Weight of the Nation:

CDC's Inaugural Conference on Obesity Prevention and Control

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DR. KOH: Thank you so much for the Honor of inviting me to speak to you at this incredible conference. I've had the great privilege of being the assistant secretary for Health for a little over one month. And part of the reason I find this new job so stimulating is that it usually involves both opportunity and challenge all at the same time. But what I want to do is to thank every person who is here because we have a common mission, and we have a common passion, and we have a common sense of purpose, and that is a mission and a passion and a purpose that is dedicated to advancing public health and prevention. We want to help all people reach their highest attainable standard of health. As the World Health Organization has put it and to help each person enjoy health in all its dimensions. And in the first few weeks of this job, I think almost every day about the World Health Organization's definition of health. This definition was written over 60 years ago, and it reads as follows: "Health is a state of complete physical, emotional, and social well-being and not merely the absence of disease and infirmity".

Isn't that beautiful? Health is a state. Health is a state of complete physical, emotional and social wellbeing and not merely the absence of disease or infirmity. In short, our good health is a gift. It is a precious gift. It's fragile. We have it today. We hope we will have it tomorrow, and the only way to protect that gift is through the power of public health and prevention.

First, let's start by viewing the landscape of obesity prevention, which is littered with giant obstacles. We have heard the main challenges repeated over and over in these first two days of this conference; that two-thirds of adults and one-fifth of kids are overweight or obese; that the costs of obesity are rising and putting great strains on our medical system. And this is yet another area where there are terrible disparities and inequities, where people of color and those of lower income are disproportionally burdened. It's hard to believe that in 2000 our Nation set a Healthy People 2010 objective to move from a baseline of 42% of adults with a healthy weight to a target of 60% of adults by the year 2010. And sadly we now note that we are going exactly the opposite way, so that the final number will be about half that target by the year 2010.

The end result of this we have heard repeatedly will be more preventable suffering related to diabetes, cardiovascular disease, arthritis, stroke, some cancers and the list goes on and on. Not the World Health Organization definition of health. So, what can we do? At times like this, I think of the wonderful quote from my wonderful friend late Rev. William Sloane Coffin, "Giant obstacles are brilliant opportunities,

brilliantly disguised as giant obstacles." And that's what we're doing today at this incredible conference. We are investing in new approaches to prevention, because as the saying goes, "If you always do what you've always done, you'll always get what you always got." We need something new. We need the broadest possible approach to prevention and that's represented by all of you who I regard as pioneers in prevention in the new 21st century.

What I feel from you is a renewed sense of commitment to public health and prevention in the broadest possible sense. The timing for this conference is great with a new administration that believes in prevention, a president that believes in health care reform and prevention, a secretary that believes in prevention, and a Department of Health and Human Services that wants to help all of you and help every American reach their highest attainable standard for health.

My own passion for prevention comes from my career as a physician and as a direct healthcare provider that has extended for over 30 years. And I know that I speak for all the direct healthcare providers in this room, that, as a group, we have cared for too many patients who have suffered preventable suffering and died preventable deaths. This is simply unacceptable. We need better ways, and we need strategies that are going to extend across the lifespan from birth until death, and we need policies and strategies that are going to make a difference in the healthcare realm but throughout government and throughout society at large. We have to understand that, first of all, this issue, like so many others in public health, begins in childhood in the preschool years. And as a critical 2006 Institute of Medicine report concluded, "Food and beverage marketing practices geared to children and youth are out of balance with recommended, healthful diets and contribute to an environment that puts their health at risk". So, our kids get off to an unhealthy start, and then it's all down hill from there. So we need your commitment in the involvement of people in public health and in business and in government and in academia to all contribute to new chapters in prevention. We need to work, not just by caring for individuals, which is very important -- and I say that as a physician -- but by working through all the social determinants of health, that you've heard about over the last few days, to make our society healthier.

In our work, which takes the broadest possible perspective, must address the full constellation of forces that are impacting on the obesity epidemic; not just genetics and biology, although they are very important, but also culture, values, economics, business, physical environments, social environments, policies and commercial and media influences.

I am so pleased that the CDC has taken the lead in this critical area through their measures project unveiled by the CDC Director, Dr. Frieden. And as you know, it summarizes some 26 recommendations that are organized into six categories. First, promoting availability of affordable healthy food and vegetables. Second, supporting healthy food and beverage choices. Third, encouraging breastfeeding, Fourth, encouraging physical activity. Fifth, creating safe communities that support physical activity. And, sixth, encouraging communities to organize for change. That's perhaps the most important because all public

health is local. It's got to start and be sustained at the local level. And you-all are leaders here that can make that happen.

I'm also thrilled to say that the Department of Health and Human Services wants to join you and support you as we, as a nation, develop a national action plan on obesity prevention and healthy weight. They'll make a difference for future generations. We want to develop and implement this plan in collaboration with all of you and the Department wants to give its absolute full support because this is one of the critical health challenges of our time.

In my new post, as Assistant Secretary for Health, I have the great honor of overseeing the Office of Public Health and Science, which has about a dozen offices, which include women's health, minority health, regional offices and regional health administrators, the Commission Corp and the Office of the Surgeon General, just to name a few. All of these offices are committed to this critical area of obesity prevention and healthy weight.

I wanted to make some particular comments about the Office of Disease Prevention and Health Promotion led by Penny Slade-Sawyer. This Office of Disease Prevention and Health Promotion puts forth the healthy people process and many of you know that as 2010 is approaching, we are now actively moving toward a healthy people 2020 planning process, which leverages the best insights in science to guide our planning as a nation to make our country reach its highest attainable standard of health.

Our Office of Disease Prevention and Health Promotion has also released the first ever comprehensive physical activity guidelines for Americans that was done in collaboration with wonderful scientific expertise and support from the CDC, and we are ecstatic that this has generated worldwide interest. We are actively disseminating these first ever federal activity guidelines through e-marketing tools, through pod casts, even through Twitter.

And these guidelines, most importantly offer people more flexibility than ever before to send the message of: Be active your way to try to get your 150 minutes a week of moderate exercise into your weekly routine.

Our same office also works in collaboration with the Department of Agriculture in updating evidence-based dietary guidelines. This was last put forward in 2005, and we are in the process of updating that now in collaboration with the Department of Agriculture, and we are looking forward to putting out those guidelines for the American people as well with your support.

Now, all these documents and statements and guidelines are critical, but they won't make a difference unless they are implemented and create action on the other end, particularly, if I can say with respect to policy.

I am delighted to see the theme of health in all policies resonating throughout this conference. Thank you for all of your creative input into helping people with promoting the best healthy routines that they possibly can supported by policies throughout all parts of society. And for those of you who want to learn more about this, let me refer you to a brilliant editorial in the July 15th issue of the Journal of the American Medical Association co-written by Janet Collins and Jeff Copeland. Dr. Collins and Copeland, in that editorial, suggests that a step toward health in all policies is to use health impact assessments just like we use environmental impact assessments of when we are looking at those aspects of public health on our society. So, this is yet another way of using the so-called social determinants to make our society healthy in the broadest sense and in the fullest sense.

In my view, we need a combination of the individual approach but also the broad policy approach and the social determinants approach that involves tools like the health impact assessments that can extend into housing, into energy, into education, into agriculture, transportation, development, business, academia -- the list goes on and on -- so that the message through all of it is a powerful message of prevention.

So, in short and in summary, these are very, very exciting times for our public health and prevention, and I am delighted to see you, as pioneers of prevention, here at this historic conference. I must say that there are some who are doubters. There are some folks who have the temerity to suggest that prevention is somehow not worth it or, even worse, God forbid, boring.

So, of course, I disagree, and I think we all disagree, but we need to renew our commitment to communicating public health and the power of prevention in the most effective way. When prevention works, everyone truly understands that our good health is a precious and fragile gift. When prevention works, everyone gets to enjoy a special extra moment with a friend or family member. When prevention works, we all get to enjoy another birthday with our loved ones. When prevention works we have the privilege of growing older. When prevention works, we enjoy the gift of having kids seeing them grow up and have kids of their own. When prevention works, as the Johns Hopkins School of Public Health likes to say: "Public health saves lives millions at a time." And when prevention works, we all enjoy the miracle, the absolute miracle of a perfectly healthy, normal day. Thank you for being pioneers in prevention.