

CHILDHOOD OBESITY IS A GROWING THREAT TO AMERICA'S CHILDREN

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ATLANTA—Researchers, physicians and policymakers are increasingly recognizing the physical and mental health threats stemming from the wave of childhood obesity sweeping across the country. It is equally important that the search for solutions focuses on the root causes—the school, economic and community conditions that are incubators for this epidemic.

Clearly, the latest data indicate that the United States faces an obesity crisis, particularly among children. According to a report by the Trust for America's Health (TAH) and the Robert Wood Johnson Foundation, obesity rates increased in 28 states over the past year, with 38—more than two-thirds of the states—having adult rates above 25 percent.

Further, the increases among children have raised considerable concern, since researchers now believe that obesity impacts learning, mental health and social behavior. In 2003, the National Survey of Children's Health (NSCH) found that only three states and the District of Columbia had childhood obesity rates higher than 20 percent—Kentucky, Tennessee and West Virginia. Yet, four years later the NSCH's survey found that obesity had reached that level in eight jurisdictions—the District of Columbia and the states of Arkansas, Georgia, Illinois, Kentucky, Louisiana, Mississippi and Texas.

At a congressional hearing earlier this year, Rep. Frank Pallone Jr. (D-NJ) put the problem in perspective: "In my state, New Jersey, 31 percent of our children are clinically overweight. That's nearly 7 percent higher than the rate of adult obesity. And I'm worried that, at a time of economic recession and high unemployment rates, many of these children will be less likely to have access to healthier, more expensive foods. Meanwhile, safety-net health programs are continuously overextended as the numbers of uninsured and underinsured continue to grow, posing further risk to children who may not be receiving the medical care that they need."

Moreover, the obesity rates are highest among minority populations. According to the Centers for Disease Control and Prevention, Hispanic boys and African American girls have the highest rates of obesity, with 22.1 percent of Hispanic boys and 27.7 percent of African American girls classified as obese. In fact, data show that obesity rates for African Americans and Latinos are higher than for Whites in at least 40 states and the District of Columbia.

There is also a clear link between obesity and income levels—35 percent of adults earning less than \$15,000 per year are obese, compared to 24 percent of adults earning \$50,000 or more per year. It's no coincidence that the South, which is the poorest region of the country, is home to 10 of the 11 states with the highest rates of obesity. For the sixth straight year, Mississippi has the highest rate for adults, 33.8 percent.

The data are startling because researchers have found links between obesity and higher rates of serious diseases, such as diabetes, heart disease and high blood pressure—even among children.

So what are the factors contributing to the high levels of obesity?

Researchers have determined that residents of minority communities have fewer opportunities to purchase healthy foods, such as fresh vegetables, because there are far fewer supermarkets in their neighborhoods. By contrast, there is a higher concentration of fast-food outlets, which serve less healthy food. Other factors include a propensity to eat foods cooked with more grease and containing more fat.

Of particular concern for children is that sugar-sweetened beverages account for 10 percent to 15 percent of the daily calorie intake for children and adolescents, a percentage that has been steadily increasing over the past few decades, according to *The New England Journal of Medicine*.

The most effective way to combat childhood obesity may be through education programs in the schools, where children and adolescents spend the majority of their day, as well as by changing the foods and beverages available to children while they are in school. Congress can take a stand in legislation reauthorizing the child nutrition programs that expire this fall. Supporters are calling for the establishment of nutrition standards for all food sold at schools, meals served in cafeterias and snacks offered in vending machines.

There has also been tremendous growth in farm-to-school programs that bring fresh fruits and vegetables into the schools. "Studies show that farm-to-school programs increase fruit and vegetable consumption among students at participating schools," the TAH report said, adding that a study conducted by the University of California at Davis found that farm-to-school programs not only increase the consumption of fruits and vegetables among participating students, but also change eating habits, causing students to choose more healthy options when fresh produce is available at lunch.

Moreover, communities are also engaged. One organization, the Southern Area of the Links has created a Commission on Childhood Obesity Prevention, which is addressing the underlying causes of childhood obesity among African American children through education, research and advocacy. Their objectives include raising awareness and expanding the knowledgebase of obesity and diabetes-related research, programs, and community based prevention strategies that can positively impact the lives of African American children; identifying and prioritizing health policies that encourage healthier children and families; and informing, supporting and enhancing collaboration, partnership development, and capacity building among stakeholders, organizations, and agencies that promote childhood obesity prevention.

To be sure, there are a number of community, state and federal initiatives underway to reduce obesity in children. But these efforts have to include changing the environment in the communities where they live. While there need to be more opportunities for parents to purchase healthy food, parents and guardians also need to educate their children about why eating healthy is important.

This childhood obesity problem will only be resolved when there is a melding of changing public policies and at-home practices. Everyone needs to get involved.

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