Seeking Environmental and Policy Solutions to Address Latino Childhood Obesity

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The selection of research articles in this Salud America! supplement of the American Journal of Preventive Medicine features a variety of promising strategies that aim to reduce obesity among Latino children. From family and consumer-directed health education,1–5 to improving environments and changing policies to promote healthy eating and physical activity,6–13 each article considers the context of Latino culture and/or conditions in places where Latinos live, work, learn, play, and pray. In this respect, the tone of this supplement is clear: anticipate long-term reduction in obesity rates by engaging the target population to foster behavior change and health-supportive social and physical environments.

Latinos represent the nation’s largest at-risk group of children for overweight and obesity, and consequent chronic illnesses in later life.14 The primary culprit—inequities in social and physical environmental conditions that favor unhealthy nutrition and inactivity—puts millions of U.S. Latino children in jeopardy for developing type 2 diabetes, heart disease, certain cancers, and more.15 The implications of high childhood obesity rates for decreased productivity, increased costs for health care, and decreased life span spell disaster, for the nation and more so for Latinos.

Primary prevention is, of course, the solution. Clinical experience has taught us that working with individuals to undo unhealthy behaviors and to endure barriers to healthy nutrition and physical activity is notoriously difficult if not elusive.16 Prevention science signals the need for a multidisciplinary approach to address factors in the social and physical environments of children that underlie unhealthy behaviors and that create barriers. Community experience is showing us that changing these factors through policies and practices that promote healthy behaviors and lifestyles is both feasible and scalable.16,17 We expect behavior change and social norms change to flow, over time. Overweight and obesity rates decline, health improves.

Articles in this supplement support the place- and population-level approach to prevention, and examine models in Latino communities that demonstrate engagement in and responsiveness to changing environments and policies. In many cases, direct involvement of the target community is crucial. In fact, the multiple benefits of community collaboration provide some of the most enduring lessons of obesity prevention programs. Community empowerment through engagement and capacity building is a common thread among a growing number of government- and foundation-supported projects now moving beyond obesity prevention to address broader dimensions of health and equity.18,19

Models and lessons from Latino communities represent the frontier, if not the cutting edge, for environmental and policy solutions to address childhood obesity. In California, pioneering efforts to ban sugary beverages from schools emerged largely in Latino communities, and Latino lawmakers advanced it to the state level. Menu labeling, community gardens, safe walking–biking routes to schools, park revitalization, youth programs, and joint use (after-hours community access to school grounds for recreation) are just some of the many environmental and policy solutions that are taking hold in Latino communities across the nation.2 However, even good science and strong community models may not be sufficient to create the political will for change, especially if there are countervailing forces that benefit from inequities and unhealthy conditions. The beverage industry recently spent more than $5 million to defeat ballot measures to impose a tax on sodas in two small California cities, El Monte and Richmond, each with sizable low-income Latino populations and high rates of obesity.19

Research represented in the Salud America! supplement is noteworthy because it represents good science and new information about a population and problem that deserve much greater attention, was produced with a minimum of resources, and provided opportunities for professional growth to a number of early career scientists. For its foresight and support of Salud America!, the Robert Wood Johnson Foundation merits acclaim. To foment even greater advances in obesity prevention, the NIH needs a more robust multidisciplinary research agenda that elucidates the nexus of children’s health and the social and physical environments, especially in Latino communities, and that features indigenous investigators and community partners.
Finally, findings from studies in this supplement, as well as stories from other evidence-based community-level childhood obesity prevention programs, fuel an unprecedented opportunity to influence health system reform through implementation of the 2011 Patient Protection and Affordable Care Act (ACA). Federal and state leaders need to better understand and support non-clinical prevention that contributes to higher quality, lower costs, and better outcomes. Obesity prevention lessons and models, like those featured in this supplement, are serving to inform ACA-supported Community Transformation Grants, state and local public health improvements, and innovations for the management and prevention of chronic conditions. In many ways, Latino communities, Latino researchers, and Latino policymakers working to prevent childhood obesity are proving to be instrumental for reshaping our nation’s health system and improving community health.

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References