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Thank you. Good morning everyone. And thanks to GMA for allowing me to do what I love to do better than anything else—be Doctor Risa. I have some straight talk for you about what's at stake if America's epidemic of childhood obesity continues unabated.

The epidemic, you see, isn't just about our kids. It's about all of us—families, schools, communities, business, health care. It's going to take all of us to turn it around. So let me begin with some patient history. Most boys and girls were this skinny when I was growing up in Seattle.

It was a very different time. My pediatrician mother made sure we had a home-cooked dinner every night. Most of the food was fresh. Portions were smaller. We ate dinner on dishes the size of today's salad plates. Food took more of the family budget. Families bought less and ate less.

Kids were more physically active, too. I walked the mile to school. And remember—it was Seattle. Half that walk was uphill. Half the other kids walked, too. Or rode their bikes. After school, on weekends, we played outside. It was safe, fun, good for us, and easy to burn off the calories that we took in.

This was how we lived our lives. Oh, my, how times have changed! One-third of our children and teenagers look like this today. Thirty years ago, 5 percent of grade school children and teenagers were obese. Today, it's about 16 percent. Add in overweight kids who're not yet officially "obese" and the national rate jumps to 32 percent. That's more than 23 million kids.



The implications are grim. Surgeons General from different administrations—David Satcher and Richard Carmona—separately warned how bad it really is.

Satcher said: "Overweight and obesity may soon cause as much preventable disease and death as cigarette smoking."

Carmona said the epidemic "is every bit as threatening [as] the terrorist threat we face today. It is the threat within."

Strong language. It needs to be. Childhood obesity is a classic epidemic. It started small, flourished in conditions ideal for unimpeded growth, and broke out across the population.

I'm going to show you something that really rattles me. The CDC mapped obesity's spread among adults over the past generation. [\[Click to view the maps from the CDC\]](#) Look... It's like a plague jumping from neighbor to neighbor, reaching further and further, getting worse and worse, until every year we need a new category. The first map shows that eight states reported rates of adult obesity between 10 percent and 14 percent in 1985. But within a decade, more than half of the states reported adult



obesity rates of 15 percent to 19 percent, and by 2007, the numbers had shifted even further, with at least 25 percent of adults now obese in 30 states. Nothing's stopping it. The deep blue category on the map used to be the very worst. Now it's the very best.

This is a medical, social and financial disaster of historic proportions unfolding in real-time. It's altered the face of the map and changed the shape of the nation. You might wonder, "What's it have to do with me?" My answer is "Everything." Look around the airport when you leave, the mall back home, your kids' schools, your family's church, where you work.

This isn't some ordinary infectious disease that strikes hard, runs its course, and then returns to normal. No, obesity creates its own "new"—but unacceptable—normal.

The fiscal price is staggering. The cost of treating obese adults doubled in less than a decade—nearly \$147 billion last year. That doesn't include indirect costs, like lost productivity, higher employer insurance premiums, smaller business margins and lower tax revenues. Who pays the bill? All of us—business, consumers, taxpayers, families. We all pay.

I see patients at a community clinic near my office. Parents bring in obese boys and girls with chronic, debilitating conditions we used to see only in adults, like Type 2 diabetes, high blood pressure, heart problems, more asthma.

The conditions don't go away. And they last a lifetime. We're raising the first generation of American children who may live sicker and die younger than their parents. This pains me as a doctor and as a mother. Think of your kids and grandkids.

We got this way by trying—and failing—to fool Mother Nature. Since before time began, our weight's been regulated by an equation that's never changed.

Calories In = Calories Burned

If we consume more calories than we need—and don't burn them off—the calories convert to fat. It's that simple. Our DNA hasn't changed since our prehistoric ancestors hunted down fat and fleshy prey for supper. We're still hard-wired to crave calorie-packed foods, except now we let our fingers do the stalking. We push "START" on the microwave—and sit down to a super-sized meal loaded with way more calories than we need to survive. It's ironic. We need less, but, reflexively, we consume more.

Meanwhile, our kids dumped their bats, balls and bikes in the garage—and came indoors to play. Now they're at the computer, playing video games and texting for more than six hours a day. They've replaced literal physical activity with virtual sedentary activity. It's a huge factor in childhood obesity. So are...

- Communities without sidewalks or bike paths.
- Neighborhoods where kids can't safely walk or bike or play.
- Low-income "food deserts" without a single supermarket.
- Schools without adequate P.E. and recess.
- And America's culture of convenience food, where portions are big, calories high and nutrition low.



Now don't get me wrong. Kids, as individuals, make their own food choices, as do you and me. However—just like you and me—kids are highly susceptible to society's enticements and nudges. Food and beverage promotion campaigns really work. They're powerful marketing tools. And, like all power tools, they perform best when handled precisely.

It's encouraging to see industry devoting more attention to whether you target and how you target children and teenagers. The question that remains is not should we do something—but what do we do.

The Robert Wood Johnson Foundation is determined to reverse the epidemic of childhood obesity by 2015. We're spending half-a-billion dollars to do it. Our only purpose is to ensure that America continues to prosper with healthy children and families, a healthy workforce, healthy business, healthy industry, and a healthy future.

But we can't do it alone. Nor do we seek to. It takes a movement to move a mountain. So we've mounted a movement. It cuts across silos and sectors. It's not partisan or political. It fits the principles of corporate responsibility. It's good business policy. It's good public health policy. It saves lives and money. The public supports it.

It calls for a commitment from all of us:

- From individuals and families—where individual responsibility begins.
- From education—kids learn better if they eat healthy and are physically active.
- From health care—treating the sick.
- From public health – keeping us healthy to begin with.
- From all levels of government—because they control everything from budgets, to infrastructure, to schools, community design, safe streets and playgrounds.
- From business—which can't afford the lost productivity and exploding health care costs.

Finally, it calls for a commitment from your industry. Your role is totally up to you.

Let's be honest. Some in health care and public health see you as adversaries. We, however, see your industry stepping up in new and helpful ways. Some of your leaders who're with us today are strongly committed. Indra Nooyi of Pepsico, in a speech last year, said this: "The truth is that we can only solve this problem together. Nobody can do it alone. We sink or swim together." She's absolutely correct.



America hasn't looked like this in nearly a quarter century.

Obesity Trends* Among U.S. Adults



BRFSS, 1985

(*BMI ≥ 30 , or ~ 30 lbs. overweight for 5' 4" person)



No Data <10% 10%-14%



Source: Behavioral Risk Factor Surveillance System, CDC

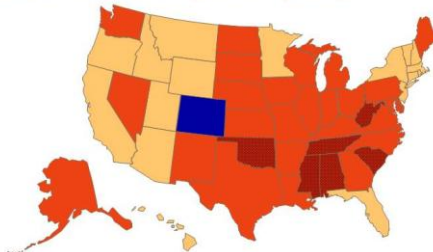
Here's what America looks like today.

Obesity Trends* Among U.S. Adults



BRFSS, 2008

(*BMI ≥ 30 , or ~ 30 lbs. overweight for 5' 4" person)



No Data <10% 10%-14% 15%-19% 20%-24% 25%-29% $\geq 30\%$



Source: Behavioral Risk Factor Surveillance System, CDC

This is not the America we want to leave to our children and grandchildren. It doesn't have to be this way. How America looks next year, and the year after that, and the year after that is up to us. All of us. Thank you.

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