

ALR Translating Research to Policy Award Recipient

Experience of Arkansas Act 1220 of 2003 to Reduce Childhood Obesity *Jim Raczynski, PhD, Joe Thompson, MD, MPH, and Herschel Cleveland, JD*

Arkansas was among the first states to introduce and pass what has been described as ambitious and comprehensive legislation to address childhood obesity. The initial ideas for finding a solution to the growing problem of obesity among Arkansas children derived from two conferences in early 2002 focusing on the growing obesity epidemic: one national, followed by a state-wide conference in Arkansas. Present at these conferences were a number of Arkansas legislators and public health officials, and the state-level meeting was co-sponsored by researchers at the University of Arkansas for Medical Sciences (UAMS) involved in a NHLBI-sponsored Nutrition Academic Award. A series of planning meetings was then held with Representative Cleveland (who later became Arkansas Speaker of the House of Representatives), other key legislators, and public health officials. These discussions culminated with Speaker Cleveland empowering the Arkansas Department of Health (ADH) to develop a draft bill, based on discussions among various stakeholders and researchers involved in the conferences and meetings, to be introduced into the Arkansas Legislature during the regular session in January 2003. This bill had strong support in both the House of Representatives and the Senate and quickly passed into law, becoming Act 1220 of 2003.

In brief, Act 1220 included a number of important components, including:

- annual measurement of body mass index (BMI) for all public school children and reporting of the BMI and associated health risks to parents;
- restriction of student access to vending machines during the school day in elementary schools;
- hiring of staff with expertise in community health promotion to work with schools and communities;
- establishment of a statewide Child Health Advisory Committee with membership from specified groups (including researchers from UAMS) to develop regulations for schools in a variety of specified areas, based on scientific evidence related to nutrition and physical activity;
- public reporting of vending contracts; and
- requiring school districts to establish school nutrition and physical activity advisory committees with broad membership.

The ensuing deliberations of the Child Health Advisory Committee over the next few years, with support of Governor Mike Huckabee, subsequently led to a series of other policy-based regulations enacted by the State Board of Education and phased in over the following few years.

Soon after Act 1220 was enacted into law, the Robert Wood Johnson Foundation (RWJF) funded the Arkansas Center of Health Improvement (Joe Thompson, MD, MPH, Principal Investigator) to assist schools in implementing the BMI measurement and reporting requirement, and to develop a BMI statewide database. RWJF also funded the Fay W. Boozman College of Public Health (Jim Raczynski, PhD, FAHA, Principal Investigator) to conduct a statewide evaluation of the implementation of the Act.

During implementation of the Act's components, concerns over both unintended consequences and the appropriateness of state action emerged from a variety of sources. Print and broadcast media, and even healthcare professionals, raised a variety of concerns, including: self-esteem problems developing among overweight children; lack of confidentiality in BMI measurement; overwhelming demands placed on the healthcare system with parents seeking advice about BMI reports; an increase in eating disorders; an increase in non-medically recommended dietary practices; an increase in weight-based teasing; and violations of parental and student "rights". The evaluation of Act 1220 suggests that none of these adverse consequences have occurred and that schools are making a variety of changes in their policies which, in many cases, exceed those required by the Act and subsequent additional regulations. Analyses of the BMI data suggest a leveling of the BMI levels across years among Arkansas children and possibly a trend toward a reduction, although additional years of data collection may be required to confirm this trend. The BMI data and the on-going evaluation findings have been instrumental in not only informing the policy and research communities about the impact and outcomes of Act 1220, but they have also been an important source of data to inform the debate in key areas in which vested interested groups have sought reductions in the requirements of the Act.