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Testimony Re: H5371
House Committee on Health & Human Services
March 1, 2021
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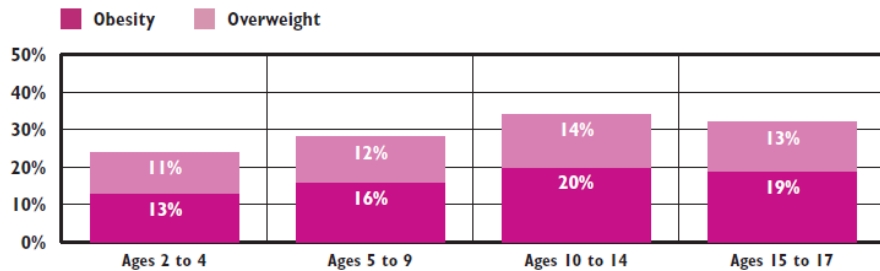
Mr. Chairman and members of the Committee, thank you for the opportunity to provide testimony today. Rhode Island KIDS COUNT supports House Bill 5371 which would require restaurants to provide healthy beverage option with any children’s meal that includes a beverage.

This bill would provide a healthier beverage option in children’s meals when dining at restaurants and fast food locations. Many restaurants and fast food locations already do provide healthier options, but this bill would make sure parents *a/ways* have the option to provide more nutritious choices for their children.

Childhood Obesity in Rhode Island

Rhode Island KIDS COUNT in partnership with the Hassenfeld Institute, Rhode Island Department of Health, and Blue Cross & Blue Shield of Rhode Island released a statewide study of clinical childhood BMI data. Results show that in 2018, 13% of Rhode Island children age 2-17 are overweight and 17% are obese.¹ We are in the process of updating this study and will release 2019 data in our Factbook this spring.

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Rhode Island Childhood Overweight and Obesity by Age, 2018



Source: Hassenfeld Child Health Innovation Institute analysis of BMI clinical and billing records of children ages two to 17 in Rhode Island from KIDSNET, Current Care, Blue Cross & Blue Shield of Rhode Island, Neighborhood Health Plan of Rhode Island, and United Healthcare collected by the Department of Health, 2018.

Sugar Sweetened Beverages Linked to Weight Gain and Obesity Among Children

Sugar sweetened beverages, particularly carbonated soft drinks and juices with added sugar, are a key contributor to the childhood obesity epidemic.² Nearly 40% of energy consumed by children ages 2 to 18 come from empty calories, mostly from soda, fruit drinks, desserts, and pizza.³ Overweight children are at increased risk for serious health problems in adulthood, including heart disease, type 2 diabetes, asthma, and cancer.⁴

Restaurants Play Large Role in Children’s Food Consumption

Children and families are consuming more of their meals at fast food and at restaurants and studies show that parents lack awareness and confidence in the amount of calories in restaurant meals.⁵

The General Assembly has a long history of supporting the health and well-being of children and supporting parents to make good choices for their children. **We urge you to support this bill and thank you for the opportunity to provide testimony today.**

References

¹ Hassenfeld Child health Innovation Institute analysis of BMI clinical and billing records of children ages two to 17 in Rhode Island from KIDSNET, Current Care, Blue Cross & Blue Shield of Rhode Island, Neighborhood Health Plan of Rhode Island and United Healthcare collected by the Department of Health, 2018

² Malik, V. S., Schulze, M. B., Hu, F. B. (2006). Intake of sugar-sweetened beverages and weight gain: a systematic review. *American Journal of Clinical Nutrition*, 84(2):274–288.

³ Reedy, J., Krebs-Smith, S. M. (2010). Dietary sources of energy, solid fats, and added sugars among children and adolescents in the United States. *Journal of the American Dietetic Association*, 110:1477-1484.

⁴ U.S. Department of Health and Human Services. (2001). *The Surgeon General's Call to Action to Prevent and Decrease Overweight and Obesity*. Rockville, MD: Office of the Surgeon General.

⁵ Lynskey, V. M., et al. (2017). Low parental awareness about energy (calorie) recommendations for children's restaurant meals: Findings from a national survey in the USA. *Public Health Nutrition*, 20(11).