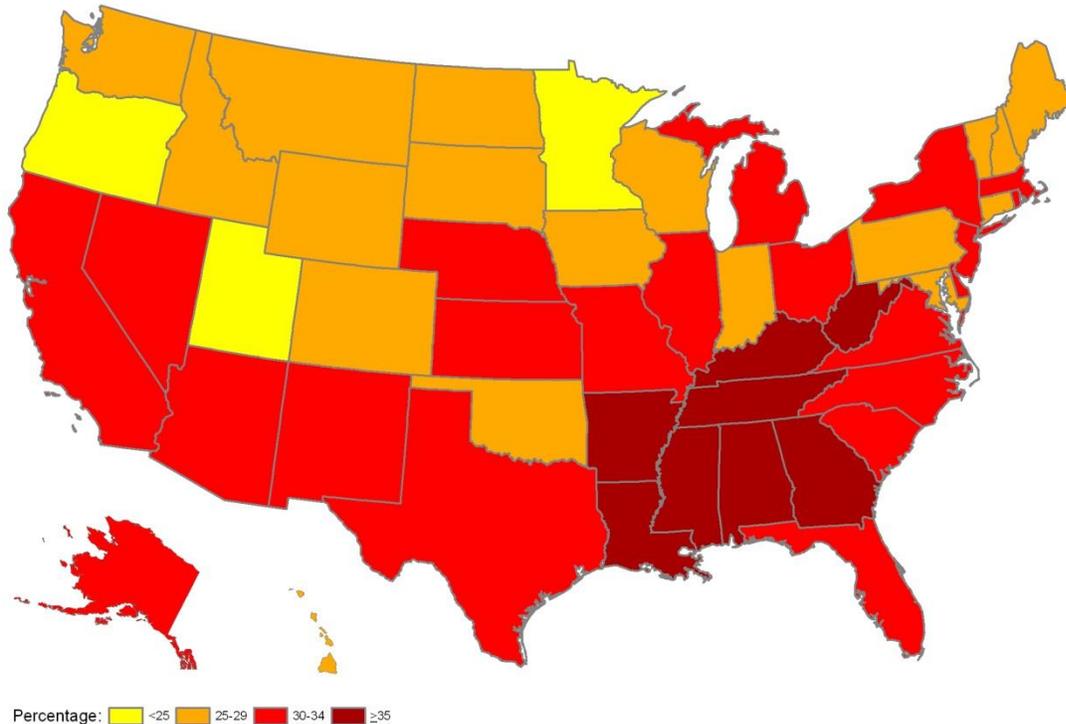


Robert Wood Johnson Foundation Center to Prevent Childhood Obesity Fact Sheet on Southern Childhood Obesity



Percentages of Overweight or Obese Youth Aged 10–17 Years in 2007ⁱ

Rates of obesity and overweight in children are at epidemic levels in the United States, and rising.

Consideration of overweight status is important because **many overweight children are progressing rapidly toward obesity.**

Childhood obesity sharply raises the risk for a number of serious health problems, including **Type 2 Diabetes, Asthma, Coronary Heart Disease, High Blood Pressure, and Stroke.** A study by the American Institute for Cancer Research released in November 2009 confirmed that **more than 100,000 cases of cancer each year are linked to obesity.**

Addressing the problem is increasingly urgent:

- The obesity rate for children ages 2 to 5 has more than doubled (from 5 to 12.4 percent) since 1980.
- The obesity rate for children ages 6 to 11 has more than quadrupled (from 4.2 to 17 percent) since 1970.

- The obesity rate for adolescents ages 12 to 19 has more than tripled (from 4.6 to 17.6 percent) since 1970.ⁱⁱ

What causes obesity?

Health advocates and policymakers are increasingly recognizing the role of **social factors** such as **income, race and ethnicity**, and **education** in causing overweight and obesity. These social factors influence the quality of children's environments at school and at home, which has a significant impact on their health:

- Children in environments with good access to **grocery stores** selling nutritious food, **parks and playgrounds**, good **schools**, safe and affordable **housing, transportation**, good **jobs**, and **healthcare** services are far less likely to be overweight or obese.
- Low-income people and people of color have a higher risk of obesity, overweight, and poor health in general because they are more heavily concentrated in environments that do not support healthy eating and physical activity.ⁱⁱⁱ

Income, race and ethnicity, and education together influence overall health, which in turn affects a child's risk of becoming overweight and obese.

In the United States:

Low-income generally means worse health, regardless of race or ethnicity.

- Among white children, for instance, for every child in poor health from a high-income family, at least **three children** from low-income families suffered from poor health.^{iv}
- Children in low-income families are about **seven times as likely** to be in poor or fair health as children in the highest-income families.^v

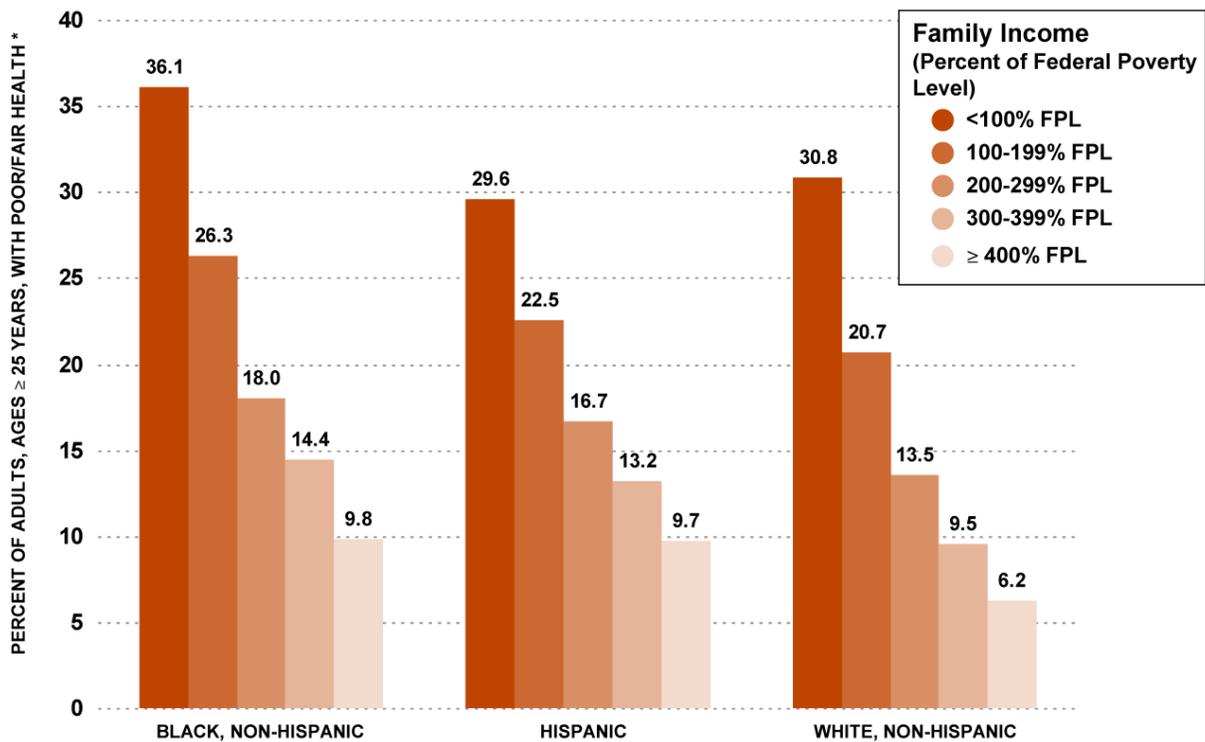
Race and ethnicity produce a different set of social experiences, which also affects health disparities. At each level of income, African-American and Latino children were in worse health than whites.

- White boys born in 2000 have a **27 percent risk** of being diagnosed with diabetes during their lifetimes, while African-American and Hispanic boys have a **40 and 45 percent lifetime risk**, respectively.
- White girls born in 2000 have a **31 percent risk** of being diagnosed with diabetes during their lifetimes, while African-American and Hispanic females have a **49 and 53 percent lifetime risk**, respectively.^{vi}

Education is linked with health, regardless of racial or ethnic group.

- Parents' education influences children's prospects for health during childhood and beyond.^{vii}
- Compared to children living with someone who has completed some college, children in households without a high-school graduate were more than **four times as likely** to be in less than optimal health.

In every racial or ethnic group, health status improves as income increases. Socioeconomic differences in health are related to differences in resources and opportunities that affect all racial or ethnic groups.



*Age-adjusted
Source: National Health Interview Survey, 2001-2005.

Compared with the rest of the United States, the South has a disproportionately high percentage of children who are overweight or obese.

- The eight states with the highest percentages of overweight or obese children **are all in the South.**
- In every Southern state except Oklahoma, at least **30 percent** of children are overweight or obese.

Childhood obesity is a severe public health problem in Georgia.

A recent report by Trust for America's Health and the Robert Wood Johnson Foundation listed Georgia as the **third-highest population of overweight and obese children** in the U.S.

37 percent of children in Georgia ages 10—17 are overweight or obese.^{viii}

- 28,000 or 24 percent of third grade children are obese.
- 43,000 or 15 percent of middle school students are obese.

- 62,000 or 14 percent of high school students are obese.
- Children from rural areas were more likely to be obese (26 percent) than children from Metropolitan Atlanta (21 percent).
- Black children were most likely to be obese regardless of socio-economic status (26 percent).

A report on equity, public policy and community engagement in **Fulton County, Georgia** identified key social determinants of health—such as education and income levels, access to essential services, and the physical conditions of the built environment—and concluded that policy measures addressing the obesity epidemic should focus on achieving **equitable distribution** of these resources.^{ix}

To that end, several **promising initiatives** are currently underway in Georgia that could serve as models for other communities:

Browns Mill Elementary and Magnet School has been sugar-free since 1999, and has also banned high fat and processed foods. The school’s visionary principal, Yvonne Sanders-Butler, implemented the bold policy after recognizing that children’s’ behavior and academic performance was connected to the unhealthy foods they were consuming. Teachers also integrate discussion about healthy eating into their class sessions. Now the students, most of whom are African-American, and about half of which are on a free or reduced lunch program, regularly post scores above the state average on Georgia’s state assessment test, with sixth graders scoring in the top percentile in reading, science, math and English.

Burgess-Peterson Academy in metro Atlanta has developed an outdoor garden and classroom from which students make their own food, and has also implemented a program that appoints students as “Wellness Ambassadors” for other students. The school successfully demonstrated that these programs meet the Georgia Department of Education’s Performance Standards, proving that existing policy regulations need not hinder creative local efforts to address childhood obesity. Such community-based initiatives can in turn help build broad support for other policy measures aimed at improving children’s’ health, such as Georgia’s new state requirements for physical activity in schools.

Parents, volunteers, city staff, city commissioners, school administration, and the school board all came together to design **Decatur’s Safe Routes to School (SRTS) Program**. The transportation goals they identified were incorporated into the Community Transportation Plan. The city’s new Active Living Division is taking on much of the program’s managing functions, and plans are also underway for a partnership with the School Wellness Council to incorporate SRTS into the district’s Wellness Plan.

Notes

ⁱ Child and Adolescent Health Measurement Initiative: 2007 National Survey of Children's Health

ⁱⁱ Robert Wood Johnson Foundation Center to Prevent Childhood Obesity: National Health and Nutrition Examination Survey (NHANES)

ⁱⁱⁱ Robert Wood Johnson Foundation Commission to Build a Healthier America

^{iv} 2003 National Survey of Children’s Health

^v RWJF Commission to Build a Healthier America

^{vi} RWJF Center to Prevent Childhood Obesity

^{vii} RWJF Commission to Build a Healthier America

^{viii} According to Seema Csukas, MD, Ph.D.; Medical Director, Children’s Healthcare of Atlanta; and the Child Wellness and Medical Director, Georgia Children’s Health Alliance. Csukas’ quote referenced from a July, 2009 piece in the *Atlanta Journal-Constitution*

^{ix} *Common Ground: Creating Equity Through Public Policy and Community Engagement*, A report by Fulton County, Georgia, December 2008