

AMENDED IN ASSEMBLY MARCH 26, 2015

CALIFORNIA LEGISLATURE—2015–16 REGULAR SESSION

**ASSEMBLY BILL**

**No. 1357**

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**Introduced by Assembly Member Bloom**

February 27, 2015

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~~An act relating to chronic disease.~~ *An act to add Chapter 5 (commencing with Section 104895.5) to Part 3 of Division 103 of the Health and Safety Code, relating to public health.*

LEGISLATIVE COUNSEL'S DIGEST

AB 1357, as amended, Bloom. ~~Chronic disease.~~ *Children and Family Health Promotion Program.*

*Existing law provides various programs that prevent disease and promote health.*

*This bill would establish the Children and Family Health Promotion Program in the Department of Public Health. This bill would require the program to consist of a competitive grant process in which grants are awarded by the department to counties, cities, nonprofit organizations, community-based organizations, and licensed clinics that seek to invest in childhood obesity and diabetes prevention activities and oral health programs. The bill would authorize the department to award a grant to any entity that will use the grant to support programs that use educational, environmental, policy, and other public health approaches to achieve specified goals.*

*This bill would require the department to develop an application and application process for the program, and would provide that the program will be funded by moneys appropriated by the Legislature to the department for this purpose.*

*This bill would make legislative findings and declarations relating to the consumption of sweetened beverages, childhood obesity, and dental disease.*

~~Existing law provides various programs for the monitoring, treatment, and prevention of chronic disease in California, including heart disease, cancer, and amyotrophic lateral sclerosis (ALS).~~

~~This bill would state the intent of the Legislature to enact legislation that would address the public health crisis relating to the growing prevalence of preventable chronic disease.~~

Vote: majority. Appropriation: no. Fiscal committee: ~~no~~-yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

1     *SECTION 1. The Legislature finds and declares all of the*  
2     *following:*

3     *(a) Over 2.3 million California adults report having been*  
4     *diagnosed with diabetes, representing one out of every 12 adult*  
5     *Californians. The vast majority of diabetes cases in California are*  
6     *type 2, representing 1.9 million adults.*

7     *(b) According to the California Department of Public Health,*  
8     *diabetes is the seventh leading cause of death in California, and*  
9     *determined to be the underlying cause of death in almost 8,000*  
10    *people each year. Diabetes may be underreported as a cause of*  
11    *death, and is a contributing factor to many deaths from heart*  
12    *disease and stroke.*

13    *(c) Adults with type 2 diabetes more often have other health*  
14    *problems. One out of every two adults with type 2 diabetes also*  
15    *has hypertension. This is two times higher than among those*  
16    *without diabetes. Adults with diabetes are also two times more*  
17    *likely to have cardiovascular disease than adults without diabetes.*

18    *(d) Hispanics, African Americans, Native Americans, and*  
19    *Asian/Pacific Islanders have higher prevalence of type 2 diabetes*  
20    *than non-Hispanic Whites. Hispanics and African Americans have*  
21    *two times higher prevalence: 7 percent of non-Hispanic Whites*  
22    *have type 2 diabetes, compared with 12 percent of Latinos, 9*  
23    *percent of Asian Americans, 14 percent of Pacific Islander*  
24    *Americans, 13 percent of African Americans, and 17.5 percent of*  
25    *Native American populations.*

1 (e) Type 2 diabetes, previously only seen among adults, is now  
2 increasing among children. If the current obesity trends are not  
3 reversed, it is predicted that one in three children and nearly  
4 one-half of Latino and African American children born in the year  
5 2000 will develop type 2 diabetes in their lifetime. Research shows  
6 that overweight children have a much greater chance of being  
7 obese as adults, with all the health risks that entails. Heart disease  
8 is the leading cause of death in the United States, with diabetes  
9 as the seventh leading cause of death.

10 (f) There is overwhelming evidence of the link between obesity,  
11 diabetes, and heart disease and the consumption of sweetened  
12 beverages, such as soft drinks, energy drinks, sweet teas, and sports  
13 drinks. California adults who drink a soda or more per day are  
14 27 percent more likely to be overweight or obese, regardless of  
15 income or ethnicity.

16 (g) The rate of children who are overweight has also increased  
17 dramatically in recent decades. After being relatively constant  
18 from the 1960s to the 1970s, the prevalence of overweight children  
19 has more than quadrupled among children between 6 and 11 years  
20 of age and nearly tripled among those between 12 and 19 years  
21 of age. In California in 2010, 38 percent of children in grades 5,  
22 7, and 9 were overweight or obese. Thirty-one of California's 58  
23 counties experienced an increase in childhood overweight from  
24 2005 to 2010.

25 (h) The obesity epidemic is of particular concern because obesity  
26 increases the risk of diabetes, heart disease, certain types of  
27 cancer, arthritis, asthma, and breathing problems. Depending on  
28 their level of obesity, from 60 percent to over 80 percent of obese  
29 adults have type 2 diabetes, high blood cholesterol, high blood  
30 pressure, or other related conditions. It has been reported that up  
31 to 60 percent of obese children 5 to 10 years of age have early  
32 signs of heart disease.

33 (i) According to nutritional experts, sweetened beverages, such  
34 as soft drinks, energy drinks, sweet teas, and sport drinks, offer  
35 little or no nutritional value, but massive quantities of added  
36 sugars. A 20-ounce bottle of soda contains the equivalent of  
37 approximately 16 teaspoons of sugar. Yet, the American Heart  
38 Association recommends that Americans consume no more than  
39 five to nine teaspoons of sugar per day.

1 (j) Research shows that almost one-half of the extra calories  
 2 Americans consume in their diet comes from sugar sweetened  
 3 beverages, with the average American drinking nearly 50 gallons  
 4 of sugar-sweetened beverages a year, the equivalent of 39 pounds  
 5 of extra sugar every year.

6 (k) Research shows that 41 percent of California children 2 to  
 7 11 years of age and 62 percent of California teens 12 to 17 years  
 8 of age drink soda daily, and for every additional serving of  
 9 sweetened beverage that a child consumes a day, the likelihood  
 10 of the child becoming obese increases by 60 percent.

11 (l) The proportion of youth drinking at least one sugary beverage  
 12 per day was highest among Latinos at 48 percent, significantly  
 13 higher than among whites at 33 percent. African-American youth,  
 14 at 43 percent, and multi-racial youth, at 46 percent, also had  
 15 significantly higher consumption than whites.

16 (m) Dental caries (tooth decay) are the most common chronic  
 17 childhood disease, experienced by more than two-thirds of  
 18 California's children. Children who frequently or excessively  
 19 consume beverages high in sugar are at increased risk for dental  
 20 caries. Untreated dental caries can lead to pain, infection, tooth  
 21 loss, and in severe cases, even death. It can slow normal growth  
 22 and development by restricting nutritional intake. Children who  
 23 are missing teeth may have chewing problems that limit their food  
 24 choices and result in nutritionally inadequate diets.

25 (n) It is the intent of the Legislature to create a program  
 26 designed to prevent and treat obesity, diabetes, heart and dental  
 27 disease and reduce the burden of attendant health conditions that  
 28 result from the overconsumption of sweetened beverages.

29 SEC. 2. Chapter 5 (commencing with Section 104895.5) is  
 30 added to Part 3 of Division 103 of the Health and Safety Code, to  
 31 read:

32

33 *CHAPTER 5. CHILDREN AND FAMILY HEALTH PROMOTION*  
 34 *PROGRAM*

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36 104895.5. (a) The Children and Family Health Promotion  
 37 Program is hereby established in the Department of Public Health.

38 (b) The program shall consist of a competitive grant process in  
 39 which grants are awarded by the department to counties, cities,  
 40 nonprofit organizations, community-based organizations, and

1 *clinics licensed pursuant to Chapter 1 (commencing with Section*  
2 *1200) of Division 2 that seek to invest in childhood obesity and*  
3 *diabetes prevention activities and oral health programs.*

4 *(c) The department may award a grant to any entity described*  
5 *in subdivision (b) that will use the grant to support programs that*  
6 *use educational, environmental, policy, and other public health*  
7 *approaches to achieve all the following goals:*

8 *(1) Improve access to, and consumption of, healthy, safe, and*  
9 *affordable foods and beverages.*

10 *(2) Reduce access to, and consumption of, calorie-dense and*  
11 *nutrient-poor foods.*

12 *(3) Encourage physical activity and decrease sedentary*  
13 *behavior.*

14 *(4) Raise awareness about the importance of nutrition and*  
15 *physical activity to childhood obesity and diabetes prevention.*

16 *(d) The department shall develop an application and application*  
17 *process for the program.*

18 *(e) Applicants interested receiving a grant shall submit an*  
19 *application to the department.*

20 *(f) The program shall be funded by any moneys appropriated*  
21 *by the Legislature to the department for this purpose.*

22 ~~SECTION 1. It is the intent of the Legislature to enact~~  
23 ~~legislation that would address the public health crisis relating to~~  
24 ~~the growing prevalence of preventable chronic disease.~~