



Robert Wood Johnson Foundation

{Childhood Obesity}

The Robert Wood Johnson Foundation (RWJF) is tackling one of the most serious threats to our nation's health: childhood obesity. Our goal is to reverse the epidemic by 2015.

In 2007 the Foundation committed at least \$500 million over five years to advance our efforts in the field—the largest prospective investment ever made by RWJF.

Today nearly one-third—25 million—of the young people in this country are overweight or obese, placing them at heightened risk for heart disease, type 2 diabetes and other debilitating diseases. Some experts predict that, unless this epidemic is reversed, the current generation of young people may be the first in American history to live sicker and die younger than their parents' generation.

While parents are the most important influencers of their children's eating and physical activity habits, the Foundation recognizes that public policy changes are needed to support parents' efforts—especially during the school day when children are beyond their parents' direct reach. RWJF places special emphasis on creating healthier environments for children at greatest risk for obesity: African-American, Latino, Native American, Asian-American and Pacific Islander children and those living in lower-income communities.

For these reasons, one of RWJF's key goals is to improve state policies on nutrition and physical activity in schools—to benefit all children and teens. We have initiated and supported a variety of programs to advance evidence, action and advocacy on this front.

Our investments in *Active Living Research*, *Healthy Eating Research* and *Bridging the Gap* support studies to build the evidence base and increase understanding about what works to prevent childhood obesity. We place special emphasis on analyzing how school wellness policies affect children's physical activity levels and dietary habits so we can identify and promote strategies that generate the greatest impact. Foundation-sponsored research also has documented that a shortage of safe places



to play in underserved communities—as well as limited access to fresh and affordable food—creates additional obesity risk for low-income and minority children. This growing body of evidence guides policy action for reversing the obesity epidemic.

The Alliance for a Healthier Generation's Healthy Schools Program, an important RWJF partner, seeks to improve nutrition, increase physical activity and promote wellness for students and staff in schools across the nation. After little more than a year, the Alliance's efforts to change school environments are yielding important results. In 2007 independent evaluators reported a 41 percent reduction in beverage calories shipped to schools—a direct and tangible result of the 2006 agreement the Alliance brokered with the nation's top beverage companies to reduce student access to high-calorie, low-nutrition drinks in school. Three states have taken the additional step of codifying Alliance nutrition guidelines: Oregon enacted both food and beverage guidelines as state law, while the Mississippi and Alabama education departments codified the beverage guidelines as official state education policy.

Motivated in part by the Alliance's demonstrated ability to drive large-scale change, the Foundation this year approved a \$20-million expansion of the Healthy Schools Program. The additional investment will enable the Alliance to provide direct help to an estimated 8,000 schools in states hardest hit by the obesity epidemic.

The National Governors Association's Healthy Kids, Healthy America program, which is supported by RWJF and the Centers for Disease Control and Prevention, also encourages state-level policy change. This program provides states with ideas and resources they can use to change the underlying social dynamic that contributes to poor health and childhood obesity.

Healthy Kids, Healthy America has three primary goals:

- To motivate and guide action by governors and senior state leaders to increase physical activity, improve nutrition and prevent obesity among America's children;
- To help create a state vision or policy action plan for advancing or accelerating childhood obesity prevention initiatives in each state; and
- To encourage state leadership by engaging in partnerships with the private sector to promote policy and social change in schools and community settings, with the ultimate goal of improving children's health.

Fifteen states received grants through the Healthy Kids, Healthy America program to establish childhood obesity prevention programs, most of which focused on school-based interventions.

In 2007 at least 16 states enacted new laws aimed at improving nutrition standards for school breakfasts and lunches or limiting vending machine availability. Eight additional states passed legislation to improve physical education in schools¹.

¹ *New Mexico and Oregon enacted laws related to both physical education and nutrition in schools.*

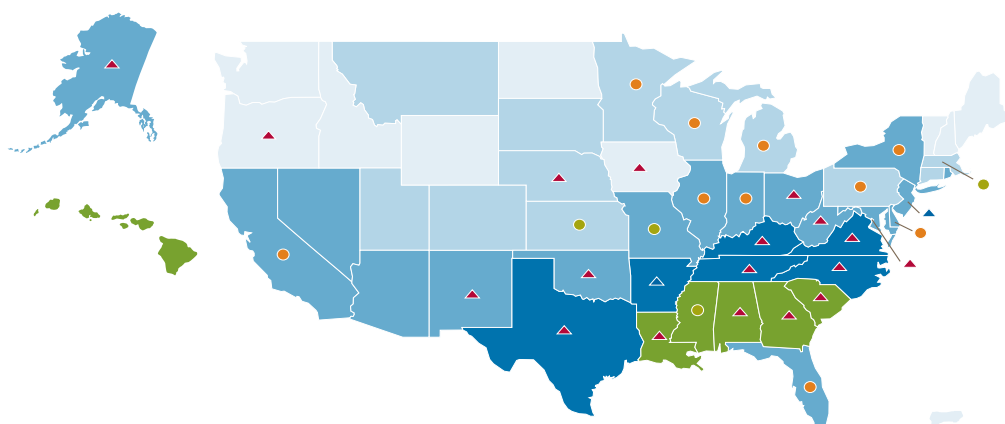


Also, 18 states established commissions, task forces or study groups to develop recommendations for preventing childhood obesity. Most are scheduled to report their findings during the first six months of 2008.

RWJF will continue working with states, municipalities and school districts to develop comprehensive solutions to the childhood obesity crisis. Each year, the evidence base validating promising approaches grows stronger, enabling RWJF and others to provide clearer and more specific guidance to policy-makers and community activists throughout the nation. In 2008 the Foundation will accelerate its outreach efforts and expects to see even more changes at the state and local level that encourage healthy eating and physical activity for all children and families, especially those at greatest risk for obesity and related harms.

For additional information about our initiatives and objectives, visit www.rwjf.org/obesity.

Childhood Obesity Risk and Participation in the Healthy Schools Program



Percentage of Census Tracts in States Predicted to be at Above-Average Risk of Obesity

- | | |
|-----------------|---|
| ■ Less than 10% | ● Original participant in the Healthy Schools Program |
| ■ 10 to 25% | ● Partner-funded original participant |
| ■ 26 to 45% | ▲ Expansion participant |
| ■ 46 to 60% | ▲ Original participant scheduled for expansion |
| ■ More than 60% | |

Source: Census Tract Analysis by the Urban Institute.