Senate Education Committee

SB 121- Proponent Testimony 6/9/2020

Good morning Chairwoman Lehner, Vice Chair Brenner, Ranking Member Fedor and members of the Senate Education Committee, thank you for the opportunity to testify today. My name is Katherine Ungar and I am a Policy Associate at Children's Defense Fund-Ohio. I am here today to offer support for Senate Bill 121.

CDF-Ohio is a statewide non-profit organization which serves as an independent voice for all children. Our mission is to ensure every child a *Healthy Start*, a *Head Start*, a *Fair Start*, a *Safe Start* and a *Moral Start* in life and successful passage to adulthood with the help of caring families and communities. We work to champion policies and programs that lift children out of poverty, protect them from abuse and neglect, and ensure quality education as well as appropriate and targeted access to resources to meet children's health and nutrition needs. We urge your support of SB 121 because it will support improved health outcomes for Ohio's children.

The first step in improving our health outcomes is to learn more about how to maintain our health and being informed to make personal decisions about our health. SB 121 is about making it a priority to teach our children how to be healthy, how to make healthy decisions, and how to cope and be resilient in the face of adversity. SB 121 is about prevention, establishing a foundation for our children to flourish and practice health and mental health.

According to the Health Policy Institute of Ohio's 2019 Health Value <u>Dashboard</u>, Ohio ranks 46th in the nation in health value and as you know from health disparity data and testimony - too many Ohioans have been left behind. Prevention strategies play a role in addressing the "U.S. healthcare system's twin problems of high costs and poor outcomes." Many causes of illness, disability and death are <u>preventable</u>, and researchers find that improvements in health knowledge and behaviors, such as physical inactivity, poor nutrition, tobacco use, and excessive alcohol consumption, would go a long way in improving health outcomes.

The Ohio Department of Health, <u>2016 Early Childhood Data Brief</u> demonstrates the significant impact of childhood overweight and obesity on not only our children's health, but also our economy. More than <u>one-third</u> of Head Start students were classified as overweight or obese and more than 40% of obese students were classified as severely obese. Childhood obesity remains a source of significant and persistent disparities, especially among Black, Native American and Latinx populations. It is important to note that making healthy food choices requires access to healthy food, which is a separate and related issue as there are many food desserts dotting our urban and rural areas of the state. As we consider the current public health crisis, the disparate impact of COVID-19 on Black and Brown individuals, it is critical that Ohio do everything it can to address and dismantle health disparities. According to a report, the <u>State of Childhood Obesity</u>,

obesity is a risk factor for chronic illnesses such as diabetes. In 2010, over 1 million Ohioans had diabetes and based on our current rates of obesity the project cases are expected to increase by over 50% in the next decade (to over 1.5M). It is critically important to teach and guide our children about how to make healthy and safe decisions.

Economically, educating Ohioans about healthy choices makes sense. According to the Ohio Department of Health's Early Childhood Overweight and Obesity Report from 2016, the economic toll that obesity presents to our state is notable. More than \$2.9 billion are spent in additional health costs for overweight and obese children in the U.S., compared with children who maintain a healthy weight. Preventable chronic diseases are estimated to cost Ohio around \$60 billion annually in healthcare costs and lost productivity. Without significant change, these costs are projected to increase by nearly \$100 billion by 2023.

In our state, there is a 30 year life expectancy gap that exists based on where you are born and live. We must eliminate this trend and education is a critical piece of this puzzle. Ohio is the **only** state in the country that does not have health education standards and health education is the **only** subject area that does not have standards. Health risks such as poor dietary choices, inadequate physical activity, physical and emotional abuse, and substance abuse have a significant impact on how well students perform in school.

Support healthy children and let's join every other state in the country with health education standards. This bill does not impose requirements upon districts, but simply equips them with the necessary tools to effectively instruct children on these important topics. Healthy habits lead to flourishing lives. We must value teaching our children how to thrive, it is a moral imperative.

We urge you to pass this bill and demonstrate to Ohio's children that you value their growth, both physically and mentally. I am happy to answer any questions and appreciate the opportunity to provide testimony today.