MR. BONINO: Breakfast has been a goal of
14 ours for almost three years now. I will tell you
15 that there is a difference between an available
16 breakfast program and an accessible breakfast
17 program. In Palm Beach County every single
18 school has an available breakfast program. But
19 because of what are considered barriers to
20 participation, whether that is lack of
21 supervision, buses being late, parents dropping
22 their kids off late, a lot of times they need to
23 start their academic day.

24 We have 37 schools that started this year in
25 Palm Beach County with what is labeled at the 100

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1 percent accessible breakfast program. With those
2 schools -- we pulled the numbers yesterday -- we
3 were feeding about 41 percent of the population.
4 It's now to 68 of the population that are eating
5 breakfast.

6 MS. RYCZKE: Accessible, does that mean that
7 you provide it free?

8 MR. BONINO: The majority of those schools
9 are under the condition of provision two, which
10 means we qualified those schools for every child
11 regardless of their meal determination, free
12 reduced or paid, every child receives a free
13 breakfast.

14 MS. RYCZEK: Every child can get a free
15 breakfast, if they're there?

16 MR. BONINO: Yes, ma'am.

17 MS. RYCZEK: And you get the funds from?

18 MR. BONINO: The federal government.

19 MS. RYCZEK: For example, you have 800 kids,
20 only half of them eat but you get funding for all
21 800. What happens to the food?

22 MR. BONINO: No. We just get funding for
23 the children that participate in the program.

24 MS. RYCZEK: You're saying only half of them
25 get the funding?

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1 MR. BONINO: Yes, ma'am.

2 MS. RYCZEK: How about the fresh fruit? How

3 is that working out? The fresh fruit.

4 MR. BONINO: In Palm Beach County we have
5 received two awards in two years.

6 MS. RYCZEK: I know.

7 MR. BONINO: From the Produce for Better
8 Health Foundation. And we have what we consider
9 a variety of products. We have two or three
10 fresh fruit choices available every day for
11 breakfast and lunch every day at every school.

12 MS. RYCZEK: I would like to see that
13 throughout the whole state. Thank you so much.

14 MS. MILLER: Are there any more questions
15 from the council?

16 Thank you so much Mr. Bonino.

17 At this time we are going to break into our
18 subcommittee groups. It's our intent over the
19 next two days to come to a consensus, ask the
20 subcommittees for their recommendations, and as a
21 full council tomorrow.

22 Before we break out I'll turn the meeting
23 over to Jennie Hefelfinger.

24 MS. HEFELFINGER: I want to give you a
25 little information regarding the subcommittee as

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1 well as the plans for lunch. First of all, I
2 would like to invite those who are our speakers
3 as well as technical assistants, certainly you
4 are welcome to join us and encouraged to join us
5 in the subcommittee meeting rooms. Also members

6 of the public are welcome as guests. Not to sit
7 at the table, but to be there for questions,
8 should the council members have any.

9 Also during the subcommittee meeting today
10 this morning, as well as later this afternoon, we
11 are going to be asking you to review and make
12 final recommendations on those recommendations
13 specific to your subcommittee. So if you could
14 come to consensus on those, review them between
15 the meetings this morning as well as this
16 afternoon.

17 Once you have those done, tomorrow we're
18 going to give you an opportunity to look at
19 recommendations -- well, later today to look at
20 the recommendations from the other subcommittees
21 so you can look where there is overlap in areas
22 of collaboration. And tomorrow ask you as a full
23 council to make final recommendations, deliberate
24 on the recommendations set forth and to come to
25 consensus on the entire state plan of

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1 recommendations.

2 So it's a little confusing, but the
3 subcommittee coordinators will be leading the
4 deliberations as well.

5 The plans for lunch, we have lunch provided
6 in a specific room for the council members. It's
7 \$10 today as well as tomorrow. Today is a buffet

8 lunch and it's a boxed lunch tomorrow. Now Carol
9 Victors, you're going to be collecting funds for
10 lunch from the council members today, if you
11 wouldn't mind please.

12 For members of the public, there is a deli
13 downstairs and I believe the Keiser staff
14 provided options for lunch for other places
15 nearby as well. I think that is all. We'll
16 reconvene after lunch at 1:30 in this auditorium.

17 MS. SCHAECHTER: Are the meetings here?

18 MS. HEFELFINGER: I'm sorry, I left that
19 out. Subcommittee coordinators are standing by
20 over here and they're going to take you to their
21 rooms. Today we have a room set aside over here
22 where two subcommittees will be. Another room
23 for another subcommittee. And tomorrow it's
24 going to switch out a little bit because of our
25 lunch arrangements. So they will be, follow your

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1 subcommittee coordinator to make sure you get to
2 the right room.

3 MS. SCHAECHTER: To make sure the public
4 knows where to go to specific subcommittee
5 meetings, can you point out which...

6 MS. HEFELFINGER: The rooms over here.

7 MS. SCHAECHTER: Nutrition subcommittee over
8 here. Catherine, Rachel and Katie. Active life
9 styles, health and nutrition and health and
10 education. You're welcome to come and go in

11 between the different rooms those of you in the
12 public that have special interest areas. But
13 please be advised these are subcommittee meetings
14 and you can respond if called upon.

15 (The session was ended at 10:43 a.m. and
16 reconvened at 1:34 p.m. and the following meeting
17 was had:)

18 MS. MILLER: All right. Welcome back. I
19 hope everybody had a good lunch. We're going to
20 go ahead and get started. First off we've got
21 Roy Rogers who is the CEO of Roy Rogers
22 Consulting. Mr. Rogers is a leading economic
23 development authority and environmental
24 consultant in South Florida.

25 Is Mr. Rogers here?

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1 MR. ROGERS: Right here.

2 MS. MILLER: Thank you. Welcome.

3 MR. ROGERS: Good afternoon, everybody. I
4 have the pleasant task within my five minutes,
5 and I'll keep it to five minutes, by starting
6 with the observation that the accommodations here
7 are terrific. Let's hear it for Keiser
8 University. I know the family and it's a
9 pleasure to be here.

10 I have an aspiration. The aspiration is
11 what I'm going to share with you in the brief
12 minutes we spend together, will be something that

13 rises to your consciousness to the degree that
14 you're going to remember this. And it will
15 become part of your report. That's my
16 aspiration.

17 It's an observation. The observation is
18 that in addition to your central focus, which is
19 fitness and your charge by the governor -- and I
20 also was selected by the governor, and that's on
21 the commission of ethics for the state. So I do
22 what you do in different a role.

23 In any event, I know what it is to be in
24 your position and come up with recommendations.
25 I would hope that you don't sunset within the

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1 duration of the 12 months. I've been on one
2 governor's commission charge that started with
3 that limitation of one year. We made the
4 recommendation one year and four years later we
5 were still meeting. And it's a new governor in
6 the state of Florida.

7 I say that because it's a segue into the
8 observation. The observation is that exercise
9 intersects environmental education and that's the
10 point. That's what I would like you to register.

11 Look at the graphic here on the back wall,
12 although you can't make it out probably from
13 where you are, it's a map of Broward County and
14 it shows many schools with the symbol of a
15 butterfly. That's because I'm connecting with

16 those schools and providing environmental
17 education, demonstrating to students and putting
18 in butterfly gardens because they all want that
19 enhancement to the campus.

20 But also the best management practices. Be
21 a good steward to the environment; to be
22 conscious of what it is; to be mindful of global
23 warming and what you might do as leaders to have
24 a positive effect.

25 So that your consideration is the stunningly

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1 simple observation. Let's take this campus as an
2 example: With a very minimal amount of resources
3 we could find a way by which we could put on the
4 campus what I'll call a Heart Trail and that is
5 where the opportunity for everybody that has an
6 activity in this building has the opportunity by
7 their choice of time and duration to go out on
8 the Heart Trail and as they have the exercise
9 obesity antidote, they're learning about the
10 environment. They're just not learning by
11 walking and looking; they're registering with
12 signage.

13 So my aspiration is with the schools that
14 I'm doing this would be another that would be
15 sustained and continue for multiple years, we
16 could have a report from me within that
17 five-minute time frame that shows that I'm going

18 to deliver. I'm going to have these Heart Trails
19 that allow someone to exercise and self-interpret
20 nature in the most appealing wholesome way.

21 We do need to connect with nature. And our
22 kids -- their time is reserved with electronic
23 devices to the detriment of playing in the woods.

24 If we could provide something by way of a
25 exercise trail that affords them the opportunity,

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1 if they elect to, to exercise. But I guarantee
2 that they'll learn about nature in that we'll
3 have it properly set up within interpretative
4 messages along the way. Not just butterflies,
5 but also the whole repertoire of wildlife.

6 I did it. I'm within five minutes. I'll
7 stop talking. But my task was so simple. Just
8 one focus and that's the intersection of what
9 you're all here to do, and that's promote fitness
10 and exercise, and the duty of the natural
11 environment which is so easily communicated.
12 Let's do it together and I mean that in every way
13 you can think of. Thank you.

14 MS. MILLER: Thanks, Mr. Rogers. Do we have
15 any questions from the council? Thank you.

16 Next up we'll be hearing from Casey Hannan,
17 the acting chief of program development and
18 Evaluation Branch of the Division of Nutrition,
19 Physical Activity and Obesity, Centers for
20 Disease Control and Prevention.

21 MR. HANNAN: Good afternoon, everyone. It's
22 a pleasure to be here. Madam Chairperson,
23 esteemed members of the council. CDC is grateful
24 for the opportunity to have a chance to share
25 with you some of our perspective on national

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1 priorities for obesity and prevention and
2 control.

3 Reading the charge, certainly allottable. I
4 think your timeline was more daunting than I
5 would care to be up against. I appreciate the
6 opportunity to intersect with you at this point
7 in your scope of activities.

8 I wanted to begin by way of setting the
9 context. Because I think by setting the context,
10 you'll understand some of my remarks later on.
11 I'll start with probably overstating the obvious:
12 that the problems of overweight and obesity in
13 our country are vexing. I know you're probably
14 saying: Thanks, Casey you came all the way down
15 from Atlanta to state this. What I'm trying to
16 do here is suggest to you that this problem,
17 these epidemics -- or this epidemic of overweight
18 and obesity began about 30, 40 years ago. It's
19 going clearly in the wrong direction. It's not
20 showing too many signs of slowing down.

21 The reason I state this is because in terms
22 of your recommendations and the plan you're

23 setting forth to the governor, think about having
24 realistic expectations of what you hope to
25 accomplish and what goals you set out to do.

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1 Again, vexing problems. I know this as a 20-year
2 public professional postgraduate school. I know
3 this as the father of three boys, ages 16, 14 and
4 almost 7. I know this as a guy who likes to do
5 triathlons on the weekend and trying to fit my
6 own time in for training so I can reach the
7 finish line.

8 Next up, cause of the epidemic is
9 multifactorial. I'm going to spend my time going
10 over a framework we adopted from an IOM report in
11 2005. In one sense, energy balance is really
12 what we are talking about here. Obesity, the
13 epidemic of obesity can be looked at from the
14 point of view of being related to two sub
15 epidemics. One epidemic of inactivity and
16 another epidemic of poor nutrition. To get
17 energy balance we need to focus on energy intake
18 and energy expenditure.

19 Conceptually very easy. How are these
20 impacted? You look at your food and beverage
21 intake and you look at your physical activity.
22 Energy in and energy out. Conceptually very
23 easy.

24 Let's consider the context that this takes
25 place in. First are a set of individual factors.

2 school health and now the division of nutrition,
3 physical activity and obesity. Your view of
4 solutions is going to depend on your view of
5 causality.

6 What will solutions require of us? Will it
7 require a magic bullet? Will there be a pill
8 that will help us be less fat and more fit? Not
9 very likely and not in our lifetime. Could it be
10 it's going to require more profound and pervasive
11 changes in lifestyle, the food supply, physical
12 activity levels, like the cultural transformation
13 that changed cultural norms related to cigarette
14 smoking and seat belt use. It will require that
15 other solutions are based on science to the
16 extent possible with the need for multicomponent,
17 multi-sectoral interventions that are strategic
18 and sustainable.

19 I want to emphasize this: While the charge
20 of this council is under a particular governor, I
21 would like you to think about your
22 recommendations in a state plan that extends well
23 beyond whatever his tenure might be as governor.
24 Sustainability is going to be key.

25 We've seen probably a decrease in smoking,

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1 but that's only after 40 or 50 years of
2 everything going in the wrong direction. And
3 we're only at 20 percent, I mean, still about 20
4 percent of people smoke and it's down from the

5 30s. Any success we are going to have is going
6 to have to be sustained by ongoing efforts over
7 years and years, if not decades.

8 The other context that I wanted to run by
9 you is that as I mentioned earlier this problem
10 has been emerging for the last 30, 40 years. The
11 sentinel point in the epidemic was the Surgeon
12 General's call to action to prevent and decrease
13 overweight and obesity.

14 We're lucky enough at CDC to have funding
15 from congress since 1999 to address nutrition,
16 physical activity and obesity effort. The state
17 of Florida fortunately has been a good steward of
18 those funds since 2001. And with the Department
19 of Health Leadership with basically what amounts
20 to pennies per capita here in the state of
21 Florida, they've done great work in the last six
22 years. They've developed partnerships. They
23 formed coalitions. And they do, indeed, have
24 their own state plan.

25 So if you're considering writing a plan to

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1 the governor with this recommendation, please
2 consider the work that has taken place before you
3 all. The work is well-done. It's well-vented.

4 And it's got the basis for informing if not
5 highlighting much of what you might want to
6 suggest to the governor.

7 I'm going to race through this section.
8 Because, again, it's more context. This is
9 traditional CDC priorities. We do this in
10 chronic disease prevention as well as infectious
11 diseases and the Department of Health here in
12 Florida has very parallel, if not identical,
13 functions that do take place.

14 We monitor free data, statistics. We bill
15 and translate the science base. I'll spend most
16 of my time at the end of my remarks commenting on
17 the science base or what we hope will be the
18 science base. We support state and local
19 programs. We promote effective policies. We
20 forge public/private partnerships on the national
21 level that give us some traction for policy
22 change. And we communicate to the public.

23 I know you've been bludgeoned with the data.
24 There has been some good conversation within the
25 health and nutrition group about diabetes. I

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1 want to say that increase in weight foreshadows a
2 lot of other chronic diseases, diabetes among
3 them.

4 Old Senator Renford used to say when showed
5 this slide, like night follows day. After weight
6 comes diabetes, hypertension other cardiovascular
7 disease risk factors.

8 We do data. We not only do health behaviors
9 and health status, we also monitor policies and

10 programs and I hope you've seen some of that. We
11 fund a good number of schools' public health and
12 universities across the country. They do great
13 work in developing an effective program. Here
14 you see Planet Health. Catch and a lifestyle
15 fitness program. Planet Health is done in the
16 Harvard, Boston area. Catch in Texas. And
17 Lifetime Fitness for the more senior of our
18 population down at the University of Washington
19 in Seattle.

20 We work a lot with the IOM. We've been
21 able, with funds from congress, to fund these
22 three reports: Preventing Childhood Obesity;
23 Food Marketing to Children and Youth; Nutrition
24 Standards for Foods in Schools. Very apropos
25 with what you all are considering. I hope that

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1 you avail yourself of these resources.
2 Translating the science base. This is where
3 CDC is a lot different than, say, some of our
4 sister agencies like NIH. We are in the business
5 of trying to apply what we know in ways that
6 benefit the population. For example, school
7 health tools, the SHI up there is a school index,
8 you might consider in your recommendation that
9 schools do this. This is a self-assessment that
10 is done to look at every schools' policies
11 related to physical activity, nutrition, staff

12 development and other things. It's completely
13 diagnostic and allows people to see ways in which
14 schools have health promoting policies or not.

15 We also have other materials that are
16 available on our Web site, such as our weight
17 management research to practice theory.

18 We support state programs, as I mentioned,
19 Florida is one of them. We currently have enough
20 resources to reach 28 states at two different
21 funding levels. This is to address nutrition,
22 physical activity for obesity prevention.

23 My former division, Adolescent School
24 Health, has funds to support 23 states. I'm
25 happy to say that Florida is one of those and has

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1 been a longstanding recipient of those funds.

2 We support local programs with other
3 appropriations we get. Examples of these are
4 Steps to a Healthier U.S., which is in 40 some
5 odd communities, some of which are here in
6 Florida. REACH, Racial and Ethnic Approaches to
7 Community Health. And Activate America, a YMCA
8 program.

9 We promote effective policies when we know
10 that there is good evidence to do so. For
11 example, schools were promoting nutrition
12 standards for foods and beverages. We had the
13 IOM report to back us up on that.

14 We advocate for a minimum of 30-minutes

15 daily physical activity. Notice we didn't say
16 physical education. This is being active while
17 you're in Phys Ed.

18 Community improved access to fruits and
19 vegetables and zonings for sidewalks, bike paths
20 and parks.

21 Work site, I would encourage the council to
22 the extent possible, to think about work sites.
23 Schools are an easy target because it's where you
24 find kids most of the time. Where do you find
25 adults? In work sites. There are all sorts of

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1 dilemmas of reaching work sites. They're not as
2 well organized and there are big corporate work
3 sites as well as small work sites. Most people
4 right now across the country are in work sites
5 that are 200 or fewer. It complicates the
6 challenge. Think about comparable
7 recommendations that you are doing in schools to
8 the work site setting.

9 We form public/private partnerships. Again,
10 to get some attraction on policy initiative.
11 Fruits and Veggies, More Matters is a CDC, HHS
12 and Produce for better health partnership. Share
13 our strength as a partnership with a group that
14 serves people who suffer from hunger.

15 And then we have a very interesting
16 partnership with the stack of names over on the

17 right. Kaiser Permanente, the Kellogg Foundation
18 and Robert Wood Johnson Foundation and the
19 California Endowment. I'll be sharing some of
20 that work in a little bit.

21 We communicate with the public mostly
22 through our Web site and through other
23 publications as well.

24 We are, as I said, vexed in many ways,
25 because what we know versus what we don't know is

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1 out of balance. We would like to know a lot more
2 to be able to say: If you do these things, we'll
3 guarantee you specific results. Like they can in
4 tobacco, where I turn green with envy. They have
5 econometric models that say that the state
6 invests per \$10 million increments that comes
7 from federal sources, master settlement sources,
8 state revenues, excise tax, what have you, they
9 can say within a good margin of error: Per \$10
10 million increments you can estimate prevalent
11 decreases in tobacco consumption.

12 We are a long, long way from that, being
13 able to do similar work in nutrition and physical
14 activity. But we do know enough to be acting.

15 I wanted to share with you a policy
16 statement or a vision statement from our center
17 of which our division took part that we promote
18 social and environmental and systems approaches.
19 Again, it's that context that I mentioned to you,

20 that individual behavior happens in a context
21 that supports healthy living.

22 What we mean by this is simply that if we're
23 out there advocating for people to eat five to
24 nine servings of fruits and vegetables a day --
25 and the new recommendations vary based on your

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1 weight status, your activity level and gender --
2 that if people don't have access to fresh fruits
3 or vegetables or that they're not affordable to
4 them, it's not going to do them a lot of good to
5 come up with a recommendation.

6 The other reason context is important and
7 our focus on policy, just by way of full
8 disclosure, is there is literature out there that
9 says policies have a lower reach -- I mean a
10 higher reach and lower cost compared to
11 individually targeted specialty care or primary
12 care types of strategies. This is derived from a
13 diabetes care article published back in 2003.

14 I'm going to give you a lot of caveats here,
15 because I'm sharing with you something that is
16 preliminary and these strategies have not yet
17 totally been determined to be effective like CDC
18 guides for community preventative services have
19 been.

20 This is work that is coming out of the
21 convergence partnership that I mentioned with

22 Kellogg, Robert Wood Johnson, California
23 Endowment and Kaiser.

24 We are looking at, across the country, ways
25 in which we can all be measuring the same things.

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1 The extent to which we can measure the same
2 things and have you get the same outcomes. We're
3 going to be able to build the evidence base much
4 more quickly than if we're all measuring
5 different things.

6 So through a very systematic process, I'm
7 sharing with you some things that you won't find
8 on CDC's Web site, because this is a preliminary
9 list. The final report is scheduled to be
10 delivered next summer, July '08.

11 Under each of these strategies we will have
12 ways in which these can be measured, the
13 selective variables that are going to be
14 measured.

15 But I want to spend some time here showing
16 you the 25 or so that have been identified as
17 having an effectiveness base, sustainability
18 consideration, that they're mutable, you can see
19 differences in those responses and that have some
20 sustainability with them.

21 To pick through these, you have them on your
22 handout: Improving access to healthier food and
23 beverage choices in public service venues.
24 Meaning, government building, schools. Improve

25 access to healthier ready to eat food and

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1 beverage choices in public service venues.

2 Approved economic access to affordable healthier
3 ready-to-eat food and beverage choices. Restrict
4 availability of less healthy food and beverage
5 choices in public service venues. Institute
6 smaller portion size options and improve
7 geographic access to supermarkets. That's under
8 food availability.

9 This one is under the theme or the category
10 advisement of promotion. Limit advertisements of
11 less healthy fruits and beverages. Increase
12 availability of breast feeding support programs.

13 Discourage consumption of sugar sweetened
14 beverages. 12 ounces packs a lot of calories if
15 it's not a diet.

16 Pricing strategies:
17 Incentives/disincentives: Pricing strategies to
18 promote purchase of healthier foods and beverage
19 choices in public service venues. In other
20 words, how can we make things a little bit more
21 affordable?

22 We have a vending machine study going on
23 that CDC, right now, is looking at increasing the
24 price of less healthy options in lieu of
25 underwriting or subsidizing these more healthy

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1 options. Trying to decide if that is a viable
2 strategy or not.

3 Pricing strategies to promote purchase of
4 fruits and vegetables. Again, is there a way
5 that we can provide some pricing incentive.

6 Incentive to food retailers to provide
7 healthier food and beverage choices. Maybe an
8 award recognition program. A lot of these ideas
9 are already being discussed here.

10 Incentives to food retailers that offer
11 healthier food and beverages located in
12 underserved areas.

13 In the area of recreation: improve
14 geographic access in places like parks, play
15 fields, courts, trails. Require Phys Ed in
16 schools. This is already under way in this
17 state. I know all about that. Increase physical
18 activity, extracurricular opportunity and
19 increase the amount of physical activity in
20 physical education programs in schools.

21 In the area of transportation the
22 recommendations are enhance infrastructures
23 supporting bicycling, bike lanes, share the road
24 signage, bike racks, etcetera. And enhance
25 infrastructure supporting walking. For example,

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1 sidewalks, benches. shade.

2 Land Use and Design: Support school site
3 location within easy walking distance as opposed

4 to clear on the other side of the neighborhood,
5 where the land is available, by the way, I
6 notice. Zone for mixed use development. Some
7 combination of residential, commercial,
8 institutional or other public land use.
9 There's one more and then I'll be done with
10 the formal remarks.

11 Safety: Enhance personal safety in areas.
12 We had a pretty interesting conversation over
13 lunch about this and how things have changed
14 quite a bit in the generations from us to our
15 parents. Enhance traffic safety in areas where
16 people are or could be physically active.

17 Again, thank you for the opportunity to
18 address the council and I commend you in your
19 efforts. I look forward to hearing about your
20 successes. CDC is in the position to learn a lot
21 by your experiences here and we're grateful for
22 your efforts.

23 MS. MILLER: Thank you. Bill?

24 MR. MONTFORD: Can you go back to slide two?

25 MR. HANNAN: Second slide?

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1 MR. MONTFORD: I think so.

2 MR. HANNAN: This one?

3 MR. MONTFORD: Keep on going. This is an
4 issue and something we talk about quite often in
5 this council and other venues as well, and that

6 is we focus a lot on schools which we rightly do.
7 I mean that's a good place. But I'm not sure if
8 we spend, not just this council, but just in
9 general, enough on all the -- including the right
10 side over there -- food and beverage industry and
11 so on.

12 I'm not sure if we focus -- I would be
13 interested in your experience in that and what
14 perhaps is happening in other communities and
15 other states.

16 MR. HANNAN: I think your observation is
17 accurate. I think to a great extent we focus on
18 schools because we are very concerned about kids
19 and we all have our own reasons for that. It's
20 certainly a way for us to ensure and protect our
21 future. Schools have shown a willingness to work
22 on health concerns throughout the last several
23 decades.

24 In public health terminology they are
25 capture points; it's a very easy place to go and

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1 collect data. I know the health and nutrition
2 committee is currently drafting recommendations
3 to do BMI screening in schools and reporting back
4 to families. A lot of reasons why schools are
5 the target. And as I said earlier, it's where
6 the kids are Monday through Friday most of the
7 day.

8 We wanted to show this by way of saying

9 there are a lot of other sectors of influence, or
10 sectors in our society, that we do need to be
11 working with. So I think we need to CDC is doing
12 a little of that. Let me say that again. CDC is
13 working pretty extensively with media through our
14 Verge campaign and other places. We interact
15 with other government agencies and we've had our
16 heads and our minds in the farm bill
17 re-authorization and looking at agricultural
18 policies that can predispose us one way or
19 another.

20 Food and beverage, certainly, they've
21 already shown a responsiveness, not only with
22 obesity but in the case with saturated fat. They
23 were very dutiful in coming to market with a lot
24 of things that were no fat or low fat options.

25 What we learned from that is that a calorie

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1 is a calorie whether you get it from a fat or
2 another source. So even though you might unbox
3 those SnackWell cookies, eating the whole thing
4 is usually not the right thing to be doing. They
5 shed some light.

6 If you think about nutrition in the micro
7 nutrient sense where we've added vitamin D to
8 milk, niacin to flour fortification, a few
9 examples. Those have all been engineered and led
10 by industry with very little government

11 environment.

12 A long answer to your question. I agree
13 with you and I think there are ways in which --
14 because our position at CDC is that all parts of
15 society, all sectors are going to share some
16 responsibility in trying to turn this ship
17 around.

18 MR. MONTFORD: I'm interested in, too, you
19 mentioned here two or three times fruits and
20 vegetables, more access to fruits and vegetables.
21 Tell me what -- I've mentioned to the table a
22 couple of couple of times that eating healthy is
23 expensive, but then I've learned that is not
24 necessarily the case. But you triggered this
25 talk again with fruits and vegetables and access.

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1 What do you mean by that? Is it because of the
2 expense or maybe a lack of education on the part
3 of the purchaser?

4 MR. HANNAN: I think those are all important
5 variables in the conversation. When we are
6 talking about access, typically we are talking
7 about an urban setting, an inner-city
8 neighborhood where supermarkets are not
9 accessible. In other words, they're not close
10 by. And the local community stores, whether it's
11 a gas station or some kind of mini mart, they're
12 not stocking any kinds of fruits and vegetables.
13 So there is that issue. Just in terms of cans,

14 if they wanted to buy them, can they put their
15 hands on them?

16 Pricing certainly is a factor. Sometimes
17 fruits and vegetables can be pretty expensive.
18 And not quite as filling as another choice that
19 is a lot less heavy, that has a higher salt
20 content and fat content.

21 In suburban and urban settings some of the
22 access we are looking at is farmer market
23 programs, where local producers of produce can
24 sell their products at a work site, at a
25 community kind of garden market setting or even

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1 supply fruits and vegetables to local schools.
2 We're seeing lot of activity going on around that
3 and USDA has funded some pilot studies in Iowa
4 and Mississippi as it relates to doing farmer
5 markets for schools.

6 MS. MILLER: Other questions from the
7 council?

8 MS. SCHAECHTER: I have a quick one,
9 particularly a little about the workplace part.
10 The stairways, you show the picture there, 15
11 years ago I worked in a building where Helen and
12 Peter Ping had given money for art in the
13 stairwells and everyone used them. It was
14 wonderful.

15 I think we see motion in the other way

16 because of security concerns. And buildings,
17 workplaces and other places don't want people in
18 stairwells. Have you all grappled with that and
19 possible solutions?

20 MR. HANNAN: We have been and being an
21 agency that bases a lot of what we do on data, we
22 don't have any data that suggests that. Two big
23 concerns are safety and injuries, falls on
24 stairs. We haven't been able to identify any
25 higher risk of workplace type of injury, whether

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1 it's a crime in the stairwell or a fall.

2 I think they're legitimate concerns. We
3 really need to pay attention to that. I haven't
4 seen any data that suggests that incidence or
5 prevalence of those problems increase as more
6 people use the stairs. People per person flight,
7 I guess would be a measurement there.

8 MS. RICHARDSON: Donna, I think a few
9 things, again, if you look federally, CDC is
10 supplying us with a lot of great ideas and the
11 programs you have. And one of those is when you
12 talked about supporting state programs, 28 states
13 you mentioned, what is the criteria or how do you
14 choose what program that money goes to?

15 MR. HANNAN: Right now -- let me first of
16 all say, if we had enough money appropriated we
17 would be in all 50 states. It's a matter of not
18 having enough money in the checking account.

19 The criteria for that is simply state health
20 departments need to apply. They are the eligible
21 entity. They have to propose a plan. In 2003
22 when the last funding cycle was recomputed, all
23 50 states came in and all were approved. They
24 get a merit score based on the quality of their
25 application. And we were only able to fund down

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1 to a certain line, where as all the applications
2 had a scoreable -- a fundable application. Is
3 that what you are getting at?

4 MS. RICHARDSON: So the state decides where
5 the money will go? Not necessarily federally,
6 the CDC chooses?

7 MR. HANNAN: When we issue those, the
8 announcements, it's targeted for state health
9 programs. The state does apply to us. Within
10 some broad parameters of the funding
11 announcements to say we want to see your plan
12 addressing these items and go down the line. The
13 states will write back and then they'll have an
14 application review and give them a numerical
15 scores.

16 MS. RICHARDSON: The next question is diet
17 drinks. We know their caloric intake. But are
18 they safe? Have you had research that shows diet
19 drinks aren't healthy?

20 MR. HANNAN: I'm not aware of any research

21 that CDC has produced. In fact, that is not
22 something we would do research on. It's more of
23 a NIH type of research endeavor. If I can
24 identify some literature on that, when I get back
25 to Atlanta, I'll send it on down to the council.

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1 MS. RICHARDSON: That would be great to
2 know. I hate to push diet drinks calorically.

3 MR. HANNAN: That's a subject that came up
4 at the health and nutrition subcommittee, a
5 conversation before lunch as well.

6 MS. RICHARDSON: Texas has the funding to
7 put together their Fitness Gram, as they call it,
8 and BMI for over 300,000 kids. You might want to
9 partner with Dr. Ted Mitchell at the Cooper
10 Institute.

11 MR. HANNAN: I am aware of that.

12 MS. RICHARDSON: That may be something you
13 can jump in on.

14 MR. HANNAN: Thank you for the
15 recommendation.

16 MS. MILLER: Don?

17 MR. RAPP: You mentioned \$10 million smoking
18 and their increment of success there. Obviously
19 there is not enough money. You don't have as
20 much money as you would like for prevention.

21 How can Florida help the national, I guess
22 it's one way to say it -- how can Governor Crist
23 be influential in getting you more money or

24 getting money for prevention or increasing the
25 awareness that prevents a lot less costly than

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1 cure.

2 MR. HANNAN: I love that question. I've
3 never been asked that question. Thank you very

4 much.

5 Top of my answer would be the leadership
6 that he's showing through this council and
7 recommendations and the plans set forth, to
8 actually do it in a way that is coordinated along
9 with the appropriate agencies within the state
10 that have the proper coalition development and
11 partnership that is thinking about things like
12 sustainability, that is using the evidence base
13 where we can, developing the evidence base where

14 it's not.

15 I think one of the things Florida can do in
16 providing leadership for the country is based on
17 the examples set here in the plan you're going to
18 set forth, let's evaluate it together and
19 understand what is working and what's not.

20 That's one huge way.

21 Another way would just be to say that --
22 simply to showcase the successes that the state
23 is going to eventually, I'm sure, demonstrate

24 with this effort.

25 MR. RAPP: In a sense you're available to

1 Florida?

2 MR. HANNAN: Yes, we always have been.

3 MR. RAPP: Always have been.

4 MR. HANNIN: It's mostly through the
5 department of health. I have to make that clear.
6 We're happy to work with all parts of the state.
7 CDC is mostly state and county health
8 departments.

9 MS. MILLER: Karen.

10 MS. DOWD: I'm going to take an opposite
11 approach that Don just took. Are there funds
12 available and/or investigative research
13 opportunities available to this council and the
14 agencies in which it is entangled to best serve
15 the state of Florida out of CDC funds?

16 MR. HANNAN: I would say the answer is yes.
17 To a great extent you're already capitalizing on
18 those opportunities.

19 The programs that I showed up there: The
20 state-based program, for example, the two I had
21 slides on, adolescence school health has a
22 coordinated health school program initiative,
23 you're already a part of that. Our division has
24 nutrition, physical activity and obesity
25 resources.

1 Another part of CDC --

2 MS. DOWD: Are we a part of that?

3 MR. HANNAN: Yes, you certainly are since
4 2001. Another part of our center, another
5 division of heart disease and stroke prevention
6 has cardio vascular disease money. I believe
7 Florida is a part of that. Comprehensive cancer
8 control, I believe you are a part of that.
9 Diabetes translation, yes, you're a part of that.
10 CDC is not going to fund so much biomedical
11 clinical investigation as they will more applied
12 demonstration.

13 MS. DOWD: Programmatic.

14 MR. HANNAN: Programmatic. To try to
15 understand, it's a semantic difference. It means
16 something to people at CDC. The difference
17 between understanding efficacy and effectiveness.
18 We're more on the applied effectiveness side.

19 MS. DOWD: With that said, if I could
20 piggyback on there, so are there any CDC funds or
21 opportunities available to states of which
22 Florida is not currently engaged?

23 MR. HANNAN: I'm not perfectly knowledgeable
24 on that. I would nod to Jennie a little bit to
25 see what you might be missing that is available.

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1 MS. HEFELFINGER: The only application that
2 we have not been able to successfully compete for
3 is the YPOMAN (phonetic) grant which was limited
4 to 15 states by federal appropriation. But we

5 have all the other CDC grants.

6 MR. HANNAN: All but one. It's a pretty
7 limited program in scope right now.

8 MS. MILLER: Are there any other questions?

9 Yes. Dot?

10 MS. RICHARDSON: I see a discrepancy here
11 with promoting effective policies,
12 recommendations for schools with 30 minutes of
13 daily physical activity. I've heard that
14 children need at least an hour of physical
15 activity. So do you think our state looked at
16 your recommendation of 30, for their decision or
17 do you feel it's an hour or what is causing that
18 discrepancy?

19 MR. HANNAN: I'll try to clear this up and
20 not talk out of both sides of my mouth. We are
21 aware that the A.P. recommendations are 60
22 minutes a day. We believe schools can contribute
23 to 50 percent of that. That's where the 30
24 minutes comes from. They're not completely in
25 school all the time. We think the family and the

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1 community can provide opportunity for the other
2 50 percent or the other 30 minutes.

3 MS. RICHARDSON: But it might be wise to say
4 an effective policy minimum of 30 minutes or a
5 recommendation of 60.

6 MR. HANNAN: It's a good point. Nice catch.
7 You've been on the president's council a long

8 time, haven't you?

9 MS. RICHARDSON: Yes.

10 MS. MILLER: Any other questions?

11 I appreciate personally the distinction
12 between physical education and physical activity.

13 Thank you very much for your comments and your

14 time. We appreciate it.

15 MR. HANNAN: Thank you.

16 MS. MILLER: Next we'll hear from Jennifer

17 Bland-Campbell. Jennifer is the director of

18 nutrition program development for airlines. As

19 director of nutrition program development

20 Jennifer works to provide nutrition guidance and

21 consultation to airline chefs developing menu

22 programs which reach the 15 million customers

23 Aramark serves every day, and healthcare

24 institutions, businesses, universities, school

25 districts, sports and entertainment facilities

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1 and convention and conference centers. Jennifer?

2 MS. BLAND-CAMPBELL: I am honored to be

3 asked to present before the council.

4 MS. MILLER: Please step closer to the mike.

5 MS. BLAND-CAMPBELL: I'm honored to present

6 before the council. And my remarks are going to

7 be briefer than my esteemed colleagues. I am

8 glad I could share some of that. I don't have

9 the words of the presentation.

10 What I hope to cover today is walk you
11 through the health and wellness program that
12 Aramark has developed for all of the arenas, of
13 which we serve. That's the focus of today's
14 meeting. I wanted to you tell you a little bit
15 about Aramark in my introduction, who we are.

16 We are a professional services company that
17 not only provides food, but facility services as
18 well as current uniforms, apparel, to a wide
19 variety of setting and not only healthcare but
20 acute care, but long-term care as well as
21 assisted living facilities. Not only in the K
22 through 12 arena but also at colleges and
23 universities.

24 A lot of our business is in the business of
25 intercity sector where we serve food through

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1 facility and corporate environments, as well as
2 large conference centers and sports and
3 entertainment arenas. We do stadiums and
4 convention centers and every four years we do the
5 summer Olympics. We're gearing up for Beijing.
6 We feed the athletes and coaches and media. We
7 also send registered dieticians to the Olympics
8 where we provide nutritional counseling and
9 analysis of all of our menus to athletes, coaches
10 and physicians.

11 We're one of the largest employer
12 corporations for dieticians and we've formed a

13 partnership with the American Dietetic
14 Association, nutrition and dietetic
15 professionals. So we think that partnership will
16 really help us to combat this obesity epidemic.
17 And last but not least we also serve in the
18 public safety corrections environment. While you
19 may think that health and wellness is not an
20 issue in those environments, as inmates get older
21 and start developing chronic diseases of obesity
22 and age, there is a lot of opportunity for us to
23 help with their health and wellness.

24 Here in the state of Florida I know that we
25 serve two school districts. I believe one is

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1 Duval County and the other one is Polk County. I
2 know we work very closely with the business
3 industry, Florida Power and Light, and they have
4 a wonderful health and fitness program for their
5 corporate employees, which we work with them.

6 How do I get rid of this?

7 So today what I want to focus on, I wanted
8 to talk with you about some of our health and
9 wellness programs. How we think about health and
10 wellness. We think about it as enabling,
11 educating and encouraging.

12 Whenever we do health and wellness programs
13 for children or adults we want to enable a
14 healthier lifestyle by providing choice and

15 transparency. By transparency I mean nutrition
16 information by the food items that we serve in a
17 very transparent manner. We want to educate our
18 customers to empower them to make those healthy
19 choices. So we have a variety of mechanisms by
20 which we provide education, whether it's an adult
21 or a child friendly environment.

22 We also have an array of promotional and
23 merchandising type activities that we do to
24 encourage people to make those healthier choices.
25 We have this mantra that we live by which is to

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1 enable and educate and encourage as it relates to
2 health and wellness.

3 We also believe that we could better serve
4 our customers with as much insight about them as
5 we need. While most of our research is in the
6 adult arena, I've heard a lot today about how
7 parents influence the behaviors, choices, food
8 habits, exercise habits of their children. We
9 feel strongly about extrapolating some of this
10 research to how we think parents will impact on
11 their children.

12 In 2004, I believe it was, yes, it was. We
13 undertook this massive research project and that
14 was during the Atkins/Crist, trying to figure out
15 how to better serve our customers. What we found
16 after we did this, we see it was much more than
17 we had bargained for.

20 nutrition education programs are based on My
21 Pyramid. And we also saw that. We're health
22 professionals, we know what they're talking
23 about.

24 This was an eye-opener for us. And
25 consequently we've developed all kinds of

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1 wellness programs with getting people familiar
2 with the 2005 dietary guideline.

3 Another result that I thought would be
4 appropriate for this group was about exercise
5 frequency since this is the fitness council on
6 physical fitness. If you look over the three
7 years, 2004, 5 and 6, exercise among adults who
8 include their children has slipped, with only 48
9 percent saying they exercise two to three times a
10 week. In proportion, people who obviously say
11 they never exercised, grew.

12 It was a good statistic while here in the
13 business of exercise physiology. When we talk
14 about nutrition, you can't talk about it without
15 the context of physical activity so it was a good
16 thing for us to have.

17 We use a lot of your research information to
18 develop programs with health and nutrition and
19 one of the educational programs that we developed
20 was all about the pyramid. We did like a
21 six-week-long campaign and this was in an adult
22 environment, which included not only one week

23 devoted to each portion of the pyramid education
24 about grains, lean proteins and fruits and
25 vegetables, but also a newsletter which tells us

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1 how to eat better without eating in a fattish
2 way, but on the back of the newsletter it's about
3 physical activity.

4 So a lot about our educational programs
5 comes out of the investigation from our research.

6 A little bit about Aramark Education
7 primarily in the healthcare food environment.
8 And in what we do to help students along so that
9 we do a small bit in combating the obesity
10 epidemic.

11 Talk a little bit about wellness as well on
12 nutrition programs which focus on meals on the
13 one hand that we serve and education on the other
14 hand. Also focuses on the environments, because
15 what we found is as we talked to children and as
16 we try to keep them within the confines of the
17 building so they could participate in the
18 reimbursable meal, we found that the environment
19 of the dining area played a big part in what was
20 necessary to encourage healthier eating.

21 So some of our meal programs include trying
22 to make sure that breakfast is a focus. We
23 talked about breakfast earlier today in one of
24 the sessions. Healthier snacking. Talked about

25 the SnackWells and eating the whole package. We

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1 have a portfolio of about 150 snacks which
2 include some packaged snacks as well as, quote,
3 fruit snacks for our service directors to choose
4 from as part of the a la carte section of the
5 dining service.

6 We also provide a lot of tools to our food
7 service directors within our school districts so
8 that as legislation sort of streams across the
9 country from California and from this state
10 coming up with different nutrients that should be
11 either avoided or included are being developed
12 sort of on an online calculator that enables our
13 director to decide which of 150 would be
14 appropriate for their state, because they can't
15 take the entire portfolio and use it across the
16 country.

17 Fruits and vegetables stations we've added
18 so that, again, accessibility was mentioned in
19 the talk before about fruits and vegetables.
20 Mobile stations, every school that we provide we
21 try to provide a salad bar if the physical plant
22 was receptive to that.

23 We also provide our food service directors
24 with a tool kit that helps them to actively
25 participate with the school district in the

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1 creation of the schools' health and wellness

2 policy that mandate, many schools struggle to put
3 together those policies in a timely fashion. I
4 am now going through having a year's worth of
5 experience with them.

6 Again, the nutrition education. We have a
7 mascot, Spike, who talks about balanced eating.
8 He visits the schools. He dances. He raps.
9 When I say eat, you say right. Eat right. We
10 talked about what that means. He does a lot of
11 physical activity while he does the nutrition
12 education.

13 We also have for older kids: Treat yourself
14 right, which is a wellness education program for
15 middle and high schools. And a healthy smart
16 program that is used in high school. We have an
17 Aramark fitness program, that's used to help
18 teachers incorporate nutrition and education into
19 their curriculum.

20 Last but not least, environment, our dining
21 brands. We have three different brands depending
22 on age group. And the brands that we're most
23 proud of are the U.B.U. Lounge, which is really a
24 very different way of looking at the school
25 cafeteria. It's like the college dorm lounge

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1 where students eat as opposed to your long tables
2 that are across with the chairs and some of that
3 institutional environment. And we find that

4 keeps students on-site especially in places where
5 it's easy to walk down the street and go to the
6 local deli or the local fast-food facility. We
7 make the environment as conducive as possible to
8 help enable and encourage healthy eating.

9 I see my time is up. I think I have one
10 more slide that talks about trying to break the
11 monotony. All of these are programs that are
12 asking how do you break the -- for healthy foods.
13 And as the green revolution is taking off, we're
14 trying as a large company that purchases so much
15 food, working with a third-party purveyor's
16 source on locally grown organic brands. That's
17 all I have.

18 MS. MILLER: Thank you. Are there any
19 questions from council?

20 No questions. Thank you very much,
21 Jennifer.

22 Next on the agenda we have Robin Turner of
23 the office of Greenways and Trails, Department of
24 Environmental Protection, to educate, working to
25 establish a statewide system of greenways and

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1 trails for recreation, conservation and
2 alternative transportation. As regional
3 coordinator Robin works with local, state and
4 federal government, nonprofit organizations,
5 private land owners, private developers and
6 citizens to facilitate OGT's mission.

7 MS. TURNER: Hello. I am Robin Turner. I
8 would like to thank you for inviting me to
9 present prior to your quote/unquote initiative
10 for the state plan on physical fitness.

11 I do work with the development of
12 environmental protection offices, greenways and
13 trails. We already said the mission that we are
14 working on is to establish a statewide connection
15 through some investigative, conservation, also in
16 transportation perhaps.

17 Our sister agency is state parks. State
18 parks are also working to provide resources, like
19 daily recreation, while preserving and
20 interpreting the natural and cultural resources.

21 With the exception of Tallahassee,
22 Jacksonville and Gainesville, the region that I
23 work with, represented in the green, is primarily
24 rural. What I've learned with working with so
25 many rural areas is not that they're not

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1 interested in the programs, but it's their lack
2 of manpower to implement the programs. So that
3 is always a struggle for them.

4 Our vision is to increase access so that all
5 Floridians can reach a greenway trail within 15
6 minutes of their home or workplace. To implement
7 this vision -- well, I was really pleased to hear
8 Elly mention that their Commit 2B Fit program and

9 Broward County's partnership with the parks
10 because it's not something that you can do on
11 your own. And it works best when everyone works
12 together because it does enhance the quality of
13 life for everyone.

14 As part of our vision for public access we
15 have developed a series of maps. We did this
16 with public input that was gathered in the series
17 of workshops held throughout the state. And the
18 focus was on our acquisition program, which is
19 part of the Florida Forever Program, we developed
20 maps for multiuse trails, paddling trails and
21 hiking trails. The hiking trails, we essentially
22 adopted the Florida national scenic trails
23 preferred route throughout Florida.

24 During the subcommittee I was also pleased
25 to hear Don mention he was interested in seeing

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1 the trail from Key West to Pensacola. Because
2 that also is a part of our goal. It is very
3 ambitious and ongoing, but one of the trail
4 projects that we manage in the Office Greenways
5 and Trails is the Keys Overseas Heritage Trails.
6 Although that is in a series of development, that
7 eventually will link into Miami and then
8 hopefully with a little implementation of our
9 plan continue on through the rest of the state.

10 With that specific section it will also
11 connect into the east coast greenways plan for

12 the east coast of Florida and that will also
13 connect this trail system on through Maine which
14 is also an ongoing trail project that is very
15 ambitious but is very, very feasible. And it
16 just comes working together with so many
17 partners.

18 Another trail system that we manage is the
19 Across Florida Greenway. Some of you may
20 remember when the barge canal was part of the
21 goal of Florida, when that was decommissioned we
22 took over the property. And there are gaps in
23 that property but we are working to make that a
24 connective system for all types of trail
25 recreation.

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1 Many of you have driven down I-75 and
2 probably crossed right under the land bridge,
3 which is the top photo on the slide. But this
4 will connect the east coast of Florida with the
5 gulf. And recently there was a man, his name is
6 Ken Smith, he was a volunteer for us. And for
7 his 80th birthday he decided he wanted to get
8 other folks above 80-years-old to hike from the
9 Atlantic to the Gulf. That's 132 miles. He got
10 several people to join on with him. And they
11 spent two weeks, recently finishing, and the
12 bottom picture on the slide is him and some of
13 his counterparts. But you did have to be over 80

14 to participate. So it's very ambitious. And for
15 those students that feel like 30 minutes of
16 physical activity a day during school is too
17 much, you'll have to introduce them to Ken Smith.
18 Because all of the participants, they don't think
19 they would do it again because there are too many
20 other trails they haven't seen yet and too many
21 other places they need go. It's really inspiring
22 what folks are doing out there.

23 For state parks there are over 1,600 miles
24 of trails within state parks. They receive
25 almost 20 million visitors annually and there are

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1 161 state parks. It's a great -- visiting state
2 parks is a great way to exercise and to increase
3 physical activity. It's not just visiting state
4 parks; you're learning about your culture, you're
5 learning about the heritage. You're seeing these
6 great environmental resources as fun and as
7 easily accessible no matter where you are in the
8 state.

9 One program that state parks are working
10 very hard on is the Suwannee River Wilderness
11 Trail. The Suwannee River, or course, exists but
12 they're looking at promoting it through rural
13 areas and looking at all the resources connected
14 by the river, whether it's cultural or --
15 recently the Florida Folk Festival was this past
16 weekend was a way to explore a lot of the

17 cultural heritage of Florida. But they are
18 building cabins and campsites every seven miles
19 along the river so that if you would like to
20 start on the northern end within Florida and
21 continue on to the gulf, you can do that in
22 multi-day paddling trips. But there are also
23 land-based trails so the part of the family who
24 doesn't want to paddle every day, ten miles a
25 day, there are other activities, whether it's

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1 horseback riding or hiking or learning about the
2 local quilt makers. It's a really good
3 partnership for state parks and for the Office of
4 Greenways and Trails to be involved with.

5 They have created several roadsters.
6 Another one they created is on the -- they worked
7 with the National Geographic, so it's available
8 on the National Geographic Web site with
9 information about the Suwannee River Wilderness
10 Trail.

11 All trails are partnerships and we have
12 many, many partners that are not included in this
13 slide. Physical activity is also a partnership.
14 Anything that your committee decides to implement
15 you're not going to be able to do without strong
16 partners. And I think that we'll have a lot of
17 the same partners in what we do and I think that
18 the partnership endeavors are going to be very

19 successful.

20 We also work with developers. I can't
21 stress enough the importance of public and
22 private partnership. I mentioned over and over
23 that connectively is one of our priorities. In
24 2005 we did have developers form in Orlando to
25 look at connecting a lot of the trail systems

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1 into -- well, let me rephrase that -- I guess a
2 lot of the properties and private ownership.
3 We're not going to be able to own everything that
4 we want to make the connections happen. We work
5 with developers to see, to make feasible
6 connections.

7 The Office of Greenways and Trails has a
8 designation program. It's available for private
9 designations or private land designation. It
10 puts liability if the folks decide to designate
11 their property into the statewide system, it puts
12 liability protection on the property and allows
13 public access.

14 If at any time if the private land owner
15 decides that the program is not working for them,
16 they can be removed from designation.

17 We see through the National Association of
18 Home Builders that walking and jogging trails are
19 what people want. They really look to it when
20 they looking to locate their homes. It used to
21 be golf courses, but now it's access to parks and

22 trails. That's over half of the population
23 surveyed by the National Associates of Home
24 Builders.

25 We also are trying to increase the public

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1 awareness about the trails. And we see that 42.5
2 million Americans ride bicycles, but that's not
3 the kids. That's not the children. The number
4 of children that ride bicycle is decreasing with
5 time.

6 So often I hear: I used to ride my bike to
7 school. Why aren't people riding? Why aren't
8 kids riding their bikes? It's partially due to
9 lack of safe places to ride.

10 The Office of Greenways and Trails is trying
11 to use some different programs to make children
12 feel safer and make parents realize the safety of
13 cycling. We work with Cops For Kids. We provide
14 helmets for children that do not have them. Cops
15 For Kids fit the helmet to the child. Not every
16 helmet is one size fits all. If you wear a
17 helmet that is fitted incorrectly, it's not as
18 safe as it can be.

19 Another event that we do is take a kid
20 mountain biking day. We do that on the Greenway
21 at Santos.

22 Some of the mountain biking trails can be
23 intimidating for me and for kids. There are

24 certain areas that I wouldn't want to bike in
25 because I'm not comfortable. So we have

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1 different challenges, trial areas, so that if you
2 don't want to bike from here to the stream on a
3 board that is this thick, you know not to go on
4 the next section of the trail. Qualifiers, so
5 you build up your confidence, you can judge your
6 ability and make good decisions.

7 Some of the resources that we have available
8 are online trail guides. State parks also have
9 an online parks guide. The subcommittee, they
10 talked about October Greenways and Trails month.
11 They mentioned that February will be physical
12 fitness month. July was also National Recreation
13 and Parks month.

14 We have promotional materials. We have
15 newsletters.

16 Our online trail guide is a resource that
17 should you decide to link with different
18 resources in the state through our Web site, this
19 may be one of the resources that you want to link
20 to. It looks like this, you select the area that
21 you're interested in and then zoom into it and it
22 will give you a list of some of the trails, not
23 all of them. It will provide you information and
24 a printer friendly version that you can take with
25 you when you go to the area.

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1 We also worked with Visit Florida. The
2 Department of Environmental Protection Services
3 Visit Florida to collaborate on some
4 publications. And that includes the bicycle
5 trail brochure, hiking trail brochure, and the
6 paddling trail brochure. We're currently working
7 on an equestrian trail brochure.

8 The Connection Newsletter which was provided
9 as one of your handouts is available
10 electronically or hard copy. You can sign up for
11 it on their Web sites.

12 Trails are something that will stay with you
13 for a lifetime. You don't have to be a member of
14 a group to do them. You don't have to schedule,
15 sign up; all ages, all sizes can always use
16 trails.

17 Again, thank you for having me here. I'll
18 take any questions that you might have.

19 MS. MILLER: Judy.

20 MS. SCHAECHTER: Very nice presentation. I
21 appreciate it.

22 You've done a lot in terms of awareness, yet
23 there are still barriers particularly for
24 families living in the intercity particularly
25 around geography and transportation. In many

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1 areas, Miami, we have families who live miles
2 from the beach but they have never ever been to

3 the beach. And they don't know where these parks
4 and trails are, whether they have an area access.

5 What creative ideas have you had to help
6 build access for intercity families or what
7 creative programs do you envision you could do
8 with the right resources?

9 MS. TURNER: One of the things that we did a
10 few years ago -- and I have limited knowledge,
11 because of my region, it's further north, but I
12 know that when my counterparts came down to the

13 Miami area, and it was primarily a
14 Spanish-speaking area, and they did Plant A Tree
15 and they brought -- when you reach different
16 ethnic groups, you may have to reach them
17 differently. Some folks television works great.
18 Some folks radio works great.

19 What we found with that community is word of
20 mouth worked the best. And we got a couple of
21 real key folks in the community that live there
22 and they went door to door and encouraged parents
23 to bring their children to the park and it was a
24 park that was within walking distance. And they
25 did Plant A Tree there and then they did other

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1 activities.

2 But what we learned from the people in that
3 community is they never would have listened, it
4 didn't matter if we did Spanish commercials or
5 not: They would never have heard the commercial.

6 They never would have seen the commercial.

7 It took someone that they knew personally

8 and that they respected reaching out to them to

9 get the message to them to bring them in.

10 I don't know if that gets the answer to your

11 question or if it's a way of looking at it.

12 MS. SCHAECHTER: I was asking your history

13 of it and that's just great.

14 MS. RYCZEK: With the budget cuts and

15 funding that we are hearing, my sister is a park

16 ranger, and boy, she loves what she does, but I

17 know that daily she is nervous that her job will

18 be cut. How do you address that?

19 MS. TURNER: I don't think about whether --

20 MS. RYCZEK: You're not feeling any squeeze

21 with any budget cuts or funding?

22 MS. TURNER: Our acquisition program is

23 funded through Florida Forever. And that may or

24 may not continue. We hope that it continues.

25 And some of the things, if it does not continue,

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1 some of the things with our mission will change,

2 I'm sure. It's not that we won't still be

3 implementing, but we will not have the

4 acquisition program.

5 MS. RYCZEK: So partners incorporate --

6 MR. ROBERT KEISER: Exactly. We work with

7 developers. And a lot of time when they are

11 National Park Service applied to the
12 Department of Transportation for a grant on
13 transportation enhancement dollars to redo all of
14 those kiosks. What we are doing as part of that,
15 there is good historical and archaeological
16 evidence that shows the route of the DeSoto
17 Trail. We identified public lands along the
18 trail route. And we are working from Bradenton
19 to Tallahassee primarily to redo all the kiosks.
20 We are looking at about 35 to maybe 40, but
21 probably 35. They'll all have the exact same
22 look. One panel will have the map. The other
23 panel would be information. And it will be up to
24 the local location, whether it's a park or a
25 trail, to provide information about that specific

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1 location, the history, archaeological, whatever
2 they decide that fits their community best. But
3 we've discussed to do pod paths and do different
4 things. We make a geo cash kind of thing that is
5 popular now that might get people not visiting
6 these trail sites more interested in seeing these
7 kiosks. They can go to the location and get out
8 of their cars, be active at the site and continue
9 on to the next location, hopefully over time.

10 MS. MILLER: Thank you very much for your
11 people.

12 We're going to move on to our final speaker,

13 Jayne Greenberg. Jayne Greenberg is the
14 Executive District Director for Physical
15 Education and Health Literacy at Miami-Dade
16 County Public Schools. In her current position
17 her primary responsibilities include: supervising
18 physical education, K through 12 health
19 education, safety education, HIV/AIDS education,
20 adaptive physical education and the sports
21 program for students with disabilities. You are
22 a busy woman.

23 MS. GREENBERG: I don't sleep. I pass out
24 at night.

25 Thank you for the opportunity to present.

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1 We're really proud being called by you. It's
2 really an honor to present. We're really proud
3 of the programs that we develop.

4 What I'm going to do, the blue folder on
5 your desk is what I put the presentation in. So
6 I'm going to move through this because there are
7 two DVDs that I would like you to see. What
8 we're talking about is the impact on physical
9 activity and physical education on children. We
10 need to see our children in action.

11 There are two things that I want to start by
12 saying which are very important. One is very,
13 very important: My district budget is zero. But
14 in the last five years has brought in \$8 million.
15 What you see that I'm going to present today is

16 zero district funding that made this possible.

17 The second thing I talk about is a
18 recommendation and it's used in my presentation,
19 because I'm talking about Miami-Dade County
20 public schools. This is not the opinion of our
21 legislative caucus for Miami-Dade County Public
22 Schools. I'm not representing our legislative
23 agenda.

24 We call our program: Shaping The Future, A
25 Blueprint For Change. What we wanted to do was

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1 do best practices. In this world of technology
2 we were remiss in not having technology in
3 physical education. In my opinion, we have not
4 eliminated our team and individual sports, but
5 the days of only having volleyball, basketball,
6 softball went out with those gymsuits that
7 snapped down that were all white with the balloon
8 legs.

9 We needed to move our physical education
10 program into an area where our kids were being
11 turned on. We focused on fitness education,
12 water sports, outdoor education and a program I
13 want to present to you called: I can do it, you
14 can do it. Because our children with
15 disabilities are an important part of the program
16 and this is critical for you to see.

17 So what did we do with technology. We

18 started developing high-tech fit wellness
19 centers. We put in cycles, steppers, treadmills,
20 cross trainers. Our students with and without
21 disabilities participate in this during the day.
22 We use heart rate monitors, pedometers, the
23 tri-fit system which is the ultimate in biometric
24 assessment.

25 They monitor the kids' cardiovascular, their

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1 body composition, their strength. We do blood
2 pressure testing. We're starting a new line of
3 research looking at children's blood pressure
4 prior to standardized testing. We're even
5 putting in heart rate monitors, a system now that
6 is digital in our wellness centers where we can
7 project 40 heart rate monitors at a time on the
8 wall so the teacher can see what capacity our
9 children are, either moderate to vigorous.
10 Because otherwise there would be no other way to
11 measure vigorous activity.

12 We started something in a prototypical
13 elementary which is not going to become our
14 middle school. Right now I have 38 of our 41
15 high schools set up with full wellness centers
16 and we are starting on our middle schools.

17 Gamers are here to stay. PlayStation, Game
18 Box, everything. By putting the game boxes --
19 this is in an elementary school right now -- the
20 Game Box actually works off of a PlayStation. A

21 blue box on the handlebars of a PlayStation. In
22 order to work the video games on the TV they have
23 to be pedaling. So we found that it's
24 incredible. And that has appeared in the Miami
25 Herald the other day -- actually last week. So

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1 we're doing a lot of games.
2 Dance Dance Revolution. For our indoor
3 program. Geo fitness. Mats outside where we can
4 have 40 to 60 kids at a time participating.
5 Again, we're bringing the gaming concept to
6 physical education. We can't keep the kids out
7 of Phys Ed. And we can't keep the principals out
8 of using the rooms. When we can't find a
9 principal, we know exactly where to find them.
10 We use bosu balls with a virtual teacher.
11 Again, using technology in our programs that if
12 the teacher is working with a student on the game
13 bike, the other students are not sitting around
14 waiting for something to do. We have instruction
15 going on throughout the day.
16 Again, because we are full inclusion, this
17 young man, David, David is in a wheelchair
18 working on an upper body odometer. What we found
19 last year we received the first time ever funding
20 from the U.S. Department of Health and Human
21 Service, HHS and the NIH foundation to do fitness
22 research on our children with physical and

23 cognitive disabilities. We found throughout our
24 program that we are able to significantly enhance
25 the cardiovascular efficiency of our students

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1 with disabilities. The HHS is going to be
2 published in that study. So we're proud of what
3 we are doing with all of our kids.

4 We also brought in the traverse climbing
5 walls, Pilates, body bar and stability ball.

6 That's in all of our schools. Our middle schools
7 already have those. Our high schools are working
8 with the equipment. We brought in Yoga, Pilates.

9 We are incorporating a lot of core and strength
10 training activities in our schools.

11 Again, this is not at the expense of the
12 traditional physical education program. This is
13 adding the piece that was missing. Brought in a
14 lot of outdoor education. As we talk about using
15 our outdoor facilities, we did a project on the
16 beach, Miami style, which is Project Adventure on
17 the Beach. We partnered with our national parks
18 and recreation associations funded us. That has

19 now named Miami-Dade County schools as the
20 training facility for state, national, local and
21 municipal parks for their accessible water sports
22 activities. We do a different kind of training.

23 As you can see those are some of our boats.

24 We now own 29 boats. We do snorkeling with the
25 students. Not only do we teach this through

1 physical education, but we have the science
2 teachers bring their kids out to physical
3 activities. We are incorporating all kinds of
4 marine science activities. And this is during
5 the school day.

6 Here is our kids with our kayaks. That's
7 Oleta River State Park. We have 29 sailboats and
8 we now own some kayaks.

9 What you're going to see on top of our
10 sailboats is a symbol called Anchors Away. The
11 sailboats were bought by the Aventura Marketing
12 Council to develop not for profit. And the
13 Anchors Away is because those are accessible
14 boats that all our students can sail in
15 independently.

16 When Miami-Dade County Public Schools is
17 finished with getting our parks and our schools
18 all set up with the boats, that is going to be a
19 national foundation. That any park or school
20 system that wants to offer accessible sailing, we
21 will buy the boats for them. That's an
22 incredible coup to the support of our community.

23 When we say water sports are full inclusion,
24 that is Herman snorkeling. That's Herman when he
25 is not snorkeling.

1 Philip, in the wheelchair that you see,

2 Philip talks about how close/accessible, that
3 wheelchair was bought with funding from the
4 Christopher Reeve Foundation, who gave us their
5 largest grant award ever last year. We are
6 bringing students with disabilities who have
7 never been to our beaches, never been to our
8 waterways, for the first time ever are now
9 experiencing what everyone else is. And that
10 empty chair is indicative that Philip is out
11 kayaking now.

12 In curriculum development. One of the
13 things we talk about, again, because this is --
14 I'm going to move through -- we do a lot of
15 professional development. We cannot implement
16 technology, the 21st century physical education
17 without training our professional physical
18 education teachers.

19 One of the recommendations that I make as we
20 move forward into mandating and implementing
21 physical education is that it's so critical that
22 states certify physical education teachers
23 overseeing our programs. That just knowing that
24 the type of activities we needed to do for our
25 own certified physical education teachers, we are

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1 standard based, we do heavy assessment as you can
2 see, and with the \$8 million that was grant
3 funded, it all comes with evaluation tools.

4 So we did a lot of evaluation, we're

5 evidence-based, we're a tangible item. We
6 collect pre and post data. We have lesson plans.

7 We do a lot of teacher observations.

8 What we've accomplished in the NASPE
9 standards. Our programs have been so successful
10 that NASPE, the National Association of Sports
11 and Physical Education, asked me to write a book
12 so the rest of the country can replicate our
13 program.

14 So on behalf of the coaches here I would
15 like to present this to the Governor's Council as
16 we move forward: that implementing new programs
17 in accordance with NASPE standards is the
18 direction that the rest of the country is moving.

19 What we found is we improved fitness scores.
20 We have nutrition knowledge, design changes,
21 positive attitudes toward physical education.

22 In your folders is also the compilation of a
23 three-year study which was conducted by two
24 statisticians at the University of Miami and Dr.
25 Cathy Roach, who has been our lead statistician

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1 and has a PhD in epidemiology, who has really
2 helped me change what we are doing in physical
3 education.

4 The evaluation instruments that we use, we
5 use the Fitness Gram and also in your folder you
6 do have copies of those. I gave you a copy of

7 the student report and the report sent home to
8 parents. This was funded through the Health
9 Foundation of South Florida for every single
10 elementary school in Miami to implement not only
11 mandatory fitness testing which we've done for
12 many years, but the mandatory fitness gram
13 reported to the parents.

14 We have also met with the University of
15 Miami School of Medicine and are asking that the
16 pediatricians get involved so when the students
17 go to their physicians they bring the fitness
18 gram report so that the pediatrician can monitor
19 the student progress on health-related issues.

20 We do monitor a lot of activities. We do
21 surveys and we do focus groups and we do
22 nutritional analysis using My Pyramid that I
23 commented about.

24 Again, there are a lot of assessments
25 because without having assessment there is no way

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1 we can say we have an evidence-based program.

2 What did we find on the final evaluation?

3 We found that students improved on all fitness
4 test scores on the fitness gram. They increased
5 their physical activity time. They improved
6 their attitude toward physical activity.

7 Students who were overweight lost an average of
8 eight pounds during the semester. And more
9 importantly to us the students who were

10 underweight, those students with eating disorders

11 gained an average of two pounds a semester.

12 We found from the qualitative and focus

13 groups, students felt better about themselves,

14 they like their teachers as role models. They

15 made lifestyle changes. The students made

16 nutritional changes, but acknowledged that the

17 culture made it difficult to make the changes at

18 home. We do a lot of -- we added a large parent

19 component, so we do a lot of activities with

20 parents.

21 At this time last week, as I said, Miami

22 Herald ran an article. But what I want to show

23 you is they also hosted a two-minute interactive

24 video.

25 (A video was played.)

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1 MS. GREENBERG: So that's just a sample of

2 what it looks like when our children are

3 exercising.

4 Now I want to talk a little bit about, and

5 Dot, I'm really glad that you brought this up.

6 The I Can Do It, You Can Do It Program. The I

7 Can Do It, You Can Do It Program was a program

8 that was developed between the U.S. Department of

9 Health and Human Services Office on Disability

10 and the President's Council on Physical Fitness

11 and Sports. And having two great leaders such as

12 Dr. Margaret Giannini and Dr. Christine Spage,
13 pulling these minds together to come up with a
14 program.

15 The way I Can Do It, You Can Do It works, is
16 that if the students with disability, and this is
17 physical and cognitive disabilities for the
18 students who cannot participate in an inclusion
19 model, if they participate in 30 minutes of
20 physical activity five days a week for six week
21 intervals they get the Presidential Active
22 Lifestyle award patch.

23 Four years ago when we implemented this
24 program on a pilot basis, we had 500 students
25 receive their patch. The second year we had 600.

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1 Last year 800. And this year, we're proud to
2 say, we're getting 1,000 students with
3 disabilities that are exercising 30 minutes a day
4 to a point where as soon as we get the date set,
5 it will be at -- the award ceremony will be at
6 the American Airlines Arena. And we're excited
7 for that potential.

8 What I want to do now is I want to take a
9 couple of more minutes. I just need to share
10 this DVD with you. I need to show you what it
11 looks like, how we're doing these programs for
12 our students during the day.

13 MS. RICHARDSON: How many schools are you
14 implemented in right now?

15 MS. GREENBERG: This? As many schools. We
16 made this a part of the Alliance for a Healthier
17 Generation. What I want to say is Miami-Dade
18 County public schools was the first district
19 rollout for the Alliance for a Healthier
20 Generation and we have -- let me move that --
21 what we've done is that the first 100 schools
22 that are involved in this year's rollout, it was
23 100 percent memo use submitted, this a mandate in
24 those schools for those that have students with
25 disabilities. It's an incredible program and I

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1 encourage the state to look at this as a program
2 for every school.

3 (A DVD played.)

4 MS. GREENBERG: So that's some of our best
5 practices in Miami-Dade County public schools.
6 On behalf of all of our students a very heartfelt
7 thank you for everything that you do for our kids
8 and for pursuing this.

9 As we push forward the impetus for middle
10 school physical education is definite. Again,
11 Miami-Dade County Public Schools has always had
12 elementary school physical education. Grades 2
13 through 5 taught by a state certified teacher; K
14 and 1 by the classroom teacher.

15 And the recommendation that I make as you
16 move forward is implementing grades 6 through 8:

17 One, it's got to be as a phase-in, a three-year
18 phase-in. It can't be a one-shot deal. And,
19 secondly, those of us in education know the
20 educational dollars are very tight. It's going
21 to be difficult. As much as I'm not in favor of
22 the waiver, my recommendation would be to have
23 physical education as a phase-in, but also have a
24 safety valve for the students whose parents are
25 adamant who want the students to take the arts,

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1 music, foreign language, home ec, everything in a
2 standard six-period day, such as we have in Miami
3 and with four of those credits being the math,
4 the science, social studies and the language
5 arts, there is no way that if we mandate physical
6 education we're not going to get push back,
7 because it is going to take away one elective.
8 If the student is below level three they're
9 either double dosed on reading, double dosed on
10 math or doing everything else and that student
11 will only have one elective.

12 So to avoid a lot of the push back that
13 could come from mandating physical education,
14 please consider a safety valve and although I'm
15 not in favor of the waiver, that might be the
16 only way that we can get this going through.

17 MR. RAPP: Debbie Mitchell was here some
18 time we all were gathered. And she had done
19 research and she read her research that when a

20 child is fit the grades come up, even if you take
21 the time away from academics. Have you done any
22 research on that?

23 MS. GREENBERG: We're looking for ways to
24 develop the data we have. In the last five years
25 with the grant funding we have collected an

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1 enormous amount of data. Right now we only have
2 the capacity -- and the fitness gram, by the way,
3 is administered to every single student in
4 Miami-Dade County in grades 4 through 12 who are
5 enrolled in physical education. I don't have the
6 capacity yet to develop a data warehouse to
7 correlate that, but we're feeling from the
8 principals, they're the ones that are supporting
9 physical education and they're seeing the
10 difference in their schools. It's a whole
11 educational climate.

12 MS. MILLER: We only have time for one more
13 question. Whoever's hand is down there. Karen,
14 I think that's you.

15 MS. DOWD: Yes, Jane, quick question.
16 Obviously what we've seen is inspiring and it's
17 phenomenal. It's what I've been talking about,
18 the new physical education and new fitness.

19 Those of us who have been around children
20 with special needs, we know that is it
21 laboriously time-consuming to get them into

22 equipment and out of equipment and into dry
23 clothes. How do you do that? And how often are
24 the children we've seen on these snippets here,
25 how often do they get those experiences?

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1 MS. GREENBERG: Because it's open to every
2 student in every school, we do have a schedule.
3 They call, they schedule something for us and we
4 do it.

5 What I need to also say because of our
6 partnership with the parks program, etcetera,
7 we're landlocked. We have no more land in Miami,
8 and parks have no children there during the
9 school day. So utilizing the parks for physical
10 education on our public land has been working out
11 great. It's something that is a commitment to
12 the schools to give us as much time as we need
13 because the socialization and integration into
14 the community for our children with disabilities
15 far exceeds the time frame. So it is done during
16 the school day.

17 MS. DOWD: In other words, these children
18 are not mandated to a strict minute schedule,
19 like a typical school day in terms of if you need
20 them for an hour and 20 minutes to get a task
21 done, then you get that cooperation.

22 MS. GREENBERG: We do. And the water sports
23 program is open to all of your students so we do
24 get the cooperation from the principals, because

25 we do fine in the academics achievement.

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1 MS. DOWD: Thank you.

2 MS. MILLER: Thank you. And if you're
3 willing to stick around, Jayne, we might have
4 some more questions during our subcommittee
5 meeting. Thank you very much.

6 We're going to move into the public comment
7 section. If you signed up for public comment
8 just wait for me to call your name and I'll bring
9 you up. You will each have three minutes to
10 address the council.

11 First up we have Marla Banta.

12 MS. BANTA: Wow. This is inspiring. When I
13 came here this morning I wasn't sure what this
14 was going to be all about. I am on the Board of
15 Directors for a Health Department in another
16 county. So I can tell you I know what your jobs
17 are like. I don't envy you at all.

18 What I've seen has changed what I wanted to
19 say, but I'll stick to what I was going to say.
20 And what I want to say is my name is Marla Banta.
21 I'm with Nature Coast Community Health Center,
22 Hernando County.

23 Back in my day when I went to school in the
24 '50s and '60s, we didn't have soda machines. We
25 didn't have candy machines. We had water

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1 fountains. We had to take gym or we failed
2 school. That was part of what you had to do.
3 You had your academics and you had...
4 I've learned today that there is not enough
5 time in school to do what we need to do. But if
6 the reason they have candy machines and soda
7 machines in school is money, switch them out to
8 juice or healthy snacks. If we can go to the
9 lunch rooms and change what the kids eat, we're
10 getting half the battle done. Parents are going
11 to have to become much more active. It's going
12 to have to go outside the school to do it. But
13 in the schools is the only place where you're
14 going to be able to have a captive audience.
15 They're also going to be able to pull the parents
16 in in some way.
17 There are a lot more resources out there
18 than I knew about and I'm in the field, and I
19 didn't know about these resources. And these are
20 resources that we need to find a way to let
21 everybody else know.
22 I walked from each committee today and sat a
23 little bit in each one of your committees. In
24 one committee they're talking about linking into
25 a Web site. Good idea; linking the different
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1 things that are there. The other committees are
2 also worried about how we are going to implement
3 it. Is there enough time and enough money?

6 of the children now, there's not going to be a
7 future.

8 I feel like I came here with three hats. I
9 came here because I have contacted Governor Crist
10 before he set up your committee. I hope I'm not
11 to blame for this, but I have contacted him.
12 I've been watching all the obese shows hoping
13 they will inspire me. Shaquille O'Neal came on
14 with one of the children. I said, I've got to do
15 something.

16 I have grandchildren in schools that are
17 doing absolutely nothing physically. All my
18 kids -- I raised four of them. They all went to
19 sports; they did everything. The schools now
20 don't have time or the funding to do it. We've
21 got to find a way to help them, help the schools
22 and help the children. And, in turn, when we're
23 in an old-age home, they'll be able to take care
24 of us.

25 I don't even know where to begin anymore.

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1 Everything I came in here for has changed now
2 that I see what is out there. I hope that we can
3 put it all together and let all the counties know
4 how to do it. Thank you.

5 MS. MILLER: Thank you so much.

6 Congratulations again.

7 Next up we have Lori Dornbusch. Do you want
8 to join us up here?

9 MS. DORNBUSCH: Good afternoon, ladies and
10 gentlemen. My name is Lori Dornbusch. I'm here
11 today on behalf of the Florida School Nutrition
12 association representing our members and students
13 across the state.

14 Our association recognizes that agricultural
15 food and natural resources are a significant
16 component of the Florida economy. Our school
17 nutrition programs would like to take a more
18 active role in partnering with local and state
19 produce growers to provide the students of
20 Florida with fresh fruits and vegetables grown
21 locally. At their best, farm school programs, as
22 they're known, enable schools to teach healthy,
23 and have locally sourced products in their
24 cafeterias, incorporate nutrition-based
25 curriculum and provide students healthy meals and

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1 learning opportunities through farm visits,
2 gardening and recycling.

3 The U.S. Congress has spoken clearly on the
4 issue of local food procurement and school
5 in-service programs supporting it in the 2002
6 passage of the farm bill stating that the
7 secretary shall encourage institutions
8 participating in the school lunch program and the
9 school breakfast program to purchase, in addition
10 to other food purchases, locally produced foods

11 for school meals to the maximum extent
12 practicable and appropriate.

13 In addition the 2004 Child Nutrition and
14 Re-authorization Act states that the secretary
15 may provide assistance to schools and nonprivate
16 entities for projects that improve access to
17 local food and asked that the USDA may provide
18 assistance to programs designed to procure local
19 foods.

20 As farm school programs gain in popularity,
21 many state legislators are taking action to
22 assist in their development to encourage the
23 consumption of locally produced products with
24 state institutions.

25 For example, as part of an economic stimulus

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1 package, Massachusetts allows state procurement
2 officers to award contracts to local producers
3 without seeking additional bids. Since state
4 legislatures across the country are realizing
5 that local consumption with adequate farmers,
6 consumers and the environment, and produces
7 economic development through local expenditures
8 on agricultural.

9 Current federal law encourages states and
10 local entities to engage in local preferences for
11 a school food service program; however, many
12 districts cannot participate in these worthwhile
13 partnerships because of the state and local

14 procurement guidelines and limits that the school
15 district must adhere to.

16 In Florida we have seven districts in our
17 state that have over 100,000 students. The
18 average enrollment for those states if you put
19 them together would average out to 197,000
20 students. And if only 60 percent of the students
21 in that average district ate lunch it would total
22 approximately 118,000 meals for that one day.

23 Conservatively, a serving of vegetables
24 costs 15 cents. Figuring that out we have just
25 spent \$17,000 for vegetables for one day in an

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1 average large-size school district. It could be
2 an item such as corn or green beans that have an
3 extended growing season, but because of the cost
4 and the limit of \$25,000 statewide, we cannot
5 purchase vegetables for more than one day from
6 that grower.

7 What we are looking for is support to
8 increase our limits, purchasing power in the
9 states to \$100,000 which would match the federal
10 limit. Currently now, we have our hands tied at
11 local districts, some only allow as much as
12 \$10,000 of procurement of locally grown produce.
13 We are asking for support to raise those limits
14 to \$100,000. Thank you.

15 MS. MILLER: Next we have Joseph Luechauer.

16 I hope I said that right.

17 MR. LUECHAUER: You were very, very close to
18 the pronunciation of my name. Thank you.

19 Council members, madam co-chair thank you
20 very much for your selective efforts and
21 dedication to the students of Florida, including
22 my own that attend public schools.

23 My name is Joseph Luechauer. I'm the music
24 curriculum specialist for the School Board of
25 Broward County. That's my day job. For fun I'm

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1 the immediate past president of the Florida Music
2 Supervision Association and I am the president
3 elect of the Florida Music Educators Association.

4 As an art selective educator we are in total
5 support of the need for a more physically active
6 population, both for students and the general
7 public. We also agree that this activity needs
8 to be routed in physical education.

9 As arts teachers we are dedicated to a
10 well-rounded curriculum that promotes a variety
11 of educational experiences including physical
12 education. Indeed, physical activity and fitness
13 are greatly intertwined with the performing arts.

14 It is obvious that many of the performing arts
15 are a combination of movement, exertion, as well
16 as expression.

17 I ask that as this council considers all
18 perspectives of physical fitness, obesity

19 prevention and physical education, that you also
20 consider certain unintended consequences of any
21 recommendations in mandating course work under
22 current school date time frames. An additional
23 requirement of any kind without an expansion of
24 the school day, especially in our middle
25 schools -- you heard about this earlier -- would

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1 limit students' choices and, in many cases,
2 greatly reduce or eliminate arts and other
3 elective programs.

4 Earlier today my colleague presented a
5 program: Commit 2B Fit, where students engage in
6 physical activity through many different types of
7 venues and organizations. Because art courses
8 and other electives can contribute to fitness I
9 would encourage this council to consider this
10 type of concept and resist any current
11 legislation that has been recently introduced
12 mandating additional minutes in the school day.

13 Working together, cooperatively, is the way
14 to achieve our common goal. And that is the
15 welfare of our students. Thank you for your time
16 today.

17 MS. MILLER: Thank you very much. Next up
18 is Dianne Bean.

19 MS. BEAN: Good afternoon. And thank you
20 very much for the opportunity to present to you

21 today. The presentations have been astounding.

22 My name is Dianne Bean. I'm the president
23 of Baux Publishing. We do publish children's
24 nutritional and wellness materials. I'm here to
25 ask that you consider recommending a nutritional

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1 and wellness curriculum as well as traditional
2 physical activity instruction.

3 It's very important that children understand
4 the relationship between nutrition, wellness and
5 physical activity, as well as the social and
6 psychological connections if we're really going
7 to change behavior with our students.

8 After the WICK Authorization Act in 2004
9 requiring nutritional instruction in the schools,
10 we interviewed many, many teachers in Florida.
11 They said what Bill Montford has been saying:
12 time, time, time. We have no time to teach all
13 of these things that are being asked of us.
14 There are a lot of good materials, but we don't
15 have time to pull them all together.

16 We need to come up with a program that is
17 all-inclusive and that is tied to the state
18 standards and is cross curricular. So that when
19 you are teaching science or language arts or math
20 that you're also reinforcing nutritional
21 concepts, wellness concepts, so that we're
22 utilizing the day the best we can. We're not
23 asking the teachers to do more than they have

24 being asked to do already.

25 In addition to that they asked that there be

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1 a home component, because, of course, we know, a
2 lot of the problems with obesity and fitness is
3 the fact that it's coming from the home. So any
4 curriculum that we might encourage should have a
5 home component and in fact we might try to put
6 some of the burden off this curriculum to take
7 place at home.

8 Again, we are talking about time, time,
9 time. Let's see if we can have the home piece
10 take care of some of that at home and have it
11 come back to school for a discussion.

12 They also ask there be some kind of
13 assessment to see the results of what is going on
14 and that it be fun.

15 And so those are my recommendations that I
16 ask you to consider. Thank you very much for
17 your time.

18 MS. MILLER: Thank you, Dianne. Next we
19 have Anne Thenot-Siegel.

20 MS. THENOT-SIEGEL: Good afternoon. My name
21 is Anne Thenot-Siegel. I have appeared in front
22 of you on several occasions. I misspoke. My
23 name is Anne Thenot-Siegel. I have appeared on
24 several occasions. Unfortunately, my request to
25 make a presentation was denied by the governor.

1 So I guess this is the avenue for me with
2 you. However, I want to ask you if you would, if
3 you think it's appropriate, to e-mail me, to call
4 me if you think you have a lead or an idea to
5 help me continue with my project. I am not
6 giving up. I was very disappointed to not have
7 the opportunity to make a presentation, but I'm
8 not giving up.

9 Ms. Dowd has been very kind and has always
10 directed me with some of the colleagues, so I'm
11 going to continue with you, so if you have a
12 lead, idea or contact that I could use, there
13 will be a memo coming to you after this afternoon
14 with my references, my e-mail address, my phone,
15 my Web site and I would gladly welcome any help
16 that you could provide me with. So this is it.

17 Thank you very much for the opportunity to
18 present and good luck to all of you. Thank you.

19 MS. MILLER: Thank you. Lastly we have Rick
20 Leitner. I may have mispronounced that one as
21 well.

22 MR. LEITNER: No, you got that right.
23 Good afternoon, council, and welcome to my
24 hometown and my home campus. I work right up
25 stairs right here at Keiser University. I am a

1 master's level exercise psychologist from FSU. I
2 had to get that in there.

5 are tomorrow educators would have a direct role
6 to actually impacting what you're actually
7 speaking about here. So that's basically it.

8 If you would entertain the idea of
9 establishing a grassroots committee of students
10 who are either in the bachelor's or associates'
11 level that could assist the faculty across the
12 state, regardless if it's in Tallahassee,
13 Jacksonville or all the way to the Keys, we have
14 a committee to actually service the faculty and
15 provide a support system for the faculty in
16 establishing all of the guidelines and policies
17 that you're about to put forth in Tallahassee.

18 I thank you. I'm going to leave my card
19 with you should you need to get in touch with me.

20 MS. MILLER: Thank you very much. We
21 appreciate the students' enthusiasm. Thank you
22 to everyone for all of your comments during
23 public comment.

24 At this time we're going to break into our
25 final subcommittee meetings. Jennie mentioned

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1 earlier, this is the time for us to finalize our
2 subcommittee recommendations and begin to review
3 the recommendations from the other subcommittees.

4 Your subcommittee coordinators have copies to
5 disseminate to all of us the recommendations from
6 each group. We'll be adjourning the meeting
7 today from those subcommittees.

8 And the shuttle back to the hotel, if you're
9 going to be on it, leaves at 5:20 sharp. We'll
10 meet here again tomorrow at 8:00 a.m. to further
11 deliberate. And thank you guys for all of your
 12 hard work.

13 (The hearing ended at 3:34 p.m.)

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CERTIFICATE

2 STATE OF FLORIDA

3 COUNTY OF BROWARD

4 I, the undersigned authority, hereby
5 certify that the foregoing transcript, pages 1 through
6 90 is a true and correct transcript of the hearing
7 held before the Governor's Council on Physical Fitness
8 at the time and place stated in the caption thereof.

9 I further certify that I am not of

10 counsel to either of the parties to said cause or
11 otherwise interested in the event thereof.

12 IN WITNESS WHEREOF I hereunto set my
13 hand and affix my official seal of this office this
14 28th day of November, 2007.

15

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LISA ANN KESSLING
Notary Public in and for the
State of Florida at Large.
20

21 My Commission Expires:
August 3rd, 2010

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Attachment 1: [Fitness1.txt](#) (text/plain) Displayed Inline (part of attached message)