



Fact Sheet

An Epidemic: Overweight and Unfit Children in California Assembly Districts

- What:** *An Epidemic: Overweight and Unfit Children in California Assembly Districts* is the first report of its kind to analyze health-related data of this sort by Assembly District.
- Why:** Childhood overweight and physical inactivity have reached epidemic levels in California and across the country. This report invites policy makers and their constituents to understand how this problem is playing out in their own communities and what they might do to positively impact the situation.
- When:** This report is based on data from the 2001 California Physical Fitness Test. The data was analyzed in 2002 and released in December of the same year.
- How:** The California Center for Public Health Advocacy obtained 2001 California Physical Fitness data from the California Department of Education. Dr. Chi Kao of the University of California, San Francisco's Institute for Health Policy Studies conducted data management and analysis. The body composition and aerobic capacity measures of the 2001 California Physical Fitness Test were used as the indicators of weight and fitness in this study. For the purposes of this analysis, children were classified as "overweight" if their body composition measurement was above the test's maximum standard and as "unfit" if their aerobic capacity score was below the test's minimum standard.
- Who:** The study was conducted by the California Center for Public Health Advocacy with funding from the Robert Wood Johnson Foundation.
- Key Findings:**
- ◆ This study shows that there are high rates of overweight and unfit children in all 80 Assembly Districts in California — even in those districts with the lowest rates.
 - ◆ Across all districts, four out of ten children are unfit.
 - ◆ In almost one-third of the districts (23 of 80 districts), at least half of the ninth graders are unfit.
 - ◆ Across all districts, 26.5 percent of children are overweight.
 - ◆ Of the nine Assembly Districts in the state with the highest percentages of both overweight and unfit children, eight are in Los Angeles County.
- Key Recommendations:**
- ◆ Enforce state law mandating physical education in the first through twelfth grades.
 - ◆ All schools (K-12) should implement the nutrition standards established by SB 19.
 - ◆ Legislative hearings be held to examine the impact advertising to children has on the epidemic.



Key Findings

An Epidemic: Overweight and Unfit Children in California Assembly Districts

The epidemic of childhood overweight and physical inactivity is a statewide problem. *An Epidemic: Overweight and Unfit Children in California Assembly Districts* demonstrates the severe situation facing California's youth. Following are some of the key findings from the report.

Principal Findings:

- ◆ **This study shows that there are high rates of overweight and unfit children in all 80 Assembly Districts in California — even in those districts with the lowest rates.**
- ◆ **In nearly every Assembly District (78 of 80 districts), at least one in four children is unfit.**
- ◆ **Across all districts, four out of ten children are unfit.**
- ◆ **In almost one-third of the districts (23 districts), at least half of the ninth graders are unfit.**
- ◆ **Across all Assembly Districts, 26.5 percent of children are overweight.**

Findings by Gender:

- ◆ In every Assembly District, the percentage of overweight boys is greater than the percentage of overweight girls.
- ◆ In 77.5 percent of the Assembly Districts the percentage of unfit girls is greater than the percentage of unfit boys.

Findings by Age:

- ◆ In 80 percent of the Assembly Districts (64 districts), there are more unfit ninth graders than fifth graders.
- ◆ Children show a decreasing level of fitness as they age.

Findings by District/Region:

- ◆ Of the nine Assembly Districts in the state with the highest percentages of both overweight and unfit children, eight are in Los Angeles County.
- ◆ The five Assembly Districts with the highest percentage of unfit children were: 39 (Los Angeles County), 47 (Los Angeles County), 48 (Los Angeles County), 51 (Los Angeles County) and 62 (San Bernardino County).
- ◆ The five Assembly Districts with the highest percentage of overweight children were: 39 (Los Angeles County), 46 (Los Angeles County), 48 (Los Angeles County), 69 (Orange County) and 79 (San Diego).



Scientific Panel

An Epidemic: Overweight and Unfit Children in California Assembly Districts

The California Center for Public Health Advocacy convened a panel of experts in the fields of physical activity, physical education, nutrition and social marketing.

Members of the Scientific Panel

- ◆ **Kelli McCormack Brown, Ph.D., CHES** (University of South Florida)
Dr. Brown is on the faculty at the University of South Florida's School of Public Health and is a social marketing expert.
- ◆ **Pat Crawford, Dr.PH, RD** (University of California, Berkeley)
Dr. Crawford is Cooperative Extension Specialist in the Department of Nutritional Sciences and Toxicology at the University of California, Berkeley, and a Co-Director of the Center for Weight and Health.
- ◆ **Betty Hennessy, Ph.D.** (Los Angeles County Office of Education)
Dr. Hennessy is currently a physical education consultant to the Los Angeles County Office of Education in the Curriculum and Instructional Services division.
- ◆ **James Sallis, Ph.D.** (San Diego State University)
Dr. Sallis is a Professor of Psychology at San Diego State University and is internationally known for his work in creating, implementing and evaluating effective physical activity and nutrition programs.
- ◆ **Gregory Welk, Ph.D.** (Iowa State University)
Dr. Welk has been a member of the *FITNESSGRAM* Advisory Board since 1996 and formerly served as the Scientific Director of the *FITNESSGRAM* Program.
- ◆ **Antronette Yancey, MD, MPH** (University of California, Los Angeles)
Dr. Yancey is an Associate Professor in the Department of Community Health Sciences at the University of California, Los Angeles' School of Public Health.

Advisors to the Study

- ◆ **Marion Nestle, Ph.D., MPH** (New York University)
Dr. Nestle is Chair of the Department of Nutrition and Food Studies at New York University. She is a member of the Science Board to the FDA and author of [Food Politics: How the Food Industry Influences Nutrition and Health](#).
- ◆ **Katherine Flegal, Ph.D.** (University of California, Berkeley and the Center for Disease Control)
Dr. Flegal was the principal author of the article "Prevalence and Trends on Obesity Among Adults" recently published in the *Journal of the American Medical Association*.



Spokesperson List

An Epidemic: Overweight and Unfit Children in California Assembly Districts

Statewide Spokespersons

FINDINGS, IMPLICATIONS AND RECOMMENDATIONS

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2001 California Physical Fitness Test Backgrounder

An Epidemic: Overweight and Unfit Children in California Assembly Districts

In October 1995 Assembly Bill 265 established the California physical performance test and mandated that the governing board of each school district administer the test to each pupil in the fifth, seventh and ninth grades. State law also required that the physical fitness data be collected at least once every two years by the California Department of Education and that the results be reported to the Governor and Legislature at least once every two years. *FITNESSGRAM* is the assessment tool used to test children.

The Cooper Institute of Dallas, Texas, developed *FITNESSGRAM* in 1982. A computerized, health-related fitness assessment for children and youth,

FITNESSGRAM is used to assess fitness nationwide in more than 6,000 schools/school districts. Last year alone, the test was used to evaluate more than one million California students.

The California Physical Fitness Test provides a number of options for measuring each of the fitness components to assure that all students, including those with physical limitations, have the maximum opportunity to complete the test. Students are compared not to each other but to health fitness standards carefully established for each age and gender, that indicate good health. The assessments analyzed in this study are described below.

FITNESS AREA	TEST OPTIONS	DESCRIPTION
<i>Aerobic Capacity</i>	Pacer	A multi-stage fitness test set to music involving running along a 20-meter distance at a specified pace that increases by the minute.
	One-Mile Walk/Run	Walk and/or run a one-mile distance at the fastest possible pace.
	Walk Test	Walk a one-mile distance as quickly as possible while maintaining a consistent pace over the entire one mile.
<i>Body Composition</i>	Body Mass Index	Provides an estimate of body composition and risk for overweight through measure of weight relative to height. Although the test is less accurate than other measures, it is relatively easy to administer and is the test most frequently used.
	Skinfold Thickness Percent Fat	Measures the thickness of the skinfold on the back of the upper arm and the inside of the right calf. Measurements are collected using a skinfold caliper. The measurements are inserted into a formula in order to calculate percent body fat.



Health Implications By The Numbers

An Epidemic: Overweight and Unfit Children in California Assembly Districts

The findings of this report have serious health implications. Childhood overweight and physical inactivity are conditions likely to follow youth into adulthood. Without intervention, the next generation of California teens appears destined to suffer prematurely from high levels of life-threatening chronic diseases, including diabetes, heart disease, stroke and cancer. These diseases are directly related to poor nutrition, physical inactivity and overweight.

Percent increase of overweight children ages 6 to 11 between 1963 and 2000 264¹

Percent increase in national costs associated with youth obesity between 1979 and 1999 263²

Percentage of obese adolescents likely to remain obese as adults 50³

Percent of overweight children in some California school districts 50⁴

Percentage of children diagnosed with type 2 diabetes that are overweight 80⁵

Ranking of the cost of obesity versus smoking and problem drinking 1⁶

Yearly cost in US Dollars of obesity to California in direct medical expenses and lost productivity 14.2 billion⁷

Number of years before cardiovascular complications in at-risk teens could appear in health statistics 15⁸

Decade in which adults who were overweight as adolescents may begin to experience serious health complications 30s⁸

Number of chronic diseases directly associated with childhood overweight 10⁸ ⁹

¹ *Journal of the American Medical Association*. 2002; 288: 1728-1732.
² *Pediatrics*. 2002; 109(5): E81-1.
³ *Journal of Nutrition*. 1998; 128(2): 411S-414S.
⁴ Obesity In Urban, Low Income, Los Angeles Elementary School Children. UCLA Schools of Medicine and Public Health, 1999.
⁵ ADA (American Diabetes Association). Children and Diabetes. ADA website [[http://www.diabetes.org/main/application/commercewf?origin=* .jsp&event=link \(B4_3\)](http://www.diabetes.org/main/application/commercewf?origin=* .jsp&event=link (B4_3))].
⁶ *Health Affairs (Millwood)*. 2002; 21(2): 245-253.
⁷ An estimate based on the Surgeon General's (2001) assessment of the annual national cost of obesity.
⁸ *California Teen Eating, Exercise, and Nutrition Survey*. 1998.
⁹ USDHHS. *The Surgeon General's Call to Action To Prevent and Decrease Overweight and Obesity*. Atlanta, GA, 2001.



Organizational Backgrounders

An Epidemic: Overweight and Unfit Children in California Assembly Districts

California Center for Public Health Advocacy

The California Center for Public Health Advocacy (CCPHA) raises awareness about public health issues and mobilizes communities to promote the establishment of effective health policies. Established in 1999 by California's two public health associations—Southern California Public Health Association and California Public Health Association-North—the CCPHA is an independent, nonpartisan, nonprofit organization.

The CCPHA uses tools of public health—health education, social marketing, epidemiology, and grassroots organizing—to design policy solutions to address public health challenges facing California today. The CCPHA's strength lies in their unique approach of working simultaneously with facets of public health that are rarely combined.

The CCPHA uses both scientific expertise and grassroots means to effect change at the community and state level, focusing not only on specific public health issues but the general well-being of all Californians.

Building on the historic strength of California's two Public Health Associations the CCPHA provides leadership in California in the field of public health, focusing their efforts on the following priority areas:

The Robert Wood Johnson Foundation, based in Princeton, New Jersey, is the nation's largest philanthropy devoted exclusively to health and health care. It became a national institution in 1972 with receipt of a bequest from the industrialist whose name it bears, and has since made more than \$2 billion in grants.

The Foundation concentrates its grantmaking in three areas: to assure that all Americans have access to basic

• **Prevention.** The CCPHA encourages the establishment of policies and programs that support community-based health promotion and disease prevention, paying particular attention to addressing health disparities;

• **Public Health Constituency Building.** The CCPHA works toward expanding and strengthening the constituency for public health by acting as a catalyst and convener of different types of people—both professional and lay—and organizations interested in promoting community health;

• **Information Transfer.** The CCPHA encourages others to learn from their experience, sharing the lessons they learn through training programs and by publicizing their findings at local and national conferences and in professional publications.

The CCPHA's initial priority issues are child nutrition and fitness, health disparities, universal access to health care, and public health infrastructure.

The CCPHA receives funding to promote nutrition and physical activity policy development from The California Endowment, the Robert Wood Johnson Foundation, and the William Randolph Hearst Foundations. They also receive core-operating support from The California Wellness Foundation.

Robert Wood Johnson Foundation

health care at reasonable cost; to improve the way services are organized and provided to people with chronic health conditions; and to reduce the personal, social, and economic harm caused by substance abuse—tobacco, alcohol, and illicit drugs.



Priority Recommendations

An Epidemic: Overweight and Unfit Children in California Assembly Districts

Unless dramatic action is taken to reform state and local policies, many of California's children will face a lifetime of poor health; furthermore, the state's economy will be burdened with additional long-term costs. The California Center for Public Health Advocacy calls on policy makers throughout the state to take clear and direct action to address this serious situation in order to ensure a healthier future for our children. The Center's recommendations are based on those made by a national Scientific Panel.

IMMEDIATE ACTIONS

- ◆ The Governor should declare this epidemic a public health emergency and immediately convene a Summit of government, health, education, business and nonprofit leaders charged with identifying immediate strategies to address the emergency.
- ◆ Every legislator should consider how best to address the epidemic.
- ◆ Every legislator should convene a District forum of community leaders within six months to identify immediate strategies to address the emergency locally.

POLICIES FOR THE COMING YEAR (2003)

- ◆ Enforce state law mandating 200-400 minutes of physical education every 10 days in grades 1-12.
- ◆ Fund and implement State law outlining elementary school nutrition standards (SB 19, 2001). While there is a cost to implement the nutrition standards, these costs would be less than the long-term economic consequences that could arise if elementary schools are permitted to sell soda and junk food.
- ◆ Hold Legislative hearings to examine the impact that advertising to children has on the epidemic.
- ◆ Ensure that every school has operable water fountains.
- ◆ Continue administering the *FITNESSGRAM* test annually and continue reporting findings to the Governor and the Legislature annually.
- ◆ Implement the *Physical Education Framework for California Public Schools K-12* — a key and

fundamental resource for developing physical education programs endorsed by the State Board of Education — in every school district.

POLICIES FOR THE NEXT FOUR YEARS (2003–2007)

- ◆ Ensure that nutrition and physical education are given equal priority to other academic subjects.
- ◆ Ensure that physical activity is included in all state-supported after-school and childcare programs.
- ◆ Middle schools, high schools, after-school programs and childcare programs should implement the nutrition standards established by SB 19.
- ◆ The California State University and the University of California system should accept physical education grades as part of a student's grade point average submitted for college admission.
- ◆ Bond measures should be used to raise funds to improve physical education facilities, community infrastructure that supports physical activity, and school cafeterias.
- ◆ State and local agencies should develop a "physical activity impact statement" as a method of determining the impact of community development on the ability of children and their families to be physically active.
- ◆ Local health departments should make promotion of healthful nutrition and physical activity top priorities.
- ◆ The University of California should conduct research to determine whether and how income and ethnicity affect fitness. Findings and recommended policy changes should be reported to the Legislature.