



MISSION: READINESS

MILITARY LEADERS FOR KIDS

Too Fat to Fight: A Brief on Hawaii

Retired Military Leaders Want Congress to Finish the Job of Helping Hawaii Get Unhealthy Food Out of Its Schools

MISSION: READINESS is the organization of over 200 retired generals, admirals and other senior military leaders who support policies and investments that will help young Americans succeed in school and later in life, thus enabling more young adults to join the military if they choose to do so.

Summary: The retired generals, admirals and other senior military leaders of MISSION: READINESS are warning Congress that approximately one in four 17- to 24-year-olds in the United States is too overweight to serve in the military. Obesity rates among children have tripled in the last 30 years, threatening not only the overall health of America, but also the future strength of our military. The Centers for Disease Control and Prevention (CDC), using a wider definition of who is overweight than the military uses, concluded that over four out of ten young adults in Hawaii are either overweight or obese. According to an analysis of data from the CDC over the past 13 years, the number of states with 40 percent or more young adults considered overweight or obese has risen from one state to 40. Over this same period, Hawaii went from 33 percent overweight or obese to 42 percent.

In response, Congress passed the Healthy, Hunger-Free Kids Act and the United States Department of Agriculture is proposing a set of new regulations aimed at improving the nutrition in school breakfasts and lunches. These will help kids replace

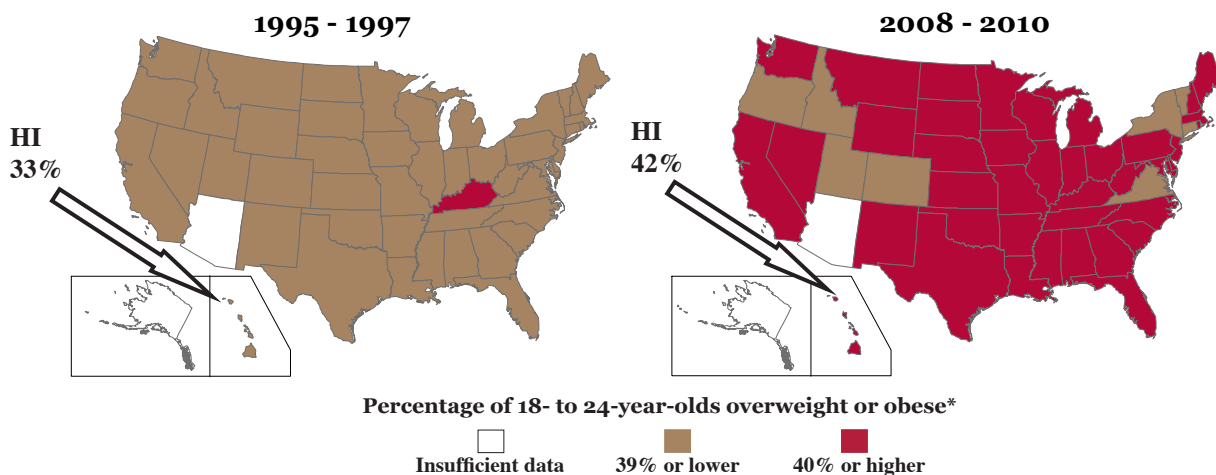
bad eating habits with healthy ones that can last a lifetime. But to finish the job, Congress needs to ensure our schools get needed equipment for better food preparation and updated training for their food service workers.

Today, more than 200 retired generals and admirals are calling on Congress to keep the momentum of the Healthy, Hunger-Free Kids Act going by improving the quality of school meals and doing the following:

First, upgrade equipment. Nearly half of schools still use deep-fat fryers and only about 15 percent of schools have salad bars. To convince kids that healthier food can be delicious, many school cafeterias urgently need new kitchen equipment like refrigerators, freezers, ovens and salad bars to serve fresher, more nutritious food.

Second, train cafeteria workers to prepare healthier meals. In a recent survey, school nutrition directors reported that recruiting skilled cafeteria workers is their number one challenge. Food service workers need new training to prepare safe and appealing meals using more fresh ingredients.

Over a thirteen-year period, the number of states with 40 percent or more of their young adults who were overweight or obese went from 1 to 40.



*Source: Centers for Disease Control and Prevention (CDC), Behavioral Risk Factor Surveillance System. If states were missing data for one or more years, data from 1998, 1999, 2005, 2006 or 2007 were used to generate a pooled average for three years in order to have large enough samples. Only states with enough data in both periods were included. Alaska did not have data for either period and Arizona did not have data for the later period.



Credit: U.S. Army Sgt. Daniel Lucas, 2010

America's Military Leaders are Sounding the Alarm Again

Military leaders have spoken out before to make sure America's youth had proper nutrition for a healthy start in life. During World War II, the military discovered that at least 40 percent of rejected recruits were turned away for reasons related to poor nutrition.¹ The National School Lunch Program, established in 1946, helped improve the health and well-being of our nation by making sure children across America had access to healthier meals at school.

A new threat: one in four young adults are too overweight to join. Surveys done for the Army's Accessions Command, which carries the responsibility for recruiting and the initial training of new Army recruits, and for the Centers for Disease Control and Prevention (CDC) show that about one in four young Americans is too heavy to join the military.²

The CDC's estimates for who is overweight or obese are alarming: The military makes allowances for young people who have extra muscle, not fat, or those who are close to the desired weight and can lose some of their excess weight in boot camp. So some potential recruits may still qualify who fall into the overweight category using the simple weight to height ratio – the Body Mass Index (BMI) – routinely used in national and state surveys. Using those more typical cutoffs, the CDC's Behavioral Risk Factor Surveillance System found that 42 percent of young adults 18- to 24-years-old in Hawaii were either overweight or obese.³ That equals over 46,000 young adults in the state. To be within the healthy weight range, a BMI of under 25, those young people would have to lose more than 1.3 million total pounds.⁴ That is the equivalent of 11 Abrams tanks.⁵

By any measure—the military's or various CDC surveys—it is beyond question that too many young people in Hawaii are overweight or obese. [See the United States maps of CDC data.] Within just a thirteen-year period ending in 2010, the number of states reporting that 40 percent or more of their young adults were overweight or obese went from just one state to 40.⁶

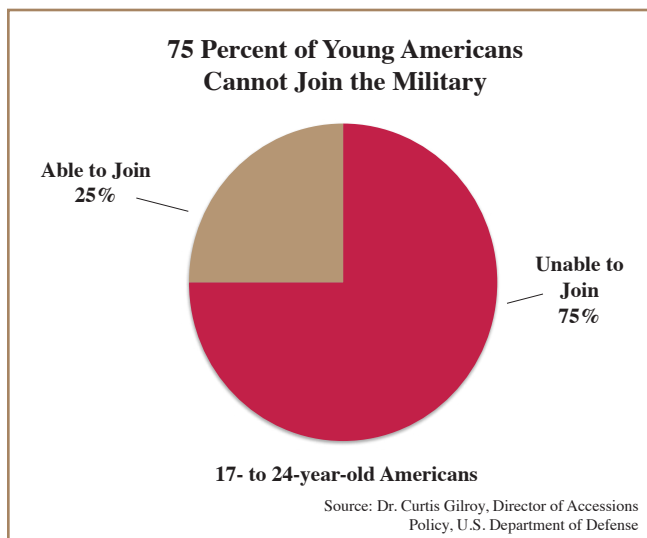
American childhood obesity rates have accelerated faster than adult obesity rates. Over the past 30 years, while adult rates of obesity have doubled, childhood obesity rates have tripled.⁷ The Journal of the American Dietetic Association reported "almost one-third of American children – nearly 23 million children and teens – are either overweight or obese."⁸ Largely because of this epidemic of obesity, one team of scientists has warned that today's children may be the first generation of Americans to live shorter lives than their parents.⁹

Seventy-five percent of Americans 17- to 24-years-old are unable to join the military for one or more reasons.¹⁰ A quarter of young Americans are currently not graduating from high school on time, and nearly one in four of those who do graduate and try to join the Army are not able to score well enough on the military's entrance exam.¹¹ Another ten percent of Americans cannot join the military because of their criminal records.¹² Some have other disqualifiers keeping them out and some have multiple overlapping reasons why they cannot join.

When weight problems are combined with educational deficits, criminal records and other disqualifiers such as asthma or drug abuse, 75 percent of Americans 17- to 24-years-old are unable to join the military for one or more reasons.¹³ The military will need to have more fit young men and women if it is going to keep finding enough recruits with the excellent qualifications needed for a modern military.

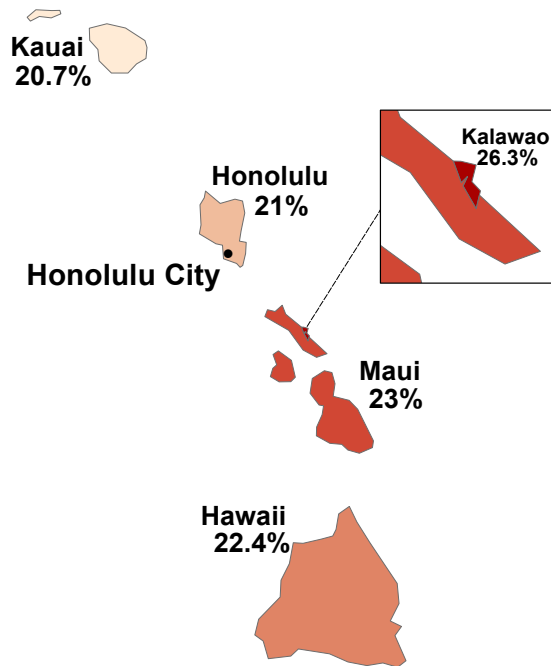
The severe recession has temporarily reduced the challenges the nation's 15,000 military recruiters face in meeting their quotas for signing up qualified individuals.¹⁴ But recruiters remember the recent past when they could not sign up enough young men and women to meet the nation's military needs.¹⁵

Under Secretary of Defense for Personnel and Readiness Clifford Stanley has warned Congress about the need to avoid a "boom or bust" recruiting cycle, and retired Air Force Lieutenant General Norman R. Seip has warned, "a failing economy is no formula for a strong military, and these longer-term eligibility problems are not going away."¹⁶





The Percent of Obese Adults in Hawaii, 2008



The military's ongoing problems with weight: Unfortunately, the impact of weight problems on the military does not stop with those turned away. Every year, the military discharges over 1,200 first-term enlistees before their contracts are up because of weight problems. The military must then recruit and train their replacements at a cost of \$50,000 for each man or woman, thus spending more than \$60 million a year.¹⁷ That figure pales in comparison, however, to the over \$1 billion cost of treating the obesity-related problems of military personnel and their families under the military's health care system, TRICARE, or the additional cost of treating obesity-related problems directly under the Veterans Administration health care system.¹⁸

Schools Can Play an Important Role in Reversing the Epidemic

In order to address obesity, it is important to start early. The journal *Health Affairs* reports that "80 percent of children who were overweight at ages 10-15 were obese at age 25."¹⁹ What children eat and drink at school is critically important because many children get up to half of their daily calories from meals at school.²⁰ Schools should also help children to exercise more.

America has had a big problem with what kids were eating in school. While Hawaii has already begun acting on its own to start improving what is served to children in schools and to get non-nutritious food out of schools, the federal government is just now reforming school nutrition policies and regulations.²¹

Though new, healthier national standards for both vending machines and school breakfast and lunch programs are on the way, schools will face major barriers to meeting the new standards, which call for more fruits, vegetables and whole grains in school meals and less calories and fat.

In the early years of the National School Lunch Program,

schools received financial assistance to help cover the cost of expensive commercial-grade equipment purchases. But in 1981, Congress eliminated that assistance and slashed other support for school meals. Since then, as food prices have climbed, many school nutrition programs have struggled to break even.

Crucial Next Steps for Congress

If America's cafeterias are going to switch to healthier meals that include more fruits, vegetables, whole grains and low-fat and nonfat milk, schools will need additional resources. The historic Healthy, Hunger-Free Kids Act cannot play its crucial role in reversing the childhood epidemic of obesity unless Congress acts now to:

Upgrade equipment: New refrigerators will be needed to store healthier foods. Freezers can keep freshly-prepared food safer longer, reducing the need to rely on canned or pre-processed foods. More ovens are needed to replace deep fryers, and salad bars will help children begin to make wiser food choices.

Nationally, nearly half of school food service professionals still use deep-fat fryers in food preparation, and only about 15 percent of public school cafeterias have salad bars.²² Many schools want to add them, but they cannot afford the \$2,500 expense. An effort in 2009 to help schools nationwide to upgrade their cafeteria equipment received applications for five times the amount of funding available.²³

Train cafeteria workers: Without improved training, bringing more fresh foods into the cafeteria could lead to spoilage and increased risks to children. Staff will also need more coaching in preparing meals with fresh ingredients that are more appetizing. As in any restaurant, properly trained staff will be essential for producing healthier meals that kids can enjoy. In a recent survey, school nutrition directors reported that finding skilled cafeteria workers is their number one challenge.²⁴

Research has found that government grants for kitchen upgrades and training can significantly improve the nutritional quality of school meals, so upgrading equipment and training is crucial for the new policies on healthier meals to work.²⁵



Credit: Flickr Creative Commons, 2011



There is another point to keep in mind: encouraging kids to eat healthier meals will backfire if the meals served are not well-prepared and appetizing. The goal is not just to hand out healthier meals, but to help children adopt healthier eating and exercising habits for life. Fresher, more appetizing meals are essential if we are to convince children that they – and the rest of their family – can cut back on their consumption of unhealthy foods and sugary beverages and switch to healthier foods. As one elementary student asked at a school providing healthier foods, “Can I take my snack home for my brother? He’s never tasted a pear.”²⁶

Conclusion

After World War II, military leaders sounded the alarm about the health of America’s children. The President and Congress heeded that warning by enacting the National School Lunch Program. Now, retired military leaders have again sounded the alarm, and Congress responded by passing the new

Endnotes

- 1 U.S. Congress. (1945). House of Representatives 49th Congress 1st Session, Hearings Before The Committee on Agriculture on H.R. 2673, H.R. 3143 (H.R. 3370 Reported). Bills Relating to the School-Lunch Program, March 23-May 24 1945. Testimony of Major General Lewis B. Hershey.
- 2 Center of Accessions Research (CAR), United States Army Accessions Command, Fort Knox, KY, data provided by Lt. Colonel Gregory Lamm, Chief, Marketing and Research Analysis Division, February 25, 2010; Cawley, J. & Maclean, J.C. (2010). Unfit for service: The implications of rising obesity for US Military recruitment. Cambridge, MA: National Bureau of Economic Research. The Accession Command’s estimate that 27 percent of 17- to 24-year-old Americans are too heavy to join is based in part on a survey done for them by the Lewin Group in 2005. The National Bureau on Economic Research (NBER) study is an analysis of data from the National Health and Nutrition Examination Survey (NHANES) study. The NBER analysis looks at eligibility rates for males and females based on BMI and body fat and exclusion criteria for the different services. Based on the NBER analysis, we conclude that approximately 23 percent of adults eligible by age would not be able to join the Army because of excess body fat. Taking both studies into account, the NBER analysis of NHANES data and the Accessions Command’s analysis, we conclude that approximately one quarter of young Americans would be too heavy to join the military if they chose to do so.
- 3 This pooled result for 2008-2010 is from the Centers for Disease Control and Prevention’s Behavioral Risk Factor Surveillance System, (BRFSS), a phone survey of over 350,000 individuals each year. National Center for Chronic Disease Prevention & Health Promotion. (2011). Prevalence and trends data – Overweight and obesity. Behavioral Risk Factor and Surveillance System. Washington, D.C.: U.S. Department of Health and Human Services. Retrieved on August 17, 2011 from <http://apps.nccd.cdc.gov/BRFSS/>
- 4 This calculation of the excess pounds 18- to 24-year-old American women and men would have had to lose to be of healthy weight (below a BMI of 25) in each state and nationally was calculated by the CDC’s epidemiologist who processes BRFSS data, Liping Pan, and was provided in a table to MISSION: READINESS in a personal communication, March 18, 2010 and was originally reported in our national Too Fat to Fight report. Other findings for this survey can be found at: National Center for Chronic Disease Prevention & Health Promotion. (2011). Prevalence and trends data – Overweight and obesity. Behavioral Risk Factor and Surveillance System. Washington, D.C.: U.S. Department of Health and Human Services. Retrieved on August 17, 2011 from <http://apps.nccd.cdc.gov/BRFSS/>
- 5 The tank estimate is from: M1 Abrams main battle tank. Retrieved on March 29, 2011 from <http://www.globalsecurity.org/military/systems/ground/m1-specs.htm> One tank equals 60 tons, or 120,000 lbs. 1.4 million pounds that must be lost equals roughly 11 tanks.
- 6 This is pooled result for 2007-2009 is from the Centers for Disease Control and Prevention’s Behavioral Risk Factor Surveillance System, (BRFSS), a phone survey of over 350,000 individuals each year. National Center for Chronic Disease Prevention & Health Promotion. (2010). Prevalence and trends data – Overweight and obesity. Behavioral Risk Factor and Surveillance System. Washington, D.C.: U.S. Department of Health and Human Services. Retrieved on March 29, 2011 from <http://apps.nccd.cdc.gov/BRFSS/list.asp?cat=OB&yr=2009&qkey=4409&state=US>
- 7 Levi, J. Laurent, R., Segal, L.M. & Kohn, D. (2011). F as in fat: How obesity policies are failing in America 2011. Washington, D.C.: Trust for America’s Health, Robert Wood Johnson Foundation. Retrieved on August 22, 2011 from <http://healthyamericans.org/report/88/>; O’Dell, C., Carroll, M.D., Curtin, L.R., Lamb, M.M., & Flegal, K.M. (2010). Prevalence of high body mass index in US children and adolescents, 2007-2008. *Journal of the American Medical Association*, 303(3), 242-249.
- 8 Story, M. (2009). The third School Nutrition Dietary Assessment Study: Findings and policy implications for improving the health of US children. *Journal of the American Dietetic Association*, 109(2), 57-513.
- 9 Olshansky, S.J., Passaro, D.J., Hershow, R.C., Layden, J., Carnes, B.A., Brody, J., Hayflick, L., et al. (2005). A potential decline in life expectancy in the United States in the 21st century. *New England Journal of Medicine*, 352(11), 1138-1145; Kulkarni, S.C., Levin-Rector, A., Ezzati, M. & Murray, C. (2011). Falling behind: life expectancy in US counties from 2000 to 2007 in an international context. *Population Health Metrics*, 9(16).
- 10 Gilroy, C. (March 3, 2009). Prepared statement of Dr. Curtis Gilroy, Director of Accession Policy in the Office of the Under Secretary of Defense for Personnel & Readiness. Before the House Armed Services Personnel Subcommittee “Recruiting, Retention and End of Strength Overview.”
- 11 Chapman, C., Laird, J., & KewalRamani, A. (2010). Trends in high school dropout and completion rates in the United States: 1972-2008 compendium report. Washington, DC: US Department of Education. Retrieved on February 22, 2011 from <http://nces.ed.gov/pubsw2011/2011012.pdf>; Theokas, C. (2010). Shut out of the military: Today’s high school education doesn’t mean you’re ready for today’s Army. Washington, DC: The Education Trust. Retrieved on February 22, 2011 from <http://www.edtrust.org/sites/edtrust.org/files/publications/files/>

“80 percent of children who were overweight at ages 10-15 were obese at age 25.”

Source: Frieden, Dietz, & Collins, 2010, *Health Affairs*

Healthy, Hunger-Free Kids Act. This year, however, Congress needs to finish the job by making sure schools have the right equipment and worker training needed to serve our children healthier and more appealing food.

The United States military stands ready to protect the American people, but if we do not help ensure that future generations grow up to be healthy and fit, that will become increasingly difficult. The health of our children and our national security are both at risk. Decisive action by Congress is still needed.

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- 12 Center of Accessions Research (CAR), United States Army Accessions Command, Fort Knox, KY, data provided by Lt. Colonel Gregory Lamm, Chief, Marketing and Research Analysis Division, February 25, 2010.
- 13 Gilroy, C. (March 3, 2009). Prepared statement of Dr. Curtis Gilroy, Director of Accession Policy in the Office of the Under Secretary of Defense for Personnel & Readiness. Before the House Armed Services Personnel Subcommittee “Recruiting, Retention and End of Strength Overview.”
- 14 Stanley, C.L. (March 17, 2010). Prepared statement of the honorable Clifford L. Stanley, Under Secretary of Defense for Personnel & Readiness before the House Armed Services Military Personnel Subcommittee. Retrieved on March 29, 2011 from http://armedservices.house.gov/index.cfm/files/serve?file_id=b1f5267-5b92-4cc7-8380-40f604a87460
- 15 See for example: Associated Press. (2005). Army’s recruiting lowest in years. Retrieved on March 29, 2011 from <http://www.military.com/NewsContent/0,13319,77951,00.html>
- 16 Stanley, C.L. (March 17, 2010). Prepared statement of the honorable Clifford L. Stanley, Under Secretary of Defense for Personnel & Readiness before the House Armed Services Military Personnel Subcommittee. Retrieved on March 29, 2011 from http://armedservices.house.gov/index.cfm/files/serve?file_id=b1f5267-5b92-4cc7-8380-40f604a87460
- 17 Dall, T.M., Zhang, Y., Chen, Y.J., Wagner, R.C., Hogan, P.F., Fagan, N.K., et al. (2007). Cost associated with being overweight and with obesity, high alcohol consumption, and tobacco use within the Military Health System’s TRICARE prime-enrolled population. *American Journal of Health Promotion*, 22(2), 120-139.
- 18 Dall, T.M., Zhang, Y., Chen, Y.J., Wagner, R.C., Hogan, P.F., Fagan, N.K., et al. (2007). Cost associated with being overweight and with obesity, high alcohol consumption, and tobacco use within the Military Health System’s TRICARE prime-enrolled population. *American Journal of Health Promotion*, 22(2), 120-139.
- 19 Frieden, T.R., Dietz, W., & Collins, J. (2010). Reducing childhood obesity through policy change: Acting now to prevent obesity. *Health Affairs*, 29(3), 357-363.
- 20 Story, M. (2009). The Third School Nutrition Dietary Assessment study: Findings and policy implications for improving the health of US children. *Journal of the American Dietetic Association*, 109(2), 57-513.
- 21 Hawaii State Department of Health. (2008). DOE’s wellness guidelines. 2nd Annual Hawaii Parent Guide: A Resource for Families. Honolulu, HI: Author; KITV Honolulu. (May 29, 2011). Meals from scratch planned for Hawaii schools. Retrieved on August 23, 2011 from <http://www.kitv.com/news/28066469/detail.html?tf=hon>
- 22 School Nutrition Association. (2007). *TrendSets Newsletter*, volume 3. Cited in Kids’ Safe & Healthy Foods Project. (2010). Tools for helping school meals make the grade. Philadelphia, PA: The Pew Charitable Trusts. Retrieved on April 21, 2011 from http://pewwpdev.forumone.com/wpcontent/uploads/2011/FINAL%20Fact%20Sheet_Equipment%20and%20Training%20March%202011.pdf; The Boston Globe. (November 22, 2010). First Lady encourages Miami students to eat greens. Retrieved on April 21, 2011 from http://www.boston.com/news/nation/articles/2010/11/22/first_lady_encourages_miami_students_to_eat_greens/ Twenty-one percent of public schools offer a salad bar at least once per week, according to a United States Department of Agriculture study, but that does not mean they have actual salad bar equipment. US Department of Agriculture. (2002). School lunch salad bars. Nutrition Assistance Program report series. NO. CN-02-SB. Alexandria, VA: Author. Retrieved on April 21, 2011 from <http://www.fns.usda.gov/ora/menu/published/CNP/FILES/saladbar.pdf>
- 23 Kids’ Safe & Healthy Foods Project. (2010). Tools for helping school meals make the grade. Philadelphia, PA: The Pew Charitable Trusts. Retrieved on April 21, 2011 from http://pewwpdev.forumone.com/wpcontent/uploads/2011/FINAL%20Fact%20Sheet_Equipment%20and%20Training%20March%202011.pdf
- 24 School Nutrition Association. (2007). *TrendSets Newsletter*, volume 3. Cited in Kids’ Safe & Healthy Foods Project. (2010). Tools for helping school meals make the grade. Philadelphia, PA: The Pew Charitable Trusts. Retrieved on April 21, 2011 from http://pewwpdev.forumone.com/wpcontent/uploads/2011/FINAL%20Fact%20Sheet_Equipment%20and%20Training%20March%202011.pdf. The sample size was 100 school food service professionals so the margin of error is fairly large at 10 percent.
- 25 Wagner, B., Senauer, B. & Runge, C.R. (2007). An empirical analysis of and policy recommendations to improve the nutritional quality of school meals. Review of agricultural economics, 29(4), 672-688. Cited in Kids’ Safe & Healthy Foods Project. (2010). Tools for helping school meals make the grade. Philadelphia, PA: The Pew Charitable Trusts. Retrieved on April 21, 2011 from http://pewwpdev.forumone.com/wpcontent/uploads/2011/FINAL%20Fact%20Sheet_Equipment%20and%20Training%20March%202011.pdf
- 26 Robert Wood Johnson Foundation. (2009). Albuquerque: Introducing fresh snacks to children. Retrieved on March 30, 2011 from <http://www.rwjf.org/pr/product.jsp?id=37931>

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