
BILL REQUEST - CODE REVISER'S OFFICE

BILL REQ. #: Z-0496.1/13

ATTY/TYPIST: AL:lel

BRIEF DESCRIPTION: Concerning the prevention of childhood obesity

AN ACT Relating to creating a childhood obesity prevention project to contain the scope and cost of the obesity epidemic in Washington; and adding a new chapter to Title 70 RCW.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

NEW SECTION. **Sec. 1.** The legislature finds that:

(1) The first five years of a child's life establish the foundation for success in education, health, and life outcomes. Maintaining a healthy weight from an early age is critical. An increasing body of research shows children who are obese are more likely to be obese as adults. The estimated annual medical cost for adult obesity in Washington is two billion nine hundred eighty million dollars.

(2) Women who are overweight and obese during pregnancy are more likely to have an overweight or obese baby. This is also true for women who gain too much weight during pregnancy. In 2011, about twenty-five percent of women were obese prior to pregnancy and about thirty-one percent gained too much weight during pregnancy.

(3) Breastfeeding can protect a child from becoming overweight or obese. The American academy of pediatrics recommends exclusive breastfeeding for the first six months of life. Only twenty percent of mothers in Washington report exclusively breastfeeding their infants for six months.

(4) Nationally about twenty-four percent of children ages birth through four years are primarily cared for in a day care, preschool, or head start setting. According to the women, infants, and children nutrition program enrollee data, about thirteen percent of preschoolers were obese in 2012.

(5) The US Congress and our state legislature have been clear with Washington state schools that their primary mission is the academic achievement of children. The state recognizes that young people

cannot be successful in schools if they face obstacles such as obesity.

(6) Children eat up to half of their daily calories at school and spend up to half of their waking hours there. In 2012, about ten percent of middle and high school-aged children were obese.

(7) Preventing childhood obesity is a multistate agency and multisector issue. The legislature therefore intends to establish a comprehensive coordinated project to guide and inform activities related to childhood obesity prevention in three agencies: Department of health, office of the superintendent of public instruction, and department of early learning.

NEW SECTION. **Sec. 2.** (1) The department of health, the office of the superintendent of public instruction, and the department of early learning shall collaborate across four high-impact focus areas to prevent childhood obesity:

- (a) Women's health before and during pregnancy;
- (b) Breastfeeding promotion;
- (c) Healthy child care and early learning environments; and
- (d) Healthy school environments.

(2) The project must include these actions:

(a) The department of health will use data from the pregnancy risk assessment monitoring system, the Washington youth sexual health plan, data from the women, infants, and children program, and data from other partners to strengthen support and current work for groups of women and infants at high risk for obesity, monitor changes in health status, and to measure progress toward goals in improving the health of mothers and infants as well as to inform the on-going obesity prevention work.

(b) The department of health shall work with hospitals, clinics, worksites and early learning facilities to develop and implement comprehensive breastfeeding policies and support systems for breastfeeding mothers.

(c) The department of early learning, in collaboration with stakeholders, shall create a childhood obesity prevention toolkit for early learning professionals, including child care providers and early childhood education and assistance contractors, to be made available on department of early learning's website.

(d) The department of early learning and the department of health shall collaborate to ensure childhood obesity prevention strategies are embedded in Early Achievers, the state's quality rating and improvement system.

(e) The department of early learning shall use research and best practices to enhance early care and education professionals performance standards to include nutrition education activities for children in written curriculum plans; and physical activity and screen time education to parents.

(f) The office of the superintendent of public instruction shall collaborate with key stakeholders to create a childhood obesity prevention toolkit for schools. The toolkit will include many free and reduced cost options for schools to implement. The toolkit will include the identification of public and private stakeholders that can provide technical assistance, resources, staffing to implement the toolkit.

(g) The office of superintendent of public instruction shall produce materials that will assist school districts in improving obesity outcomes for children in ways that also address improved academic achievement by creating obesity prevention curricula, policy, and environmental changes to the extent practical within major educational initiatives such as teacher and principal evaluations, common core standards and assessments, and schools that are in need of improvement.

(h) The office of superintendent of public instruction shall use childhood obesity prevention research and best practices—when revising the state's health and fitness standards.

(i) The department of health, the office of the superintendent of public instruction, and the department of early learning shall

consider childhood obesity prevention research and best practices when revising rules concerning children's health outcomes.

(j) Identification of other cross-collaboration opportunities between the department of health, the office of the superintendent of public instruction, and the department of early learning, along with recommended actions;

(k) Identification of additional policy and budget recommendations including a range of actionable items for consideration by the legislature;

(l) Additional action steps and outcomes to reduce childhood obesity, including a focus on reducing health disparities in specific population groups; and

(m) Costs and resources required to implement the project identified in this section.

(n) Identification public-private partnership opportunities to leverage public resources and generate broader impact to promote children's health.

NEW SECTION (3) The department of health, the office of the superintendent of public instruction, and the department of early learning shall submit their recommendations to prevent childhood obesity in a report to the governor and the appropriate committees of the legislature by December 31, 2014, which includes the following:

(a) Summary of impacts of childhood obesity on short and long-term health outcomes, health care and other costs, academic achievement in early learning, and school settings;

(b) Identification, description, and gap analysis of state and local government and community-based programs to prevent childhood obesity, including cross-agency efforts;

(c) Assessment of feasibility, benefits, and challenges of strategies in each of the four focus areas identified.

NEW SECTION. **Sec. 4** The department of health, the office of the superintendent of public instruction, and the department of early learning shall collaborate to identify shared goals and benchmarks. The agencies shall also develop individual agency projects to reduce

the prevalence of childhood obesity in Washington, assessing existing groups with common strategies, and financial impacts associated with childhood obesity.

NEW SECTION. **Sec. 5** Sections 1 through 4 of this act constitute a new chapter in Title 70 RCW.