Preventing Childhood Obesity
The Power of Policy and Political Will

U.S. Senator Tom Harkin

It is beyond dispute that Americans are severely burdened by the medical and social costs of childhood obesity and resulting chronic diseases. Likewise, there is broad acknowledgement that steps must be taken to promote wellness and prevent avoidable illness and disease. However, there is incomplete consensus as to the optimum course that should be taken to address these challenges. In part, this is due to the fact that we are still assessing which interventions are most effective, and which can be successfully implemented on a mass scale. To address these challenges, I commend the authors in this supplement to the American Journal of Preventive Medicine.

Perhaps the biggest challenge of all is the political one. Powerful interests and legions of lobbyists are arrayed against even commonsense proposals to encourage healthy choices and behaviors. And Americans themselves are generally wary of government—the “nanny state”—telling them what they should eat and drink, and how they should manage their own health. Given these challenges, if we are serious about wellness and disease prevention, and breaking with the status quo, several things need to happen.

First, we must move beyond the fruitless blame game as to who or what is responsible for America’s epidemic of childhood obesity and related chronic diseases. Are individuals at fault? Corporations that relentlessly advertise unhealthy foods? Public schools that slight recess and physical education? A changing society that is increasingly sedentary? Isn’t it obvious that there is plenty of blame to go around? And isn’t it equally obvious that any successful effort to combat obesity, diabetes, heart disease, and other preventable conditions must mobilize all sectors of our society and economy: individuals, families, corporations, employers, schools, and government at all levels?

Second, as we continue to investigate the causes of childhood obesity as well as the behaviors that can prevent or reverse related chronic diseases, we need a more robust effort to translate the research findings into workable, sustainable interventions in our communities, schools, and workplaces. To that end, it is critical that we strengthen the ties between researchers who strive to identify evidence-based practices to promote public health, and policy makers and elected officials who are in a position to create public-information campaigns, incentives, and mandates in order to implement best practices on a broad scale.

Third, if our aim is obesity prevention, we must begin at the earliest possible age, with infants and children. Fortunately, there is a high degree of consensus and urgency with regard to the health needs of America’s children. The shocking rise of childhood obesity and associated conditions such as type 2 diabetes is a fact beyond reasonable dispute. Moreover, it is clear that children, given their limited cognitive development, are uniquely vulnerable to manipulation by the advertising and marketing of less-healthy foods and beverages. There is strong consensus among policy makers, parents, and the public at large that, when it comes to protecting the health of children, robust public health interventions are appropriate and necessary. Moreover, there are several areas where we are obviously falling short at present.

For instance, because of outdated laws, our public schools, today, are awash in junk foods and sugary beverages, utterly undermining the aims of the nutritionally balanced National School Lunch Program. We need to implement updated federal nutrition standards for foods sold through school vending machines, snack bars, and other sources outside the cafeteria at lunchtime. Legislation, for which I am the chief sponsor, the Child Nutrition Promotion and School Lunch Protection Act, would update school nutrition standards and give the U.S. Department of Agriculture authority to regulate all foods and beverages sold in schools.

We also need to promote physical activity among our kids. It’s unconscionable that we build elementary schools without playgrounds and that kids can’t walk to a school just blocks away because busy roads lack sidewalks. Leading experts have set guidelines that children should participate in 60 minutes of physical activity everyday. The PLAY Every Day Act (www.playeveryday.org/Bill%20s651.pdf), which Senator Hillary Clinton and I introduced earlier this year, provides resources to communities to create coalitions that work to remove...
barriers that prevent children and families from living healthy, active lives. My vision is to have every community in America focused on promoting health and preventing disease—instead of just dealing with the bad consequences of obesity, diabetes, and heart disease.

Another area that needs to be examined is food marketing to kids. In recent reports, the Kaiser Family Foundation and the Institute of Medicine have detailed the incredible pressure that our children face today due to the marketing of junk food. The food industry spends more than $12 billion a year on marketing campaigns through television, movies, cell phones, and the Internet. Sadly, the majority of the advertising is for candy and foods high in sugar, salt, and fat and inconsistent with national dietary recommendations. Only 2% of advertising is for fruits and vegetables. I am hopeful that the FCC Task Force on Media and Obesity that I co-chair with Senator Brownback will develop and implement real solutions that effectively deal with this public health problem.

The papers in this supplement highlight many of the most pressing topics for policy makers and practitioners who are addressing childhood obesity. My hope is that Americans can come together around commonsense policies to protect and promote the health of our children, and that this will lead to a broader discussion of the role of public policy in promoting better health for all Americans. We must fundamentally shift our healthcare system toward preventing disease, promoting good nutrition, and encouraging physical activity—in other words, recreating America as a “wellness society.” This will be good for the physical and mental health of the American people. And it will be good for the fiscal health of government, corporate, and family budgets. In an era of skyrocketing healthcare costs, this is the only sustainable course for America’s future.

References