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by
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on behalf of Deans and Directors in the
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HB 914 – RELATING TO OBESITY PREVENTION

Obesity is the most significant risk factor for adult obesity and chronic disease such as diabetes and cardiovascular disease. Of great concern, obesity has become very common among adults in Hawaii and now among the children and adolescents of Hawai‘i.

- Childhood obesity increased 29 percent from 1999 to 2011 (YRBS 2011). In some communities of Hawai‘i, over 50% of children and teens are now overweight and obese (Okihiro, 2005).
- Approximately one in four adults in Hawaii is obese. From 2000 to 2010, the percentage of adults considered obese increased to 48 percent (BRFSS 2010).
- Major health disparities exist across racial and ethnic groups in Hawai‘i; 44 percent of Native Hawaiians adults are obese compared to 14 percent of Japanese adults.
- Obesity is a major risk factor for diabetes. In the decade from 1997 to 2007, the prevalence of self-reported diabetes in Hawai‘i rose from 5% to 7.7% of adults. Age-adjusted diabetes prevalence is highest in Hawaii among our low-income adults (13.4%), Native Hawaiians (12.5%) and Filipinos (9.9%) (BRFSS 2010).
- Economic Cost of obesity: An estimated $470 million is spent annually on obesity-related health problems in Hawai‘i (Trogdon, 2012)

The development of obesity involves a complex interplay of factors impacting the nutrition and physical activity of people in Hawai‘i. Reversing the obesity and chronic disease epidemic will take a multi-faceted and comprehensive approach involving multiple sectors of the community.

In 2012 the Governor established a Childhood Obesity Prevention Taskforce, under Act 269, to address the growing crisis of childhood obesity in Hawai‘i. The Taskforce was made up of 20 voting members representing a wide variety of organizations and agencies. The Taskforce reviewed the extensive evidence on obesity and delivered a comprehensive set of recommendations for the 2013 legislative session. The Governor and Legislature are now acting on several bills and resolutions based on these
recommendations.

Under Act 269, the Taskforce’s mandate expired in December 2012 and the Taskforce was dissolved. The obesity challenges to Hawai‘i remain. Loss of this interdisciplinary coalition of scientists, educators and community leaders must be addressed.

HB 914 will establish a Council to advise the governor and legislature on a plan to address obesity in Hawai‘i and monitor progress. In order for the State of Hawai‘i to address the obesity and associated chronic disease epidemic in a meaningful way, such a permanent multi-disciplinary council needs to be established. The council should be comprised of representatives from multiple sectors, including government agencies and community organizations. The Council should support the development, implementation and evaluation of Hawaii’s obesity prevention plan and promote collaboration, effectiveness, accountability and progress on this urgent matter.

For these reasons, we strongly support this bill.