



2019 Legislative Session Recap

www.PartnershipforaHealthyTexas.org • [@txlegeobesity](https://twitter.com/txlegeobesity)



Obesity is a major public health crisis in Texas¹:



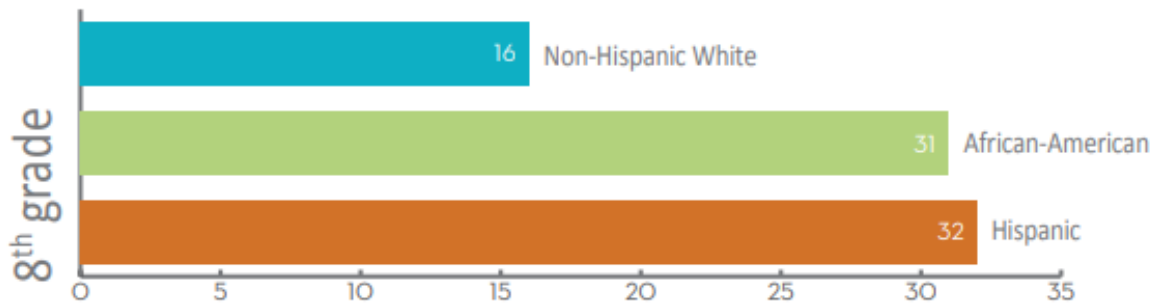
Texas has the 7th highest obesity rate for youth ages 10-17 and the 14th highest adult obesity rate in the U.S.¹



Over 600,000 Texas youth ages 10-17 have obesity.

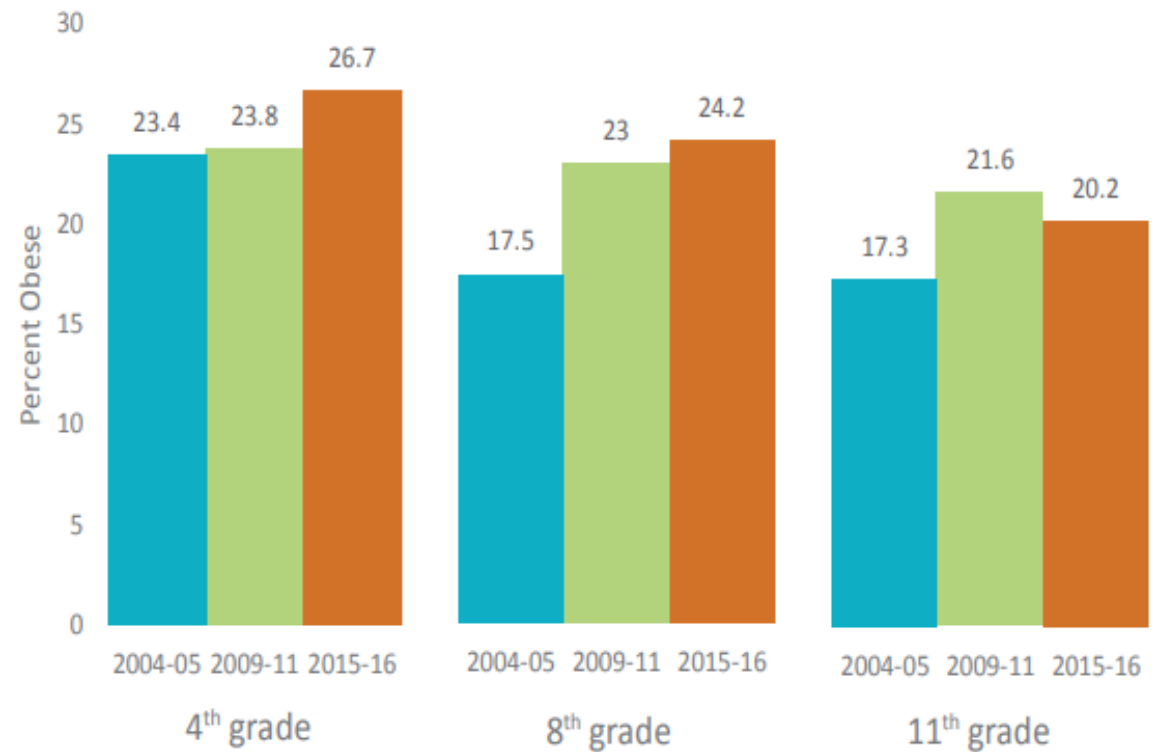


In Texas, Hispanic and African American children have nearly twice the rate of obesity compared to non-Hispanic white children².



Percent of Texas children who have obesity, by grade and ethnicity^{2,3}

Childhood obesity is getting worse over time.



Trends in childhood obesity from 2004-05 to 2015-16^{2,3}

Childhood Obesity is Risky

Obesity is associated with increased lifetime risks for adverse health outcomes^{4,5}, including:

- diabetes
- heart disease
- asthma
- high blood pressure
- depression
- sleeping difficulties
- higher risk of being obese as an adult

Childhood Obesity is Costly

Childhood obesity results in extra health care costs. A child with obesity has **\$12,900** more in medical costs than a child with normal weight⁶.

Educational attainment is associated with lifetime earnings⁷. Obesity in childhood is associated with poorer educational outcomes^{8,9,10}, including:

- lower GPA
- lower reading scores
- lower math scores
- more school absences

We must do more to combat obesity in Texas.



Context of the 86th Legislative Session

Time is of the essence

- Less than 140 days to pass legislation
- Over 7,800 bills filed; only 1,400 passed
- Must pass budget bill (~\$250 billion)



Leadership Priorities

- School finance reform
- Property tax relief
- School safety & student mental health
- Hurricane Harvey



How do we elevate obesity as a pressing issue with so much on lawmakers' minds?



**PARTNERSHIP FOR
A HEALTHY TEXAS**

CONQUERING OBESITY

Mission:

To develop and promote policies that prevent obesity in Texas

Guiding Principles:

- Encourage collaboration among all interested parties in reducing obesity
- Inform policy makers about the consequences of the disease
- Promote evidence-based strategies at multiple levels: individual, family and community
- Serve as a resource for individuals and entities interested in addressing obesity prevention



**PARTNERSHIP FOR
A HEALTHY TEXAS**

CONQUERING OBESITY

Our History:

- The Partnership began in 2006 when key health-related organizations banded together to address the ever growing problem of obesity in Texas communities.
- The Partnership brought together research experts to develop a statewide policy document, the Texas Obesity Policy Portfolio, which identified evidence based policy initiatives that have proven to have a positive impact on fighting obesity.
- During the Partnership's first session educating lawmakers, five of six legislative priorities were passed.
- The Partnership for a Healthy Texas is now the most recognized and valued advocacy voice in the fight to end obesity in Texas.



Historical Accomplishments:

- Passed legislation to require minimum minutes of physical activity in schools and established Fitnessgram
- Consistently defeat legislation to eliminate Fitnessgram and coordinated school health
- Worked with the Texas Department of Agriculture to put nutrition policy in rule rather than have to go through legislature
- Strengthened School Health Advisory Councils by expanding their scope to all components of coordinated school health and adding accountability through Campus Improvement Plan requirements
- Supported passage of funding for Dept. of State Health Services for evidence based obesity prevention initiatives
- Early childhood interagency council established to study nutrition and physical activity in early childcare setting

In the News



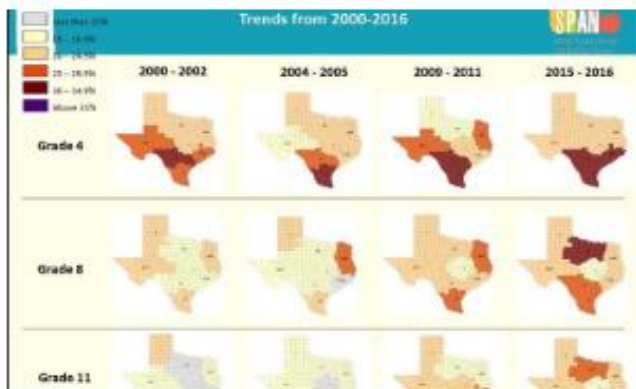
NEWS

HEALTH ADVOCACY GROUP TAKES ISSUE WITH DEEP FRYERS IN SCHOOLS

The medical director of a children's health advocacy group said a recent move to reverse a 10-year ban on deep fryers in schools sends the wrong message to kids...

[READ MORE](#)

September 5, 2018



NEWS

STATEWIDE SURVEY SHOWS CHILDHOOD OBESITY RATES IN EAST TEXAS

More than 20 percent of certain school-aged children in East Texas are considered obese or severely obese, but the region is not among the worst in the state, according to a new report...

[READ MORE](#)

September 18, 2017



NEWS

JUNK FOOD COMPANIES LOVE SID MILLER

The results are in for public comments about Agriculture Commissioner's push for more deep fryers in schools, and it's a landslide: 105-8...

[READ MORE](#)

June 9, 2015



Steering Committee Organization Members





Find what works for Texans

Work with leading research institutions, state agencies, and a wide range of non-profit organizations to identify policies and best practices that will yield the greatest impact on obesity in Texas.



Set priorities for the Legislature

Collaborate with advocacy groups to set specific legislative priorities, and do the legwork to get legislators and the public informed and in support.




Follow through and track success

After policies make their way into law, the Partnership ensures they are enacted as intended and monitored and evaluated for efficacy.

OUR LATEST

Partnership for Healthy Texas in the 2017 Texas Legislative Session

- 5 priorities:
 - Quality physical education
 - Healthy food in state property vending machines
 - Creating a Vision Zero Action Plan for Texas
 - Recognize licensed out of school time providers who above any beyond minimum standards for healthy eating and physical activity
 - Update child care minimum standards related to physical activity and nutrition
- No progress during session



The Partnership for a Healthy Texas

WWW.PARTNERSHIPFORAHEALTHYTEXAS.ORG

The Partnership for a Healthy Texas, a coalition of over 130 organizations, has set out to identify and support policy that will have the most impact on the obesity epidemic in our state. The Partnership began in 2006 and has since become a recognized and valued partner in the fight against obesity and will continue to have a strong influence on Texas policy.

Mission
To develop and promote state policies and programs that prevent obesity in Texas

Purpose

- Encourage collaboration among all interested parties in reducing obesity
- Inform policy makers about the consequences of the disease
- Promote evidence-based strategies at multiple levels: individual, family, community, and policy
- Serve as a resource for people interested in addressing obesity prevention and treatment

OUR LEGISLATIVE AGENDA

1. Ensure all Texas schools provide adequate, quality physical education to reduce the risk for obesity and related chronic diseases so that students are better equipped to succeed academically and socially.
2. Include foods of higher nutritional value in vending machines on state property to give state employees the option to make healthier food choices that will reduce their risk for obesity and diet-related chronic disease.
3. Make communities more conducive to regular physical activity and encourage Texans to walk, bike, and utilize public transportation by creating a task force to design a Vision Zero Action Plan for Texas.
4. Recognize licensed out-of-school time providers who go above and beyond minimum state licensing requirements by adopting national standards for evidence-based healthy eating and physical activity.
5. Ensure children served by licensed childcare providers receive nutritious foods and drinks to help them develop healthy eating and physical activity habits as they learn and develop in early care environments.

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Clearly Articulate the Problem

Healthy Children, Healthy State: **CHILD OBESITY CRISIS IN TEXAS**
 Michael & Susan Dell Center for Healthy Living

Obesity is a major public health crisis in Texas¹:

- Texas has the 7th highest obesity rate for youth ages 10-17 and the 14th highest adult obesity rate in the U.S.¹
- Over 600,000 Texas youth ages 10-17 have obesity.
- In Texas, Hispanic and African American children have nearly twice the rate of obesity compared to non-Hispanic white children².

Childhood Obesity is Risky

Obesity is associated with increased lifetime risks for adverse health outcomes^{4,5}, including:

- diabetes
- heart disease
- asthma
- high blood pressure
- depression
- sleeping difficulties
- higher risk of being obese as an adult

Childhood Obesity is Costly

Childhood obesity results in extra health care costs. A child with obesity has \$12,900 more in medical costs than a child with normal weight⁶.

Educational attainment is associated with lifetime earnings⁷. Obesity in childhood is associated with poorer educational outcomes^{8,9,10}, including:

- lower GPA
- lower reading scores
- lower math scores
- more school absences

Trends in childhood obesity from 2004-05 to 2015-16^{2,3}

Grade	2004-05	2009-11	2015-16
4 th grade	23.4	23.8	26.7
8 th grade	17.5	23	24.2
11 th grade	17.3	21.6	20.2

Percent of Texas children who have obesity, by grade and ethnicity^{2,3}

Grade	Non-Hispanic White	African American	Hispanic
8 th grade	~15%	~30%	~30%

We must do more to combat obesity in Texas.

Logos: UTHHealth, Michael & Susan Dell Center for Healthy Living, Partnership for a Healthy Texas, Texas Health and Human Services, Texas Department of State Health Services.

Identify the Solutions

PARTNERSHIP FOR A HEALTHY TEXAS
 CONQUERING OBESITY

Priorities for the 86th Texas Legislative Session

Dedicated to developing and promoting policies and programs that prevent obesity in Texas.

partnershipforahealthytexas.org

[@txlegeobesity](https://twitter.com/txlegeobesity)

Logos: UTHHealth, Michael & Susan Dell Center for Healthy Living, Partnership for a Healthy Texas, Texas Health and Human Services, Texas Department of State Health Services.



**PARTNERSHIP FOR
A HEALTHY TEXAS**
CONQUERING OBESITY

The Partnership for a Healthy Texas, a coalition of over 50 organizations, has identified five health policies for consideration by the 86th Texas Legislature. These policies are aimed at positively impacting the obesity epidemic in Texas, particularly among school-age children.

Summary of Priorities for 86th Legislative Session

- 1) Require school districts to institute recess policies that allow children the opportunity to practice life skills and be active.
- 2) Increase quality physical education (PE) in schools to ensure our children are active, healthy and ready to learn.
- 3) Re-establish the requirement for one semester of health education for high school graduation to ensure our youth are prepared to live a healthy life.
- 4) Update minimum standards for child care facilities for nutrition, active play, and screen time to allow the smallest Texans the opportunity to build a healthy life.
- 5) Support legislation and policies at the state level that incentivize the purchase of healthy foods with Supplemental Nutrition Assistance Program (SNAP) dollars.

Steering Committee Organization Members



Restore Health Education

Issue

Texas students are not receiving the information necessary to make healthy decisions.

A comprehensive skills-based health education program is a critical component to a high school student's well-rounded education and is needed to support healthy and academically successful students.

Various state mandates require schools to implement specific topics such as bullying prevention, tobacco prevention, Parenting and Paternity Awareness (PAPA), and CPR instruction, yet the venue for implementation (Health Education) has been limited.

Background

In 2009, the Texas Legislature cut health education as a high school graduation requirement. This greatly decreased the number of students exposed to critical information around drug use, healthy relationships, mental health, infectious disease control, and even topics like responsibility and compassion.

Adolescents who participate in health education are better able to access, understand, and advocate for health information and services. This can help students maintain or enhance their health and influence the health behaviors of those around them or in their care.

Health education can enhance efforts to decrease absenteeism, reduce risky behavior, promote social and emotional health, prevent disease, and increase students' ability to be college and career ready.

Recommendations

- 1) Restore the requirement that all Texas high school students receive the 0.5 health education credit as a graduation requirement.

About Us

The Partnership for a Healthy Texas, a coalition of over 50 organizations, began in 2006, when several health-focused organizations banded together to take action. The Partnership for a Healthy Texas is now the most recognized and valued advocacy voice in the fight to end obesity in Texas.

References available at partnershipforahealthytexas.org/HealthEd

Issue at a glance

0
credits in Health Education are required for high school graduation in Texas.

2009
Health Ed was eliminated as a graduation requirement by the 81st Texas Legislature.

1
venue (Health Ed) for a variety of currently required state health topics.

0.5
credits should be restored as a high school graduation requirement.

Create SNAP Incentive Programs

- HB 3541 (Rose)/SB 1834 (Alvarado)
- Requires HHSC to develop a pilot program to incentivize purchase of Texas grown fruits or vegetables under SNAP
 - Pilot allows SNAP recipients to double their fruit and vegetable purchases.
- Allows HHSC to submit applications for federal funds to go towards this purpose
- Requires HHSC to study existing programs across the state.
- Passed both chambers; signed by the Governor.



SNAP Incentive Programs

Support HB 3541 & SB 1834

Issue
at a glance

Issue

All Texans need access to affordable healthy foods, and SNAP incentive programs offer a solution.

Low-income families are disproportionately impacted by obesity. Unhealthy food is inexpensive in the short-term, but the consumption of fresh fruits and vegetables – which may carry a higher price tag – is directly linked to a reduced burden of chronic disease and obesity.

Texas should take steps to **promote the availability of SNAP incentive programs state-wide, like the popular Sustainable Food Center Double Dollars project,** to benefit the health of the most vulnerable Texans while also boosting local agriculture.

Background

SNAP is a program that helps millions of individuals and families with low-incomes buy groceries. **Almost 30% of all Texas children benefit from the SNAP program and over half of SNAP recipients in Texas are under 18.** SNAP benefits are **100% federally funded,** and the state provides **50% of the cost of administering the program.** **Every dollar spent on the SNAP program generates \$1.80 in economic activity.**

Through the Farm Bill, the **federal government set aside \$250 million over 5 years for SNAP "incentive" programs** to encourage fresh produce consumption. These programs typically give SNAP recipients an extra dollar for every dollar of SNAP benefits spent on locally-grown fresh fruits and vegetables, making healthy food more affordable and effectively doubling the SNAP customer's buying power.

Farmers, grocery store owners, farmer's market vendors, and small retail stores also reap the benefit from higher sales of locally-grown produce. Several successful SNAP incentive programs exist at the local level in Texas, but **no state-level programming or investment exists.**

Recommendations

Direct the Health and Human Services Commission to study local SNAP incentive programs across Texas and create a state pilot to incentivize the purchase of fresh fruits and vegetables in the SNAP program.

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References available at partnershipforahealthytexas.org/SNAP

30%

of Texas children benefit from the SNAP program.

>50%

of SNAP recipients are under the age of 18.

\$250M

in federal funding is on the table for incentive programs.

\$1.80

of economic activity is generated for every dollar spent on the SNAP program.

Recess Policies for Schools

- HB 455 (Allen)/SB 364 (Watson)
- Required the DSHS School Advisory Committee to develop model policies for recess
- Required school districts to adopt a recess policy after reviewing model policy
- Policy must specify:
 - required number of minutes of weekly unstructured play
 - Whether recess can be withheld as a form of discipline
- Overwhelmingly passed both chambers; vetoed by Governor.



Recess Policies for Schools Support HB 455 & SB 364

Issue

Recess provides children with health, social, and academic benefits, yet no statewide policy recommendations exist.

Since 2003, Texas Education Code has required local school health advisory councils (SHACs) to make policy recommendations concerning daily recess for elementary school students, but the state provides no specific guidance to build these recommendations, nor any expectation that the boards adopt a district policy.

Regular activity breaks in the school day are necessary for student success. State guidance is needed to ensure districts provide all students adequate recess time for their academic, social, and mental wellbeing.

Background

Recess is considered unstructured time for physical activity during the school day and should be considered in addition to regular physical education as part of a comprehensive school physical activity program. Recess allows children the opportunity to practice life skills such as cooperation, taking turns, following rules, sharing, communication, negotiation, problem solving, and conflict resolution. Recess provides the creative social and emotional benefits of play.

The National Association for Sport and Physical Education (NASPE) recommends at least 20 minutes of recess each day for all children. According to a recent study, *The Status of School Recess in Texas School Districts*, high-performing school districts were twice as likely to have a recess policy safeguarding the minimum amount of time students have for recess. Guideline compliance depends on awareness, enforcement, and implementation guidance.

Recommendations

- 1) Direct TEA to develop model policies on recess periods during the school day that encourage constructive, age-appropriate outdoor playtime.
- 2) Require each school district board to implement a model recess policy, based on the TEA model policy and recommendations from the local SHAC.

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References available at partnershipforahealthytexas.org/recess

Issue at a glance

20

minutes of recess per day (at least) is recommended.

73%

of TX children do not get the daily recommended amount of physical activity.

0

state-level policy recommendations exist in TX for school recess.

2x

Districts that are high-performing academically are 2x more likely to have a written recess policy than low-performing districts.

Update Child Care Standards

- HB 1808 (Lucio)/SB 952 (Watson)
- Issue at a Glance
 - 31% of 2-5 year olds from low-income families in Texas are overweight or obese
 - Overweight or obese preschoolers are 5x more likely to be overweight or obese in adulthood.
 - Over 1.1 million kids in Texas are cared for in licensed or regulated child care programs.
- Updates and clarifies minimum standards for child care homes and centers related to physical activity, screen time and nutrition
- Aligns minimum standards with best practices from the American Academy of Pediatrics and Department of Agriculture's Child and Adult Food Care Program
- Financial waiver included in bill as compromise with opponents

PARTNERSHIP FOR A HEALTHY TEXAS
CONQUERING OBESITY

Update Child Care Standards
Support HB 1808 & SB 952

Issue at a glance

Issue Child care licensing standards must be improved to ensure kids achieve and maintain a healthy weight and lifestyle.

Early care and education programs play a **critical role in helping kids eat healthy, stay active, and maintain a healthy weight.**

The state already requires child care providers to comply with minimum standards for nutrition, physical activity, and screen time. However, these **minimum standards are not aligned with nationally-recognized best practices for child health.**

Background

About **75% of kids under age 6 spend much of their day in child care outside the home**, meaning that child care programs are the places where kids are forming nutrition and physical activity habits. In fact, **nearly 1 million young kids in Texas are cared for in licensed or regulated child care programs (child care centers or homes).**

Since 1971, Texas has regulated minimum standards for child care licensing. Parents place trust in the state to set the bar at a level that aligns with best practices and updates to the standards are overdue. For example, **current standards allow for 2-5 year olds to have two hours of screen time per day—double the recommended amount for a 24-hour period in this age group.**

Recommendations

- 1) Update minimum standards for **nutrition** to align with the **Child and Adult Care Food Program (CACFP) administered by the Texas Department of Agriculture.**
 - CACFP provides clear, scientifically-backed, age-appropriate guidance that is regularly reviewed and updated; research shows children in CACFP programs receive foods of higher nutritional value.
- 2) Direct Childcare Licensing to update minimum standards for **active play and screen time** to align with the **AAP and Caring for our Children best practices for early education.**

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References available at partnershipforahealthytexas.org/childcare

31% of 2-5 year olds from low-income families in TX are overweight or obese.

5x Overweight or obese preschoolers are **5x more likely** to be overweight or obese in adulthood.

1 million kids in TX are cared for in licensed or regulated child care programs.

31 states & the District of Columbia have aligned their nutrition standards with CACFP.

partnershipforahealthytexas.org

Twitter: @txlegeobesity

The Standards

Nutrition

- CACFP is a popular program Texas has participated in for decades.
- Administered by the Texas Department of Agriculture , CACFP sets out easy-to-understand guidelines for meals and snacks so children of all ages receive a variety of healthy food in care.
- 31 other states adopted laws aligning their minimum standards with CACFP.

Active Play and Screen Time

- Currently, state standards do not say how much physical activity is age-appropriate for children of different stages of development.
- Current standards prohibit screen time for children under age two, but allow up to 2 hours per day by their 2nd birthday.
- Bill updates minimum standards by clarifying amount of offered active play and cutting the amount of allowed screen time for young children



All childcare options available to a family throughout Texas should meet best practice standards endorsed by the American Academy of Pediatrics (AAP). I would expect nothing less for my own children and I want to ensure my patients are guaranteed the same basic level of healthy habit-forming environments.”

- Dr. Kimberly Avila Edwards

Journey through the Legislature

2017 Session

- Heard in both Chamber's Committees
- Failed House floor vote: 59-71

2019 Session

- Passed Senate: 26-5
- Passed House: 110-36
- Became law without Governor's signature.



Invest in Quality Physical Education

- HB 1 (Zerwas), Article XI Budget Rider
- \$500,000 for TEA to provide grants to school districts for additional high quality training for physical education teachers
- No appetite this session to increase required minutes of PE for elementary or middle school
- Budget rider included in House budget, but excluded from final Conference Committee budget



Quality Physical Education

Issue

We need quality physical education in schools to ensure Texas students are active, healthy, and ready to learn.

Quality physical education sets kids on the path to an active healthy lifestyle. Being overweight has become the leading medical disqualifier for 17-24 year olds wishing to serve in the military, making **obesity a threat to our national defense.**

Quality physical education provides students with structured physical activity alongside a planned, sequential, K-12 standards-based program of curricula. Quality PE training for instructors can help schools achieve **>80% more physical activity** time in the weekly minutes allotted for PE.

Background

Physical Education classes and recess have declined in schools nationwide over the past decade, while childhood obesity rates have continued to rise. Increasingly, **PE classes are being led by teachers or instructors who are given little or no PE-specific training or certification.**

Quality PE training could be an effective way to **nearly double daily minutes of physical activity without disrupting the school schedule.** After completing a quality PE training, schools in Ysleta ISD (El Paso) saw an **84% increase in PE class time spent engaged in moderate-to-vigorous physical activity.**

The vast majority of **parents (95%) agree that physical education should be part of a school curriculum for all students in grades K-12.**

Recommendations

- 1) **Recommend all PE teachers be trained in physical education instruction.**
- 2) **Request a wording change from "physical activity" to "physical education," in current and future legislation.**
- 3) **Increase PE minutes from 135 to 150 per week in elementary schools.**
- 4) **Increase PE requirements for middle schools from four to six semesters.**

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References available at partnershipforahealthytexas.org/qualityPE

Issue at a glance

73%

of 17-24 year olds are unfit for military service. The leading medical disqualifier is being overweight.

73%

of TX children do not get the daily recommended amount of physical activity.

>80%

increase in physical activity time during PE class after Quality PE training.

\$33:1

return on investment for PE, through reduced healthcare costs and increased labor participation.

Joint Press Conference on the Importance of Physical Activity for Texas Youth

- Major General (Ret.) Rick Noriega, U.S. Army
- Texas State Senator Donna Campbell
- Deanna M. Hoelscher, Ph.D. Regional Dean, UT Health School of Public Health in Austin and Director, Michael & Susan Dell Center for Healthy Living
- Tim Schauer, Partnership for a Healthy Texas
- Joe McMahan, Texas State Director Missioner Readiness



FOR IMMEDIATE RELEASE |

Contact: Joe McMahan, 512-413-2337, jmcmahan@missionreadiness.org

****Media Advisory for May 1, 2019****

**Retired General and Health Experts to Speak at State Capitol
To Highlight Importance of Physical Activity for Future National Security
*Obesity is a leading medical disqualifier for military service and high-quality physical education in schools can help address this problem***

WHAT: Press conference about the connection between physical activity and military readiness

WHERE: Texas Senate Press Room (2E.9) at State Capitol, Austin, Texas

WHEN: Wednesday, May 1, 2019 at 9:45 AM

WHO: Major General (Ret.) Rick Noriega, U.S. Army
Texas State Senator Donna Campbell
Deanna M. Hoelscher, Ph.D., Regional Dean, UT Health School of Public Health in Austin and Director, Michael & Susan Dell Center for Healthy Living (Content Expert)
Tim Schauer, Partnership for a Healthy Texas
Joe McMahan, Texas State Director, Mission: Readiness

Background:

A retired U.S. Army General, a Texas State Senator, a health expert from the UT School of Public Health, and a representative from a Texas health policy advocacy group will speak at the State Capitol about the importance of high-quality physical education for children's health and future national security.

Nearly one-third of young Americans are now too overweight to serve in the military, and obesity is one of the leading reasons why 73 percent of young adults in Texas would not be able to qualify for military service if they tried to join.

The speakers will urge state legislators to take steps to ensure the health and wellness of students is improved by increasing the quality level of PE, asking schools to adopt a recess policy, and updating the childcare standards regarding physical activity, screen time, nutrition.

General Noriega is a member of Mission: Readiness, the nonprofit organization of more than 750 retired admirals and generals strengthening national security by ensuring kids stay in school, stay fit, and stay out of trouble.

StrongNation.org/MissionReadiness

[Mission_Ready](#)

[MissionReadiness](#)

Restore Health Education

- No specific legislation filed this session
- Difficult to find a champion for bringing back the half credit for health education.
- Need to continue to message that health education can be the home for many health related mandates on schools
- Submitting interim charge on this topic

PARTNERSHIP FOR A HEALTHY TEXAS
CONQUERING OBESITY

Restore Health Education

Issue at a glance

0 credits in Health Education are required for high school graduation in Texas.

2009 Health Ed was eliminated as a graduation requirement by the 81st Texas Legislature.

1 venue (Health Ed) for a variety of currently required state health topics.

0.5 credits should be restored as a high school graduation requirement.

Issue Texas students are not receiving the information necessary to make healthy decisions.

A **comprehensive skills-based health education** program is a critical component to a high school student's well-rounded education and is needed to support **healthy and academically successful students**.

Various **state mandates require schools to implement specific topics** such as bullying prevention, tobacco prevention, Parenting and Paternity Awareness (PAPA), and CPR instruction, yet the **venue for implementation (Health Education) has been limited**.

Background

In **2009, the Texas Legislature cut health education as a high school graduation requirement**. This greatly decreased the number of students exposed to critical information around drug use, healthy relationships, mental health, infectious disease control, and even topics like responsibility and compassion.

Adolescents who participate in health education are better able to **access, understand, and advocate for health information and services**. This can help students maintain or enhance their health and influence the health behaviors of those around them or in their care.

Health education can enhance efforts to **decrease absenteeism, reduce risky behavior, promote social and emotional health, prevent disease, and increase students' ability to be college and career ready**.

Recommendations

1) Restore the requirement that all Texas high school students receive the 0.5 health education credit as a graduation requirement.

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References available at partnershipforahealthytexas.org/HealthEd

partnershipforahealthytexas.org Twitter: @txlegeobesity

Other Partnership for a Healthy Texas Tracked Legislation

Supportive legislation

- Tobacco 21
 - HB 749 (Zerwas)/SB 21 (Huffman)
 - Passed both chambers; signed by the Governor
- Healthy food financing
 - HB 1252 (Rodriguez)
 - Left pending in House Urban Affairs Committee
- Fitnessgram report to parents
 - HB 128 (Hinojosa)
 - Passed the House; failed to receive hearing in Senate Education Committee
- Healthy food in corner stores
 - HB 605 (Thierry)/SB 574 (Miles)
 - Left pending in Senate Finance and House Ways and Means Committees

Problematic legislation

- Includes Fitnessgram in list of repealers
 - SB 1376(Paxton)/HB 3638 (Patterson)
 - Final bill which passed and was signed by Governor did not include repeal of Fitnessgram
- Repeal of SHACs/CPR/Fitnessgram
 - SB 377(Hall)
 - Never received Committee hearing
- Repeal of SHAC requirement
 - SB 441 (Campbell)
 - Never received Committee hearing



Interim Next Steps

Thank our Legislator Champions!



(And cultivate more...)



2019

Partnership for a Healthy Texas Legislative Champion Award



Partnership for a Healthy Texas Retweeted

 **Senator Kirk Watson** ✓
@KirkPWatson

Honored to be the first recipient of the Legislative Champion award by the Partnership for a Healthy Texas. It was especially nice to receive from my friend & great public health advocate @DavidLakey_MD during an event @DellMedSchool. Thx to @txlegeobesity for your work! #txlege



9:18 AM · Sep 13, 2019 · Echofon

10 Retweets 21 Likes

Submit Interim Charge Ideas to Legislators

For House Appropriations and Senate Finance Committees:

Revisit and update the Texas Comptroller's report from 2007 and 2011 on the economic costs of obesity on the state. Specifically, identify future costs on state funded programs such as ERS, TRS, Medicaid and other safety net programs as well as the impact on Texas businesses due to absenteeism, healthcare costs and lost productivity. Recommend strategies to address the costs of obesity in the next biennium's budget cycle and over the next decade.

Rationale: According to the Robert Wood Johnson Foundation, Texas has the 14th highest adult obesity rate in the nation, and the seventh highest obesity rate for youth ages 10 to 17. Obesity contributes to Texas' rising rates of chronic diseases, including diabetes and hypertension, as well as maternal mortality and morbidity, thus increasing costs to state-funded health care programs and reducing working productivity.

Submit Interim Charge Ideas to Legislators

For House Public Education and Senate Education Committees:

Study the quality, amount and scope of physical education and physical activity students are receiving in school districts across the state. Examine data collected by the Texas Education Agency as outlined in Senate Bill 1873 (85th Legislature) and make recommendations that improve access to moderate to vigorous physical activity while increasing academic performance and classroom behavior.

Rationale: According to the Robert Wood Johnson Foundation, Texas has the 14th highest adult obesity rate in the nation, and the seventh highest obesity rate for youth ages 10 to 17. Obesity contributes to Texas' rising rates of chronic diseases, including diabetes and hypertension, as well as maternal mortality and morbidity, thus increasing costs to state-funded health care programs and reducing working productivity. To combat obesity, we must intervene early and teach children healthy physical activity habits.

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For House Public Education and Senate Education Committees:

Examine strategies to streamline and coordinate all health related school activities. Identify venues within the school day to ensure students are receiving comprehensive skills-based health education to promote social emotional health, prevent disease, decrease absenteeism and reduce risky behavior.

Rationale: In 2009, the Texas Legislature cut health education as a high school graduation requirement. This greatly decreased the number of students exposed to critical information around drug use, healthy relationships, mental health, infectious disease control, and even topics like responsibility and compassion. Various state mandates require schools to implement specific topics such as bullying prevention, tobacco prevention, Parenting and Paternity Awareness (PAPA), and CPR instruction, yet the venue for implementation (Health Education) has been limited. Adolescents who participate in health education are better able to access, understand, and advocate for health information and services. This can help students maintain or enhance their health and influence the health behaviors of those around them or in their care.

Begin forming policy priorities for the 2021 Legislative Session

We want to hear from you!

How to Get Involved

- Sign up for coalition emails at:
www.PartnershipforaHealthyTexas.org
- Follow us on Twitter at:
[@TXLegeObesity](https://twitter.com/TXLegeObesity)
- Apply on behalf of your organization to be on the PFHT Steering Committee
- Michael & Susan Dell Center for Healthy Living – Legislative Tracker
<https://sph.uth.edu/research/centers/dell/86th-texas-legislature>

A screenshot of the "Become a Member" sign-up form. The form includes fields for Last Name, Position/Title, and State. There is also a section for Preferred Email Format with radio buttons for HTML and Plain-text. A blue "SUBMIT" button is at the bottom.

Early Childcare Education				
Bill #	Author	Status	Brief Description	Past Bills (2017)
SB 708	State Sen. Judith Zaffirini	PASSED - Signed by the Governor; effective 6/14/19	Mandates that HHSC collect, compile and publish any reported incidents at licensed day-care centers that involve threats to the health, safety or welfare of a child. Companion Bill: HB 1682	
HB 1682	State Rep. John Raney	FAILED TO PASS - passed committee, but did not receive House vote	Mandates that HHSC collect, compile and publish any reported incidents at licensed day-care centers that involve threats to the health, safety or welfare of a child. Companion Bill: SB 708	



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CONQUERING OBESITY

Thank you!

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