
America has to get moving to curb epidemic

By Susan Levine and Lori Aratan

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WASHINGTON - The problem at first was that the problem was ignored: For almost two decades, young people in the United States got fatter and fatter - ate more, sat more - and nobody seemed to notice. Not parents or schools, not medical groups or the government.

But since the alarm was finally sounded in the late 1990s, the problem has been the country's reaction: a fragmented response that critics say suffers lack of direction and money to back it up.

"The sense of this as a national health priority just doesn't come through," said Jeffrey P. Koplan of Emory University, a former director of the Centers for Disease Control and Prevention and chairman of the Institute of Medicine's 2004 study of childhood obesity. The top recommendation of that seminal report was for the government to convene a high-level, interdepartmental task force to guide a coordinated response. It never happened.

Contrast that with the offensive mounted in European countries: France mandated health warnings on televised food ads. Spanish officials reached agreement with industry leaders on tighter product labeling and marketing as well as reducing fat, salt and sugar in processed foods.

Britain restricts food ads on TV programs catering predominantly to children and has pulled sweets and sweetened drinks from schools. Eighty-five percent of all grades have at least two hours of physical education a week. The 2011 goal is five hours.

"The whole of the government has signed up," Will Cavendish, director of health and well-being in Britain, where the Healthy Weight, Healthy Lives program is backed by \$600 million in funding over three years.

But U.S. epidemic won't be reversed by federal fiat alone; responsibility lies also with individuals, the health community, corporations, local governments and families. Still, health experts insist that strong leadership is crucial.

"This probably will contribute more to our health-care bill than anything else over the next 50 years," Koplan said.

The first signs of trouble appeared in the late 1970s as rates of overweight people started to rise due to societal, technological and policy shifts that turned the youngest generation into the heaviest ever.

As more women worked outside the home, families ate more takeout and processed food. Spurred by the profit margins of volume production, fast-food restaurants pushed larger portions. Gadgets such as remote TV controls and video games meant children were planted for longer periods in front of televisions and computers.

Through the 1990s, once-rare vending machines multiplied as administrators signed exclusive contracts giving their schools a share of sales; the money was considered essential for band uniforms, sports equipment and other unfunded programs. Soon, soda and chips were a ubiquitous part of millions of students' days.

All this happened at the same time that school systems cut back on recess and physical education.

Federal officials defend their record, saying they have worked "resolutely and steadily" in the past eight years to combat obesity. They calculate that the Department of Health and Human Services has spent \$4.5 billion on prevention, treatment and research since 2003.

Obesity-specific initiatives include Web-based public education campaigns, public service announcements, new dietary guidelines and, coming by late fall, first-time guidelines on physical activity.

Acting Surgeon General Steven K. Galson declared childhood obesity his main priority. A White House spokeswoman said President Bush is equally concerned. Emily Lawrimore noted his speeches about fitness and the need for parents to be role models. He met with corporate executives last year to encourage advertising changes.

Yet the president has followed contradictory tracks. He launched an expansive HealthierUS project in 2002 but tried to kill or cut prominent federal efforts aimed at overweight children and teens. His 2009 budget would end a \$75 million program to help schools and communities expand physical-education offerings and purchase equipment. It would maintain at current levels obesity grants that benefit only half the country.

Only in December did the U.S. Department of Agriculture modify the Women, Infants and Children nutrition program to assist low-income families in buying fresh fruits and produce. And the USDA's school breakfast and lunch program continues to sell whole milk and sweetened flavored milk. Mexico has eliminated both from its poverty programs and intends to do the same in schools.

Into the breach have stepped foundations committing hundreds of millions of dollars. State and local governments have also stepped up, passing myriad measures since 2005 to get children moving and eating better.

Influential groups have worked with food companies to limit marketing and availability of certain products to younger children.

But advocates say the limited power of persuasion and lesser state and local resources make forceful federal measures imperative. Jeffrey Levi urges an all-hands mobilization similar to what the government has demanded in advance of a possible flu pandemic. "Obesity has potentially as great, if not greater, an impact on public health,;" said Levi, executive director of Trust for America's Health.



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