

Improving Childhood Nutrition in Ohio

Encouraging healthy eating can help strengthen national security



Acknowledgements

Council for a Strong America is a national, bipartisan nonprofit that unites five organizations comprised of law enforcement leaders, retired admirals and generals, business executives, pastors, and prominent coaches and athletes who promote solutions that ensure our next generation of Americans will be successful, productive members of society.

Mission: Readiness

Retired admirals and generals strengthening national security by ensuring kids stay in school, stay fit, and stay out of trouble.

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18%
**of Ohio children are
considered obese**

In the United States as a whole, as well as in Ohio, 71 percent of youth between the ages of 17 and 24 cannot serve in the military, due to issues such as lack of education, a record of crime or substance abuse, or lack of physical fitness.¹ Obesity is one of the main medical disqualifiers, and rates of obesity among young people are on the rise.² Due to the fact that the military relies on volunteers, the trend of increasing obesity among young people is especially concerning, because individuals who would otherwise be qualified to serve are being disqualified due to excess weight.³

In addition to being one of the major disqualifiers for the military, obesity can also lead to health issues throughout life. Children with obesity have a higher risk of other health problems, both during childhood and in the future. Obesity in childhood can lead to high blood pressure,

diabetes, joint problems, asthma, and high cholesterol, as well as an increased risk of obesity in adulthood.⁴ Many children in Ohio face higher obesity risk due to malnutrition caused by food deserts and food insecurity, which must be addressed in order for children in our state to grow up healthy and prepared for life and careers, whether or not they choose to join the military.

In the U.S., 15.3 percent of children between the ages of 10 and 17 were considered obese in 2017-2018.⁵ Ohio's obesity rate for children in the same age range was higher than the national average, at 17.1 percent.⁶

In 2017, the Ohio Department of Health performed Body Mass Index screenings for three- to five-year-olds across the state. Out of 82 early care and education centers selected to be representative of the overall Ohio population, over 3,000 children were screened. Nearly 26 percent of children in

these settings were found to be overweight or obese, illustrating the need for proper nutrition among children of preschool age.⁷

Food insecurity and food deserts in Ohio

Research has found links between obesity and food insecurity. An estimated 37 million people (including over 11 million children) in the U.S. were food insecure in 2018, meaning that they did not have access to adequate food to sustain a healthy life.⁸ Food insecurity can occur for a number of reasons, including a lack of financial resources to afford healthy foods.⁹ An additional component that may contribute to food insecurity and malnutrition is living in a food desert, defined as an area lacking in fresh vegetables, fruit and other healthy foods. Food deserts can be present when there are not enough grocery stores or farmers' markets within a community, or in areas where fresh food is available, but unaffordable.¹⁰

As of 2018, over 23 million people in the U.S. lived in food deserts, which are often in low-income communities in both urban and rural areas.¹¹ Residents in these areas often have obesity rates that are disproportionate to their peers in areas that have access to affordable, nutritious food.¹² One study estimated that nearly a quarter of rural Ohio households (over 475,000 residents) lived more than a ten-minute drive from a grocery store. Additionally, 75 percent of these households were more than one mile walking distance from a grocery store, and three percent did not have access to a vehicle, making obtaining healthy food even more difficult.¹³ In 2009, just eight percent of Ohio residents were considered food insecure; by 2018, that rate had risen to 13 percent.¹⁴ The same year, an estimated 22 percent of the state's children

lived in a food insecure household.¹⁵ These statistics illustrate the need for programs in our state that provide accessible and affordable healthy food for all Ohio children and families.



To ensure kids grow up strong, healthy, and ready for any career they choose, we must provide all Ohio families with adequate access to nutritious food.



**Brigadier General (Ret.)
Myron Ashcraft**
U.S. Air Force

Food insecurity and food deserts contribute to obesity

Healthy food can be unaffordable or difficult to find in a food desert, leading to limited access and negatively impacting the health of those who live there.¹⁶ Residents in these areas are more likely to suffer from heart disease, diabetes, and obesity. However, there are more factors contributing to these conditions in food deserts than simply a lack of grocery stores. Obesity rates in food deserts have been found to be higher if there are also convenience stores in the community, increasing the likelihood of residents consuming unhealthy foods.¹⁷ Individuals

living in homes with food insecurity often consume more energy-dense foods that have poor nutritional value, which also may contribute to higher rates of obesity.¹⁸

Several studies have found a correlation between food insecurity and obesity in children.¹⁹ One study found that among children ages five and under, 18 percent of those who lived in food insecure homes were considered overweight.²⁰ Children between ages six and 11 who experience food insecurity have been found to be at a significantly higher risk for obesity than younger children.²¹ Teens between the ages of 12 and 17 who experience food insecurity have also been found to have higher rates of overweight and obesity, compared to those who are food secure.²²

Obesity prevention efforts in Ohio

Many children in Ohio and throughout the country are gaining weight at younger ages and are entering kindergarten overweight or obese. Fortunately, programs focused on preventing obesity among younger children have been found to be effective. These programs are beneficial because children develop food preferences by age two or three and are more easily able to develop healthy habits at a younger age.²³

In Vinton County, Ohio, the only grocery store closed in 2013, forcing the town's 19,000 residents to travel over ten miles for fresh foods. In 2016, Campbell's Market was provided with funding from the Healthy Food for Ohio program to build a new grocery store for the Vinton County community. The market also accepts WIC and SNAP, providing families with more options to purchase healthy foods.²⁴ Healthy Food for Ohio provides grants and loans to food



retailers to develop or renovate stores that sell fresh food in underserved communities throughout the state. The program's goal is to improve citizens' access to fresh, affordable foods, and improve the health of all Ohioans.²⁵

Another state-funded program is Produce Perks, which matches SNAP benefits dollar-for-dollar at participating stores and farmers' markets. This program gives more families access to affordable fruits and vegetables. The Produce Perks program is supported by the Ohio Nutrition Incentive Network, which works to improve access to healthy, affordable food across the state.²⁶ In 2019, nearly 19,000 consumers were able to double their SNAP benefits, providing their families with healthy, nutritious food. Since 2010, \$1.6 million worth of healthy food has been purchased as a result of the program.²⁷

In 2016, child care regulations in Ohio did not meet national obesity prevention

standards, such as providing children with fresh fruit and vegetables. In order to remedy this, the Ohio Department of Health partnered with organizations statewide and improved nutrition standards in 80 percent of counties. The Department also worked with statewide organizations to provide preschools, home-based child care programs, and licensed child care centers with training and resources on healthy eating for the children in their care. This initiative worked with more than 1,600 early care and education providers statewide, reaching nearly 110,000 children. The program provided education to parents on healthy eating, and improved menus in child care facilities by providing fresh fruit and vegetables at each meal, and substituting sugar-sweetened beverages with water or milk.²⁸



The Ohio Child Care Resource and Referral Association developed Ohio Healthy Programs to give early care and education programs the tools to address obesity in children. ECE providers can apply for designation as an Ohio Healthy Program by meeting specific guidelines such as professional development for staff, improving menus for children, engaging families, and developing and implementing a wellness policy.²⁹ As of February 2020, there were over 240 Ohio Healthy Programs throughout the state.³⁰

 **\$40 million**
the net return Ohio could receive from a 2.5% reduction in childhood obesity

Conclusion

By reducing childhood obesity by just 2.5 percent, Ohio could see a net return of over \$40 million in economic benefits through the reduction of health care costs for obesity-related conditions.³¹

When kids have increased access to healthy foods, they can grow up to be healthy and better prepared for any job they choose, including the military. Ohio has already made strides towards preventing obesity among children, but more must be done in order to ensure the health and fitness of all Ohio youth.

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