

# Obesity, Nutrition, & Physical Activity Strategies in the States

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# Federal Legislation

## ***IMPACT (Improved Nutrition and Physical Activity) Act - enacted 2003***

### Congressional Findings

- An estimated 61% of U.S. adults and 13% of children are overweight or obese.
- Prevalence of obesity is increasing - 3 times as many overweight adolescents and twice as many overweight children as 29 years ago.
- An estimated 300,000 deaths per year are associated with being overweight or obese.

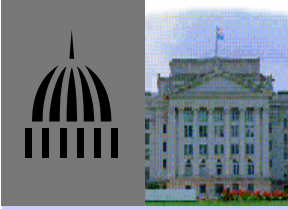


# Federal Legislation

## *IMPACT Act*

### Congressional Findings

- Obesity and being overweight are associated with an increased risk for:
  - heart disease (the leading cause of death)
  - cancer (the second leading cause of death)
  - diabetes (the 6th leading cause of death)
- Obese individuals have a 50 to 100% increased risk of premature death.



# Federal Legislation

## ***IMPACT Act***

### Congressional Findings

- Healthy People 2010 goals identify obesity and being overweight as a leading U.S. health problem and include objectives for:
  - increasing the proportion of adults who are at a healthy weight
  - reducing the proportion of children and adolescents who are overweight or obese.



# Federal Legislation

## ***IMPACT Act***

### Congressional Findings

- Another goal of Healthy People 2010 is to eliminate health disparities among different population segments. Obesity is a health problem that disproportionately impacts medically underserved populations.
- The U.S. Surgeon General's report "A Call To Action" lists treatment and prevention of obesity as a top national priority.

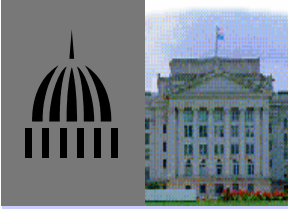


# Federal Legislation

## ***IMPACT Act***

### Congressional Findings

- Estimated direct and indirect annual cost of obesity in the U.S. is \$117,000,000,000 (exceeding costs of tobacco-related illnesses) and appears to be rising dramatically.
- The Surgeon General's "A Call To Action" and a variety of other consensus documents state that weight control programs should promote a healthy lifestyle, including regular physical activity and healthy eating.



# Federal Legislation

## ***IMPACT Act***

### Congressional Findings

- Eating preferences and habits are established early in childhood.
- Poor eating habits are a risk factor for the development of eating disorders and obesity.



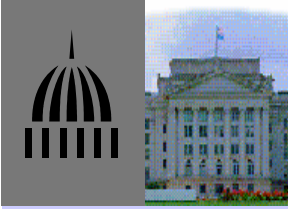
# Federal Legislation

## ***IMPACT Act***

### Congressional Findings

- Simply urging overweight individuals to be thin has not reduced obesity and may result in other problems such as body dissatisfaction, low self-esteem, and eating disorders.
- Effective interventions for promoting healthy eating behaviors should promote healthy lifestyle and not inadvertently promote unhealthy weight management techniques.





# Federal Legislation

## ***IMPACT (Improved Nutrition and Physical Activity) Act***

### Federal Legislative Response

- Training Grants - \$60 million in grants in FY2004 to train health professionals on how to identify, treat, and prevent obesity or eating disorders.



# Federal Legislation

## ***IMPACT Act***

### Federal Legislative Response

- Community-Based Solutions to Increase Physical Activity and Improve Nutrition

Grants for Community Activities such as:

- city planning, transportation initiatives, and environmental changes that help promote physical activity such as walking or bicycling for transportation
- partnerships with businesses and others to increase physical activity and promote healthy eating behaviors at workplaces and while traveling to and from work

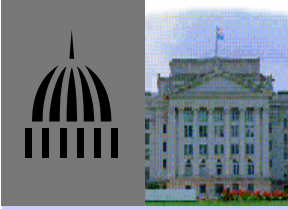


# Federal Legislation

## ***IMPACT Act***

### Federal Legislative Response

- Grants for Community Activities - continued
  - forming partnerships with agencies that provide recreational services to establish after school and weekend community activities
  - incentives for retail food outlets that offer nutritious foods to locate in economically depressed areas
  - forming partnerships with senior centers and nursing homes to establish programs to foster physical activity and healthy eating behaviors for older people



# Federal Legislation

## *IMPACT Act*

### Federal Legislative Response

- Grants for Community Activities - continued
  - forming partnerships with daycare facilities to establish programs that promote healthy eating behaviors and physical activity
  - providing community educational activities targeting good nutrition
  - carry out age-appropriate school-based activities (e.g., developing curricula and intervention programs to promote healthy eating behaviors and habits in youth)



# Federal Legislation

## *IMPACT Act*

### Federal Legislative Response

- Grants for Community Activities - continued
  - carry out age-appropriate school-based activities, e.g., developing curricula and intervention programs to promote healthy eating behaviors and habits in youth, such as:
    - after hours physical activity programs
    - increasing opportunities for student choice for healthy eating
    - science-based interventions to prevent eating disorders
  - educate educators and parents about healthy lifestyles

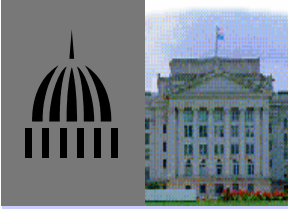


# Federal Legislation

## ***IMPACT Act***

### Federal Legislative Response

- Grants for Community Activities - continued
  - carry out activities through local health delivery systems, such as:
    - promoting healthy eating behaviors and physical activity services to treat or prevent eating disorders, being overweight, or obesity
    - providing patient education and counseling to increase physical activity and promote healthy eating behaviors
    - providing community education on good nutrition and physical activity



# Federal Legislation

## ***IMPACT Act*** - Summary

- \$60 million in grants in FY 2004
- Programs to increase activity & educate
- CDC report on grant results & research - within 6 years
- Annual review of results for information important to health disparities

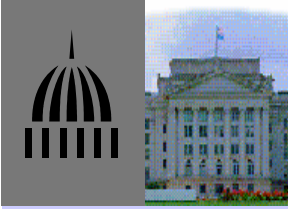


# Federal Legislation

## ***IMPACT Act*** - Summary

- HHS report to Congress on obesity research (causes, prevention, treatment) - within 1 year
- HHS report to Congress on effectiveness of the campaign to change children's health behaviors and reduce obesity





# Federal Legislation

- Obesity Prevention Act (incorporated into IMPACT legislation)
- National School Lunch Act (reauthorized through 3/31/04)
- Better Eating for Better Living Act (effort to revise school lunch nutrition guidelines, for content, variety, fruits & vegetables, cultural responsiveness)
- Healthy Children through Better Nutrition Act (introduced in House to promote access and quality in child nutrition programs and improve WIC program)



# State Actions

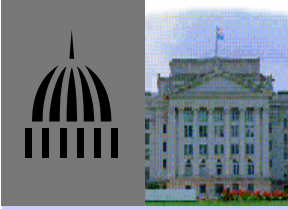
- Obesity task forces
- Walkable communities
- Physical education
- Nutrition education
- Nutrition standards



# State Actions in 2003 - CO, HI, MI, NV, WA

Colorado - measures enacted

- SJR 03-005 - Legislators resolved to participate in “Colorado on the Move” by wearing step counters as role models.
- SJR 03-045 - Declares “Colorado Walking Wednesday” - encouraging children and families to walk to school once a week, encouraging communities to promote active living and address obesity through exercise.
- SJR 03-004 - Resolves to promote healthy lifestyles and reduce health care costs by encouraging healthy personal choice in the home, at work, in schools, and by copy of resolution to US DHHS.



# State Actions in 2003 - CO, HI, MI, NV, WA

## Colorado

- HB 03-1145 - Proposed coverage for obesity treatment under Medicaid - fiscal impact estimated at \$975,313 for FY03-04. (did not pass)
- Proposed SB for 2004 - Would require increased choice of healthy foods and beverages in school vending machines.
  - Dept. of Education to provide guidance on healthy foods.
  - 50% of food or beverage items in each machine to be healthy by 2006-07.
  - Fiscal withholding from school districts for sales of non-healthy foods and beverages; monies credited instead to school breakfast program.



# State Actions in 2003 - CO, HI, MI, NV, WA

## Hawaii - measures carried over to 2004

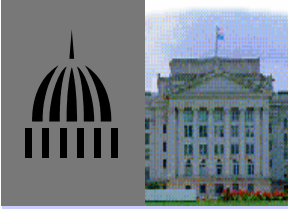
- HB 1428 - Find's that Hawaii's rate of childhood obesity is twice that on mainland. Proposes a three-year school nutrition demonstration program with components of:
  - Voluntary participation by 10 high schools, middle, and elementary schools.
  - Limitations on beverage sales.
  - Limitations on serving size and sales of foods high in saturated fat.
  - School policies on nutrition and physical activity developed based on recommendations of participating schools.



# State Actions in 2003 - CO, HI, MI, NV, WA

## Hawaii - measures carried over to 2004

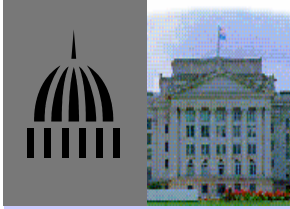
- HB 1670 - Pupil Nutrition, Health, and Achievement Act of 2003 (-04)  
Encourages development of healthy eating and exercise habits. Includes:
  - Increased reimbursement for school meals meeting USDA nutrition standards. Encourages sale of full meals, meeting USDA-approved meal pattern, rather than sales of competitive foods.
  - Restrictions on sales of snack items during meal times, except for fruit, nonfried vegetables, legumes, beverages, dairy or grain products that meet limitations on saturated fat and sugar content (except fruit).
  - All day at elementaries, only water, milk, 100% fruit juice, or fruit-based drinks of 50% fruit juice and no added sweeteners may be sold.
  - Encourages school districts to develop physical activity and nutrition policies.



# State Actions in 2003 - CO, HI, MI, NV, WA

## Michigan

- SB 902 - Mandated at least 30 minutes of physical activity per school day or 135 minutes of physical activity per week, which could include physical education class - did not pass.
- SR 27 - Joins in recognizing March 2003 as National Nutrition Month (with American Dietetic Association)- passed.
- Act 159 - Appropriations enacted under Chronic Disease and Injury Prevention and Health Promotion:
  - Dedicates \$250,000 to obesity program.
  - Provides for the Michigan model or another comprehensive school health education curriculum.

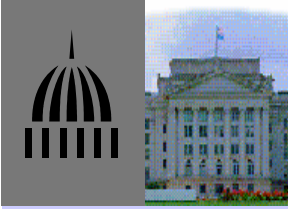


# State Actions in 2003 - CO, HI, MI, NV, WA

## Nevada - enacted

- SCR 12 - Encourages school administrators, teachers, and educational personnel to promote nutrition and physical fitness in K-12 schools by:
  - Implementing specific existing models such as CDC's VERB media campaign, Colorado's 10,000 steps, California's SHAPE program, and guidelines of the President's Council on Physical Fitness and Sports,
  - Developing positive policies for nutrition and physical activity at school
  - Increasing pupils' physical activity, expanding high quality physical education, promoting health education, and enhancing after-school sports and recreation,
  - Incorporating nutrition education into core curriculum, and involve families and communities in encouraging nutrition and fitness,
  - Developing high standards for food and drink competitive with school foods, evaluating when such foods are sold and the quality of foods in vending machines, and replacing foods of minimal nutritional value.





# State Actions in 2003 - CO, HI, MI, NV, WA

## Nevada - enacted

- SCR 13 - Directs the Legislative Committee on Health Care to conduct a bipartisan interim study on medical and societal costs and impacts of obesity in NV.
  - Recognizes the obesity epidemic and its national cost.
  - Mandates the study and a report to include:  
an analysis of fiscal impact of obesity on health care costs and productivity in NV, and possible savings from prevention and proper obesity treatment; identification of cost effective programs in NV and other states for statewide implementation; recommendations to increase public awareness; examination of effects of the 24-hour and transient lifestyle of some NV population on obesity; recommendations for programs and practices that encourage healthy fitness and nutritional choices; any other legislative proposals for health care for obesity.



# State Actions in 2003 - CO, HI, MI, NV, WA

## Washington - pending

HB 1866 - Nutrition in public schools - Schools to set example by promoting healthy eating at school meals, healthy options for competitive foods, and opportunities for physical activity.

- Statewide recommendations to be developed for: nutritional content of school meals, nutrition curriculum, policies on competitive foods, and on increasing student physical activity.
- School boards to develop nutritional integrity policy, provide standards for availability of healthy competitive foods for time, location, and pricing. Opportunity for parent comment.
- State to develop model policy for measurement of body mass index of students that school districts may elect to follow.

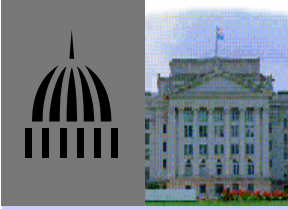


# State Actions in 2003 - CO, HI, MI, NV, WA

## Washington - pending

SB 5436 - Sales of competitive foods and beverages on public school campuses.

- Findings acknowledge childhood obesity epidemic, potential for long-term health problems for obese youth, and prevention efficacy by diet and physical activity, with schools as a logical place to address obesity issue.
- USDA regulates nutrition in school breakfast and lunch program, but only limited standards are in place to regulate competitive foods, often high in added sugars, sodium, and saturated fat content.
- Bill sets nutrition standards for foods sold on school grounds during school hours.
- Establishes a statewide task force to recommend ways to implement nutrition standards - details follow.



# Proposed State Actions in 2004 - IN, IL

## Indiana

HB 1014 - Initiates a childhood obesity response through nutrition policies, measurement of BMI, physical activity in schools. Recently reported as a comprehensive bill.

- Requires K-8 schools to provide physical activity for students 5 days a week (no fiscal impact noted, as recess could qualify as an activity).
- Requires development of model policies for measurement of students' body mass index.
- Addresses nutrition comprehensively by requiring school boards to adopt nutritional integrity policies.



# Proposed State Actions in 2004 - IN, IL

## Indiana

HB 1014 - School board nutritional integrity policies to include:

- A nutrition education curriculum.
- Ways to address different health needs and peer influences in elementary, middle, and high schools.
- Healthy dietary practices in the school's meal program and for other foods sold in schools:
  - at least 50% of non-meal foods available must qualify as healthy under USDA standards,
  - prices for healthy and non-healthy foods must be competitive, and
  - foods not qualifying as healthy may be sold only when it does not interfere with meal service.
- Policies to be reviewed and may be revised every other school year.



# Proposed State Actions in 2004 - IN, IL

## Illinois - Gubernatorial / Legislative Package

- HB 3974 - Would require school boards to prohibit soft drinks and candy being sold to students from school vending machines. Governor states that junk food ban won't burden schools with existing vending contracts since major soft drink companies also produce healthy beverages.
  - In pilot at CA high school, beverage sales increased \$1200 monthly after healthy beverages replaced soft drinks in vending machines.
- Other components of legislative package: modify PE curriculum to stress health and physical activity; create Juvenile Diabetes Research and Nutritional Health Fund; Designate January and February as Children's Nutritional Awareness Months to encourage healthy eating and physical activity; resolution urging Congress to strengthen Child Nutrition Program and National School Lunch Program.



# Child Obesity Task Forces

New York

Texas

Maine

Washington

Arkansas

Rhode Island

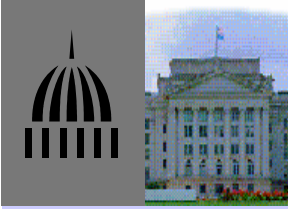


# Child Obesity Task Forces

Looking at:

- Nutrition standards
- Professional development of food service staff
- Food and beverage contracts
- Media campaigns
- Financial, psychological and physiological impact of obesity





# Child Obesity Task Forces

- Washington state proposes task force organized through office of superintendent of public instruction and charged with:
  - Finding alternate fund-raising means to offset revenue lost from sales of competitive foods not meeting nutritional standards.
  - Increasing availability of fresh fruit and vegetables.
  - Listing recommended foods and beverages that meet nutritional content standards.
  - Enhancing the student dining experience and allotted lunch time.
  - Suggesting how to stop commercial marketing in schools.
  - Providing incentives, financial and non-financial, for high school participation in the healthy foods program.
  - Exploring ways for schools to assess how well they promote nutrition and healthy living and how well nutrition and physical activity are integrated into the curriculum.



# Child Obesity Task Forces

- Washington task force membership would include:
    - School principals and teachers
    - School boards
    - Parent organizations
    - Advocacy groups concerned with children and health
    - Department of health
    - Students and the public (at least 3 HS students and 3 members of public)
    - Dieticians and nutritionists
    - School food service employees
    - School nurses, health care providers, health maintenance organizations
    - Representatives of the soft drink and vending industries
- (Task force to submit recommendations by December 1, 2004)



# American Academy of Pediatrics Policy Statement

AAP Policy Statement issued in January 2004 calls for schools to restrict the sale of soft drinks. Rationale:

- Between 56 and 85 percent of school-age children consume at least one soft drink daily.
- As soft drink consumption increases, milk consumption decreases, and milk is the principal source of calcium in the typical American diet.
- Soft drinks and fruit drinks are sold ubiquitously in vending machines, in school stores and at school sporting events.
- As a source of income for school districts, soft drink sales can be substantial but nutritious alternatives such as water, real fruit juices and low-fat milks are available for vending, and can help preserve school revenues.



# American Academy of Pediatrics Policy Statement

The AAP policy recommends that pediatricians work to eliminate sweetened soft drinks in schools by educating school authorities, patients and parents about the health ramifications of soft drink consumption. It also recommends:

- Pediatricians advocate for the creation of a school nutrition advisory council to ensure that the health and nutritional interests of students form the foundation of nutritional policies in schools.
- School districts should invite public discussion before making any decision to sign a vended food or drink contract.
- If a school district already has a soft drink contract in place, it should be adapted so that it does not promote overconsumption by students.
- Consumption or advertising of sweetened soft drinks within the classroom should be eliminated.



# American Academy of Pediatrics Policy Statement

To reduce consumption of soft drinks in schools, the policy also recommends that:

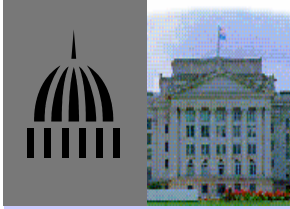
- Vending machines not be placed in cafeteria spaces where lunch is sold, and
- Soft drinks not be sold as part of, or in competition with, the school lunch program.



# National Soft Drink Association Response

The National Soft Drink Association, which represents most soft drink makers nationwide, said the new AAP policy is incomplete and goes too far.

- Daily physical activity is also critical to combat childhood obesity the NSDA said. 81% of adults support daily PE in schools.
- Federal regulations already prohibit the operation of soft drink machines in school cafeterias during breakfast and lunch.
- The soft drink industry supports these regulations and the prerogative of local educators, parents and students to determine vending machine hours, placement, beverages sold.
- Industry recognizes the need for variety of beverages and offers sugar-free, caffeine-free, bottled water, juices, sport drinks, teas.



# Active Living Environments

“Promoting Biking and Walking:  
The Legislative Role”

<http://www.ncsl.org/programs/health/rwj.htm>

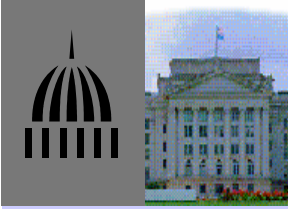


# Active Living Environments

## ***Safe Routes to School***

- CA, DE, FL, OR, TX - State law as of 2003;  
Other local communities and developments  
include safe routes that:
  - Decrease traffic and pollution
  - Increase health of children
  - Promote walking and biking to school
  - Address safety concerns





# Physical Education

- 48 states mandate P.E.
- 60% of states require schools to follow national or state P.E. guidelines. 80% require adapted or mainstream P.E. for students with IEPs.
- 11 states require P.E. for graduation.
- IL requires daily P.E. for K-12.
- AL requires daily P.E. for K-8.
- AR requires one hour of P.E. per week for K-9.
- MI bill to require daily P.A. for elementary.
- ROTC, marching band, organized sports, work experience exemptions allowed.



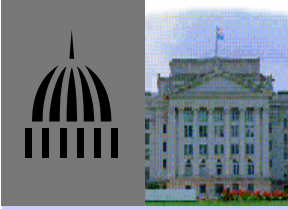
# Physical Education

- NV Senate Concurrent Resolution No. 12 - Encourages school personnel to promote nutrition and physical fitness in schools by increasing all pupils' physical activity, expanding quality P.E. programs, and building on existing physical fitness and nutrition models such as:
  - Colorado's "10,000 Steps to Better Health" program
  - California's "Shaping Health as Partners in Education" SHAPE program
  - Guidelines of the President's Council on Physical Fitness and Sports
  - CDC's VERB media education campaign



# Physical Education

- CT law - P.E. teacher supervision
- HI bill - P.E. teacher in every public school
- MS law - K-12 physical activity coordinator
- OH bill - P.E. curriculum director



# Nutrition Education

- 68.6% of states require nutrition to be taught at elementary, middle & high school.
- CA - incorporated nutrition into health curriculum and the after school program.
- Bills - curriculum standards, obesity, type II diabetes and CVD prevention in nutrition education and development of statewide nutrition curricula recommendations.



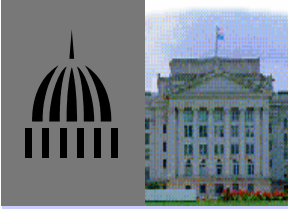
# Nutrition Standards

- Public health advocates & industry views
- Industry favors nutrition education, p.e.
- State agencies and local school food authorities required to establish rules to control the sale of competitive foods.
- CA nutrition standards passed in 2001.



# Nutrition Standards

- Texas Education Agency policy
  - Food restrictions
  - Penalty: loss of school lunch subsidies
- 2003 bill to develop nutritional standards due by October 2004.



# Vending Machines

- Ban vending machines in elementary schools completely - Arkansas bill (passed)
- Ban all foods and drinks that are high in fat and sugar - Maine bill (did not pass)
- Ensure equal number of healthy foods in vending machines - Michigan bill (did not pass)
- Restrict food and beverage contracts - Oregon bill (did not pass)



# Local Policies

- Oakland School District ban on soda and candy
- LA Unified School District
  - Healthy options only offered in vending machines
- NYC Junk Food and Soda Free Act
  - Snapple contract reported to provide \$166 million profit for NY schools vending only water and fruit juices





**Thank You!**



# Additional NCSL Resources

- Health Promotion Program State Legislation and Statute Database
  - [www.ncsl.org/programs/health/pp/healthpromo.cfm](http://www.ncsl.org/programs/health/pp/healthpromo.cfm)
- Physical Activity and Nutrition
  - [www.ncsl.org/programs/health/phyact.htm](http://www.ncsl.org/programs/health/phyact.htm)
- 50 State Summary of Breastfeeding Laws
  - [www.ncsl.org/programs/health/breast50.htm](http://www.ncsl.org/programs/health/breast50.htm)