



**Testimony of Victoria Weeks Rogers, MD  
The Barbara Bush Children's Hospital at Maine Medical Center and *Let's Go!***

**In Support of LD 816 –  
An Act to Promote Academic Achievement through Hunger Relief for Maine Children  
March 22nd, 2017**

Good Morning Senator Langley, Representative Kornfield and members of the Joint Standing Committee on Education and Cultural Affairs. My name is Victoria Rogers – I am a Pediatrician at The Barbara Bush Children's Hospital at Maine Medical Center and the Medical Director of the 5210 *Let's Go!* Program. Additionally, I am the Associate Director of the American Academy of Pediatrics Institute for Healthy Childhood Weight – where I help develop national recommendations on healthy eating and physical activity.

I am here on behalf of *Let's Go!* to testify in strong support of LD 816 – An Act to Promote Academic Achievement through Hunger Relief for Maine Children. *Let's Go!* is a community based childhood obesity prevention program that has been working in Maine for over 10 years. We focus on increasing healthy eating and physical activities wherever kids live, learn, work and play. Currently we are working with about one-third of all public schools in Maine. We provide tools, resources and training to teachers to help make the healthy choice the easy choice. And it's working – we have seen:

- **An improvement in school environments –there are more healthy snacks and celebrations, less pizza parties, more recess, less sedentary time.**
- **Kids are drinking less sugary drinks, watching less screen time and eating more fruits and veggies.**
- **And now thanks to the hard work of our school nutrition programs in Maine, school lunches are healthier than ever – they are typically healthier than lunches brought from home**

However, one area of concern for me and for the *Let's Go!* program is that **1 in 4 Maine children live in a food insecure home – that's a ¼ of all of our children.** I can tell you first hand the effect that poor diet and food insecurity has on our children. Children who wake up each morning and don't know where or when they will eat next are much more likely to do poorly in school, have behavior problems, learning difficulties and overall poor health. They often go to school hungry. Do you know what it's like to try to read or do a math problem when you're hungry? You can't do it. Imagine what it would be like for you to wake up this morning and not know when or where your next meal would be...What if you had to come to work without eating anything – would you be able to concentrate right now? Would you be able to make important decisions in hearings like this? This is what ¼ of our Maine children face

every day when they go to school without breakfast and come home to an empty refrigerator and cabinets.

LD 816 – will help to end student hunger by *eliminating the “reduced price” category for school lunch*, similar to what happens for school breakfast. It would allow all students that qualify for reduced priced lunches to get them for free. This is imperative for numerous reasons:

- School meals are the main source of nutrition for many children. **Even at reduced prices the cost of a lunch meal often means that some students cannot afford that meal** because of their family’s situation. The student is stuck in the middle, not able to afford the school meal, but unable to qualify for the free meal. This results in a hungry student which leads to disadvantages in the classroom.
- According to research, food insecurity in children is associated with behavior problems, disrupted social interactions, compromised school performance, **poor dietary intake, lower physical activity**, altered daily activities and school absenteeism.<sup>1</sup>
- It is well documented in the research that the **health of students is linked to their academic achievement**. Schools, health agencies, parents and communities all share a common goal of supporting the link between healthy eating and improved academic achievement of children and adolescents.<sup>234</sup>

**The research is solid: healthy kids learn better.** So in summary, I, and *Let’s Go!*, strongly support LD 816 – this bill will allow more children to eat healthy school lunches every day – making them ready to learn and become great students! Thank you for your time.

For more information, please contact Victoria W. Rogers, MD by phone, at 207-662-2410, or by email, at [rogerv@mmc.org](mailto:rogerv@mmc.org)

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<sup>1</sup>Frongillo, E. A., Bernal J. (2014). Understanding the Coexistence of Food Insecurity and Obesity. *Curr. Pediatr Rep* 2: 284-290. <http://link.springer.com/article/10.1007%2Fs40124-014-0056-6#page-1>

<sup>2</sup>McKenzie, FD, Richmond, JB. Linking health and learning: An overview of coordinated school health programs. In: Marx E, Wooley SF, Northrop D, eds. *Health is Academic: A Guide to Coordinated School Health Programs*. New York, NY: Teachers College Press; 1998.

<sup>3</sup>Bradley, B, Green, AC. Do Health and Education Agencies in the United States Share Responsibility for Academic Achievement and Health? A Review of 25 years of Evidence About the Relationship of Adolescents’ Academic Achievement and Health Behaviors, *Journal of Adolescent Health*. 2013; 52(5):523–532.

<sup>4</sup>Basch CE. *Healthier Students Are Better Learners: A Missing Link in Efforts to Close the Achievement Gap*. New York: New York. Columbia University; 2010.[http:// www.equitycampaign.org/i/a/document/12557\\_EquityMattersVol6\\_Web03082010.pdf](http://www.equitycampaign.org/i/a/document/12557_EquityMattersVol6_Web03082010.pdf). Accessed February 26, 2014.