

# Family Impact Seminar

## *Childhood and Adolescent Obesity: Community and School Policy Options*

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# Childhood Obesity Prevention

- Success stories
  - Waycross (SE Public Health District)
  - Troup and Bulloch Counties
  - NW Georgia
  - Washington, GA
  - Healthcare Georgia, Philanthropic Collaborative
  - Kaiser Permanente, Wellstar, Children's Healthcare of Atlanta

# Georgia's Context

- Efforts are fragmented, small-scale and difficult to evaluate
- Roles for families, communities, schools
- We must do more to support and empower families, communities, schools
- Role for the state

# State Level Policies

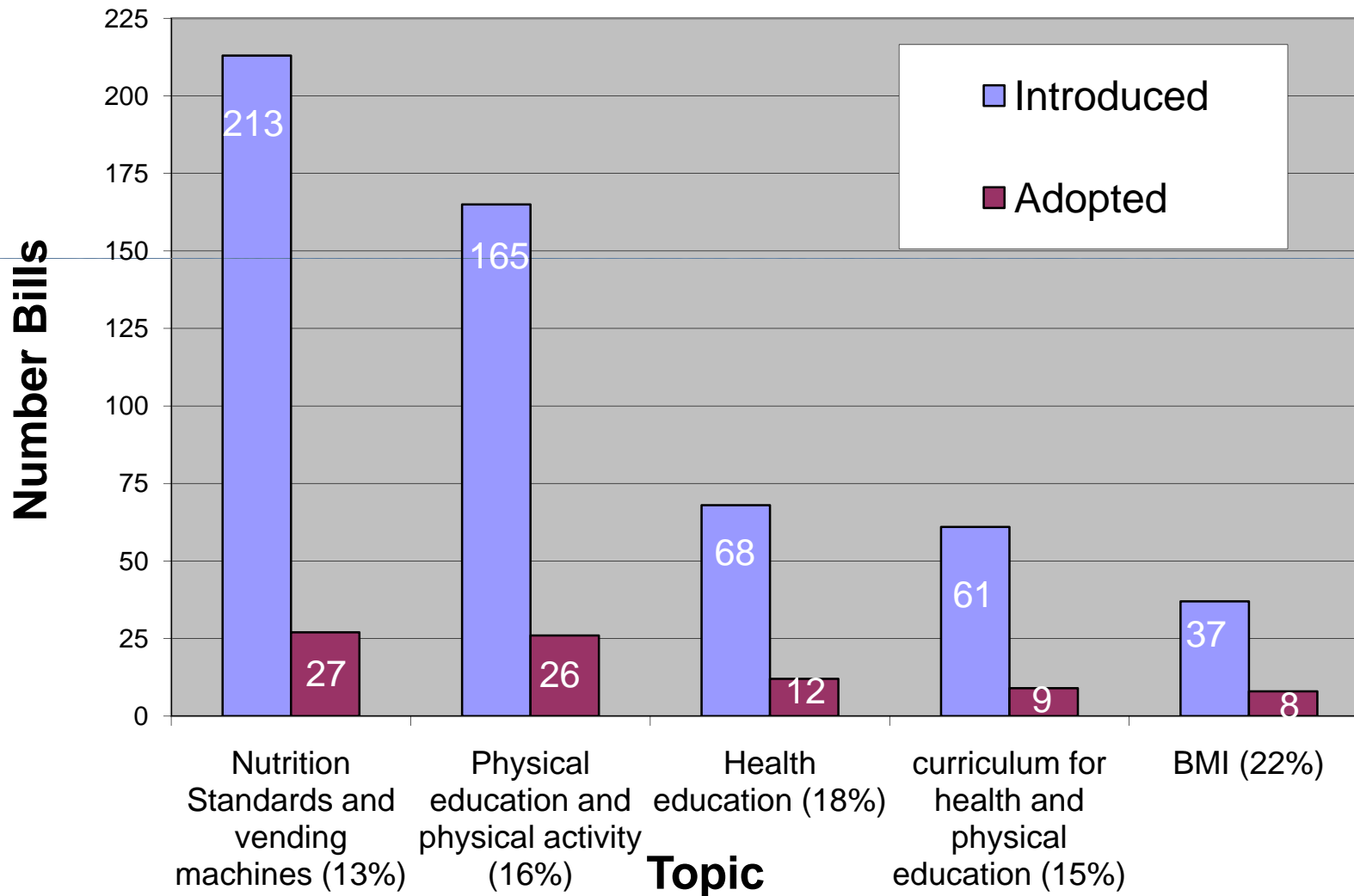
- States across the nation have recognized the health and economic threats that obesity poses.
- State action around the nation provide examples of policy opportunities for Georgia

# Patterns of Childhood Obesity Legislation (US), 2003-2005

- 717 bills and 134 resolutions
- 17% of bills were adopted, 53% of resolutions
- Bills introduced between 2003 (199) and 2005 (339) increased (annual figure)
- Bills adopted increased from 40 (2003) to 55 (2005)

(Boehmer, TK, Brownson, RC, et al., 2007)

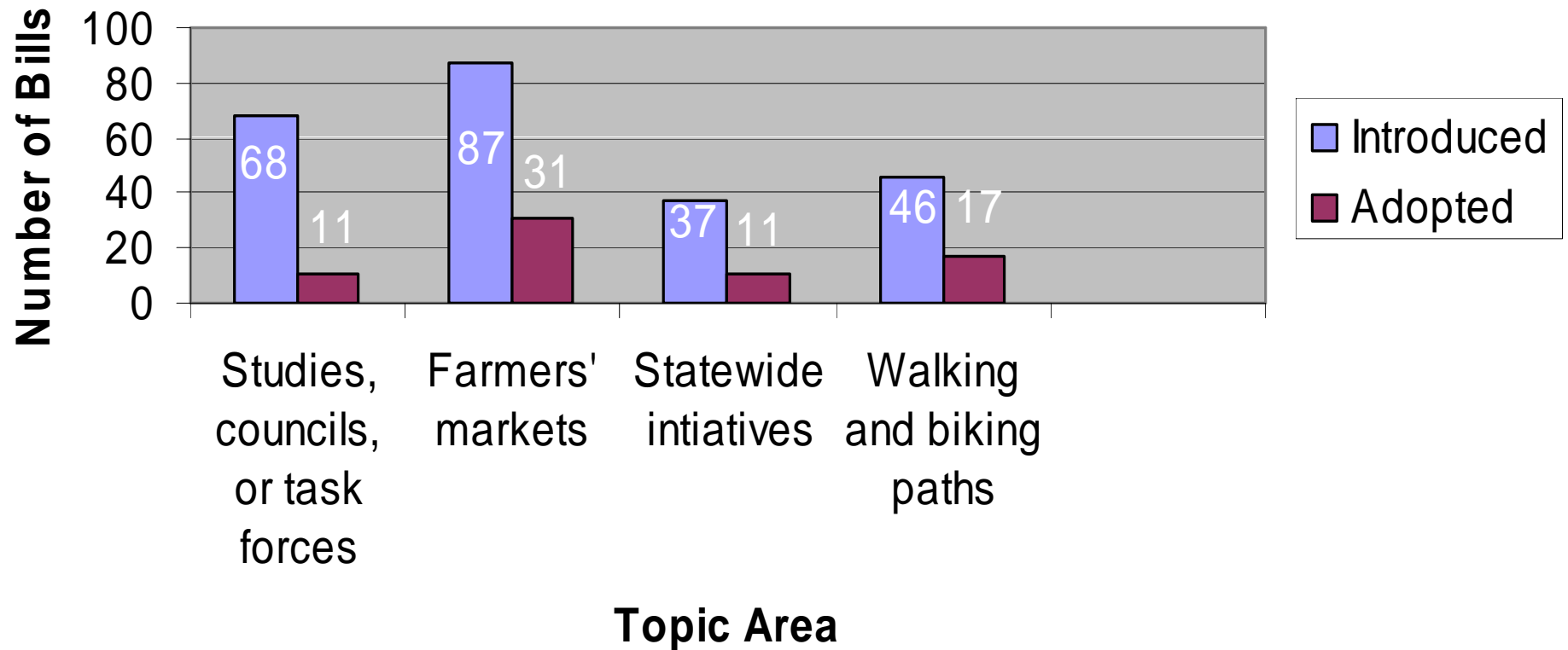
## School Related Legislation on Obesity Prevention (US, 2003-2005)



# Legislative Activity in the South: Schools

- South Carolina
  - 30 min PE/day, fitness testing grades 2, 5, 8, and once 9-12; nutrition standards
- Alabama
  - 30 min K-8, \$11.2million for 180 PE teachers
- North Carolina
  - 30 minutes K-8; enacted nutrition standards
- Tennessee
  - BMI monitoring, PE in grades K-8
- Mississippi
  - 150 min PE/week; 45 min health/week K-8

## Community-related Legislation on Childhood Obesity Prevention 2003-2005





# Lessons Learned

- State level policies can and have increased parents' awareness
  - Behavior changes among families in Arkansas
- Costs should not be prohibitive. Prevention can be achieved without unreasonable fiscal burdens
- Long-term support and programmatic sustainability can be encouraged through state agency work plans and budgets

# Health and Economic Impact

- Prevalence is higher than national figures
- Overweight severity is greater also
- Children are not fit
- Trends often track into adulthood
- It is unclear the extent to which schools are adhering to state PE regulations

# Call to Action

- Incidence of chronic disease may worsen
- Medical costs and economic burdens
- Current statewide prevention is fragmented and small-scale.
- Need for a coherent approach across GA