SUMNER M. REDSTONE
Global Center for Prevention and Wellness
MESSAGE FROM THE CHAIR

It is hard to believe how much progress we have made in these first five years of the Redstone Global Center for Prevention and Wellness. Our efforts have focused on system changes through research, policy, and partnerships. As our organizational chart shows, our staff is small, but incredibly creative, vigorous, and productive. The center’s core staff of Jeff Hild, our policy director, Kate Wolff, our director of communications and partnerships, and Sarah Baldauf before her, have been extraordinarily effective representatives of the center. Together, we have begun to work locally, with other municipalities and states, federally, and globally. Details on our work are provided in the following pages, but it may be useful to provide a brief overview of our accomplishments.

When we began our work, our goal was to make the District of Columbia the healthiest capital in the world through a focus on nutrition, physical activity, and obesity. While this work continues, we can safely say that we have successfully increased physical activity among our youngest citizens through our work on the Healthy Students Amendment Act of 2018. However, we also realize that unless we address the social and health inequities that exist in the District, our goal will not be achieved. Our efforts to make the new hospital proposed for Ward 8 a hub for a new health system may provide a comprehensive approach to reducing these disparities.

The STOP Obesity Alliance began in 2007, and I previously served on its advisory committee. When I became the Chair of the Redstone Global Center, it seemed appropriate to make the Alliance part of the center’s activities. Our work at STOP has focused on improving the care of people with obesity. Our efforts have included the development of competencies arrived at by consensus of a wide variety of obesity providers, characterization of the coverage for obesity care by state Medicaid and state employee health plans, publishing a standard of care for obesity, and designing a proposed ideal benefit for obesity care. These efforts are unique and potentially transformative.

The center also became the home of the project known as Building Community Resilience (BCR), directed by Wendy Ellis. Wendy was a Milken Scholar and completed her dissertation on a systems approach to community resilience at the same time that she was directing the BCR network, which consisted of local community collaboratives in Washington, D.C.; Portland, Oregon; Dallas, Texas; Cincinnati, Ohio; and Kansas City and St Louis, Missouri. The BCR network has been funded by grants from the Doris Duke Charitable Foundation and the Kresge Foundation. The recognition that resilient communities foster resilient children has gained immediate currency and has led to a rapid expansion of BCR activities. Jeff Hild’s efforts have led to an emphasis on policies that address adverse childhood experiences and the social determinants of health at local, state, and federal levels. Our efforts are now directed to developing the support necessary to establish BCR as a national center.

The release of the report of the Lancet Commission on Obesity, entitled The Global Syndemic of Obesity, Undernutrition, and Climate Change followed two Lancet series on obesity. I was pleased to co-chair the Commission with Boyd Swinburn of the University of Auckland. The report was the product of three years of work, and provided a unique perspective on the three most pressing threats to the health of people and the planet. Our report points to potential double and triple duty solutions that simultaneously address two or all three of the pandemics, with recommendations for actions at the local, state, and global levels. Our emphasis on policy solutions may unify the heretofore siloed efforts around each of these pandemics.

The center’s grants in support of pilot studies have played an important role in the development of young faculty in Milken Institute School of Public Health (SPH). The program was originally limited to applicants focused on nutrition, physical activity, or obesity, but has since been broadened to include support for pre-doctoral candidates, as well as faculty whose work focuses on policy and inequities in the District. As we show in this report, the pilot studies have resulted in a number of publications, as well as successful grant applications.

In summary, I am extremely grateful for the generous support provided for our activities by the Sumner M. Redstone Charitable Foundation. The support for the center has enabled us to focus on issues critical to the health of the District of Columbia, communities, states, countries, and the planet. Our success would not have been possible without that support. Thank you.
STRATEGIC OVERVIEW AND LOOKING AHEAD

The Sumner M. Redstone Global Center for Prevention and Wellness at the George Washington University Milken Institute School of Public Health was established in 2014. The center is led by Chair and Director, William Dietz, MD, PhD, who served as Director of the Division of Nutrition, Physical Activity and Obesity at the Centers for Disease Control and Prevention for nearly 16 years. The work of the center focuses on research and solutions to improve nutrition, physical activity, and obesity. By engaging in strategies to make Washington, D.C., the healthiest capital in the world, reducing health disparities and inequities, the center is able to push innovation that can be replicated in other places. The center’s home in the only school of public health in the nation’s capital provides a unique opportunity to influence local, national, and global policy.

The Redstone Global Center recognizes that obesity has a profound impact on the public’s health. It affects every system in the body, and those with the disease experience a range of health and social consequences. It is also a major cause of heart disease, type 2 diabetes, and many cancers. Pervasive stigma and bias associated with obesity exacts a high psychological toll and also impairs interactions with clinicians that can produce poor health outcomes. The medical costs of obesity approximate $150 billion annually - roughly 10 percent of the national health care budget. In a recent editorial in the *Journal of the American Medical Association*, Dr. Dietz identified young adulthood as a neglected, yet essential target for preventing the development of obesity. Successful prevention efforts could reduce obesity in young adult parents and potentially, in their children.

The center also is committed to supporting thought leadership and real-world strategies to address childhood adversity, which can have profound impacts on health outcomes, including greatly increasing the likelihood of developing obesity or other chronic health conditions. Part of the center’s work focuses on developing and disseminating solutions to prevent and ameliorate childhood adversity and trauma.

TIMELINE OF REDSTONE GLOBAL CENTER ACTIVITIES

- **MARCH:** The Milken Institute, the Sumner M. Redstone Charitable Foundation, and the Milken Family Foundation came together to provide $80 million to GW public health, the largest gift in GW history.
  - The gift created the Sumner M. Redstone Global Center for Prevention and Wellness
- **MAY:** GW celebrates the opening of Milken Institute School of Public Health Building, a sustainable, state-of-the-art building designed to promote healthy habits.
2015

- **JUNE:** Dr. Dietz appointed co-chair of the D.C. Department of Health Diabesity Committee
- **NOVEMBER:** First Redstone Global Center Pilot Grants awarded
- **DECEMBER:** Pre-screening of the PBS documentary *In Defense of Food* with journalist Michael Pollan
Highlights

In its first five years, the Redstone Global Center:

- Formally installed Dr. William Dietz as the inaugural Sumner M. Redstone Chair in March 2016.
- Created and convened internal and external advisory groups.
- Became a leading voice in the District for policy changes to enhance health through increased access to physical activity and nutritious food, public health responses to community violence, and trauma-informed supports for children, families, and communities.
- Was instrumental in the passage of the Healthy Students Amendments Act of 2018, which increases physical activity across District schools, mandates daily recess for students, and improves school nutrition.
- Successfully advocated for important investments in D.C. budgets, including funding for the Healthy Students Amendments Act, the Student Fair Access to School Act, Birth to Three for All D.C., and WIC Program Expansion.

TIMELINE OF REDSTONE GLOBAL CENTER ACTIVITIES

2016

- **FEBRUARY**: First convening of the Lancet Commission on Obesity
- **MARCH**: Dr. William Dietz formally installed as the inaugural Sumner M. Redstone Chair
- **JUNE**: Incorporated the STOP Obesity Alliance into the Redstone Global Center
- **JULY**: Dr. Dietz appointed as a Commissioner on the D.C. Healthy Youth and Schools Commission
- **AUGUST**: First staff for the Building Community Resilience collaborative hired
- **OCTOBER**: National Academy of Medicine symposium on Reversing the Dramatic, 30-Year Rise in Obesity and Type 2 Diabetes, featuring keynote addresses by Margaret Chan of the World Health Organization and the Redstone Global Center’s Dr. Dietz
- **OCTOBER**: Second convening of the Lancet Commission on Obesity
• Helped establish and support new research in the Department of Exercise and Nutrition at District of Columbia Public Schools elementary schools.

• Incorporated the STOP Obesity Alliance into the center and celebrated STOP’s 10-year anniversary

• Published the first-ever standard of care for adult obesity treatment as well as an assessment of obesity coverage in Medicaid and state employee health plans across all 50 states and D.C., and launched interactive coverage maps online.

• Co-led a multi-year process to develop and curate the first-ever Provider Competencies for the Prevention and Management of Obesity.

• Became the academic home and incubator for the Building Community Resilience National Collaborative and Network.

• Led policy engagement with Congress and federal agencies, including the coordination of “Hill Days,” participation in Congressional Briefings, and advocacy for legislation on trauma-informed care and obesity care and treatment.

• Developed a policy agenda across local, state, and federal government to support the key priority areas of the center’s work.

• Co-led and convened the multi-year effort of the Lancet Commission on the Global Syndemic, which connects the pandemics of climate change, undernutrition, and obesity and culminated in a groundbreaking report and policy recommendations in January 2019.

• Launched and grew multiple digital platforms, including social media channels, blogs and websites

• Funded nine Redstone Pilot Program grants for junior faculty to generate data for NIH grant submissions

• Developed stronger institutional ties to cross-sector work, such as integration of Milken Institute School of Public Health’s Food Policy Institute into the work of the Redstone Global Center.

• Published 29 peer-reviewed articles contributing to the field of public health in high-impact journals such as The Journal of the American Medical Association, The Lancet, and Health Affairs.

**2017**

- **JANUARY:** Second Redstone Global Center Pilot Grants awarded
- **APRIL:** First national convening of the Building Community Resilience five network sites in Washington, D.C.
- **JULY:** BCR co-hosted a briefing on childhood trauma – The Need to Address Childhood Trauma: Implications for Child Welfare and Education – at the U.S. House of Representatives
- **AUGUST:** New release of STOP Obesity Alliance infographic highlighting key takeaways from Director Bill Dietz’s recent editorial, Obesity and Excessive Weight Gain in Young Adults: New Targets for Prevention
- **DECEMBER:** Release of Provider Competencies for the Prevention and Management of Obesity
Looking Forward

The center remains committed to the prevention and treatment of obesity, improving nutrition and physical activity, and other interventions to address health disparities and inequities. As we plan for the next five years at the Redstone Global Center, this work will include:

- Increasing the reach and influence of the Lancet Commission Report on the Global Syndemic, particularly through engagement with policymakers and fostering collaboration with organizations working to improve the food system.
- Supporting the growth of the Building Community Resilience Collaborative and Network to serve more communities and operate independently.
- Continuing to support research and innovation in obesity prevention, the care of people with obesity, ensuring that coverage for evidence-based treatment occurs, and lifting up promising practices that eliminate stigma.
- Continuing engagement with policymakers and stakeholders in Washington, D.C., to improve public health outcomes in our nation’s capital.
- Continuing to grow the center’s policy capacity to further address health disparities, obesity care and treatment, and public health priorities locally, nationally, and globally.

TIMELINE OF REDSTONE GLOBAL CENTER ACTIVITIES

- **JANUARY:** Third Redstone Global Center Pilot Grants awarded
- **JUNE:** Wendy Ellis, BCR Project Director, delivered the inaugural John W. Downing Jr. Lectureship at Howard University
- **SEPTEMBER:** Wendy Ellis, BCR Project Director, selected as a 2018 Aspen Institute Ascend Fellow
- **NOVEMBER:** STOP Obesity Alliance presented new research at Obesity Week, assessing coverage of obesity prevention and treatment in states
- **DECEMBER:** As part of a multi-year effort of the Redstone Global Center, D.C. Council passed legislation to ensure students in D.C. public schools have more time for play and physical activity
The Redstone Global Center Team

The activities of the center are driven by a growing team with exceptional expertise in policy, research, and practice. In 2019 the center staff includes Jeff Hild, Policy Director; Lorenza West, Policy Research Assistant, Nadia Harb, Research Program Manager, and Kate Wolff, Communications and Outreach Director, for the Redstone Global Center; Cristy Gallagher, Research Project Director, and Nichole Jannah, Research Associate, with the STOP Obesity Alliance; Dr. Wendy Ellis, Project Director, Daniel Chen, Senior Research Associate, and Caitlin Murphy, Research Program Manager, with the Building Community Resilience collaborative.

Internal Advisory Group

To further deepen engagement within Milken Institute SPH and amplify work across departments and the broader university community, the center established the Internal Advisory Group (IAG) in 2015. Members meet annually to provide strategic support and guidance on the center’s projects and plans. Membership in 2019 included:

- **Lynn Goldman**, Michael and Lori Milken Dean of Milken Institute School of Public Health and Professor of Environmental and Occupational Health
- **Jim Tielsch**, Professor and Chair of the Department of Global Health
- **Rajiv Rimal**, Professor and Chair of the Department of Prevention and Community Health
- **Jane Thorpe**, Professor and Acting Chair, Department of Health Policy and Management
- **Jennifer Sacheck-Ward**, Sanofi Professor of Prevention and Wellness and Chair, Department of Exercise and Nutrition Sciences

2019

- **JANUARY**: Fourth Redstone Global Center Pilot Grants awarded
- **JANUARY**: The Lancet Commission on the Global Syndemic of Obesity, Undernutrition and Climate Change released its report and policy brief, identifying the ‘Global Syndemic’ as the interacting pandemics of obesity, undernutrition and climate change linked by common drivers and shared solutions
- **MARCH**: Dr. Dietz co-authored American Academy of Pediatrics policy statement to Reduce Sugary Drink Consumption in Children and Adolescents
- **MAY**: New commentary published in the journal *Pediatrics* from Dr. Bill Dietz calls for a new approach to prevent obesity in low-income, minority communities
- **JULY**: STOP Obesity Alliance published a new standard of care for medical educators, health care providers and community programs to enhance the level of care for patients with obesity
- **SEPTEMBER**: BCR network expanded to a sixth site, reaching 40+ cross-sector organizations in nine states
External Advisory Group

The work of the Redstone Global Center is reviewed by the External Advisory Group (EAG), which meets on an annual basis to provide direction and recommendations. Created in December 2015, the EAG has helped to define the center’s scope of work and identify new opportunities, including special consideration of policy development and implementation. Membership in 2019 included:

- **Sue Curry**, Dean, University of Iowa College of Public Health and Distinguished Professor, Department of Health Management and Policy
- **Larry Deyton**, Senior Associate Dean for Clinical Public Health, George Washington University School of Medicine and Health Sciences
- **Steven Gortmaker**, Professor of the Practice of Health Sociology, Harvard T.H. Chan School of Public Health
- **Mauricio Hernandez Avila**, Secretary General – IANPHI Mexico Secretariat, National Institute of Public Health
- **LaQuandra Nesbitt**, Director, D.C. Department of Health
- **Russel Pate**, Professor, Department of Exercise Science, Arnold School of Public Health, University of South Carolina
- **Joseph Wright**, Senior Vice President and Chief Medical Officer of Capital Region Health, University of Maryland Medical System
Washington, D.C. Activities

Addressing Chronic Diseases and Health Disparities

In 2018, the D.C. Department of Health published a Health Equity Report, providing a review of social and structural determinants of health in the District. The report builds on the findings that clinical health care drives only 20 percent of population health outcomes, while the remaining 80 percent is generated by non-clinical factors, such as education, employment, income, housing, transportation, food environment, outdoor environment, and community safety. As the D.C. Department of Health notes, there are “significant differences across neighborhoods that align with disparities in health outcomes, including life expectancy, with differences of 21 years between the two ends of the spectrum.” According to D.C. Department of Health data, more than half of all adults living in D.C. are overweight or have obesity; rates climb to over 72 percent east of the river in Wards 7 and 8. In addition, over half the residents in Wards 7 and 8 may develop diabetes and its potential complications of blindness, kidney failure, and lower-leg amputation.

Dr. Dietz became co-chair of the Diabesity Committee at the D.C. Department of Health when it launched in June 2015. The committee convenes local and national stakeholders to address the dual epidemics of obesity and diabetes. The Diabesity Committee has working groups targeting physical activity, clinical interventions, and reducing sugary drink consumption. Most recently, a physical activity working group was launched to promote physical activity and explore ways to reduce disparities that exist in D.C. around inactivity, including by ward, race, and income.

Since 2016, the Redstone Global Center has developed and deepened working relationships with policymakers, including D.C. Council members and staff, and has become a sought-after resource among local advocates and elected officials. Most recently, the center has coordinated several opportunities for leadership and engaged Milken Institute SPH faculty to provide testimony to the D.C. Council. For example, in 2018 and 2019, center staff and Milken Institute SPH faculty appeared before the Council in support of the city’s fiscal year 2020 budget priorities to improve nutrition, increase physical activity, and efforts by the D.C. government to build community resilience by addressing adverse childhood experiences in the context of adverse community environments.

The center is also championing Health Impact Assessment legislation to ensure that health considerations are part of the decision-making process for all major projects in the District as well as the development and implementation of a new health system in Ward 8, conjunction with a new community hospital on the St. Elizabeth’s campus.

In 2018, the center worked with a local non-profit to develop a cost/benefit analysis of a medically tailored meals intervention for individuals with chronic illnesses. The analysis was presented to the District’s Medicaid agency and later utilized to support a medically tailored meals pilot through one the District’s Medicaid Managed Care Organizations.
Sugar: Changing Social Norms, Reducing Consumption

The center is actively working to reduce sugary drink consumption through education, community engagement, and policy changes. Consumption of sugary drinks – including soda, sports drinks, and juices with added sugars – contributes to the development of obesity, diabetes, and other chronic illnesses. Sugary drinks account for 31 percent of added sugars in the U.S. diet. As part of the Diabesity Committee, the Redstone Global Center worked with the D.C. Hospital Association and D.C. Health to obtain pledges from all D.C. Hospital CEOs to employ successful strategies to improve employee, patient, and visitor health by increasing sales of healthy beverages, such as water, and reducing availability and consumption of sugary drinks.

To build on these efforts, the Redstone Global Center is part of a coalition of organizations in D.C. supporting community-led efforts to reduce sugary drink consumption through the implementation of new policy, including exploration of an excise tax. The center, in collaboration with Redstone Fellow and Milken Institute SPH faculty member Michael Long, will continue to provide data and technical assistance for the coalition work, as well as advising Council members on legislative language.

Physical Activity: Targeting Youth and Schools

Dr. Dietz is a Commissioner on the D.C. Healthy Youth and Schools Commission and chairs its Subcommittee on Physical Activity. As part of the commission, the center has been a key force in work to create a physical activity standard for pre-K students in the District’s public schools. The center worked to pass the Healthy Students Amendments Act in 2018. This act will increase physical activity across District schools by helping them meet existing physical education and physical activity requirements, mandating daily recess for students, and requiring annual professional development to support incorporation of active recess and physical activity into the classroom and active recess. Future efforts will focus on funding and implementing the law, increasing physical activity in out-of-school programs, and improving data collection.

D.C. Activities - Highlights since 2014:

- Provided expert testimony at 13 D.C. Council hearings and briefed the Mayor’s cabinet on the impact of childhood adversity on health outcomes in the District.
• Guided successful policy initiatives such as:
  ▶ Reduction of sugary drink availability at D.C. hospitals
  ▶ Medically tailored meals pilot program
  ▶ New standards for physical activity in schools
• Partnered with law enforcement and community organizations to examine the root causes of community violence and its long-term impacts on public health.

National Activities

The STOP Obesity Alliance

A cornerstone of the Redstone Global Center’s work is to develop and promote innovative strategies that can prevent unhealthy weight gain, poor nutrition, and chronic disease, and to improve care and treatment for those living with obesity. To help carry out this mission, the Strategies to Overcome and Prevent Obesity Alliance (STOP), initially created at GW in 2007, joined the Redstone Global Center in 2014.

Members of the STOP Obesity Alliance include health professionals, government agencies, researchers, policymakers, employers, health insurers, patient advocates, and quality-of-care organizations. Essential to STOP’s success is its active and diverse coalition, with collaborative member relationships critical to achieving shared goals and capitalizing on partnership opportunities. STOP’s activities drive innovative and practical strategies that combat obesity, ranging from tools for primary care physicians to efforts to reduce stigma and bias in workplaces, provider offices, and the media. This work is supported by Novo Nordisk, Sanofi, WW (formerly Weight Watchers), Seca, and voluntary membership fees.

STOP conducts outreach efforts and continues to utilize publications, exhibitions at scientific meetings, and media opportunities to expand its reach. Members are convened quarterly, with an annual corporate membership meeting held each fall. An e-newsletter is sent out monthly with member updates, summaries of newsworthy research, expert perspective on obesity-related news, and a monthly “Letter from the Director” that describes research, treatment, policy, and other obesity-related developments.

Over the past five years, STOP has continued to build on and develop new resources on the most consequential topics in obesity prevention and management, distilled into data-driven infographics and fact sheets designed for public consumption. The Why Weight Guide helps health care providers initiate productive conversations around weight with patients. Similarly, the Weigh In Guide helps parents talk to their children about weight in non-stigmatizing ways. More recently, STOP is curating the first-ever Provider Competencies for the Prevention and Management of Obesity and published an analysis of Obesity Coverage in Medicaid and State Employer Health Plans over a decade - including an interactive U.S. map documenting insurance coverage by Medicaid and state employee health plans.

STOP regularly and strategically convenes experts and develops novel resources that inform policy and practice. In 2018, STOP convened a series of roundtable meetings with relevant stakeholder groups to answer the questions of who should provide obesity care, where obesity care should be delivered and what care should be provided by whom. The result was a practical, tangible, measurable, and simple standard of care for the treatment of adult obesity, published in the July 2019 issue of Obesity. The recommendations proposed are intended to provide health professionals, payers, community organizations, policymakers, and those affected by obesity with guidance on foundational components of evidence-based obesity care, reaching across care settings and representing evidence-based practices that positively affect the health of people affected by obesity.
EXCESSIVE WEIGHT GAIN AMONG YOUNG ADULTS
A New Target for Prevention

Between the ages of 18 and 55, approximately ...
1 in 4 women
+ 1 in 8 men
... gain at least 44 lbs

More likely to develop:

Women
- type-2 diabetes: 9.5 x higher risk
- coronary artery disease: 2.2 x higher risk
- obesity-related cancers: 1.7 x more likely to die prematurely
- stroke: 1.6 x more likely to die prematurely
- severe osteoarthritis: 1.4 x more likely to die prematurely

Men
- 7.5 x higher risk
- 1.5 x more likely to die prematurely

Weight gain ≥ 44 pounds during early to middle adulthood significantly increases chronic disease risk.

RESEARCH to understand how major life transitions in young adults contribute to excessive weight gain.

EXPLOREx family-based interventions as cost-effective strategies to reduce premature death & disease.

In family interventions for pediatric weight loss, parents also lose weight.

Sources:
1 Zheng et al., JAMA, 2017; 2 NHANES I Epidemiologic Follow-up Study; 3 Coronary Artery Risk Development in Young Adults (CARDIA) Study; 4 Dietz, JAMA, 2017; 5 Wrotniak, Epstein, Paluch & Roemmich, JAMA, 2004

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Stop Obesity Alliance
A product of the Strategies to Overcome & Prevent (STOP) Obesity Alliance at the Sumner M. Redstone Global Center for Prevention & Wellness

Preventable

Marriage
Pregnancy
Divorce

Full-time job
Child rearing
Loss of a loved one

Independent living

Between the ages of 18 and 55, approximately ...
25% of adults gaining ≥ 44 lbs or ≥5 BMI units

NHANES 2:
1971-75 to 1981-84

CARDIA Study 3:
1985-86 to 1995-96

Health Professionals Follow-up & Nurses’ Health Studies

Rate has more than doubled since the 1980s

Women

Men
Coverage for OBESITY TREATMENT SERVICES

State Medicaid Programs

2016 - 2017

Obesity Counseling
41 of 51
state Medicaid programs
indicated coverage for
at least one obesity screening
+ counseling visit
(range: 0 to 76 visits/year)

Nutritional Counseling
20 of 51
state Medicaid programs
indicated coverage for
at least one nutritional
consultation visit for obesity
(range: 0 to 12 visits/year)

Anti-Obesity Medications
16 of 51
state Medicaid programs
indicated coverage for
one or more FDA-approved
medications for the
treatment of obesity

Bariatric Surgery
49 of 51
state Medicaid programs
indicated coverage for one
or more surgical procedures
for the treatment of obesity

Obesity prevalence of adults (aged 18+ years)
with BMI > 30 kg/m² (NHANES, 2017)

Diabetes prevalence of adults (aged 18+ years)
diagnosed with diabetes (NHANES, 2016)

State’s Medicaid program has taken the
My Healthy Weight Pledge

Obesity Counseling

Coverage*

Reasonable coverage for non-pregnant adults
21 years in at least one plan

Evidence that service is excluded from
coverage for non-pregnant adults

Absent or contradictory evidence of
coverage for non-pregnant adults

*Many programs limit coverage by requiring presence of a specified comorbid condition, offering
access only through certain plans, requiring prior authorization for covered services, imposing
significant cost-sharing, and/or imposing annual or lifetime service caps. Actual coverage may differ
from that predicted by this analysis.

For additional information regarding state-specific coverage limitations, please see the
Supplementary Information published online: https://onlinelibrary.wiley.com/doi/10.1002/oby.23307

STOP OBESITY ALLIANCE
A product of the Strategies to Overcome & Prevent (STOP) Obesity Alliance at the Sansum + REDSTONE
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Coverage for Obesity Treatment Services

State Employee Health Insurance

2016 - 2017

Obesity prevalence of adults (aged 18+ years) with BMI ≥ 30 kg/m² (BRFSS, 2017)

Diabetes prevalence of adults (aged 18+ years) diagnosed with diabetes (BRFSS, 2016)

Obesity Counseling
51 of 51
State employee health insurance programs indicated coverage for at least one counseling visit
(range: 0.5 to 36 visits/year)

Nutritional Counseling
42 of 51
State employee health insurance programs indicated coverage for at least one nutritional counseling visit for obesity
(range: 0 to 12 visits/year)

Anti-Obesity Medications
23 of 51
State employee health insurance programs indicated coverage for one or more FDA-approved medications for the treatment of obesity

Bariatric Surgery
43 of 51
State employee health insurance programs indicated coverage for one or more surgical procedures for the treatment of obesity

Covered:
possible coverage for non-pregnant adults (21+ years) in at least one plan

Not Covered:
evidence that service is excluded from coverage for non-pregnant adults

Undetermined:
absent or contradictory evidence of coverage for non-pregnant adults

*Many programs limit coverage by requiring presence of a specified co-morbid condition, offering access only through certain plans, requiring prior authorization for covered services, imposing significant cost-sharing, or placing annual or lifetime service caps. Actual coverage may differ from that predicted by this analysis.

For additional information regarding state-specific coverage limitations, please see the Supplementary Information published online: https://onlinelibrary.wiley.com/doi/10.1002/oby.22047

STOP Obesity Alliance
A product of the Strategies to Overcome & Prevent (STOP) Obesity Alliance at the Sumner M. Redstone Global Center for Prevention & Wellness

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STOP is a founding member of the National Obesity Care Week (NOCW), along with the Obesity Action Coalition (OAC), the American Society for Metabolic and Bariatric Surgery (ASMBS), the Obesity Medicine Association (OMA), and The Obesity Society (TOS). NOCW, heading into its fifth year, has been supported by more than 35 champion organizations, almost half of which are also members of the STOP Obesity Alliance. In 2019, STOP and Virgin Pulse celebrated the 10th National Employee Wellbeing Month, spotlighting the workplace’s role in helping to create healthy employees. Held in June each year, Virgin Pulse and STOP launched the initiative in 2009 and have since added sponsorships from the Partnership to Fight Chronic Disease and WorldatWork.

STOP Obesity Alliance Highlights since 2014:

- 70 member organizations.
- 675 downloads of the Why Weight Guide.
- Eight national convenings on a range of timely obesity prevention and care topics, such as roundtables on obesity management and coverage and convening stakeholders to discuss provider training and education.
- Published the nation’s only comprehensive resource for Coverage for Obesity Prevention and Treatment Services in Medicaid and State Employee Health Insurance Programs, including state fact sheets and an interactive map.
- In collaboration with the 20+ members of the National Academy of Medicine’s Roundtable on Obesity Solutions, developed 10 competencies across multiple professions, with the potential to reach thousands of providers and patients across the country in a variety of care settings.
- 2,100+ newsletter subscribers.
- 8,350+ Twitter followers with an average of 11,000 monthly impressions.
Improving Health Outcomes by Building Community Resilience

The Redstone Global Center recognizes that the root causes of many chronic diseases such as obesity, heart disease, and diabetes stem from childhood and community adversity. In 2015 the center became the academic home to the Building Community Resilience Network and Collaborative (BCR). In four years, BCR has grown from a doctoral research project to an internationally recognized public health movement that is working to prevent and mitigate what BCR has coined the “Pair of ACEs” – adverse childhood experiences occurring in the context of adverse community environments. Teams across the country use the BCR process and tools to help their communities not only ‘bounce back’ in the face of adversity, but bounce forward to improve outcomes for children and families. Lessons learned inform national policy debates related to equity and the Pair of ACEs.

Using the BCR process and tools, communities work to align multi-sector systems—such as health care, education, criminal justice and the courts with city and county government and community-based partners, including providers, parenting support services, and grassroots community advocates. Teams develop strategies – from implementing trauma-informed practices to data sharing and advocating for policy change – that bolster community strengths, fill systems and resource gaps, and ultimately build child, family, and community resilience.

The national BCR team at GW, led by Michael and Lori Milken Public Health Scholar Dr. Wendy Ellis, provides technical assistance, including strategic planning, facilitation of cross-sector information sharing, support for data and measurement, development of policy strategies, convening, and communications support. Training and development is also provided to help BCR network teams learn to effectively advocate for policy changes through engagement on Capitol Hill and with collaboration with federal agencies, such as the Assistant Secretary for Planning and Evaluation and the Substance Abuse and Mental Health Support Administration, both at the U.S. Department of Health and Human Services. BCR is supported by a total of $1.7 million in grant funding from the Doris Duke Charitable Foundation and the Kresge Foundation.
BCR Highlights since 2015:

- 40+ cross-sector organizations in nine states + D.C. actively connected via the BCR network across the country, serving six million+ children and families.
- 60+ workshops, trainings, webinars, townhalls, and presentations across 22 states, including 10+ strategic planning sessions.
- 25,000+ downloads of BCR’s tools and resources, including the “Pair of ACEs” tree, the *Coalition Building and Communications Guide*, and the *Policy and Advocacy Guide*.
- 22 states and 90 counties are using the Pair of ACEs infographics customized to their region.
- Two “Hill Days” where BCR teams made over 50 visits to their federal representatives.
- Five Congressional Briefings co-led to educate Members and staff on the health impact of the Pair of ACEs and potential policy solutions.
- One federal law signed into law including trauma-related provisions championed by BCR: The Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act (SUPPORT for Patients and Communities Act).

Humanitarian Crisis at the Border

In 2018, a federal policy change resulted in more than 2,300 immigrant children being forcibly separated from their parents at the U.S.-Mexico border. Concerned about the on-going and compounded trauma experienced by children as a result of this and subsequent federal policy decisions, Dr. Dietz, who is a pediatrician, released an initial statement in 2018, updated in 2019, related to the lifelong health impacts of the new policies. Redstone Global Center staff have also provided expert advice to Congressional staff and members of the media conducting oversight and investigations of the family separation policy and its aftermath.
Traumatic Family Separations Can Have Lifelong Impact on Children

GW expert and former HHS official Jeff Hild said the government needs to do more to reunify families.

GW expert Jeff Hild says children who have been separated from their families at the border are experiencing trauma that will impact them for years to come. (Photo courtesy of the U.S. Department of Health and Human Services)

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The separation of families at the U.S.-Mexico border could have long-term health consequences on immigrant children, according to Jeff Hild, policy director at the Sumner M. Redstone Global Center for Prevention and Wellness at the Milken Institute School of Public Health.

The Redstone Center works to reduce health disparities and inequities locally, nationally and globally, including identifying ways to make children, families and communities more resilient in the face of adversity. Mr. Hild served as chief of staff at the Administration for Children and
Global Activities

The Lancet Commission on Obesity

Dr. Dietz and Boyd Swinburn of the University of Auckland are co-chairs of the Lancet Commission on Obesity, composed of an international group of commissioners and fellows. Following a series of convenings, including two hosted by Milken Institute School of Public Health, the Lancet released the Commission’s seminal report, The Global Syndemic of Obesity, Undernutrition and Climate Change, in 2019. The report is the first to definitively place and critically examine obesity in a wider context of the global interactions of the pandemics of obesity, undernutrition, and climate change. The Global Syndemic illustrates how the pandemics of obesity, undernutrition and climate change coexist in time and place, interact to increase their adverse effects, and are driven by the underlying systems of agriculture, transport, land use, and urban design. The linkages between these three pandemics suggest double- or triple-duty solutions that simultaneously mitigate two or all three pandemics. In conjunction with the report’s release, the commission released actionable recommendations in its Policy Brief intended for national and municipal governments, civil society, funders, businesses, and international agencies.

Looking forward, the Redstone Global Center is developing plans to leverage both a communications and policy strategy that bridges the current silos and addresses common drivers of the Syndemic in the United States through double- and triple-duty actions. Mitigating the U.S. contributions to climate change through this unique, multi-sector lens will have a major impact domestically and globally while also reducing obesity and undernutrition. Strategies in the United States include initial efforts to develop sustainable dietary guidelines, augment city efforts to address climate change through their procurement policies and efforts to reduce food waste, and the development of a communication strategy to mobilize policy makers and public opinion.
Activities in Milken Institute School of Public Health

To support the development of future leaders, the center funds pilot studies for faculty and predoctoral candidates working in nutrition, physical activity, obesity, and chronic disease disparities within the D.C. metropolitan area. The Redstone Global Center also connects with Milken Institute SPH faculty through a fellows program to support research and instruction. Awardees and fellows are listed below.

Awardees

• **Aubrey Villalobos, DrPH candidate, Health Behavior.** 2019 Redstone Global Center Pilot Grant Awardee for research on breastfeeding norms among African-American women.

• **Kate Applebaum, Associate Professor, Environment and Occupational Health.** 2018 Redstone Global Center Pilot Grant Awardee for research on physical activity and kidney health in Central American agricultural workers.

• **Allison Sylvetsky Meni, Assistant Professor, Exercise and Nutrition Sciences.** 2018 Redstone Global Center Pilot Grant Awardee for research on associations between low-calorie sweeteners, diet quality and metabolic risk in adolescents with diabetes. Publications: *Consumption of low-calorie sweetened beverages is associated with higher total energy and sugar intake among children, NHANES 2011-2016*.

• **Uriyoán Colón-Ramos, Associate Professor, Global Health.** 2017 Redstone Global Center Pilot Grant Awardee for research into tap water drinking behaviors among Latino children. In 2018, Dr. Colón-Ramos was part of a team that developed a nutrition program evaluation course for program managers in Latin America as part of the Pan-American Health Organization (PAHO). Publications: *Formative research to design a promotional campaign to increase drinking water among Central American Latino youth in an urban area*.

• **Kim Robien, Associate Professor, Exercise and Nutrition Sciences.** 2017 Redstone Global Center Pilot Grant Awardee for research on the effect of weight loss and phthalate exposure reduction on body composition among women. Dr. Robien’s research focuses on nutrition in chronic disease prevention, food access in underserved communities, environmental nutrition and sustainable food systems, and the extent to which exposure to food-borne chemicals may contribute to risk of obesity and chronic diseases.

• **Todd A. Miller, Associate Professor, Director of Graduate Studies, Exercise and Nutrition Sciences.** 2016 Redstone Global Center Pilot Grant Awardee for research into the use of strength training for fat loss. Publications: *Resistance training combined with diet decreases body fat while preserving lean mass independent of resting metabolic rate: a randomized trial*.

• **Amira Roess, Assistant Professor, Global Health.** 2016 and 2018 Redstone Global Center Pilot Grant Awardee for research into breastfeeding outcomes for WIC populations and the effect of breastfeeding on the microbiome in minority infants. In 2019, research funded by the center was used as part of a successful grant application to the Bill and Melinda Gates Foundation for a study of infant feeding behaviors and associations with infant health outcomes. Publications: *Social support for breastfeeding in the era of mHealth: A content analysis*.

• **Monique Turner, Associate Professor and Associate Dean for MPH Programs, Prevention and Community Health.** 2016 Redstone Global Center Pilot Grant Awardee for research into diabetes prevention programs for young obese maternal caregivers and their children’s health. Publications: *Impact of self-efficacy on risk aversion in the context of surgical weight loss decision scenarios*. 
Fellows

• Monica Hubal, Professorial Lecturer, Exercise and Nutrition Sciences. Dr. Hubal’s research focuses on identifying ideal intervention strategies to regain health as well as the factors that make some people more prone to developing obesity, type 2 diabetes, and cardiometabolic disease, especially in early life.

• Michael Long, Assistant Professor, Prevention and Community Health. Dr. Long conducts research at the intersection of epidemiology and quantitative policy analysis with the goal of identifying cost-effective and politically feasible policy solutions to promote community health.

• Sameera Talegawkar, Associate Professor, Exercise and Nutrition Sciences. Dr. Talegawkar’s research focuses on the role of diet and other lifestyle factors on chronic disease risk in minority populations, and on age-related functional declines in older individuals.

Redstone center staff volunteering with D.C.-based Martha’s Table Joyful Market