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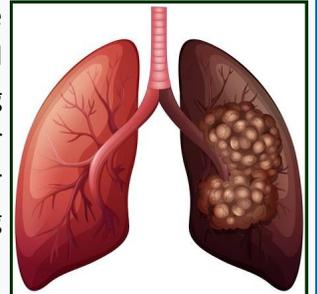
# Health Matters Newsletter

www.sbcphd.org

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## Lung Cancer Deaths are 28% lower in California

Early adoption of tobacco control efforts in California led to fewer people ever smoking, reduced the amount used by those who do smoke and helped smokers quit at a younger age — when their risk of developing lung cancer is lowest. As a result, a new study published online October 10 in [Cancer Prevention Research](#) says lung cancer deaths are 28% lower in California compared to the rest of the country and the gap is widening each year by almost a percentage point reviewing data from 1974-2014.



Researchers at University of California San Diego School of Medicine and Moore's Cancer Center say California's approach has been particularly effective in discouraging young people from starting to smoke. The state has achieved success by aggressively responding to early evidence linking smoking to lung cancer with policies aimed at discouraging smoking and then, in 1988, by passing a voter initiative to set up the nation's first comprehensive statewide tobacco control program run by the California Department of Public Health. This progress has also been bolstered by the state's smoke-free workplace act in 1986 and a multitude of local laws that have reduced exposure to secondhand smoke both indoors and outdoors.

## Importance of Nutrition and Physical Activity

Nutrition and physical activity are the building blocks to optimal development and a lifetime of good health. The necessary groundwork for childhood nutrition is started prior to the birth. It begins with the mother's health before and during pregnancy, is reinforced during infancy by parents and caretakers' guidance, and is influenced by the community through adolescence into adulthood.

Proper nutrition during these times can lead to<sup>1,2</sup>:

- Decreased risk of premature births
- Decreased fetal or infant death
- Decreased anemia
- Reduction in overweight and obesity levels
- Appropriate behavioral and cognitive development
- Reproductive health
- Increased ability to learn



Not only is proper nutrition important during these key developmental years, but the US Department of Health and Human Services recommends that children and adolescents aged 6 to 17 years should have 60 minutes or more of physical activity each day. While the American Pediatric Association has set recommendations regarding limiting screen time overall per day, starting at preschool, screen time should be limited to 2 hours a day to promote active play.

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Regular physical activity includes the following benefits for children:

- Builds and maintains strong bones, muscles, and joints
- Decreases likelihood of developing obesity and risk factors for chronic disease
- Reduces feelings of anxiety and depression and promotes psychological well-being<sup>3</sup>
- Can help youth improve concentration, memory, and classroom behavior, and may improve school grades and performance on standardized academic tests<sup>4</sup>

Together proper nutrition and physical activity ultimately affect childhood obesity which can have lasting affects into adult hood. By ensuring proper nutrition and physical activity is started at a young age lasting consequences can become prevented. Solutions include, but are not limited to:

- Reinforcing messages and assisting parents in proper pregnancy, breastfeeding, infant feeding, and recommendations on dietary intake from the USDA
- Increasing access to healthy foods
- Supporting limited screen time messages and increasing physical activity or active play
- Promoting food literacy
- Increasing safe and usable parks, bike paths, and walking trails
- Implementing policy changes focused on health outcomes
- Improving the whole family health and well-being

*Data Trends*

Limited Santa Barbara County (SBC) data for childhood obesity pulled from the California Health Interview Survey (CHIS) and WIC program shed light on the tip of the iceberg of this epidemic.

Overweight percentiles of children, age 2-18	Obese percentiles of children aged 4, enrolled in WIC by program location	Obese percentiles of children aged 2-4, enrolled in WIC program by Federal Poverty Level																																										
<table border="1"> <thead> <tr> <th>Year</th> <th>SBC</th> <th>CA</th> </tr> </thead> <tbody> <tr> <td>2012</td> <td>12.90%</td> <td>11.60%</td> </tr> <tr> <td>2013</td> <td>22.50%</td> <td>12.20%</td> </tr> <tr> <td>2014</td> <td>18.60%</td> <td>15%</td> </tr> <tr> <td>2015</td> <td>37.90%</td> <td>14.90%</td> </tr> <tr> <td>2016</td> <td>7%</td> <td>16.20%</td> </tr> </tbody> </table>	Year	SBC	CA	2012	12.90%	11.60%	2013	22.50%	12.20%	2014	18.60%	15%	2015	37.90%	14.90%	2016	7%	16.20%	<table border="1"> <thead> <tr> <th>Location</th> <th>2015</th> <th>2016</th> </tr> </thead> <tbody> <tr> <td>Mid County</td> <td>18.17%</td> <td>18.17%</td> </tr> <tr> <td>South County</td> <td>18.12%</td> <td>17.01%</td> </tr> <tr> <td>North County</td> <td>26.36%</td> <td>24.63%</td> </tr> </tbody> </table>	Location	2015	2016	Mid County	18.17%	18.17%	South County	18.12%	17.01%	North County	26.36%	24.63%	<table border="1"> <thead> <tr> <th>FPL Category</th> <th>2015</th> <th>2016</th> </tr> </thead> <tbody> <tr> <td>&lt;50% FPL</td> <td>19.62%</td> <td>20.28%</td> </tr> <tr> <td>50%-100% FPL</td> <td>18.81%</td> <td>18.43%</td> </tr> <tr> <td>&gt;100% FPL</td> <td>17.46%</td> <td>17.34%</td> </tr> </tbody> </table>	FPL Category	2015	2016	<50% FPL	19.62%	20.28%	50%-100% FPL	18.81%	18.43%	>100% FPL	17.46%	17.34%
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<p>Over the past 5 years the childhood obesity levels have been on a slight increase in the US from 16.9% to 18.5% for children aged 2 to 18 based on the National Health and Nutrition Examination Survey. From CHIS, that utilizes a self-reported weight by age to determine overweight statistics, it shows that CA mirrors this increase over the past 5 years; SBC reports an average of 19.78% overweight children.</p>	<p>The highest rate of childhood obesity in SBC based on information from the WIC program is in North County. These differences in obesity levels potentially correlate to the vast differences in community living across the county.</p>	<p>Children enrolled in the SBC WIC program who are living &lt;50% below the Federal Poverty Level (FPL) had a higher percent of obesity when compared with those who are living 50%-100%, and above 100% of the FPL. There are many factors that affect families who are living below the FPL that can contribute to the obesity epidemic and it is difficult to determine a singular causality.</p>																																										

<sup>1</sup> <https://www.aap.org/en-us/advocacy-and-policy/federal-advocacy/Pages/childnutrition.aspx>  
<sup>2</sup> <https://www.cdc.gov/obesity/childhood/causes.html>  
<sup>3</sup> *Healthy Schools - Physical Activity Facts* (Centers for Disease Control and Prevention), accessed 2016  
<sup>4</sup> J. Adams, *Physical activity may help kids do better in school, studies say* (Washington Post, October 21 2013)