Source: National Association Of Chronic Disease Directors. Accessed January 30, 2024.

## STRATEGIC HELP FOR CHILDREN WITH OBESITY: A SUCCESS STORY AT DENVER HEALTH

Pediatric obesity is a challenging issue for all of us working in primary care. On the one hand, the United States Preventive Services Task Force (USPSTF) issued a Grade B recommendation that all children should be screened for obesity and then offered or referred to intensive behavioral interventions (defined as 25+ hours). On the other hand, quality community programs often come and go with fluctuations in grant funding, and gaps in community-clinical communication make it difficult to know if resources have been accessed. This is particularly challenging in low-income settings for many factors, but it is heavily related to disparities in resource allocation.

Denver Health (DH) is a safety-net health care system that has been serving the underserved in Denver for more than 150 years. It also includes a network of nine Federally Qualified Health Centers (FQHCs). In 2018, DH FQHCs took care of more than 150,000 Denver residents. Our pediatric patients suffer disproportionately from unhealthy weight and its health impacts, despite the stereotype of Colorado as a healthy state. The question we at DH asked ourselves was: how do we best provide resources and programs to our 21,000 children who are overweight and obese while complying with USPSTF guidelines?

The answer, for us, was MEND. MEND stands for Mind, Exercise, Nutrition – Do It! and is an evidence-based program originally developed in the UK. MEND has been shown to be effective in a randomized-controlled trial, as well as in subsequent evaluations in communities in the U.S. Rather than developing our own program, we chose to implement MEND because our organization believes in building upon proven models.

In 2015, we secured seed grant funding to pilot MEND "in-house" at Denver Health clinics to reduce barriers to participation and increase its acceptance among our patients. We accepted referrals from all of our Primary Care Providers during well child checks, and MEND was offered on weekday evenings at convenient hours with trusted staff in their medical home. Families quickly fell in love with MEND, and we expanded to four of our FQHCs. Later when we found shockingly high rates of prediabetes, non-alcoholic fatty liver disease, and hypertension at very young ages, we also added a new layer of provider medical visits to the MEND curriculum to allow us to more appropriately treat the individual medical issues related to weight. This model has provided a path to sustainability as well as increased participation and patient satisfaction.

It also works! The Centers for Disease Control assisted in an evaluation in 2018 that showed that compared to a control group who did not participate, MEND participants showed statistically significant change in BMI trajectory over time, as well as systolic and diastolic blood pressure (publication review in process). MEND is now a fully operationalized program and a

regular part of how we provide care and support to our children and families struggling with unhealthy weight.

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Learn more about the MEND program: <a href="https://healthyweightpartnership.org/what-we-offer/">https://healthyweightpartnership.org/what-we-offer/</a>