

Review of U.S. Government
Programs and Resources
Aimed at the Prevention of Childhood Obesity:
A Bibliographic Essay

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Introduction

To understand the government's focus and attention on childhood obesity in the U.S., one needs to know some history on findings concerning obesity as a human condition. The U.S. medical community began to notice increases in deaths due to cardiac disease and other conditions that would seem otherwise preventable in our privileged modern society. A connection was made between obesity and hypertension with a higher risk for coronary heart disease and other conditions (Mallick, 1983, Office of the Surgeon General, 2010). However, as the medical community began to draw attention to the increase in obesity findings within the U.S., a more alarming trend was discovered amongst the children of America. By 1999, it was estimated that 61 percent of American adults and 13 percent of American children were considered obese (Office of the Surgeon General, 2001). By 2001, there were nearly double as many obese children as there were in 1980 (Office of the Surgeon General, 2001). Concerned for the current and future health of its citizens, the U.S. Government began to seriously address this issue by raising public awareness, increasing research, creating initiatives designed to assist parents and schools and utilizing existing programs that tie in to physical activity and nutrition guidelines. The eventual focus on this crisis has been to prevent obesity in children and adolescents by educating and encouraging parents, teachers and children themselves to learn healthy eating habits and increase physical activity.

This essay is broken up into two sections. First, a history of the development of government programs aimed at the prevention of childhood obesity and reduction in current rates. Second, a review of the current government programs available to assist parents, schools and children.

These include government information web sites, resources and initiatives that are aimed at assisting citizens of the U.S. and specifically children to be aware of a healthy and active lifestyle in order to prevent obesity. Every effort was made to include all government sponsored initiatives and some government recommended non-government organization websites as well. There will certainly be more non-government organization resources not mentioned in this essay that are helpful to those interested in combating childhood obesity and readers are encouraged to pursue research of those non-government programs.

Methodology

I began my research on the government's initiatives and available information concerning childhood obesity by searching the medical and health related government agencies – the Centers for Disease Control (CDC), Health and Human Services (HHS) and the National Library of Medicine (NLM) and National Institutes of Health (NIH). I then researched in the nutrition related government agencies of the Food and Drug Administration (FDA) and the U.S. Department of Agriculture (USDA). I utilized Science.gov and the U.S. Department of Education to locate links to web pages and articles concerning childhood obesity. I also utilized USA.gov, both its search engine and its list of U.S. departments and agencies to find additional government programs and web pages and the Whitehouse website to find links on the First Lady's *Let's Move!* program, the President's Council on Fitness, Sports and Nutrition and press releases related to initiatives to combat childhood obesity. For current FDA regulation information on food labels, I utilized Regulations.gov. For historical information, I searched the FDsys for Executive Orders and Public Papers of the Presidents. Finally, I searched in both ERIC and in Rutgers databases for historical medical information concerning obesity and its rise in concern both in the medical community and in the political arena.

For the purpose of this essay, in addition to web pages and programs, I reviewed press releases, committee reports, memoranda, executive orders, presentations, blog entries, research reports and studies, brochures, proposed guidelines, previous clinical trial proposals, public service announcements, and government publications. I did not review specific legislation or bills related to any of the above actions and initiatives as I felt that though they relate to this topic, they are separate from the evaluation of the government resources available to the public. I did, however, research on Regulations.gov and in FDsys for information on the current FDA proposal to update the food nutrition labels.

A History of Program Development

As far back as 1956, when President Eisenhower created the President's Council on Youth Fitness after concern was raised in a 1953 article that American students were losing muscle tone, the government has been concerned with the lack of physical activity in America's youth (President's Council on Fitness, Sports & Nutrition, 2016). However, in 1996, the Surgeon General's report on Physical Activity and Health was the first Surgeon General's report on physical activity with only one mention of obesity in the entire report. It was prepared with a collaboration of agencies that are still working together today on the reduction of childhood obesity levels in the U.S. It wasn't until two years later, that a symposium on Childhood Obesity was held in 1998 with opening remarks given by then Surgeon General Dr. David Satcher who referred to childhood obesity as an epidemic. In 2001, Dr. Satcher delivered *The Surgeon General's Call To Action To Prevent and Decrease Overweight and Obesity*. This document is the first to address specific areas that government programs can target to address childhood obesity. This was the first government publication to focus on the measurement of body mass, the economic consequences of obesity, the disparities in community numbers and

racial backgrounds of adults and children in the obese range and to suggest actions for schools, communities, media and creating a national action plan. Dr. Satcher was extremely focused on the government taking action with education and food nutrition programs in schools as methods of prevention of childhood obesity. Although it is over 14 years old, his *Call to Action* is still a commendable resource on community sourcing and agency collaboration.

In the following year, President Bush issued two executive orders; one to promote personal fitness and the other to expand the President's Council on Physical Fitness and Sports into an advisory role to the President and to the Secretary of Health and Human Services (HHS). President Bush called on the Departments of Agriculture, Education, HHS, Housing and Urban Development, Interior, Labor, Transportation and Veterans Affairs to evaluate their role in regards to the topic of physical fitness and propose actions on how they can provide programs or regulations, whether existing or newly created, to the public for the promotion of physical fitness. President Bush also launched the HealthierUS initiative in 2002 which included several programs focused on nutrition especially that of "promoting nutrition curriculum and education in our schools" (Office of the Press Secretary, 2002). This is the first effort made by the government to reach children, six years after the Surgeon General announced childhood obesity as an epidemic.

In 2003, the Surgeon General delivered a statement in testimony before the subcommittee on Education Reform in which he draws attention yet again to the childhood obesity epidemic (Carmona, R.H., 2003). In this statement, he provides statistics that the rate of children who were overweight had more than tripled since the 1960's and further states that "nearly three out of four overweight teenagers may become overweight adults" (Carmona, R.H., 2003). Since the 1998 symposium referenced above, these are the first steps taken to focus specifically on

children. Over the next two years, initiatives would address parents and communities with assistance on how to make healthier choices. For the first time, some of these initiatives were available in Spanish. The major program We Can! (Ways to Enhance Children's Activity and Nutrition) was launched in 2005 by the National Institutes of Health (NIH). We Can! was the first government initiative to directly address childhood obesity and to acknowledge something more than nutrition education in schools was needed.

By 2007, the food pyramid had been updated by the Department of Agriculture (USDA) to become MyPyramid and product nutrition labeling had been modified to include trans fats by the Food and Drug Administration (FDA). However, with still increasing numbers of children who are obese, President Bush released a new fact sheet after meeting with executives from industries who advertise to youth. The fact sheet announced that HHS was partnering with Dreamworks Animation to launch an ad campaign using the animated character Shrek to encourage children to be physically active for one hour a day. Unfortunately, this campaign was questionable as to its effectiveness for helping reduce childhood obesity. It used the same character that was simultaneously promoting a high sugar cereal and a high fat snack (Horovitz, Bruce, 2007).

Much of the partnering that the government encouraged with food and entertainment industry marketing representatives can be called into question. All of the government programs are working with the newly published *Dietary Guidelines for Americans 2005* created in collaboration by HHS and USDA and updated every five years under the National Nutrition Monitoring and Related Research Act of 1990 (Office of Disease Prevention and Health Promotion, 2016). This publication of the dietary guidelines promotes vegetables, fruit, whole grains and milk products (U.S. Department of Health and Human Services and the U.S. Department of Agriculture, 2005). The majority of food industry representatives listed in the

fact sheet did not offer any food product recommended in the *Dietary Guidelines* (Office of the Press Secretary, 2007).

In 2010, two years into a new administration, there were many changes. In January, the Surgeon General released *The Surgeon General's Vision for a Healthy and Fit Nation 2010* referring back to Dr. Satcher's *Call to Action* from 2001. In it she states she will strengthen and expand on Dr. Satcher's recommendations. At the time *Vision for a Healthy and Fit Nation* was written, nearly one in three children was either overweight or obese (Office of the Surgeon General, 2010). Surgeon General, Dr. Benjamin, again calls attention in her 2010 *Vision for a Healthy and Fit Nation* to the disproportionate rates of obesity and reports that 29% of non-Hispanic black teenagers are obese vs. 17.5% of Hispanic teenagers and 14.5% of non-Hispanic white teenagers. She addresses the importance of breast feeding and creating healthy child care settings, recognizing our changing family life with often both parents working, in addition to laying out action for childcare programs, schools and communities.

In February of that year, President Obama issued a Memorandum establishing the Taskforce on Childhood Obesity and setting a goal to end the epidemic of childhood obesity by the year 2030; one generation later. The taskforce consists of the Secretaries of many different agencies but is under the administration of HHS. In May of 2010 the Taskforce released its Action Plan with measurable goals broken down into 5 specific subjects: early childhood, empowering parents and caregivers, healthy food in schools, access to healthy, affordable food and increasing physical activity with 11 to 17 actions for each area. The 98 page report, *Solving the Problem of Childhood Obesity Within A Generation*, presents a total of 70 recommendations that involve either federal, state or private sector action with the overarching goal of reducing the rate of

childhood obesity to 5% by the year 2030 (White House Task Force on Childhood Obesity, 2010).

Also in February of 2010, First Lady, Michelle Obama launched the *Let's Move!* campaign. Her campaign targets parents and schools as well as chefs and community leaders and it encompasses all of the government agency programs available. In June, the President's Council on Physical Fitness and Sports added "Nutrition" to its name and its mission. And a few months later, President Obama announced September as the first National Childhood Obesity Month.

At the beginning of 2011, the 2010 Dietary Guidelines were released. This version gives tips to incorporate the guidelines into every day life such as drinking water instead of high sugar drinks, eating less and avoiding larger than needed portions, making half the plate fruits and vegetables. They have now been updated to the 2015 – 2020 Dietary Guidelines which include physical activity guidelines as well. In June 2011, MyPlate replaced MyPyramid as the USDA tool for determining appropriate portions of dietary food groups. This change marked a need to simplify the message of healthy eating and provide direct guidelines on portion control. The most recent government activities on childhood obesity have been through the Let's Move! initiative discussed later in this essay.

Current Research and Prevention Government Online Resources

CDC – The CDC was one of the first government agencies to address childhood obesity. On the home CDC site page, under its Healthy Living section, there are pages entitled *Overweight and Obesity*, *Healthy Weight*, *Nutrition* and *Physical Activity*. There is also a separate division within the CDC entitled *Division of Nutrition, Physical Activity and Obesity* which acts as a portal linking the user to the above pages and provides a special page on programs and

initiatives, including the *Childhood Obesity Research Demonstration Project (CORD)* which is discussed under this essay's Programs and Initiatives section.

The *Overweight and Obesity* page has a special page for *Childhood Overweight and Obesity* with sections on facts, statistics (from 2011-2012), definitions, and causes and consequences. The page on *Healthy Weight* has separate sections for children and teen's Body Mass Index (BMI) providing links to the *CDC BMI Calculator* and growth charts with an in-depth description of BMI and its importance in overall health. Other methods of calculation are briefly touched upon, which can be a controversial topic, but emphasis is placed on the overall health of a child having an appropriate weight range for his/her height. There is a separate section for schools to use as a guide when measuring students' BMI to ensure respect for the student and the student's privacy.

The *Healthy Weight* page also has *Tips for Parents* which outline the concerns and risks for childhood obesity and provide healthy guidelines on nutrition and physical activity. The page on nutrition has links to the Office of Disease Prevention and Health Promotion's (ODPHP) *Dietary Guidelines* which are published every five years and to the publication, *The CDC Guide to Strategies to Increase the Consumption of Fruits and Vegetables*, neither of which are geared toward children. There are however, links to interesting reports such as the progress of children eating more fruit but not vegetables and some states showing a decline in childhood obesity in lower income pre-school children. The *Physical Activity* page has a section specific to children providing information on how much activity they need with tips on how to get children active. There are links to reports on strategies to increase physical activity among youth dating from 2012 and physical activity guidelines from 2008.

The *Healthy Schools* page is packed with data from 2013 and 2014 surveys. No 2015 data

was available at the time of this review. This page is full of information on healthy eating and includes links to the publication *Parents for Healthy Schools: A Guide for Getting Parents Involved from K–12* and *School Health Guidelines to Promote Healthy Eating and Physical Activity*. The 2015 *Parents for Healthy Schools: A Guide for Getting Parents Involved from K–12* is designed to be used by school organizations that work with parents such as the PTO or PTA. The 2011 *School Health Guidelines to Promote Healthy Eating and Physical Activity* were designed to provide schools with nine guidelines based on research, literature review and best practices.

Bam! Body and Mind is the CDC's site for kids. It provides some online games to learn how to make healthy food choices along with outlined tips and facts. The games are geared more toward an elementary school level. The reading level of the presented information and the delivery of the information are geared more toward teens. There are some good tips for teens on how to increase physical activity but the overly placating graphics on the site may turn teens away.

Overall, the CDC site provides extensive data and information but does not link to *Let's Move!*, the most comprehensive government program currently running. There is a link in the Division of Nutrition, Physical Activity and Obesity portal to the *Let's Move! Salad Bars to Schools* program but no other mention of the *Let's Move!* initiatives were noted. The CDC site does link to *WeCan!* which was last updated in 2013. The CDC is still the cited source for information within *Let's Move!* and provides factual and reliable information on childhood obesity.

NIH – The National Institutes of Health provide a multitude of information on childhood obesity through fact sheets from *Medline Plus*, the *National Institute of Diabetes and Digestive*

and Kidney Disease (NIDDK), the National Heart Lung and Blood Institute (NHLBI) and the Eunice Kennedy Shriver National Institute of Child Health and Human Development. There are also articles on childhood obesity obtainable through *PubMed Health* and *PubMed Central* in the *National Library of Medicine*. This resource is plentiful in facts, statistics and articles on studies concerning the topic of childhood obesity. The NIH also produces publications such as *Take Charge of Your Health: A Guide For Teenagers* published in 2012 that provides facts and tips to teenagers recognizing their need for independence and decision making ability. There is an abundance of research on childhood obesity being done through the *NIH Obesity Research Task Force* made up of twenty-six institutes. The *NIH Obesity Research* website also provides links to NCCOR and ClinicalTrials.gov while providing *RePORT* (Research Portfolio Online Reporting Tools) which “provides access to reports, data, and analyses of NIH research activities, including information on NIH expenditures and the results of NIH supported research” (National Institutes of Health, 2015).

Office of Disease Prevention and Health Promotion (ODPHP) – ODPHP provides online information on childhood obesity through HealthFinder.gov, Health.gov and HealthyPeople.gov. This government site provides some basic tools and information to spread the word on childhood obesity including a toolkit on Childhood Obesity Awareness Month. It’s the ODPHP’s role to inform the public on health issues and to connect people to information that will help them stay healthy. At the front of HealthFinder.gov are links to Parenting - Nutrition and Physical Activity with guidelines on how to help your child stay at a healthy weight and Health.gov prominently displays the dietary nutrition guidelines and physical activity guidelines published by HHS.

Kids.gov – Kids.gov is a portal designed by USA.gov for children to have a safe site to learn by playing games, watching videos and following links to other sites. There are activities, games and videos specifically on exercise, fitness and nutrition with links to other appropriate government pages for kids to learn about nutrition, recipes and fun forms of exercise. Basically, it is a portal to many of the great site pages and videos specifically aimed at kids from the programs and initiatives listed in this essay as well as organizations and approved videos from outside the government. It would be nice if it also provided access to some of the school program lesson plans that are offered through the USDA Food and Nutrition Service (FNS) programs such as *Grow It, Try It, Like It!* discussed in the USDA program section below.

Agency for HealthCare Research and Quality – This government agency working on evidence-based research to improve healthcare, provides news briefs and reports on childhood obesity studies and methods of prevention. It has published the 2013 *Childhood Obesity Prevention Programs: Comparative Effectiveness Review and Meta-Analysis* which is based on research conducted by the Johns Hopkins University Evidence-based Practice Center. This report strongly favors school-based interventions.

A Review of Current Initiatives and Programs

White House Initiatives

Let's Move! - The *Let's Move!* initiative is the most recent addition to the list of government programs aimed at ending childhood obesity. It is also the most comprehensive. It promotes the First Lady's passion for gardening and fresh food plus the importance of good nutrition, physical activity and smart choices that children need to learn how to make for themselves. It addresses healthy eating and fitness from pregnancy through adolescence. The program provides information and suggested actions for parents, schools, chefs, community leaders, community

officials, healthcare providers and kids. This initiative aims to simplify the tools and recommendations available to parents and schools. The site spells everything out – it doesn't just provide warnings and facts and assume that parents will know how to address these issues on their own. There are specific suggestions and actions for every level such as providing shopping lists and weekly meal menus, gardening guides or linking to resources for activities.

Its website also acts as a portal to the other agency resources such as the USDA's *MyPlate* food group and portion tool, the *MyPlate SuperTracker*, the *Dietary Guidelines for 2015*, and the *HealthierUS School Challenge* or the CDC site pages for *Healthy Schools* and *Overweight and Obesity* including the *BMI Calculator*. Unfortunately, some of these links are not set up properly. The site also connects users to *MyPlate* inspired recipes using a Pinterest page that holds recipes identified by several food partners which replaced previous links to the actual sponsor home page which were cumbersome and required the user to search.

The program spreads out to schools and communities to provide motivation, grants, contests and challenges and has grown to include specialty sections such as:

Let's Move! Child Care

Let's Move! in Indian Country

Let's Move! Active Schools

Let's Move! Cities, Towns & Counties

Let's Move! Outside

Let's Move! Museums & Gardens

Let's Read! Let's Move!

Let's Move! Salad Bars to Schools

Chefs Move to Schools

Each of the above special branches of the *Let's Move!* initiative focuses government resources on special projects that help to get children moving and eating healthy while partnering with non-government organizations, partners and sponsors. Many of these initiatives are run by organizations outside of the government partnering with the *Let's Move!* campaign such as the National League of Cities and Shape America.

Through this initiative, the government is making use of as many resources as it can beyond its own agencies to promote awareness of the concern for childhood obesity and elevate the discussion to action plus involve children and schools in as many ways as possible. For instance, Sesame Street is helping to promote fresh produce and the *Let's Move!* website connects to the Sesame Street site's page which provides a tool kit to parents for *Healthy Habits For Life*. Also, the American Heart Association is working with this campaign to "create environmental changes needed to reverse obesity" by creating an online social network and providing "free communications, tools and resources to registered Leaders who are building healthy communities and policies for kids" (American Heart Association, N.D.). The goal of *Let's Move!* is not just to promote and share information but to create programs and events at the local level and make it as easy as possible for citizens of all ages to take action.

Partners and sponsors for this campaign are more appropriate to children's health and fitness than in previous government efforts. They include Sesame Street, Kaiser Permanente, NBA FIT, the Robert Wood Johnson Foundation, NFL Play 60, UNICEF Kid Power, the National PTA, Team FNV and the Produce Marketing Association. Where possible, *Let's Move!* takes advantage of new technology and utilizes Pinterest, social networks, blogs and YouTube videos. The *Let's Move!* initiative may be Michelle Obama's project during this government administration, but it has spread out to the private sector and non-government, non-profit

organizations to hopefully have a permanent effect.

President's Council on Fitness, Sports & Nutrition – As stated in the History section, this program has been in force since 1956 and it's most recent modification was to add "Nutrition" to its mission to "engage, educate, and empower all Americans to adopt a healthy lifestyle that includes regular physical activity and good nutrition. The Council plays a key role in the development of the administration's programmatic priorities, outreach, and awareness efforts to improve the health and quality of life for all Americans" (President's Council on Fitness, Sports & Nutrition, 2016). Programs pursued by this council include; *Let's Move!*, the *Presidential Youth Fitness Program* run in America's schools, *I Can Do It, You Can Do It* (ICDI) which has been implemented in nine sites to focus on children and adults with disabilities, the *PALA+* program which is a six week personal challenge to physical activity and healthy eating, *Joining Forces* which focuses on service members and their families and the *President's Challenge Award* program in which all citizens can participate.

USDA Food and Nutrition Service (FNS) Programs

The FNS provides programs on child nutrition in schools, healthy child care and adult care food programs, supplemental nutrition programs and special programs such as Farm to School. For this essay, the following initiatives were chosen as they specifically focused on prevention of childhood obesity in addition to promoting good health.

MyPlate - *MyPlate* is the new USDA tool which replaces the well known "Food Pyramid." *MyPlate* is designed to guide children and adults on choices within food groups as well as help with portion control and it is available in 20 different languages. To accompany the new tool, the USDA also has the *Choose MyPlate.gov* website. This site also connects users to weekly menus, recipes, tips on healthy eating and exercise and in-depth information on food groups. Pus

the USDA developed the *SuperTracker* resource for users to track their daily food intake and physical activity. For the purposes of this essay, focus will be placed on the *Choose MyPlate for Children* and *Choose MyPlate for Students* sites.

Choose MyPlate for Children is divided into pre-schoolers and kids. For pre-schoolers the content is aimed at parents, providing growth charts, meal and snack pattern food plans with calorie intake guidance per age and even a guide for parents of picky eaters. For kids, there are recipes submitted by children, games, activity sheets, videos and music – all providing information and getting kids motivated. Teacher guides and snack guides are provided in both English and Spanish.

Choose MyPlate for Students is divided into teens and college students. For the teen age group, there is a separation of information for boys and girls with a connection to the NIH publication *Take Charge of Your Health: A Guide For Teenagers* reviewed in the NIH section above. For college students, the focus is on *MyPlate on Campus* which “is an initiative to get college and university students talking about healthy eating and working with their campus community to create ways for students to adopt healthy lifestyles that they can maintain during and beyond their college years” (U.S. Department of Agriculture, N.D). The site provides training and a toolkit plus resources provided in both English and Spanish and guidelines on how to use social media for this effort. There are only a few resources aimed at college students and the students are actually referred to some of the adult pages and tools.

What’s Cooking - The USDA *What’s Cooking USDA Mixing Bowl* site contains recipe tools and cookbooks. The *Recipes for Healthy Kids: Cookbook for Homes* and the *Recipes for Healthy Kids: Cookbook for Schools* are based on contest winning recipes offered by kids and teams of kids, teachers, school nutrition professionals and parents. These recipes are from kids

for kids and are recommended by the *MyPlate* program and the *Team Nutrition* program. What's Cooking also features the *Healthy Recipes from the Whitehouse to You* cookbook online which offers five recipes originally inspired by the *HealthierUS School Challenge* program.

Team Nutrition - *Team Nutrition* is a USDA initiative to “support the Child Nutrition Programs through training and technical assistance for foodservice, nutrition education for children and their caregivers, and school and community support for healthy eating and physical activity” (U.S. Department of Agriculture, 2016). Primarily, this program is targeted for schools and educators but in addition to nutrition training and information, there are guides for summer activities and snacks in both English and Spanish, links to *What's Cooking* recipes, and e-books that help educate children on the MyPlate tool. It offers an excellent guide to educators entitled the *SuperTracker Nutrition Lesson Plans for High School Students* which helps teachers educate teens on the USDA *SuperTracker* tool. This guide recognizes the independence of high school students and provides educators with specific lesson plans on how to motivate and encourage teens to use the tool. Also available to child care centers is the *Grow It, Try It, Like It! Nutrition Education Kit Featuring MyPlate* which is a seven book program to introduce pre-school children to fruits and vegetables and how they grow. This program offers lessons, activities, planting activities, family recipes and home activities plus a CD-ROM and DVD to supplement the ongoing story that helps to teach the above. *Team Nutrition* also works with the *HealthierUS School Challenge* and *Chefs Move to Schools* initiatives reviewed separately.

HealthierUS School Challenge – The *HealthierUS School Challenge* is “a voluntary certification initiative recognizing those schools enrolled in *Team Nutrition* that have created healthier school environments through promotion of nutrition and physical activity” (United States Department of Agriculture, Food and Nutrition Service, 2016). This program awards

monetary incentives ranging from \$500 to \$2000 to schools that modify their lunch programs to reflect changes inspired by *Team Nutrition* and *Let's Move!* and meet specific criteria and objectives. The hope is to incent schools to go above the nutrition requirements and challenge themselves to offer nutritious, healthy food that children will love.

CDC Programs

Childhood Obesity Research Demonstration Project (CORD) - This CDC run program provided grants appropriated from the Affordable Care Act to community research aimed at childhood obesity prevention. The research is focused on combining public health interventions in the school system and early child care settings with pediatric health care intervention and the community to see if child obesity in low-income areas can be reduced. There are currently six communities involved. “Supporting underserved children ages 2 to 12 years, and their families, who are eligible for the Child Health Insurance Program (CHIP), the Childhood Obesity Research Demonstration (CORD) uses the Obesity Chronic Care Model as a conceptual framework, and builds on an array of existing federal and non-federal initiatives” (NCCOR, 2014). This project concluded in 2015 and the CDC along with the grantees is synthesizing its findings to make recommendations on how to eliminate and prevent childhood obesity.

NIH Programs

We Can! – The *We Can!* Program is the *Ways to Enhance Children's Activity and Nutrition* national program focused on children ages 8 to 13. This program was launched in 2005 and has not been updated since 2013 however; the site pages are still available as resources to parents.

FDA Programs

Nutrition Facts Label – The FDA introduced the *Nutrition Facts Label* over twenty years ago. The label is designed to help consumers know what they are eating in terms of calories,

sugar, fats, and other dietary intake so they may make informed choices on what they eat. While this does not specifically focus on childhood obesity, parents rely on the *Nutrition Facts Label* to help them make choices for their children's diet. Recently, the FDA has proposed changes to the label that would require companies to include if there are added sugars as well as levels of potassium and vitamin D. Companies would no longer be required to report levels of vitamins A and C nor will the calories from fat be included. The design of the label would also change to focus and simplify the serving size and servings per container information, total calories per serving and the percentage daily value for each listed item. While these proposed changes were open for comment, the FDA proposed a second change to the label that would require a percentage daily value amount for added sugars. The time for comments on both proposed rules has closed and no further updated information has been posted on the proposed rules status.

Non-Government Programs

Partnership for a Healthier America (PHA) – PHA was launched at the same time and in conjunction with *Let's Move!*. This non-partisan, non-profit organization works with the private sector to the same end goal as *Let's Move!* It is under the leadership of First Lady Michelle Obama, Senator Cory Booker, former Senator William Frist and former COO of the Juvenile Diabetes Research Foundation, Lawrence A. Soler. It partners with private sector companies to provide opportunities to children stay active and to reach the youth of today through music and media campaigns.

Alliance For a Healthier Generation – The Alliance for a Healthier Generation is a non-profit organization created by the American Heart Association and the Clinton Foundation to address childhood obesity. The Alliance runs programs for schools and collaborates with private sector companies to engage them in voluntary commitments to healthier food choices. It

also provides facts and information as well as access to an interactive map of the U.S. which informs the user on specific childhood obesity facts for the state and what programs are being run by the Alliance in that state.

The National Collaborative on Childhood Obesity Research (NCCOR) – The NCCOR is a collaborative group consisting of the CDC, the NIH, the Robert Wood Johnson Foundation (RWJF), and the USDA. They are working together and combining funding to address the problem of childhood obesity in America. “NCCOR focuses on efforts that have the potential to benefit children, teens, and their families, and the communities in which they live. A special emphasis is put on the populations and communities in which obesity rates are highest and rising the fastest: African-Americans, Hispanics, Native Americans, Asian/Pacific Islanders, and children living in low-income communities” (National Collaborative on Childhood Obesity Research, 2014). The NCCOR site offers the *Catalogue of Surveillance Systems* for free access to 100 publically available datasets pertaining to childhood obesity. It also provides access to the *Measures Registry* which “is a searchable database of diet and physical activity measures relevant to childhood obesity research” and the Registry of Studies which “is a searchable database of community-based studies assessing known factors impacting rates of childhood obesity” (NCCOR, 2014).

Conclusion

Government response to the childhood obesity epidemic in the U.S. has been slow to start but now many efforts are being made in hopes to change children’s and parents’ behaviors and mindsets through school and community programs. Finally, there is an emphasis on children and more specifically, children in communities that are disproportionately higher in childhood

obesity incidence. The school and child care settings have been recognized as key locations to introduce healthy nutrition and nutrition education as well as increase physical activity.

The government is also attempting to affect the private sector food industry by creating partnerships in many of these programs outlined above. Are these partnerships and initiatives enough to affect the food industry or the American public's behaviors and eating habits? The recent FDA proposed changes to the Nutrition Facts Label has met with some resistance from the food industry (Watson, 2015). "The majority of public comments the FDA received supported the proposed change to label added sugar. A majority of these supporting comments came from scientists and public health experts, while a majority of comments opposing the label came from the food industry" (Union of Concerned Scientists, 2015). If the proposed regulations are implemented, it will be interesting to see just how much of an impact information on added sugar will have on consumers. Also, the focus on the percentage of sugar the average American consumes may alter buying patterns. This "conflict of interest" was the issue raised earlier in the history section of this essay in reference to earlier initiatives on childhood obesity partnering with companies offering high sugar beverages and cereals, such as General Mills and Coca Cola.

It also raises the question, what research is being done by the government on corn sugars and genetically modified organisms (GMO) added in many of American foods? Recently there has been public push back on added high fructose corn syrup, also a GMO, which has been voluntarily removed from many products by the manufacturer resulting in the label "no high fructose corn syrup." How have these added corn sugars affected childhood obesity rates?

With the *Let's Move!* program, all of the USDA programs and the Dietary Guidelines placing emphasis on fresh fruit and vegetables, the government will be expected to back up their dietary recommendations and additional questions may be raised where GMO's and added corn sugars

fit into a healthy diet. America is at a turning point with eating healthy. Do American's follow the government's recommendations and guidelines or do they continue to listen to the food industry's marketing?

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