

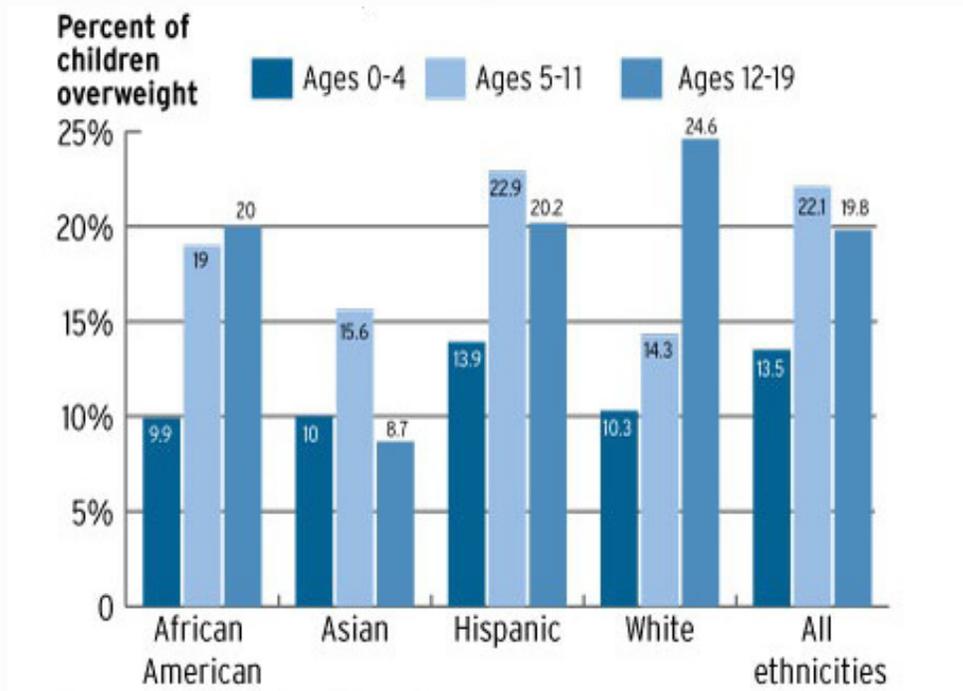
Childhood Obesity in Orange County: More Needs to be Done

1. SUMMARY

Childhood obesity in Orange County continues to be an epidemic. If this growing epidemic is not addressed, some have suggested, the current generation of U.S. children will be the first to have a shorter average lifespan than their parents.¹ Over the past 35 years – less than half a lifetime – the percentage of American adolescents who are obese has more than tripled, rising from 5 percent to almost 18 percent.²

These national statistics closely mirror obesity statistics for Orange County. In taking a close look at childhood obesity in Orange County, the Grand Jury found that this problem affects all sectors of society regardless of race, education or income level.³ While lower education and income levels can exacerbate this problem, there are other core issues that must be addressed if Orange County is to make meaningful inroads into reversing this trend. (See Figure 1.)

Figure 1. Overweight In Orange County
The percent of children with weight greater than the 95th percentile on the Pediatric Growth Chart varies by age and ethnicity/race in O.C.
Data is from 2007.



Source: Orange County Register graphic, based on data from the 15th Annual Report on the Conditions of Children in Orange County, 2009.

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2. REASON FOR INVESTIGATION

With the percentage of obese American adolescents tripling in a generation, the Orange County Grand Jury decided to review efforts of the County of Orange and the Orange County Health Care Agency (OCHCA) to combat the problem and to determine the effectiveness of the measures. The Grand Jury study sought to determine whether Health Care Agency budgeting for control of childhood obesity is adequate.

3. METHOD OF INVESTIGATION

During this study, the Grand Jury reviewed the following sources:

- Publications.
- Websites.
- Prior Grand Jury Reports.
- Documents received from Orange County Health Care Agency.
- San Diego County Childhood Obesity Action Plan.
- 14th Annual Report on the Conditions of Children in Orange County, 2008.
- 15th Annual Report on the Conditions of Children in Orange County, 2009.

Grand Jury members attended meetings of the Nutrition and Physical Activity Collaborative (NuPAC) and Orange County Champion Moms.

Interviews were conducted by the Grand Jury with Orange County Health Care Agency Public Health Services officials and others.

4. BACKGROUND AND FACTS

Prior Orange County Grand Juries have reported on this important topic, the most recent being the 2008-2009 Grand Jury. The focus of that Grand Jury study was on Orange County schools and their efforts to comply with state and federal guidelines pertaining to meals and exercise. In reviewing the progress made, the 2009-2010 Grand Jury found

that most County schools are in compliance. Currently each school district develops its own program to address issues related to overweight children. However, there is an opportunity to make additional gains by developing a best-practices procedures manual that would apply to all schools uniformly.

4.1 Definition of obesity and overweight

Childhood obesity is a condition in which excess body fat negatively affects a child's health or well-being. The diagnosis of obesity is often based on Body Mass Index. A BMI of 25 to 29.9 is considered overweight, with 30 or above considered obese. BMI should be used as a guide, along with waist size, to help estimate the amount of body fat.⁴

4.2 Projected financial impact of childhood and adult obesity

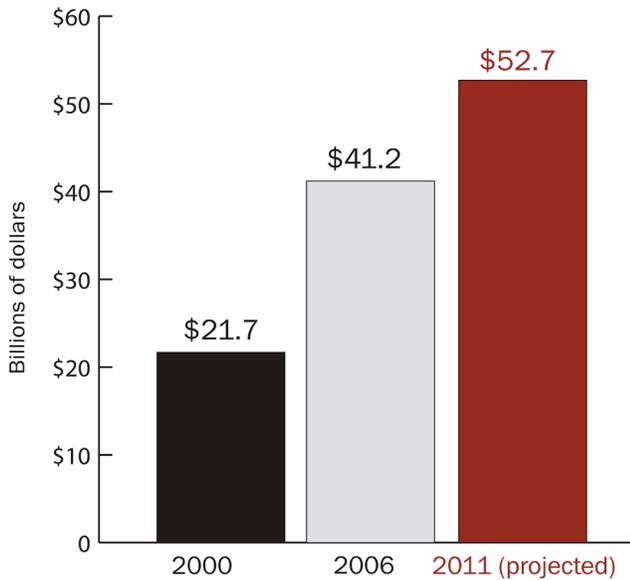
Overweight children are more prone to develop serious health problems. These problems may continue or develop during adulthood. There is a long list of diseases attributed, in whole or in part, to obesity. Children and adolescents who are overweight have a greater risk of developing Type 2 diabetes, asthma and orthopedic problems; they are more likely to have risk factors for cardiovascular disease (such as increased blood pressure and high cholesterol); and they are more likely to have behavioral problems and depression.

In addition, children and adolescents who are overweight are more likely to remain so as adults; with an estimated 75% of overweight adolescents remaining obese as adults.

According to a study of the statewide economic impact of obesity published in 2009, Orange County ranked second only to Los Angeles County in the economic costs of adults who are overweight, obese and physically inactive, costing Orange County an estimated \$3.3 billion per year. The cost of adult obesity for California was \$41.2 billion in 2006 and is projected to cost \$52.7 billion in 2011.⁵ (See Figure 2.)

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Figure 2. Costs of Overweight, Obesity and Physical Inactivity in California



Source: California Center for Public Health Advocacy

4.3 Causes of Childhood Obesity

Childhood obesity is the result of a combination of individual, social and environmental factors. These core issues include:

- Diet – Maintaining poor habits such as overeating and eating foods with a high-fat content.
- Sedentary Life Style – Physical inactivity.
- Genetics – Genes which control appetite and metabolism may also predispose children to obesity.

- Home Environment – Parents failing to make the right decisions to ensure that their children get enough physical activity and are eating nutritional meals in appropriate portions.
- Psychological Factors – Low self-esteem, stress, nervous condition and depression are some of the factors which may lead to over-eating.
- Medical Conditions – Certain conditions such as hypothyroidism, which is a hormonal cause of obesity.

4.4 Collaborative Efforts

Orange County Health Care Agency and its numerous programs, networks, workgroups and committees within Orange County are responsible for leading coordinated efforts and optimizing resources to decrease obesity. These groups are composed of administrators from various public agencies, including but not limited to Orange County Nutrition and Physical Activity Collaborative (NuPAC), school districts, Orange County Department of Education, and Public Health Foundation Enterprises (PHFE)/ Women, Infants and Children (WIC). (See Table 1.)

These administrative groups meet occasionally to discuss and update their numerous initiatives, obesity prevention plans, policies, strategies, etc. These groups of administrators and OCHCA attempt to coordinate the efforts of the numerous programs. However, with limited administrative resources available, OCHCA is unable to provide the required coordination to better use its limited funds. Furthermore, few if any of these groups meet directly with parents; therefore, little information reaches the home.

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Table 1. Partial List of Partners Collaborating with OCHCA and NuPAC

2 nd Harvest Food Bank of OC	OC Dept of Ed Network Coalition (cont):
4 th District PTA	Capistrano USD
American Cancer Society	Centralia SD
American Diabetes Association	Cypress SD
American Heart Assoc-Latino Programs	Garden Grove USD (pre-k)
American Lung Association	La Habra City SD
Boys & Girls Clubs in OC	Magnolia SD (pre-k)
Cal State University – Fullerton	Saddleback Valley USD
CalOptima	Westminster SD (pre-k)
Camino Health Centers – WIC	OC Head Start, Inc.
Children and Families Commission	OC Hunger Coalition
Children’s Hospital of Orange County	OC in Motion
City of Laguna Hills	OC Marathon/Canning for Hunger
Community Action Partnership of OC	Office of Congresswoman Loretta
Sanchez	
Dairy Council of California	Orange Unified SD
Disney GOALS	Planned Parenthood
Fullerton Collaborative	PowerPlay MD-OC
Huntington Beach Union High SD, Ocean	Project Access, Inc.
View SD, Westminster SD	Santa Ana Education Foundation
Irvine Unified SD	Santa Ana Unified School District
Kaiser Permanente	St. Jude Medical Center
Latino Health Access	KID HEALTHY Steps to Healthy
Mission Hospital	Collaborative
Newport-Mesa Unified SD	The Healthy Orange County (THOC)
OC Department of Education	Coalition
OC Dept of Ed Network Coalition:	THINK Together
Anaheim City SD	U.C. Cooperative Extension
Buena Park SD	YMCA of OC

Source: NuPAC Fact Sheet from September 2007 – August 2008 Year-End Report

One of the keys to controlling childhood obesity is getting the information into homes about how to prevent and overcome the problem. A parent workshop presented by Champion Moms addressed the importance of nutrition and physical activity. This program organized by the Health Care Agency’s Family Health Division was an excellent example of obesity prevention by directly involving parents.

Unfortunately, the Grand Jury learned of no other County-sponsored structured programs or regular meetings that directly involve parents in coping with childhood obesity. Apparently not enough is being done by Orange County government to extend or develop programs designed to acquaint parents with how to deal with childhood obesity and to understand its causes.

A commitment is lacking from county government to develop such anti-obesity programs and provide the resources to make them effective. Unless the County acts expeditiously, little or no improvement can be expected in efforts to reverse the childhood obesity epidemic.

4.5 Budget

Orange County is addressing the obesity problem through several programs jointly funded by state, federal and private foundation grants. The County’s budget for the Orange County Health Care Agency provides no funding that specifically targets childhood obesity. By depending almost entirely on grants (which are not guaranteed), Orange

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County in effect gives low priority to reducing childhood obesity.

During the Fiscal Year 2009-2010, OCHCA received grants from private foundations and the California Department of Public Health totaling \$6,615,067 to support healthy eating and physical

activity promotion. However, as with most grants, limitations are placed on the grant recipient as to how the money can be spent. (See Table 2.) With funding from County government, OCHCA could create and implement new programs or adapt current ones to directly involve parents.

Table 2. Summary of OCHCA Fiscal Year 2009-2010 Federal, State and Private Foundation Grant Amounts

Program	Program Description	Grant Amount
Women Infants Children (WIC)	WIC provides breastfeeding support, nutrition education and supplemental food.	\$5,396,740
Nutrition Network - Local Incentive Award	Elementary school youth are reached through multi-session classroom-based activities that encourage healthy eating. This program provides healthy eating messages at school cafeterias.	\$382,427
Nutrition Network - Regional Award	<p>Parent Empowerment Program: Partnerships are fostered between schools and organization in order to offer nutrition education classes to parents.</p> <p>Retail Program: Staff members conduct food demonstrations and work with grocery stores to encourage fruit and vegetable consumption among customers.</p> <p>Worksite Program: Healthy eating and physical activity breaks are encouraged at partner worksites.</p> <p>Nutrition and Physical Activity Collaborative (NuPAC): NuPAC convenes local providers of nutrition education and physical activity promotion. OCHCA staff provides the coordination with NuPAC.</p>	\$704,651
Healthy Eating Active Communities	Collaborative between OCHCA, Latino Health Access and the Santa Ana Unified School District aimed at reducing childhood obesity in the 92701 zip code.	\$131,249
Total		\$6,615,067

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4.6 Grant limitations

The state and federal agencies include limitations on how grant funds may be used. For example, a grant may specify that it is to be used in high food stamp usage communities. Another grant specification might allow use of funds only to persons whose income is below federal poverty level.

4.7 Grant Over-Reliance

In November 2009, OCHCA was one of 500 counties nationally competing for a portion of a \$353 million national grant. In March 2010, Orange County learned that its \$20 million grant proposal to be used to fight childhood obesity in the County was not selected.

The County had submitted a plan along with the grant application outlining how the grant money was to be used. Had the County been awarded the grant, this money would have gone a long way toward enhancing the coordination of existing programs as well as developing additional programs designed to address childhood obesity. The obesity problem still exists. The fight against childhood obesity is negatively impacted by the failure of this grant money to be awarded to Orange County. This over reliance on grant money will limit OCHCA's ability to implement those plans outlined in the grant application in addressing this growing epidemic. County government needs to make a commitment to be creative and aggressive in appropriating resources or we can expect to continue to lose ground in reversing this epidemic.

4.8 Commendation

The 2009-2010 Grand Jury commends and thanks the personnel of OCHCA for their assistance and cooperation during this study.

5. FINDINGS

In accordance with California Penal Code Sections 933 and 933.05, the 2009-2010 Grand Jury requires, or as noted, requests responses from each agency affected by the findings presented in this section. The responses are to be submitted to the Presiding Judge of the Superior Court.

Based on its investigation of childhood obesity in Orange County, the 2009-2010 Orange County Grand Jury has arrived at five principal findings, as follows:

- F.1 ***Lack of coordination:*** Orange County Health Care Agency currently is responsible for the coordination of all programs receiving grants to fight childhood obesity. OCHCA and groups of administrators attempt to coordinate the efforts of numerous programs. However, with limited personnel dedicated to childhood obesity prevention, OCHCA is unable to provide the required coordination to better use its limited funds.
- F.2 ***Grant limitations:*** The County receives federal and state grants that support programs to fight childhood obesity which contain conditions that restrict how funds may be used, thus limiting the effectiveness of the programs' efforts. For example, some children may be excluded because they are not in a group targeted by grant criteria, such as food stamp eligibility or being below federal poverty level.
- F.3 ***Over-reliance on grant funds:*** There is an over-reliance by the County on state and federal grants to address the obesity epidemic in children. There is no assurance that any grants will be awarded.
- F.4 ***Lack of parental involvement:*** Parental involvement is a crucial element in combating childhood obesity. Existing city and county programs, networks, workgroups and committees are composed of administrators

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from various public agencies, who meet periodically. Few, if any of these groups meet directly with parents; therefore, little information reaches the home.

- F.5 *Lack of comprehensive plans:* There is not a comprehensive plan which outlines all County efforts in place to address childhood obesity.

Responses to Findings F.1 through F.5 are requested from Orange County Health Care Agency.

Responses to Findings F.2, F.3, and F.5 are required from the Orange County Board of Supervisors.

6. RECOMMENDATIONS

In accordance with California Penal Code Sections 933 and 933.05, the 2009-2010 Grand Jury requires, or as noted, requests responses from each agency affected by the recommendations presented in this section. The responses are to be submitted to the Presiding Judge of the Superior Court.

Based on its investigation of Childhood Obesity in Orange County, the 2009-2010 Orange County Grand Jury makes the following five recommendations:

- R.1 *Lack of coordination:* The County needs to address the coordination gap which exists between all of the programs designed to address childhood obesity in the County. The necessary resources need to be appropriated to ensure centralized coordination by OCHCA of these programs. (See Finding 1)
- R.2 *Grant limitations:* The County should dedicate funding to address the childhood obesity epidemic across all demographic groups. (See Finding 2)
- R.3 *Over-reliance on grant funds:* The County should provide support through the use of general funds to assist OCHCA and its part-

ner groups in expanding their fight against childhood obesity. (See Finding 3)

- R.4 *Lack of parental involvement:* The County and OCHCA should create and implement new programs or adapt current ones to directly involve parents through regularly scheduled meetings designed to promote healthy children. (See Finding 4)
- R.5 *Lack of comprehensive plans:* The County and OCHCA need to create a comprehensive strategic plan which addresses and measures all efforts designed to fight the childhood obesity epidemic in the County. (See Finding 5)

Responses to Recommendations R.1 through R.5 are requested from Orange County Health Care Agency.

Responses to Recommendation R.2 and R.3 are required from the Orange County Board of Supervisors.

7. REQUIRED RESPONSES

The California Penal Code specifies the required permissible responses to the findings and recommendations contained in this report. The specific sections are quoted below:

§933.05

(a) For purposes of Subdivision (b) of Section 933, as to each grand jury finding the responding person or entity shall indicate one of the following:

- (1) The respondent agrees with the finding.
- (2) The respondent disagrees wholly or partially with the finding, in which case the response shall specify the portion of the finding that is disputed and shall include an explanation of the reasons therefore.

(b) For purposes of subdivision (b) of Section 933, as to each grand jury recommendation, the

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responding person or entity shall report one of the following actions:

- (1) The recommendation has been implemented, with a summary regarding the implemented action.
- (2) The recommendation has not yet been implemented, but will be implemented in the future, with a timeframe for implementation.
- (3) The recommendation requires further analysis, with an explanation and the scope and parameters of an analysis or study, and a timeframe for the matter to be prepared for discussion by the officer or head of the agency or department being investigated or reviewed, including the governing body of the public agency when applicable. This timeframe shall not exceed six months from the date of publication of the grand jury report.
- (4) The recommendation will not be implemented because it is not warranted or is not reasonable, with an explanation therefore.

8. APPENDIX

¹The National Academies Free Press (web page) http://www.nap.edu/openbook:.php?record_id=12746&page=7

²Health Experts Offer Action Steps Local Governments Can Use to Cut Childhood Obesity Rates (web page) <http://www8.nationalacademies.org/onpinews/newsitem.aspx?RecordID=12674>

³The 15th Annual Report on the Conditions of Children in Orange County, 2009 (book) <http://www.ochealthinfo.com/cscc/report>

⁴Calculate Your Body Mass Index (web page) <http://www.intelihealth.com/IH/ihtIH/E/9339/23671/266826.html?d=dmHealthAZ>

⁵The Economic Costs of Overweight, Obesity and Physical Inactivity (pdf file) CCPHA Research & Reports: Costofobesity_PRESSKIT.pdf http://www.publichealthadvocacy.org/PDFs/Costofobesity_PRESSKIT.pdf