



HISPANIC YOUTH NEED A HEALTHY PATHWAY TO PREVENT CHRONIC ILLNESS

What does the phrase “living long and living well” mean to Hispanic/Latino youth? Can young Hispanics meet this goal? Yes, if they establish healthful lifestyles early in life, including eating right and exercising regularly.

Some legislators are concerned that the idea of living long and living well is not being taken seriously among today’s Hispanic/Latino youth. There are many things standing in the way of healthy lifestyle for them: little or no parental guidance, busy schedules including school and extracurricular activities, a sedentary lifestyle on the computer or in front of the TV, and they are even besieged by snack and soda vending machines at schools. It is not surprising to see an increasing rate of obesity and diabetes among the young.

“These are serious health issues that we cannot ignore, not only because of the suffering of the children, but also because of the toll on our health care system, our schools and our future work force. Obesity and diabetes are very difficult and persistent problems in youths and adults in our society,” said New York State Assemblyman Felix Ortiz, president of the National Hispanic Caucus of State Legislators.

Legislators can play an influential role in fashioning policies that improve the health of young people. In early 2005, California State Senator Martha Escutia authored two pieces of legislation (SB 965 and SB 12) to eliminate K-12 public school campuses of junk food and ban soda from high school campuses. “Schools play such an influential role in the development of children and teens,” said Escutia, “that schools need to provide students foods and beverages that contribute to their health.” Both bills passed the Senate with bipartisan support on September 6, 2005.

If left unchecked, young people struggling with weight issues will lead to more economic hardships for states in the future when they have to deal with an increasing number of residents who have costly chronic diseases. Those who are obese are more likely to have high blood pressure, high cholesterol, type 2 diabetes, stroke, gallbladder disease, osteoarthritis, sleep apnea and even some cancers.

Why do people become obese?

Simply put, we gain weight when the body takes in more calories than it burns off. Those extra calories are then stored as fat. The amount of weight gain that leads to obesity doesn't happen in a just a few weeks or months. Because obesity is more than just being a few pounds overweight, those of us who are obese have usually been getting more calories than we need for years.

Adults who have a body mass index (BMI)—a calculation based upon a person's height and weight—of 30 or above are considered obese, while those with a BMI of 25 to 29 are referred to as being overweight. Among children and teens, however, they are described as being either overweight or at risk of overweight. Regardless of the phrasing used, it is a growing problem in the United States. Results from the 2003-04 National Health and Nutrition Examination Survey estimated that 17 percent of children and adolescents between the ages of 2 and 19 were overweight.

Obesity can run in families, but just how much is due to genetics and how much is due to the environment people are raised in is hard to determine. Eating habits are learned at a young age. Families eat the same foods, have the same habits (like snacking in front of the television), and tend to think alike when it comes to weight issues (like urging children to eat a lot at dinner so they can grow "big and strong"). Hispanic families may be at a particular risk due to their diets, which traditionally are high in carbohydrates and which may contribute to weight gain.

Young people overall are much less active today than they used to be, with televisions, computers and video games filling their spare time. Cars also dominate our lives, with fewer people walking or riding bikes to get somewhere. In many communities, especially poorer ones, the streets and parks are not safe, sidewalks are beyond repair or non-existent and physical education has been eliminated from the school curriculum. In 1996, the U.S. Surgeon General's *Report on Physical Activity and Health* warned, "A sedentary lifestyle is a dangerous risk factor for disease. The good news is that even moderate levels of physical activity for people of all physical abilities will significantly reduce the risk of such chronic health problems as heart disease, diabetes, and some cancers."

As lives become busier, there is less time to cook healthful meals, so it has become easier to eat at restaurants, grab takeout food or buy quick foods at the grocery store to heat up at home. All of these can contain much more fat and calories than meals prepared from fresh foods at home.

At times, emotions can fuel obesity as well. Young Hispanic females, particularly those who experience low self-esteem or belonging issues, may tend to eat more if they are upset, anxious, sad, stressed out, depressed or even bored. Consequently, after eating too much, they may feel bad about it and eat more to deal with those bad feelings, creating a tough cycle to break.

In most cases, weight problems arise from a combination of genetic, metabolic, behavioral, environmental, cultural and socioeconomic influences. Certain illnesses, like thyroid gland problems or unusual genetic disorders, are uncommon causes for gaining weight. Behavioral and environmental factors are large contributors to overweight and obesity and provide the greatest opportunity for actions and interventions designed for prevention and treatment.

The growing price of obesity

According to the Centers for Disease Control and Prevention (CDC), the percentage of children who are overweight has more than doubled--and among adolescents the rates have more than tripled--since 1980. On the CDC's Division of Adolescent and School Health Web site, <http://www.cdc.gov/healthyyouth/keystrategies/pdf/make-a-difference.pdf>, it notes the following:

- In some communities, almost half of pediatric diabetes cases are type 2 diabetes, which is influenced by poor diet and lack of exercise and once was believed to affect only adults.
- In one large study, 61 percent of overweight 5- to 10-year-olds already had risk factors for heart disease and 26 percent had two or more risk factors.
- Overweight children have a 70 percent chance of being overweight as adults—facing higher risks for diseases such as heart disease, diabetes, stroke and several types of cancers.
- Less than 25 percent of adolescents eat enough fruits and vegetables each day. More than a third of students in grades nine through 12 do not regularly engage in vigorous physical activity.

Overweight in young people can cause illnesses that once were thought to be problems only for adults, such as hypertension (high blood pressure), high cholesterol levels, liver disease and type 2 diabetes. Hispanic state legislators have taken steps to introduce legislation to address the prevalence of chronic disease, starting with children, where studies show how poor nutrition, unhealthy eating habits and sedentary lifestyles can harm their health and wellness. Another approach, although unsuccessful, was introduced in 2005 by California State Senator Deborah Ortiz (SB 454), to “require public health insurance programs to provide access to information about nutrition, obesity, physical activity, and state and federal nutrition programs.”

Text box

Obesity in California 2005

Race/Ethnicity	Percentage who are overweight
Latino	33.7
African-American	28.6
White	20.2
Asian	17.5
All children in California	26.5

Fact: Obesity costs the state of California about \$25 billion each year in health care costs and lost

productivity.

Source: California Center for Public Health Advocacy

Deborah Ortiz, who chairs the Health and Human Services Committee, comments that “the increase in obesity affects all Californians, but it disproportionately affects low-income communities and communities of color. Unhealthy foods are the most convenient and the cheapest, and the communities that rely on them also are those that have the least access to preventative health care and good nutritional information.”

Nationally, nearly 112,000 deaths each year are linked to obesity. Currently, the Hispanic population ranks third among ethnic groups for most health care reported illnesses linked to obesity, but those numbers are anticipated to increase rapidly due to the growth of the Hispanic population. Containing risk behavior is a key step in trying to control the increase in chronic conditions.

What States Are Doing

In 2003, the New York State Health Department found that nearly half of elementary-aged children are overweight. In response, New York State Assemblyman Felix Ortiz, who chairs the Task Force on Food, Farm and Nutrition Policy, created a State Childhood Obesity Prevention Program to reduce the deadly future consequences such as diabetes, heart disease and cancer. The program has four components:

- Develop nutrition and physical activity media campaigns;
- Implement school and community-based programs to improve nutrition and increase physical activity;
- Coordinate obesity prevention strategies in government nutrition and recreation programs; and
- Sponsor a conference on solutions to childhood obesity; provide training to medical professionals and track the prevalence of the problem in the state.

Results from the program are not yet known, since the legislation passed near the end of 2003 and funding was not appropriated until late 2005. However, the legislation is being modeled in other states, including Nevada, Arkansas, California and Georgia.

According to Assemblyman Ortiz, “This may be the most important public health program of the 21st century because we are facing a growing epidemic which not only kills people today, but may overwhelm our state’s health and financial resources in the coming years.”

Obesity and overweight, if left unchecked, does stand to levy severe consequences for states in the future. In New York alone, more than half a million New Yorkers are diabetic and heart attacks are the leading cause of death among women. Medical costs also stand to increase substantially. The American Cancer Society estimates that medical costs from obesity in New York are close to \$4.7 billion annually and 55 percent of Medicaid recipients exceed a healthy weight. On a national scale, obesity-related illnesses cost an estimated \$117 billion.

“Anyone who learns of these facts should understand why it is imperative that we respond now to the most costly threat to public health in this country,” Assemblyman Ortiz said. “New York can be a model for the rest of the country and even the world because the problems with chronic disease affect every country, every race and every ethnic group.”

Facts:

- Individuals who don't engage in sufficient physical activity have twice the chance of developing cardiovascular disease as those who are physically active. Physical inactivity can predispose you to obesity and diabetes, both of which can promote cardiovascular disease. (National Alliance for Hispanic Health)
- Individuals who are overweight are at a higher risk for having high cholesterol, developing hypertension and other chronic cardiovascular conditions than those who maintain a healthy weight. It is estimated that only 18% of women and 20% of men consume the recommended five servings of fruits and vegetables a day. (National Alliance for Hispanic Health)
- Hispanic Americans are 1.5 times more likely to have diabetes than non-Hispanic whites. (CDC)

Resources:

1. National Alliance for Hispanic Health
Su Familia: The National Hispanic Family Health Helpline
1 (866) SU-FAMILIA or 1 (866) 783-2645
SuFamilia@hispanichealth.org or <http://www.hispanichealth.org>
2. American Heart Association
National Center 1-800-242-8721
<http://www.americanheart.org>
3. Obesity
http://Kidshealth.org/teen/food_fitness/dieting/obesity.html
4. Being Physically Active Can Help You Attain or Maintain a Healthy Weight
http://www.surgeongeneral.gov/topics/obesity/calltoaction/fact_whatcanyoudo.htm
5. The Surgeon General's Call to Action to Prevent and Decrease Overweight and Obesity
www.surgeongeneral.gov/topics/obesity/calltoaction/fact_vision.htm
6. Centers for Disease Control and Prevention: Healthy People 2010 and the National Initiative to Improve Adolescent
www.cdc.gov/HealthyYouth/AdolescentHealth/NationalInitiative/index.htm
7. New York State Department of Health, Activ8Kids! - Childhood Obesity Prevention Program <http://www.health.state.ny.us/prevention/obesity/activ8kids/statistics>

The National Hispanic Caucus of State Legislators (NHCSL) is the preeminent organization representing the interests of 300 Hispanic state legislators from all states, commonwealths, and territories of the United States. Founded in 1989 as a nonpartisan,

nonprofit 501(c)3, NHCSL is a catalyst for joint action on issues of common concern, such as health, education, immigration, homeownership and economic development to all segments of the Hispanic community. NHCSL also works to design and implement policies and procedures that will impact the quality of life for Hispanic communities; serves as a forum for information exchange and member networking; an institute for leadership training; a liaison with sister U.S. Hispanic organizations; a promoter of public/private partnerships with business and labor; and a partner with Hispanic state and provincial legislators and their associations representing Central and South America. For more information visit www.nhcsl.org