COMBATING L.A. COUNTY’S CHILDHOOD OBESITY CRISIS

Taking the First Step with a Healthy Breakfast

The idyllic world of healthy children playing in the park, energized by nutritious foods and snacks, is far from reality in Los Angeles County. Instead, the County leads the State in an epidemic of childhood overweight, with potentially catastrophic consequences for the County’s children, their families and the communities that will deal with this issue.

The Los Angeles Collaborative for Healthy Active Children, a county-wide collaborative of nearly 100 health and nutrition organizations and individuals, is concerned with impacting the skyrocketing rates of childhood overweight and lack of nutritious food among low-income persons in the County. This brief reflects upon recent findings from the 2002–03 Los Angeles County Health Survey, Food Insecurity and Obesity on the Rise as well as the County’s 2002 Paving the Way for Physically Fit and Healthy Children, and offers the L.A. Collaborative’s insights and recommendations on how to begin to address the crisis with a healthy breakfast.

CONFRONTING A CRISIS

Recent findings from the Los Angeles County Health Survey, in combination with other studies, show that millions of Angelenos are overweight and obese. In addition, forty percent of 5th, 7th and 9th graders in Los Angeles County are either overweight or at risk of being overweight. Highlighted in a recent L.A. Health publication is that this epidemic disproportionately affects Los Angeles County’s lower income residents, those with incomes below 300 percent of the federal poverty level, who are also food insecure.

Over 63 percent of lower income residents in Los Angeles County who are food insecure are either overweight or obese, compared to 56 percent of lower income residents who do not experience food insecurity and 55 percent of the general population at all income levels. In communities where there is heightened food insecurity, foods high in calories, fats, and sugars, but low in many essential nutrients, are readily available, more affordable, and aggressively promoted. This is the paradox of undernourished yet overweight citizens. In food insecure areas, the situation is compounded by the limited availability of fresh, attractive and affordable fruits and vegetables, which can help reduce the risk of obesity.

All of these dangers are mirrored among children in Los Angeles County, where again the County has some of the State’s highest percentages of both overweight and physically unfit children. This problem is accentuated in Assembly Districts where food insecurity is most acute.

MARCH 2004
FACING THE CONSEQUENCES

Given the severity of this problem and its considerable impact on children, it is no exaggeration to call this a crisis that cuts to the heart of Los Angeles County’s future. The next generation of wage earners, voters and leaders...our children...are suffering from unprecedented levels of overweight and associated illnesses, complications and challenges.

If this chronic trend of overweight and under nourished children is not corrected in Los Angeles County, we face severe consequences:

- **Reduced School Funding:** Poorly nourished children have higher school absenteeism, poor academic performance, increased disciplinary problems and are less likely to graduate—all of which influence school performance and ultimately limit school funding.11,12,13

- **Higher Health Care Costs:** Obesity-related diseases (Type 2 Diabetes, heart disease, stroke, cancers) cost California $7.7 billion a year,14 with nearly half that total ($3.43 billion) attributed to Los Angeles County alone. More than half the costs associated with these conditions are borne by the taxpayer.14

The unprecedented number of overweight children today is certain to dramatically increase health care costs as overweight children reach adulthood.

TAKING A FIRST STEP

The L.A. Collaborative recognizes that the crisis of overweight children is a complicated issue that demands a variety of interventions and environmental improvements. Relying on evidence-based data, the L.A. Collaborative advocates the regular consumption of a healthy breakfast as the frontline approach to correcting the County’s obesity epidemic, especially among children.

Why a healthy breakfast first? Studies show that those who skip or eat an unhealthy breakfast are at higher risk of being at an unhealthy weight:

- Daily breakfast consumption is recognized as one of four common behaviors of successful weight losers by the National Weight Control Registry.15
- Eating a healthy breakfast every day is associated with reduced risk of obesity, diabetes and cardiovascular disease.16
- Obesity rates were 35 to 50 percent lower among those who ate a healthy breakfast compared to those who skipped breakfast.16
- On the average, children who consumed ready to eat cereals or cooked cereals had a lower Body Mass Index than those who skipped breakfast.17
- A longitudinal study showed that normal weight children who never ate breakfast weighed more than peers who frequently ate breakfast.18

Despite the preponderance of information supporting the wisdom of eating a healthy breakfast, Angelinos are taking a pass on breakfast. There has been a significant decline in breakfast consumption from 1965 to 1991 by children and adolescents.19

A 2001–2002 survey showed that nearly half of Los Angeles children do not eat any breakfast (nutritious or otherwise).20 And in Los Angeles County, fewer than 30 percent of those school children eligible for a free- or reduced-priced breakfast take advantage of this program.21

To help children in Los Angeles County, especially those most susceptible to food insecurity, control and improve their weight, the ideal place to start is through the promotion and greater utilization of the School Breakfast Program countywide. Increased participation in the School Breakfast Program would:

- Fundamentally address the obesity issue.
- Ensure all children, regardless of income and eligibility, access to a breakfast that meets nutritional guidelines.
- Increase consumption of fruits and vegetables,22,23 a vital part of a healthy diet.
- Enhance academic performance of students.
- Safeguard Los Angeles’ most susceptible food insecure children.
- Return significant fiscal rewards to Los Angeles County taxpayers. Of over one million school children in L.A. County eligible for the free and reduced School Breakfast Program, more than 742,000 do not take advantage of the program.21

If they did participate in the program, school districts in L.A. County would receive an estimated additional $174,382,590 per year in federal and state reimbursement. Furthermore, if the 626,271 students ineligible for subsidized meals participated in the School Breakfast Program, an additional $24,800,331 in federal reimbursement could be claimed by schools in L.A. County.21
AT THE ROOT OF THE PROBLEM
The L.A. Collaborative has identified many factors that may be contributing to America’s growing childhood overweight epidemic. For children in Los Angeles County facing food insecurity issues, some of the prime problems include:

• Heightened affordability of calorie-dense, nutrient-light foods.
• Ready access to poor food choices and limited access to healthy alternatives.
• Limited availability of fresh, attractive and affordable fruits and vegetables.
• Fast-paced lifestyles that put a premium on convenience at the expense of smart nutrition.
• Limited nutrition education or understanding of how to make nutritional choices.
• Aggressive marketing of what is most frequently the least healthy food choices.
• Neighborhoods that discourage or prevent physical activity.
• Increased portion sizes.

RECOMMENDATIONS
Eating a nutritious breakfast is a practical way of beginning to address Los Angeles’ childhood overweight crisis. Increasing consumption of a healthy breakfast among all children across Los Angeles County requires the concerted support of a wide range of players. These partners seek not only educational and promotional efforts but also fundamental changes to the policies, systems, and environments that don’t actively support breakfast consumption. The Los Angeles Collaborative for Healthy Active Children appeals to policymakers at all levels, to community leaders, the private sector, parents and educators, to adopt, support, and implement sensible changes that create an environment where all children can eat a healthy breakfast every day.

PARENTS AND FAMILIES
• Eat a healthy breakfast daily.
• Ensure children participate in the School Breakfast Program.
• Educate yourself about the School Breakfast Program and make an appointment to meet the food service staff at your child’s school.
• Request fast food chains to offer and promote nutritious breakfast choices, such as fresh fruit, on their menus.
SCHOOL DISTRICTS

- Implement changes to increase participation in School Breakfast Programs.
  - Offer universal (free) breakfast to all students.
  - Offer breakfast in the classroom at all elementary schools.
  - Remove basic obstacles by budgeting adequate time to eat and address transportation impediments.
  - Provide second-chance breakfast in all schools.
  - Involve parents, teachers, and students in learning the value of eating a healthy breakfast. Conduct tasting of new items, vary menus, etc.

- Adopt and distribute science-based nutrition education curricula to teachers, parents, and students.

- Form a school health team and utilize assessment tools, such as the School Health Index, to determine barriers to the School Breakfast Program and identify strategies to increase participation.

STATE AND FEDERAL POLICYMAKERS

- Establish the School Breakfast Program at all schools.
- Provide all low-income children a free breakfast by eliminating the reduced-price category.
- Fund grants to initiate and expand School Breakfast Programs.
- Amend the State Education Code to:
  - Establish breakfast as part of the school day.
  - Require nutrition education in K-12 curricula and as part of standardized tests.
- Train teachers to teach nutrition education curricula which comply with the California Health Framework and National Standards.
- Visit a breakfast program at a school in your district.

COMMUNITY-BASED ORGANIZATIONS

- Offer and promote healthy breakfasts in all childcare, off-track and summer programs.
- Adopt healthy breakfast standards as established by the Los Angeles Collaborative for Healthy Active Children.
- Provide and promote education on the value of a healthy breakfast, as well as simple steps to prepare healthy breakfasts at home.

COUNTY AND CITIES

- Offer USDA-funded breakfast programs with childcare and summer programs in community settings, including but not limited to parks and recreation facilities.
- Publicly honor restaurants, businesses, and community organizations which support healthy breakfasts that meet Los Angeles Collaborative for Healthy Active Children guidelines.
- Model “Breakfast First” by providing healthy breakfasts at local government meetings.

MEDICAL COMMUNITY: MANAGED CARE AND HEALTHCARE INDUSTRIES

- Work with healthcare providers, community organizations, members, and families in a variety of settings to disseminate culturally appropriate information on the importance of eating a healthy breakfast, as well as information about the local School Breakfast Program.

PRIVATE SECTOR

- Increase employee productivity and wellness by supporting a healthy breakfast. Provide a comfortable break room and clean preparation facilities, and adopt a healthy breakfast policy for meetings.
- For eating establishments: Promote and competitively price healthy breakfast menu items, indicating nutritional information.
- Promote healthy breakfast by offering product donations and accessibility to healthy foods to support local community efforts.
BODY MASS INDEX (BMI) is a relationship between weight and height that is associated with body fat and health risk (BMI=kg/m²).

**TERMINOLOGY**

**FOOD INSECURITY** is limited or uncertain availability of nutritionally adequate and safe foods or limited or uncertain ability to acquire foods in socially acceptable ways.

**OBESITY** is a term used to refer to adults at or exceeding a body mass index of 25.

**BODY MASS INDEX (BMI)** is a relationship between weight and height that is associated with body fat and health risk (BMI=kg/m²).

In children and teens, BMI is used to assess underweight, overweight and risk for overweight. Children’s body fatness changes over the years as they grow. Also, girls and boys differ in their body fatness as they mature. This is why BMI for children, also referred to as BMI-for-age, is gender and age specific. BMI-for-age is plotted on gender specific growth charts. These charts are used for children and teens 2–20 years of age.

**UNDERWEIGHT**

BMI-for-age less than 5th percentile.

**AT RISK OF OVERWEIGHT**

BMI-for-age 85th percentile to less than 95th percentile.

**OVERWEIGHT**

BMI-for-age is at or above the 95th percentile.
REFERENCES

3 Paving the Way for Physically Fit and Healthy Children—Findings and Recommendations. CA: Los Angeles County Task Force on Children and Youth Physical Fitness, August 2002.
4 2002-03 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Health Services
16 Pereira M, Karastavov AI, Van Horn L, Slattery M, Jacobs Jr. DR, & Ludwig DS. Presented at the American Heart Association’s 43rd Annual Conference on Cardiovascular Disease Epidemiology and Prevention March 6, 2003 (unpublished).