Nutritional Misfortune

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As my first year of medical school came to a close in May of 2012, I began work on a summer research project in collaboration with groups in Milwaukee studying childhood obesity. At first glance, the summer project seemed like it would be very clear-cut—the project mentors and I would develop a protocol to measure plate waste in a community center summer camp and extrapolate health and economic implications from those findings. But my idea that the summer project collaboration would go very smoothly quickly changed. As my research progressed, I became wrapped up in the literature review process in an attempt to educate myself in childhood nutrition, obesity, protocol development, and nutrition standards within schools. This last area is what stirred my passion about the implications of this project.

After meeting with the Executive Director of Agape, one of the Milwaukee area community centers, I learned about the resources the center receives to provide healthy, nutritious meals to their numerous summer camp participants. This fiscal year, the maximum lunch reimbursement rate is $3.325 through the Wisconsin Department of Public Instruction (DPI) Summer Food Service Program.[1] The maximum rate corresponds to those students eligible for free lunch, which describes all of the Agape Community Center's summer camp participants. Because Agape works on a very small scale, most of the meals they serve cost more than what is reimbursed to the center (taking into account the cost of food and labor), creating a fiscal deficit.

After processing this information, I began to wonder if it is possible to lower childhood obesity rates with such a low rate of meal reimbursement. How can chefs at schools and centers feasibly provide nutritious and plentiful meals with such little financial support? I also wonder whether pediatricians, family practice physicians, and nurses are aware of this dismal rate and what its implications are for the youth they care for. I believe it is imperative that this rate be increased to allow children who receive meals in community centers and schools to grow to be healthy.

In discussing with Agape staff the limitations involved in planning meals while adhering to the standards outlined by the DPI, I learned how this task is actually carried out. In a plate waste study last year at Agape, 56% of fruits and 50% of vegetables served were wasted.[2] It is apparent that community centers and schools need strategies that target youth to increase their fruit and vegetable intake. To do this, they need to be supported financially with the means to provide attractive, fresh, and healthy options. Instead of financially supporting sugar-laden or unappealing options such as applesauce and frozen fruits that are wasted anyway, the DPI should assist centers to provide fresh fruits as an alternative. In the end, the economics of the switch will benefit the DPI and provide nutritional benefits to the youth.

Getting youth in urban populations to consume enough fruits and vegetables is difficult enough, but the added stress of being severely limited financially makes the task even more daunting.[3] Through increased financial support of community centers and schools that provide meals to youth, we can begin to change the face of nutrition in public programs and encourage new, healthy eating habits in our youth.

As this project collaboration continues, I hope I can encourage change in those around me surrounding this topic of reimbursement rates and nutritional standards within our community and our schools. I will need to focus my efforts on future discussions with leaders of the Wisconsin DPI to begin to understand how change with regard to financial standards can come about. Also, keeping the medical community interested and inspired will require continual recruitment and education of fellow medical students to be a part of community-engaging projects.

The first year of medical school was difficult. The task of improving the nutrition in centers and schools may be even more of an uphill battle, but I am staying true to the cause and remain hopeful, passionate, and excited to see what the future holds with regard to childhood nutrition and healthy living.

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