



NEW REPORT FINDS 41 STATES HAVE OBESITY LEVELS OVER 20 PERCENT; STATE AND FEDERAL OBESITY POLICIES ARE FAILING

Alabama is worst, Colorado is best, but no state is making the grade

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Washington, D.C., October 20, 2004 – Trust for America’s Health (TFAH) today released a new report “F As in Fat: How Obesity Policies are Failing in America,” which found that national and state policies are falling far short of obesity control and reduction goals.

Since states and the federal government have a crucial role to play in fighting the obesity epidemic, TFAH conducted a study of government action. TFAH concluded that America does not have the aggressive, coordinated national and state strategies needed to address the crisis, and that threatens to make the epidemic worse. Nearly 119 million American adults, 65 percent of the population, are currently overweight or obese. The direct and indirect costs of obesity in America are more than \$117 billion per year.

“The added weight of the obesity epidemic to our already ailing health system is causing it to burst at the seams. Americans’ growing waistlines are leading to escalating disease rates and costs,” said Shelley A. Hearne, DrPH, Executive Director of TFAH. “While personal behavior is at the center of maintaining healthy levels of diet and exercise, there is so much more the government can and should be doing to address the obesity crisis.”

Some **key findings** from the study include:

1. **The federal government faces organizational issues**, including a lack of designated leadership, a bureaucratic tangle of involved agencies, and a need to learn to balance the often competing interests of industry and public health.
2. **Obesity and obesity-related disease rates are escalating throughout the nation.**
 - Adult obesity exceeds 20 percent in 41 states and D.C. Alabama ranked as the heaviest state with 28.4 percent obesity and Colorado ranked as the least heavy at 16 percent. All states are on track to fail the national goal of reducing the proportion of adults who are obese to 15 percent or lower by the year 2010.

- In 40 states and D.C., six percent or more of adults have diabetes, far exceeding the national goal of 2.5 percent by the year 2010, with Mississippi having the highest rate at 11 percent and Colorado the lowest at 4.7 percent.
- The median overweight and obesity levels for high schools students is 11.1 percent, the national goal is five percent or lower.
- One in every seven children is either overweight or obese. The median overweight and obesity levels for low-income children aged two to five is 14.3 percent.
- Sixteen percent of active duty adults in the U.S. armed forces are obese, and the military health system spent \$15 million for bariatric surgeries in FY 2002.

3. Most school food and physical activity programs and policies need more aggressive support and attention.

- Only four states -- California, Hawaii, Texas, and West Virginia -- have set nutritional standards for foods in sold in schools that are not part of the federally sponsored school lunch program, called “competitive foods,” which include items sold in vending machines, ala carte in cafeterias, snack shops, and bake sales.
- Thirty-three states and D.C. **do not** limit the availability of competitive foods beyond federal requirements.
- While only two states -- Oklahoma and South Dakota -- do not require some form of physical education in elementary and secondary schools, the requirements in all states are often not enforced and many of the programs are inadequate.

4. State policies and actions aimed at obesity are fragmented and inadequate.

- Although the effectiveness of “snack” and soda taxes is unknown and may even result in negative consequences, 17 states and D.C. have enacted forms of these taxes to try discouraging consumption of food low in nutrients.
- Eleven states have passed legislation to limit obesity-related lawsuits.
- Only a few states and communities have tried to improve access to low-cost, nutritious food in low-income areas, even though low-income groups have the highest levels of overweight and obesity.

- Only a few states have initiatives to help foster increased physical activity, such as increasing sidewalks and park development.

To help combat the obesity crisis, TFAH recommends some crucial government actions in the report, including:

1. **The CDC should be designated as the “command and control center” to manage the obesity epidemic.** The CDC should:
 - Form and chair an interagency Task Force, including external experts.
 - Centralize obesity-related public education campaigns.
 - Establish the nutritional guidelines.
2. **Research and implementation for cures, community programs, and treatment must be “fast-tracked.”** All research must be expedited to fill the large gaps in the available scientific information on obesity so that health officials are better able to understand and contain the epidemic. For instance, the CDC should:
 - Form a “Rapid Response” Obesity Investigative Service (OIS) similar to the current Epidemiological Investigative Service (EIS) for infectious disease. The OIS would be deployed quickly into communities to help design and construct studies to gain information about how to create the most effective control and prevention programs possible.
 - Conduct a Youth Fitness Study, including evaluating school physical education programs and the impact of fitness on classroom performance and performing a new National Youth and Fitness Survey (the last one was done 20 years ago).
 - Investigate root causes and origins for unhealthy eating, physical activity, and obesity.
 - Study the impact of marketing and advertising on children’s diet and health.
3. **“Checks and balances” must be instituted for state and federal programs.**
 - The effectiveness of obesity research and programs must be regularly evaluated.
 - The CDC and other federal agencies must have the authority to without funds from states that do not comply with information reporting requirements.

4. Upfront funds to combat obesity must be increased to save lives and taxpayer dollars.

- Funding should be increased for CDC Division of Nutrition and Physical Activity (DNPA) grants from \$44.7 million to a minimum of \$70 million. In FY 2004, there were only funds for 28 states to participate in the program.
- Funding for CDC's Division of Adolescent and School Health (DASH), Coordinated School Health Program should also be increased from the \$15.7 million received in FY 2004 to a minimum of \$36 million.
- New tax policies should also be explored that create incentives, such as for employer-provided wellness programs and for real estate developers to convert brownfields into activity-oriented facilities, or include green space and accessible sidewalks in their plans for residential development.

The report was supported by grants from the Dr. Robert C. Atkins Foundation, the Bauman Foundation, and the Benjamin Spencer Fund. The report and state-specific information is available on TFAH's Web site at www.healthyamericans.org

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