



Ounces of Prevention, Pounds of Cure

In the face of a growing child obesity epidemic, can Texas shift the scales?



TEXANS CARE
for CHILDREN

Weighing the Case for Action:

Let's Make Our Children Healthy Again

Growing up healthy profoundly affects lifelong health. Unfortunately, children in Texas face serious barriers to a healthy start: their state has the seventh-highest rate of child obesity. Obesity's link to type II diabetes, heart disease,

"Obesity already costs Texas businesses 9.5 billion dollars per year, and that cost is expected to rise to over 30 billion dollars by 2030."

stroke, cancer, and other health complications means this is an epidemic with unsustainable costs—financial, social, and medical—for Texas.

Fortunately, child obesity is entirely preventable.

Addressing it requires

that we reshape the environment making our children sick—something that takes leadership, collaboration, and persistence. Texas has not always had an obesity epidemic; we can reclaim the days when children, by and large, would grow up healthy, nourished, fit, and free from a future of preventable, chronic disease.

What's more, as evidence from the state comptroller suggests, the future financial and economic security of our state depends on it.

- ✓ Effective obesity prevention measures curb health care costs.
- ✓ They represent a strategic use of public will and dollars now for the future of Texas.
- ✓ They ward off, instead of delay, spiraling costs to us all.
- ✓ Prevention represents an incredible bargain. In fact, a number of innovative approaches require no public funds at all.

**But in 2011,
did State Leaders
Opt for Prevention
or Cure?**



Open this report to find out.



Costly decisions

Commitments to a Healthier Future

State leadership made clear early on that no new investment proposals would receive consideration, and some members of the Texas Legislature used a significant revenue shortfall as an excuse to scrutinize even cost-neutral school-based obesity prevention proposals. The Legislature cut \$4 billion from school district budgets, and some lawmakers sought to appease local districts by removing requirements, such as requiring assessments of student health, as though this were a suitable alternative to funding key school programs.

Investments in Prevention

In tight budget times, preventive health services that produce savings by creating healthier students, more productive workers, and a more prosperous Texas too often fall victim to shortsighted cuts—and the 82nd legislative session was no exception. Texas reduced community-based obesity prevention/chronic disease prevention programs by 43%, despite these programs' track record of success, because the legislature proved unwilling to match revenue levels to actual state needs.

The Health and Safety division of the Texas Education Agency (TEA), whose responsibility it was to assist schools with the implementation of coordinated school health, health education, health services, and FitnessGram, was dissolved due to budget cuts and the elimination of TEA jobs. Although the Texas Legislature requires school districts to use coordinated school health in grades K-8, it has not funded implementation and has now removed resources to help schools that need support. Failing to fund or provide continued support for our only statewide obesity prevention measure in schools—coordinated school health—represents a serious missed opportunity for Texas and high “pounds of cure” costs to taxpayers.



Just holding the line

Charting Obesity Trends

In 2011, the state comptroller received authority and funding to map obesity data to identify areas of the state where children are at high risk for obesity, award school-based grants to fight obesity, and create an obesity information web portal to communicate with schools, businesses and the public about the economic impact of obesity in Texas. The \$2 million allocation to the comptroller to support anti-obesity measures passed as a part of the budget and represented a significant reduction from what the Comptroller was provided in previous sessions. Still, the measure will help high-risk schools fight the obesity epidemic and raise awareness about the serious impact of obesity in Texas.

School Fitness Reports

Senator Jane Nelson sponsored legislation (SB 226) to increase the usefulness of FitnessGram, the state-adopted annual physical fitness assessment. FitnessGram provides a fitness report card for students and their families, so it is largely a tool to gauge fitness levels and an opportunity to provide parents with an evaluation of their child's health. The bill passed successfully, and the new law now requires reporting of de-identified, individual fitness data, so parents can see correlations between fitness and academic data for their children's school.

While this represented progress, Texas also took a step back in this very same area. While elementary students and most middle school students will still receive FitnessGram assessments, a law originally by Representative Rob Eissler, but finally passed by Senator Florence Shapiro in the special session, limits the assessment to students in P.E. As law, SB 8 has all but eliminated the FitnessGram for high schoolers, the majority of whom are not enrolled in P.E., and taken away a key tool that parents have to make important health decisions and measure their children's physical health.

Coordinated School Health

Coordinated school health is the evidence-based program recommended by the Centers for Disease Control to fight the obesity epidemic. It provides nutrition education standards, health and fitness standards, health assessments and school wellness programs. It has been integrated into Texas schools since 2001 and is the only comprehensive initiative in Texas designed to prevent obesity in school-age children. Other statewide policy efforts directed through schools have largely

focused on physical education, fitness measurement, and nutrition, which are central pillars of obesity prevention, but coordinated school health is the only program focused on the integration of the many contributing factors to child obesity, from school to family to community. Representative Dennis Bonnen sought to eliminate coordinated school health in Texas schools through HB 2796, a proposal, that fortunately was prevented from becoming law. Senator Nelson sought to recognize schools for meeting and exceeding minimum standards for implementing coordinated school health (SB 224), but her bill was never scheduled for a House floor vote.

Exercise and Nutrition in Schools

Several bills seeking to combat obesity failed. Senator Nelson proposed legislation (SB 185, SB 186) that would have required 30 minutes of physical activity for all middle school students and would have restored the P.E. and Health requirements for high schoolers to what they were in 2009 (three semesters, instead of one, for P.E., plus a semester of health). Representative Cindy Burkett sought to require that elementary schools offer recess (HB 3770) in order to improve both health and classroom behavior. Representative Diane Patrick proposed legislation (HB 3467) that would have restricted school districts from offering food containing industrially produced trans fats, and Representative Carol Alvarado proposed legislation (HB 127) that would have prohibited public schools from selling unhealthy beverages like sugary soda during school hours. While several of these bills received bipartisan support, none became law.

Sugary Drinks

Eating right and exercising are vital for children's health, but reducing childhood obesity also requires more attention to a major contributor to weight: sugary drinks. Children are the age group most likely to drink these beverages regularly and, because they are also cost sensitive, increasing these drinks' cost would curb children's consumption. Public health experts recommend a penny-per-ounce tax on sugary drinks—something that would generate an estimated \$1.3 billion dollars per year for Texas. Senator Eddie Lucio, Jr. and Representative Joe Farias both proposed a targeted tax on unhealthy, sugar-sweetened beverages. Although the proposals differed (SB 1004 applied to both sweetened and

unsweetened sodas, while HB 2214 targeted only sugary drinks and allocated a portion of revenue from the tax to obesity prevention programs), they both had the goal of reducing obesity and overweight prevalence, while generating needed revenue for the state. Although the proposals generated wide-ranging support and brought media attention to the link between sugary drinks and obesity, they were not successful. In the face of heavy industry opposition, Texas missed a chance to reverse childhood obesity.

Americans' consumption of sugary drinks, like soda, has roughly doubled in the past 30 years in direct relationship to the dramatic rise in obesity rates. Public health experts attribute 43% of the rise in caloric intake in that time to increased consumption of sweetened beverages alone. "

Active Transportation

The National Institutes of Medicine recommends legislation that promotes "complete streets"—those designed for the safety of all users with features such as sidewalks and bikeways— as a strategy to fight child obesity. Representative Linda Harper-Brown and Senator Rodney Ellis both sponsored proposals that would have ensured that, when new roads are built or repairs are made to existing roads, accommodations like sidewalks, crosswalks, and bike lanes are part of the plan (HB 1105, SB 513). Both bills failed to receive a floor vote.





Positive steps

Fresh Food Access

Many Texas children lack sufficient access to healthy, nutritious foods essential to maintaining a healthy weight. Three positive bills by Representative Borris Miles passed the legislature to

Families in Texas struggle to pay for healthy foods and to find places to purchase them: Texas has the nation's second-highest rate of childhood food insecurity and the lowest number of supermarkets per capita.

address this problem by supporting urban agriculture and increasing access to healthy food. Although HB 2994, which supports innovative urban farming

technologies and research advancements, was signed into law by Governor Rick Perry, Governor Perry vetoed the other two, which would have incentivized urban agriculture business development (HB 2996) and created an urban farming pilot program (HB 2997). Another bill by Senator Nelson that unfortunately never received a hearing would have directed the General Land Office to develop a plan for the establishment of community food gardens on unused or underused state properties (SB 184).

Many low-income school-aged children have access to healthy breakfasts and lunches during the school year, but when school breaks for summer, these children can lose access to healthy meals. Senator Lucio passed a bill that expands summer food programs and supports local economies using federal funds to allow more children to participate



in the program (SB 89). Food advocates, churches, supportive legislators, and program providers also succeeded in defeating a proposal that would have undermined children's access to meals, by having schools opt in (instead of out) of providing summer meals to students.

Restricting access to certain food purchases, without simultaneously increasing access to healthy foods, could lead to unintended consequences, including higher levels of food insecurity among poor children. Fortunately, the two bills filed to limit purchasing options under the Supplemental Nutrition Assistance Program (formerly known as food stamps) failed (HB 1151 by Representative Richard Raymond nor HB 3451 by Representative Susan King). Two better bills—to target the root causes of obesity and empower individuals to determine and purchase healthy options, without risking higher food insecurity—also failed to pass: one by Senator Lucio (SCR 26), which would have urged Congress to ensure that SNAP benefits are adequate for the purchase of a healthy diet, and a bill by Representative Marc Veasey (HCR 87), which would have urged Congress to expand the Healthy Incentives Pilot for SNAP recipients.

Places where kids feel safe walking, biking, or getting outside experience significantly lower rates of youth obesity, even when other factors, like income, are taken into account.



Measures of Success: How to Tip the Scales toward Prevention



This session our state saw improvements in the fight against obesity, matched with a significant undermining of efforts. In the face of an epidemic, we must address the barriers that prevent Texans from maintaining a healthy weight. Having a statewide impact on obesity requires policies that make our daily environment healthier and more suitable for children.

Policies that address and reshape our everyday environment, support local community efforts, and educate families about healthy options can produce lasting change. Policies that target root causes—like sugary drink consumption, lack of access to affordable fresh fruits and vegetables, and lack of sidewalks and trails that support an active lifestyle—will put us on the path to success. Effective statewide policies to curb obesity in Texas are critical to containing healthcare costs and ensuring that our forthcoming workforce is able to tackle the challenges of the future.

Key Things Our State Must Still Do:

- ① Monitor student fitness through in school assessments so our state can make targeted interventions that address the growing obesity epidemic.
- ② Curb children's drinking of sugary beverages through a consumption tax that will put soda in its place as an occasional treat, while also increasing revenue available for public health spending.
- ③ Promote healthy schools by supporting coordinated school health and school nutrition standards in order to increase student success.
- ④ Make communities safe for active living by making new roads accessible to pedestrians and cyclists.
- ⑤ Address barriers to affordable, nutritious foods by empowering local communities to provide fresh produce and wholesome foods through school nutrition programs and community gardens.



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Texans Care for Children is a 501(c)(3) nonprofit organization and the leader in policy advances for children. Its areas of focus include child and maternal health, child protection, juvenile justice, mental health, and family financial security. With members statewide, Texans Care is a nonpartisan voice for children, a source on children, and a network for people who put kids first.

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