

The Power of Research

We Can Reverse the Childhood Obesity Epidemic

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We know that research has the power to shape the strategies and policies that will help us solve our nation's most threatening health problems. Childhood obesity certainly falls into that category, and researchers have taken note, using their knowledge and skills to explore the role that both physical activity and healthy eating can play in turning back the epidemic. But as we interpret data to inform policy, let us also remember the incredible toll that physical inactivity, unhealthy eating, and obesity take on so many people's daily lives.

Recently, I was contacted by my cousin, who still lives in the same neighborhood where we grew up in Washington DC. My cousin's teenaged daughter had just been diagnosed with type 2 diabetes, and he called me for advice. I could hear the concern in his voice when he explained how he was searching for answers to help his daughter and also to prevent his younger son from going down the same debilitating path. During our talk, I gave him the name of a pediatrician who's a friend of mine, but our discussion about prevention was not as easy.

I told him what he already knew: Our old neighborhood lacks safe places for kids to play and be active, the community has no grocery stores that stock fresh foods, and the local school environments are equally as unhealthy. I also explained that things have changed a lot since we were kids: fewer kids walk to school, and most don't have daily physical education (PE); too many kids spend more time in front of a television, computer, or videogame than they do engaging in physical activity; and foods and drinks are served in larger portion sizes. I could tell that he thought this was unfair—and that he believes the obstacles to raising healthy children in his neighborhood are great. Like all parents, my cousin wants his children to live full and healthy lives. Even though I was able to reassure him that there's a movement building to address these problems, somehow I still felt unsatisfied by our conversation.

It is stories like these that keep me awake at night—and inspire us, at the Robert Wood Johnson Foundation (RWJF), to tackle this most pressing threat to the health of our children and families. Today, more than 33% of children and teens—about 25 million kids—are

overweight or obese.¹ And unfortunately, as my story illustrates, our children are increasingly being diagnosed with adult diseases, such as hypertension and type 2 diabetes. We also know that obese children have a higher risk for a host of serious conditions, depression, and anxiety.

At RWJF, we believe that halting and then reversing the rise of obesity among our nation's children requires changing public policies and community environments to make healthy choices a realistic option for all families. And we are investing at least \$500 million over 5 years to remove the barriers that prevent children from eating well and engaging in regular physical activity.

Many of these barriers are supported by public policies that do not give parents or children the opportunity to make healthy choices in their schools and communities. For example, 2006 national data show that only 4% of elementary schools, 8% of middle schools, and 2% of high schools provided daily PE or its equivalent for students.² Families living in low-income communities have less access to safe places where they can be physically active, such as parks, green spaces, bike paths, walking trails, sports facilities, and public pools.³ Current estimates also show that 37% of children spend three or more hours a day watching television,⁴ and that they are bombarded with advertisements for foods that are high in fat, sugar, or sodium.⁵

RWJF is working to change policies and environments to better support active living and healthy eating, and we are investing in three interlocking and reinforcing strategies—evidence, action, and advocacy—to create these changes. Building a solid evidence base to learn how we can best address the causes of childhood obesity is an important part of our plan. RWJF supports three flagship research programs—Active Living Research, Healthy Eating Research, and Bridging the Gap—to help us identify school, community, state, and federal policies that will promote physical activity and healthy eating among children. Our research is particularly focused on families living in low-income neighborhoods who are at the greatest risk for obesity. We also are funding evaluations of state-level childhood obesity prevention policies in Arkansas, Delaware, and West Virginia to help inform efforts in other states across the nation. We can use this research to inform advocates and drive action. We also work with advocates to find out which research questions need to be an-

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swered. In this way, each prong of our strategy informs and reinforces the others.

The papers presented in this special issue,^{6–18} which were featured in the Active Living Research 2007 annual conference, explore a number of factors that influence active living in diverse and disadvantaged neighborhoods and provide valuable insight that can help inform the policy-making process. These studies, and others supported by the Active Living Research program, demonstrate the necessity of collaboration, coordination, and communication among government, schools, communities, industry, and foundations working to address the childhood obesity crisis. The findings also reveal how families living in lower-income communities are disproportionately affected by the epidemic, and highlight possible intervention strategies for underserved populations.

It is important that, when results like these are reported, they do not simply sit on a shelf. We must share findings with leaders, advocates, schools, and parents—and use what we learn to shape and change public policy at all levels.

At RWJF, we believe that investing in coordinated, multi-level research will lead to the significant policy changes that are necessary to reverse the childhood obesity epidemic. We are grateful to the study authors for their contributions to this special issue and to our collective knowledge, and we commend them for their efforts to help improve the health of our nation's families and children.

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