

'Healthy Kids Act' Sets Ad, Snack and Drink Industries' Teeth on Edge

The Wall Street Journal (Nov. 13, 2009) The advertising, snack food and televisions industries are having a collective meltdown over a bill quietly introduced by Democratic Reps. Jim Moran of Virginia and Bill Pascrell of New Jersey: The Healthy Kids Act. The measure, aimed at helping to curb the obesity epidemic in children and teens, would give broad authority to three federal agencies to weigh in on commercials for beverages and foods "which do not contribute to a healthful diet for children and adolescents and the consumption of which is discouraged." The Federal Trade Commission would get power to set rules on marketing to youth, and could decide when ads for foods and beverages could be deemed an unfair trade practice – a phrase that sends chills down the spines of companies everywhere.

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New Research Connects Transportation Options to Physical Activity and Health

RWJF (Nov. 16, 2009) — Today fewer than half of U.S. children and adolescents get the recommended daily hour of moderate-to-vigorous physical activity, and nearly one-third of young people are overweight or obese. Walking and biking for transportation can help people be more active overall, and transportation investments which make that easier are an important strategy for increasing physical activity and promoting health among all Americans.

Two new resources by Active Living Research, a national program of the Robert Wood Johnson Foundation, examine the relationship between investments in active transportation, physical activity and obesity rates, and the extent to which regions across the country are making such investments.

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**Estimated County-Level Prevalence of Diabetes and Obesity --- United States, 2007**

(CDC) — Comprehensive disease surveillance systems are important for developing preventive health policies and tracking their impact in populations at high risk. Although existing chronic disease surveillance systems function well at the national or state level, few provide data at the local level, where many policies and interventions ultimately are implemented. To overcome this limitation, Bayesian multilevel models have been applied to reliably estimate disease prevalence at the local level (1). CDC adapted this methodology to estimate diabetes and obesity prevalence in all 3,141 U.S. counties in 2007 (2--4)



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Can Playing Active Video Games Equal Moderate Intensity Exercise?

ScienceDaily (Nov. 18, 2009) — Active Wii sports™ video games and some Wii fit™ activities may increase adults' energy expenditure as much as moderately intense exercise, according to research presented at the American Heart Association's Scientific Sessions 2009. The study, funded by Nintendo™, demonstrated that about one-third of the virtual physical activities require an energy expenditure of 3.0 METs or above, considered moderate-intensity exercise. METs are metabolic equivalent values, a standard method of estimating energy expenditure.



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Built Environments and Obesity in Disadvantaged Populations

Oxford Journals (May 9, 2009) In the United States, health disparities in obesity and obesity-related illnesses have been the subject of growing concern. To better understand how obesity-related health disparities might relate to obesogenic built environments, the authors conducted a systematic review of the published scientific literature, screening for studies with relevance to disadvantaged individuals or areas, identified by low socioeconomic status, black race, or Hispanic ethnicity. A search for related terms in publication databases and topically related resources yielded 45 studies published between January 1995 and January 2009 with at least 100 participants or area residents that provided information on 1) the built environment correlates of obesity or related health behaviors within one or more disadvantaged groups or 2) the relative exposure these groups had to potentially obesogenic built environment characteristics.



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The Future Costs of Obesity: National and State Estimates of the Impact of Obesity on Direct Health Care Expenses

In a unique study that departed from looking at historical costs of obesity, Kenneth E. Thorpe, Ph.D., and colleagues from Emory University developed an econometric model to estimate the growth of health care costs over time that are attributable to changes in obesity rates. This report provides projections of future health care costs directly attributable to obesity for each state and for the nation.



Using nationally representative data on adults, the study estimates the effect of the increasing prevalence of obesity on total direct health care costs. Estimates are controlled for age, gender, race, ethnicity, marital status, education, income, health insurance status, geographic region and smoking status.

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