# School Lunches Aff/Neg

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# Advantage 1 Academic Acheivement

## The Federal School Lunch Application process is massively outdated – this causes millions of children to not receive appropriate food they need stopping learning and causes childhood diabetes

Scott Allyn June 25, 2009

“Brown seeks to streamline National School Lunch Program”, THE MORNING JOURNAL <http://www.morningjournal.com/articles/2009/06/25/news/mj1238530.txt> accessed 6/27/2009

If applying for the National School Lunch Program were easier, more than 150,000 additional Ohio school-age children who are eligible could get a nutritious lunch or breakfast, according to U.S. Sen. Sherrod Brown. Accordingly, Brown announced legislation yesterday to streamline the application process and provide $2 billion for five years to pay for new computer equipment and food for the program. "Today, the application process is a filing-cabinet-type process," he said. "It does not reflect today's school districts or today's technology." Brown's bill would modernize the application system and reduce paperwork and administrative costs, he said. Currently, about 500,000 Ohio students get free or reduced-priced lunches or breakfasts through the National School Lunch program, although about 700,000 children are eligible, according to Brown. "The more children who receive this food, the better their educations will be," he said. "A hungry child cannot learn and grow." Childhood diabetes can be reduced through better nutrition as well, he said. During the summer, the number of Ohio children receiving free meals drops to 60,000, despite food being distributed at more than 1,000 locations across the state through the Summer Food Service Program, according to Brown. The drastic drop-off is a national problem with many causes, including the difficulty of starting a program in June and ending it in September, he said. The Summer Food Service Program, administered by the U.S. Department of Agriculture, provides breakfast, lunch or a snack to school-age children at 12 locations in Erie County, 19 locations in Lorain County and four locations in Huron County.

## Success in the classroom decreases the likelihood of poverty

World Bank 2002

<http://www.amacad.org/publications/monographs/Ubase.pdf>

[G]lobal research . . . has established unequivocally that education increases individual incomes; that it is positively correlated with macroeconomic growth; that it is strongly correlated with reductions in poverty, illiteracy and income inequality; and that it has strong complementary effects on the achievement of . . . lower infant and child mortality, better nutrition, and the construction of democratic societies. The expansion of educational opportunity, which can simultaneously promote income equality and growth, is a “win win” strategy that in most societies is far easier to implement than the redistribution of other assets, such as land or capital. In short, education is one of the most powerful instruments known for reducing poverty and inequality and for laying the basis for sustained economic growth, sound governance, and effective institutions (2002a: v).

## Poverty is the deadliest form of violence it outweighs your disads

Mumia Abu-Jamal, former Reporter and Death Row inmate, 1998

[“A QUIET AND DEADLY VIOLENCE,” 9/19/98, http://www.mumia.nl/TCCDMAJ/quietdv.htm]

It has often been observed that America is a truly violent nation, as shown by the thousands of cases of social and communal violence that occurs daily in the nation. Every year, some 20,000 people are killed by others, and additional 20,000 folks kill themselves. Add to this the nonlethal violence that Americans daily inflict on each other, and we begin to see the tracings of a nation immersed in a fever of violence. But, as remarkable, and harrowing as this level and degree of violence is, it is, by far, not the most violent feature of living in the midst of the American empire. We live, equally immersed, and to a deeper degree, in a nation that condones and ignores wide-ranging "structural" violence, of a kind that destroys human life with a breathtaking ruthlessness. Former Massachusetts prison official and writer, Dr. James Gilligan observes; "By `structural violence' I mean the increased rates of death and disability suffered by those who occupy the bottom rungs of society, as contrasted by those who are above them. Those excess deaths (or at least a demonstrably large proportion of them) are a function of the class structure; and that structure is itself a product of society's collective human choices, concerning how to distribute the collective wealth of the society. These are not acts of God. I am contrasting `structural' with `behavioral violence' by which I mean the non-natural deaths and injuries that are caused by specific behavioral actions of individuals against individuals, such as the deaths we attribute to homicide, suicide, soldiers in warfare, capital punishment, and so on." -- (Gilligan, J., MD, Violence: Reflections On a National Epidemic (New York: Vintage, 1996), 192.) This form of violence, not covered by any of the majoritarian, corporate, ruling-class protected media, is invisible to us and because of its invisibility, all the more insidious. How dangerous is it -- really? Gilligan notes: "[E]very fifteen years, on the average, as many people die because of relative poverty as would be killed in a nuclear war that caused 232 million deaths; and every single year, two to three times as many people die from poverty throughout the world as were killed by the Nazi genocide of the Jews over a six-year period. This is, in effect, the equivalent of an ongoing, unending, in fact accelerating, thermonuclear war, or genocide on the weak and poor every year of every decade, throughout the world." [Gilligan, p. 196] Worse still, in a thoroughly capitalist society, much of that violence became internalized, turned back on the Self, because, in a society based on the priority of wealth, those who own nothing are taught to loathe themselves, as if something is inherently wrong with themselves, instead of the social order that promotes this self-loathing. This intense self-hatred was often manifested in familial violence as when the husband beats the wife, the wife smacks the son, and the kids fight each other. This vicious, circular, and invisible violence, unacknowledged by the corporate media, uncriticized in substandard educational systems, and

un-understood by the very folks who suffer in its grips, feeds on the spectacular and more common forms of violence that the system makes damn sure -- that we can recognize and must react to it. This fatal and systematic violence may be called The War on the Poor.

## We have a moral obligation to challenge Poverty – it outweighs all other impacts –

**Union for Reform Judaism 2003**

“Confronting and Combatting Poverty in The United States” <http://urj.org/Articles/index.cfm?id=7146> acessed 6/30/2009

"Our teachers have said: If all the troubles of the world are assembled on one side and poverty is on the other, poverty would outweigh them all" (Midrash Exodus Rabbah 31:12). Our prophets have taught: God commands us to "share your bread with the hungry and bring the homeless into your house" (Isaiah 58:7). And according to Maimonides, the highest degree of charity is to aid a person in need by "offering him a gift or a loan, by entering into partnership with him, or by providing work for him so that he may become self-supporting, without having to ask people for anything. In regard to this, it is written: 'You shall maintain him; whether stranger or sojourner, he shall live beside you' (Leviticus 25:35); that is to say, maintain him so that he may not fall and be in need of help" (Maimonides, Mishneh Torah, "Gifts to the Poor" 10:7).If our prophets and sages lived today, surely they would be crying out against a nation that allows children to go hungry and families to sleep on the streets. Surely they would cry out against a society that neglects healing the sick, clothing the naked, and feeding the poor as national priorities. We, too, cry out.The Union for Reform Judaism has long advocated for children, the poor, the elderly, the sick, the disabled, and the "stranger among us." In 1965, we affirmed that the amelioration of poverty is a societal obligation not of charity but of justice. We have also called for social welfare entitlement programs (1965) and income maintenance programs wholly or largely financed by the federal government to meet the basic needs of those who are unable to work and those working with inadequate income (1971). In 1981, we opposed policies "that place an unfair burden on the unemployed, the poor, the near-poor, minorities, and the elderly and children." In 1995, we affirmed our economic commitment to America's poor and called upon the United States government to maintain its responsibility to ensure an adequate, federally guaranteed safety net to protect our nation's most vulnerable populations. We also opposed the use of block grants to the states when such grants were used to end entitlement programs or as a means to decrease the obligations of the federal and state governments to the poor, the sick, the elderly, and the disabled. In 2001, we resolved to oppose any tax policies, including rate cuts, that restrict the government's ability to address urgent needs both in the United States and abroad and oppose any tax policies, including rate cuts, that unfairly and inequitably bestow their benefits on the wealthy in our society. Today, sadly, we must once again reaffirm our commitment to the eradication of poverty. We are deeply troubled by poverty throughout our communities in North America and, indeed, around the world; however, we are particularly concerned about emerging U.S. policy that affects those most vulnerable. The slumping economy, the costs of war and homeland security, and a lack of attention on the national stage make these trying times for low-income families. In the richest country in the world, one in six children lives in poverty and 33 million people are hungry or at risk of hunger. Requests for emergency food assistance and shelter increased an average of 19% during 2002, and 38% of the requests by homeless families went unmet in cities across the United States. In 2001, 32.9 million people in the United States lived below the federal poverty line, while the estimated cost of maintaining a safe and decent standard of living, including food, housing, health care, transportation, child care, and taxes, was almost twice the federal poverty threshold. Almost 30% of working families with one to three children under age twelve did not earn enough to afford these basic necessities. A record 41.2 million people in the United States did not have health insurance in 2001, and health care premiums are increasing dramatically-at about 11% a year, five times the current rate of inflation. As economic stagnation continues, along with the consequent likelihood of greater unemployment, the number of people at risk is likely to grow.

## The state governments are already cash-strapped – making them pick up the slack in funding only increases poverty

**Union for Reform Judaism 2003**

“Confronting and Combatting Poverty in The United States” <http://urj.org/Articles/index.cfm?id=7146> acessed 6/30/2009

The notion that the states can take up the slack is illusory. States are currently facing a $70 billion budget shortfall, their worst fiscal crisis since World War II. Many states have already cut programs, including child care assistance and Medicaid, that help poor Americans. The tax cut passed in May 2003 will further erode state revenue and could cost states $3 billion over the next two state fiscal years. The ten-year cost to states could be $16 billion or more if the new provisions do not "sunset" and if states do not "decouple" their tax codes from the new federal laws. When the federal government passes tax cuts that reduce revenues and then shirks its responsibilities to the poor by devolving programs to cash-strapped states, it is effectively denying the poor the benefit of those programs.

## Letting some students suffer while others succeed is injust – any form of discrimination cannot be tolerated and must be rejected

Albert, **MEMMI**, Professor Emeritus of Sociology, University of Paris, RACISM, **1997**,

p. 165. (DRGCL/B1046)

Of course, this is debatable. **There are those who think that if one is strong enough, the assault on and oppression of others is permissible**. But no one is ever sure of remaining the strongest. **One day, perhaps, the roles will be reversed. All unjust society contains within itself the seeds of its own death. It is probably smarter to treat others with respect so that they treat you with respect.** "Recall," says the Bible, "that you were once a stranger in Egypt," which means both that you ought to respect the stranger because you were a stranger yourself and that you risk becoming once again someday. It is an ethical and a practical appeal -- indeed, it is a contract, however implicit it might be. In short, the refusal of racism is the condition for all theoretical and practical morality. Because, in the end, **the ethical choice commands the political choice, a just society must be a society accepted by all. If this contractual principle is not accepted, then only conflict, violence, and destruction will be our lot. If it is accepted, we can hope someday to live in peac**e. True, it is a wager, but **the stakes are irresistible.**

# Advantage 2 - Nutrition

## School lunch enrollment is at an all time high due to economic downturns – states budgets are already stretched thin – they might not be able to afford additional spending

Peter Eisler 6/11/2009

“More Students on Free Lunch Programs” <http://www.usatoday.com/news/education/2009-06-10-student-lunches_N.htm> USA TODAY accessed 6/27/2009

Nearly 20 million children now receive free or reduced-price lunches in the nation's schools, an all-time high, federal data show, and many school districts are struggling to cover their share of the meals' rising costs. Through February, nationwide enrollment in free school lunch programs was up 6.3% over the same time last year, to 16.5 million students, based on data from the U.S. Food and Nutrition Service (FNS), which subsidizes the programs. Participation in reduced-price lunch programs rose to 3.2 million students, the data show. MORE: School systems juggle cost of free lunches Demand in some states has climbed at an even greater rate: Enrollment in free lunch programs jumped almost 17% in California, and several states — Arizona, New Jersey, Utah and Vermont — also saw more than 10% growth. Many new enrollees are believed to be first-timers from families hit by the recession, says FNS Administrator Julie Paradis. "These programs are intended to expand when the need is greater ... and we're pleased that they're working," she adds. "But certainly there are additional costs, and that is a concern at a time of scarce resources. Our state and local partners are stretched."

## This all time enrollment is overstretching the budgets of schools

ASCD Smartbrief June 11, 2009

“Schools scramble to keep up with demand for free lunches” <http://www.smartbrief.com/news/ascd/storyDetails.jsp?issueid=F55CA4F5-CEC1-4C7B-BC4F-C2A66D96B7BE&copyid=2DF70951-3339-46FF-9643-E9B9BDB63581> accessed 6/27/2009

With record numbers of students getting free and reduced-price lunches, many U.S. districts are struggling to keep up with demand. While the cost to districts averages $2.92 per free lunch, schools receive just $2.57 in federal reimbursement, according to the School Nutrition Association. Some states pitch in extra, but many schools are stretching budgets to make up the difference.

## The amount of federal government funding is critical to whether or not schools can cover their costs for school luinches

Newman et al, ‘8

[Constance,” Balancing Nutrition, participation, and cost in the national school lunch program” Amber Waves, 9-2008, <http://www.ers.usda.gov/AmberWaves/September08/Features/BalancingNSLP.htm>]

In 2005-06, USDA’s Food and Nutrition Service (FNS) sponsored a national study—the School Lunch and Breakfast Cost Study II—to evaluate the adequacy of reimbursements. The study measured cost in two ways: the reported cost and the full cost of producing a reimbursable or nonreimbursable meal. Reported costs are those incurred by SFAs in providing meals; these costs are charged to their foodservice accounts. Full costs are the reported costs plus unreported costs that the school districts, not the SFAs, incur on behalf of the program. Unreported costs can include meal-time supervisory labor, administrative labor, such as that needed for payroll and accounting, as well as indirect costs, such as those associated with equipment and utility costs that are not charged to the SFA. In school year 2005-06, full costs were composed of food (37 percent), labor (about 48 percent), and other costs (about 15 percent), which included supplies, contract services, and indirect costs. The FNS cost study found that in school year 2005-06, the average reported cost for producing a reimbursable lunch was $2.36 across SFAs. Summing the cash reimbursement for free lunches from that year ($2.32 and $2.34 for qualifying low income districts) and the entitlement commodity rate for that year ($0.175), the midpoint reimbursement rate was $2.51, which was higher than the average reported cost. Most schools had costs below the reimbursement rate: 78 percent of schools had reported per lunch costs that were below the USDA free-lunch subsidy rate. On the other hand, in school year 2005-06, the average full cost for producing a reimbursable lunch was $2.91 across SFAs, which is 40 cents higher than the midpoint free subsidy of $2.51. Only 32 percent of schools had full lunch costs that were below the USDA free-lunch subsidy. The finding that full costs are generally not covered by the free-meal rate points to the larger problem of hidden or, perhaps, unanticipated costs that can affect the long-term financial health of the program. Schools with a larger share of students receiving free or reduced-price meals were likely to cover both types of costs. In schools where more than 60 percent of lunches served were free or reduced-price, revenues averaged 125 percent of reported costs and 107 percent of full costs. By contrast, in schools with less than 60 percent of free and reduced-price lunches served, revenues averaged 111 percent of reported costs and 88 percent of full costs. The greater amount of Federal subsidies received for those meals makes an important difference to schools in covering their costs.

## When schools lack money – they turn to fast food companies for contracts

Yeoman ‘3

Mother Jones Magazine, Jan/Feb

Under the program, the federal government buys up more than $800 million worth of farm products each year and turns them over to schools to serve their students. The U.S. Department of Agriculture, which administers the system, calls this a win-win situation: **Schools get free ingredients** while farmers are guaranteed a steady income. The trouble is, **most of the commodities provided to schools are meat and dairy products**, often laden with saturated fat. In 2001, the USDA spent a total of $350 million on surplus beef and cheese for schools -- more than double the $161 million spent on all fruits and vegetables, most of which were canned or frozen. On top of its regular purchases, the USDA makes special purchases in direct response to industry lobbying. In November 2001, for example, the beef industry wrote to Agriculture Secretary Ann Veneman, complaining that a decline in travel after September 11, along with a lowered demand for beef in Japan, was suppressing sales of their product. The department responded two months later with a $30 million "bonus buy" of frozen beef roasts and ground beef for schools. "Basically, it's a welfare program for suppliers of commodities," says Jennifer Raymond, a retired nutritionist in Northern California who has worked with schools to develop healthier menus. "It's a price support program for agricultural producers, and the schools are simply a way to get rid of the items that have been purchased." All in all, **schools obtain almost 20 percent of their food from the commodities program -- and they depend on the handouts to meet tight budgets. "School districts are under intense budgetary pressure, and often-times nutrition is at the bottom of the priority list**," says David Ludwig, director of the obesity program at Children's Hospital in Boston. **School nutrition directors face increasing mandates from their higher-ups to break even, or even make a profit, and therefore have no choice but to accept surplus commodities**. "They help shape our menus significantly, especially if you're going to run a program successfully financially," says Christy Koury, director of child nutrition for schools in Freeport, Texas, where menus run heavy on hamburgers, cheese-stuffed pizza sticks, and pepperoni calzones.

## These contracts effect health in a number of ways

## First, vending machines are a key source of unhealthy school eating.

## Murkowski, ‘7

[Lisa, US Senator, Alaska, American Journal of Preventative Medicine, “Preventing Obesity in Children” 33:4(s)]

Recent studies show that between 1980 and 2000, the prevalence of obesity among children and adolescents nearly tripled. And in my home state of Alaska, recent estimates show that obesity kills nearly 500 Alaskans each year—that is simply an unacceptable figure. Last month, the Institute of Medicine15 reported findings that the rise in obesity over the past 2–3 decades has been accompanied by an increase in the number of alternative food options available on school campus—especially vending machines. And yet another disturbing report has found that of all the babies born in 2000, 1 in 3 will become overweight.

## Soda is a primary source of children’s excess sugar and leading cause of obesity.

## Committee on School Health, ‘4

[“Policy Statement: Sift Drinks in Schools” Pediatrics, Vol. 13, No. 1, AAP Policy, [http://aappolicy.aappublications.org/cgi/content/full/pediatrics;113/1/152#SEC1](http://aappolicy.aappublications.org/cgi/content/full/pediatrics%3B113/1/152#SEC1)]

In the United States, children’s daily food selections are excessively high in discretionary, or added, fat and sugar.10–15 This category of fats and sugars accounts for 40% of children’s daily energy intake.10 Soft drink consumers have a higher daily energy intake than nonconsumers at all ages.16 Sweetened drinks (fruitades, fruit drinks, soft drinks, etc) constitute the primary source of added sugar in the daily diet of children.17 High-fructose corn syrup, the principle nutrient in sweetened drinks, is not a problem food when consumed in smaller amounts, but each 12-oz serving of a carbonated, sweetened soft drink contains the equivalent of 10 teaspoons of sugar and 150 kcal. Soft drink consumption increased by 300% in 20 years,12 and serving sizes have increased from 6.5 oz in the 1950s to 12 oz in the 1960s and 20 oz by the late 1990s. Between 56% and 85% of children in school consume at least 1 soft drink daily, with the highest amounts ingested by adolescent males. Of this group, 20% consume 4 or more servings daily.16 Each 12-oz sugared soft drink consumed daily has been associated with a 0.18-point increase in a child’s BMI and a 60% increase in risk of obesity, associations not found with "diet" (sugar-free) soft drinks.18 Sugar-free soft drinks constitute only 14% of the adolescent soft drink market.19 Sweetened drinks are associated with obesity, probably because overconsumption is a particular problem when energy is ingested in liquid form20 and because these drinks represent energy added to, not displacing, other dietary intake.21–23 In addition to the caloric load, soft drinks pose a risk of dental caries because of their high sugar content and enamel erosion because of their acidity.24

## Limiting access to cola is vital to ending obesity – schools influence decisions made throughout life

## Markel, ‘4

[Howard, George E. Wantz Professor of the History of Medicine, Professor of Pediatrics and Communicable Diseases; Director of the Center for the History of Medicine at the University of Michigan “Soft Drinks, Schools and Obesity” MedScape Today, 3-8-2004, <http://www.medscape.com/viewarticle/470344>]

The American Academy of Pediatrics issued a major policy statement in January urging the restriction of soft drinks in the nation's schools.[1] That sounds like wise medical advice, given that the number of obese children has more than doubled since 1980 and that studies consistently show that overweight children tend to stay that way into adulthood. As many as 85% of American school-aged children consume at least 1 soft drink daily, and the average 12-ounce soda contains about 10 teaspoons of sugar and 150 calories.[1] Although soft-drink consumption is certainly not the only cause of childhood obesity, limiting easy access to these drinks in schools seems like a welcome -- and common-sense -- contribution to public health.

## Second, Contracts cause school lunches to become unhealthy – this influences home eating patterns

J. Amy **Dillard ‘8**, Law Professor University of Baltimore, 2008, Sloppy Joe, Slop, Sloppy Joe: How USDA Commodities Dumping Ruined the National School Lunch Program, University of Baltimore Legal Studies Research Paper No. 2008-05, [http://papers.ssrn.com.ezp-prod1.hul.harvard.edu/sol3/papers.cfm?abstract\_id=1133157], p. 12

From the food industry perspective, the greatest benefit of holding CPAs with the USDA is the opportunity to market its products to children. The food industry spends $15 billion per year marketing to children, but by putting products like breaded chicken nuggets in front of children during school lunch, the food industry is able to profit from the CPA contract and stealthily market to school-age consumers. The fact that most parents have some kind of frozen chicken nugget in their freezer is a testament to the food industry’s successful manufacturing and marketing, some of which occurs in schools. The USDA lauds the cost-efficiency of processing raw commodities into table-ready meals, but low-cost foods are usually the least healthy.

## Once schools agree to these contracts in the long-term – they jeopardize all federal funding for school lunches – this means soda machines and vending machines are the only choice for students

## Farmer, ‘4

[Kyle, “Policy Page: Pouring Rights” Virginia School Board Association, Number 93, 2-2004, <http://www.vsba.org/pageFeb04.pdf>]

Potential conflicts: The final downside to “pouring rights” contracts concerns a possible conflict with the National School Lunch Program. The program, created in 1946, is designed to provide schools with federal funds in order to provide nutritious, affordable meals to all school children. The NSLP includes restrictions on the sale of foods of minimal nutritional value (soda pop, candy, etc.) in cafeterias during school lunch periods. If a district’s exclusive vendor contract calls for the sale of the vendor’s products during lunch periods, the school could lose federal funding.

 **Obesity will decrease life expectancy and kill millions – the impact is greater than a war or pandemic – medicine and technology can’t stop the trend**

**Lalasz, ’05** (Robert Lalasz is a senior editor at PRB. May 2005 “Will Rising Childhood Obesity Decrease U.S. Life Expectancy?” Population Reference Bureau, <http://www.prb.org/Articles/2005/WillRisingChildhoodObesityDecreaseUSLifeExpectancy.aspx?p=1>)

(May 2005) A new study contends that rising childhood obesity rates will cut average U.S. life expectancy from birth by two to five years in the coming decades—a magnitude of decline last seen in the United States during the Great Depression.

The study, published in the March 18 issue of the New England Journal of Medicine, contradicts recent government projections that U.S. life expectancy will reach at least the mid-80s by the year 2080.1 Such forecasts, write lead author S. Jay Olshansky and his nine co-authors, are a "simple but unrealistic extrapolation of past trends in life expectancy into the future."

In turn, other demographers have characterized the Olshansky team's analysis as largely unsupported by evidence, and the article has spotlighted a long-standing debate about whether there are biological limits to an individual human lifespan—all amidst a recent flurry of contradictory research about how obesity effects morbidity and mortality rates. One new study from the Centers of Disease Control and Prevention (CDC) even argues that being overweight has a positive effect on life expectancy.2

But Olshansky, a professor of epidemiology and biostatistics at the University of Illinois-Chicago, remains convinced by his team's conclusions. "If anything, we're being conservative in our estimates," he says. "We're assuming no change in obesity levels from 2000 levels, and actually, they've gotten worse."

Obesity and the Future of Medicine

Projecting life expectancy is more than an academic exercise. Many U.S. government agencies—including the Social Security Administration, Congress, and the military—use such forecasts to guide policymaking on issues from tax rates to the solvency of age-based entitlement programs.

And almost all these projections assume that U.S. life expectancy will continue to rise as steadily as it has since the 1930s, spurred by new medical approaches and technology as well as behavioral shifts towards healthier lifestyles. But Olshansky and his co-authors question whether medicine and public health interventions can counter the rapid increases in U.S. obesity rates over the last two decades, especially among children.

The incidence of obesity—which researchers have linked to an elevated risk of type-2 diabetes, coronary heart disease, cancer, and other health complications—rose approximately 50 percent in the United States in both the 1980s and 1990s. Two-thirds of all U.S. adults are now classified as overweight or obese, as are 20 percent to 30 percent of all children under age 15.

And Olshansky argues that this rapid rise in obesity rates will cause a "pulse event" of mortality in the United States—akin to the large number of deaths caused by an influenza pandemic or a war, but spread out over the next four or five decades.

"Any time there's an increase in early-age mortality [deaths before age 50], it has an effect on overall life expectancy," says Olshansky. "And when these children reach their 20s, 30s, 40s, and 50s, they'll face a higher risk of death. It's roughly equivalent to discovering that a large segment of our young people who never smoked suddenly decided to smoke."

The Surprising Impact of Obesity Today

To demonstrate the future effects of rising obesity levels, Olshansky and his co-authors first calculated how current rates of adult obesity are diminishing overall U.S. life expectancy. Using studies that argue being obese reduces your life expectancy by nearly 13 years, the researchers estimated by how much overall rates of death would fall if every obese person in the United States lost enough weight to reach the optimal Body Mass Index (BMI) of 24. (Obesity is generally defined as having a BMI of 30 or above.) "In other words, to find out the effects of obesity, we statistically wiped out obesity," says Olshansky.

They found that obesity now slices one-third to three-quarters of a year off overall life expectancy, depending on one's race and gender (see figure). These figures don't sound like much, says Olshansky, until you put them into context. "They are larger than the negative effect of all accidental deaths as well as homicides and suicides," he says. "If you wiped out cancer, that would only add 3.5 years to overall U.S. life expectancy."

And the effect of obesity will only grow, write Olshansky and his co-authors, as its prevalence further rises and children and young adults "carry and express obesity-related risks for more of their lifetime than previous generations have done." Even eliminating a major disease such as cancer, they conclude, would not counter the negative consequences for life expectancy caused by this wave of deaths. "They will overwhelm the positive influences of technology," says Olshansky.

# Thus we offer the following plan:

# The United States Federal Government should pass the Hunger Free Schools Act and provide states with the necessary funds to cover the financial shortfalls in enrolling new students into the Free and Reduced Lunches Program.

# Observation II – Solvency

## The Hunger Free Schools Act gives more millions of students an opportunity to get the food they need to stave off hunger and succeed in schools

Senator Sherrod Brown Press Release June 24 2009

<http://brown.senate.gov/newsroom/press_releases/release/?id=77DD4C60-B42A-41AB-BB12-951AC1C8F3C6> “Senators Announce New Effort to Combat Childhood Hunger” accessed 6/29/09

WASHINGTON, D.C. – U.S. Sen. Sherrod Brown (D-OH) announced new legislation today to combat childhood hunger. The Hunger Free Schools Act, which is cosponsored by Sens. Robert P. Casey (D-PA) and Michael F. Bennet (D-CO), would help more families enroll in the national school lunch program, one of the most important programs designed to alleviate childhood hunger. “A hungry child cannot learn and grow,” Brown said. “During these challenging economic times, more families are struggling to put food on the table. We have an obligation to connect children with nutrition programs and to ensure they don’t go hungry during the school-year or the summer months.” “We can’t expect kids to focus on fractions if their stomachs are growling,” Bennet said. “This bill removes barriers to education by making sure kids come to class well-fed and ready to learn. It will cut expenses and reduce paperwork so that schools can focus on preparing our kids for the future rather than clearing administrative hurdles.” More than 23 million children received assistance during the 2007 school year through the free or reduced-price school lunch program. A recent U.S. Department of Agriculture (USDA) report, however, found that in 20 states, up to 20 percent of eligible children are not getting enrolled. For these students and for many school administrators, the often complicated and redundant application process deters potential enrollment. Direct certification, a streamlined approach to determining family eligibility, relies on existing data and is utilized to promote broader participation in the national school lunch program. As a result of the Child Nutrition Reauthorization Act of 2004, all school districts are now required to use direct certification to enroll children from families that qualify for food assistance from the Supplemental Nutrition Assistance Program (SNAP). This requirement was effective nationwide for the 2008-09 school year. Children from families receiving Temporary Assistance for Needy Families (TANF) cash assistance may also be directly certified. During the 2007-2008 school year, only five states managed to directly certify 90 percent or more of the students they were required to directly certify. Sixteen states directly certified 60 percent or fewer of those children. The Hunger Free Schools Act announced today would improve and expand access to the school lunch program for needy children, promote direct certification, reduce paperwork and administrative costs, and utilize technology. Specifically the legislation would: • Improve state performance in enrolling eligible children in school lunch program by setting a performance standard (95 percent of students required to be directly certified for school lunch programs should be reached) and providing incentives to high performance schools; • Expand access to child nutrition programs by requiring school districts to utilize data from Medicaid and the State Children’s Health Insurance Program to directly certify more students for free school meals; and • Achieve universal access for high poverty schools by allowing schools or districts serving a high proportion of low-income children to offer free lunches to all students. More than 13 million U.S. households are considered to be “food insecure,” meaning that they do not always have enough food to meet the needs of their family members or cannot afford the cost of food. Of the 36.2 million Americans living in “food insecure” households, more than 12 million are children. Households with children are nearly twice as likely to encounter food insecurity and hunger as other households.

## Electric Point-of-sale system reduces the stigma associated with school lunches encouraging more students to get the lunches they need

Quinn Moore, Mathmatica Policy Institute, June 2009

Report No 53 “Factors Associated With School Meal Participation and the Relationship Between Different Participation Measures“

School use of electronic point-of-sale (POS) technology is strongly associated with student’s school lunch participation. This may be because electronic POS technology increases the convenience or decreases the stigma of receiving school lunch. This relationship is strongest for high school students.

# Extension – Funding Shortfalls cause turn to fast-food

Schools would turn to fast food companies to generate revenue

Mascarenhas 99

Community Food Security Project, National Radio Project, “What’s for Lunch? Surplus Agriculture and School Meals,” June 2, http://www.radioproject.org/transcript/1999/9922.html

Yeah, I think it’s a wonderful program. I think from our perspective at Occidental College, the Community Food Security Project, what we wanted to do was to show that **the school districts have been seeing their programs as cash-strapped because of disinvestment in the educational systems**, **often food services is seen as the place that should be generating revenue. And so many food services around the country have turned to things like fast-food: McDonald’s, Taco Bell, Coca-Cola, Pepsi-Cola -selling these things to school children.** And we believe that’s not the way, that’s not the mission of food service in our public schools, in any school, really. The mission is to provide nutritious foods that also teach children about making healthy choices, that these are lifelong dietary patterns that we’re establishing early in their lives, and it’s our responsibility -it’s the responsibility of food services in schools to show kids that making healthy choices can taste good and can be fun and can be cool and, you know, all of those things. And we believe this program has really shown that school districts can do that.

## Schools strapped for cash will sign deals with fast food companies and wont have an alternative program

## Yeoman ‘3

Mother Jones Magazine, Jan/Feb

This year, Congress will take up the National School Lunch Program for the first time in five years. But industry representatives and health experts agree there will be no serious effort to prevent schools from serving children so many cheeseburgers, pizzas, and french fries. Instead, **most of the debate is expected to center on who serves up those items**. The food-service association estimates that **30 percent of all public high schools currently sell Burger King, Domino's Pizza, and other brand-name fast food in their cafeterias alongside federally subsidized meals,** and many more dispense chips and sodas in vending machines down the hall. Nutrition experts want the USDA to regulate corporate vendors in schools, but such "**competitive" foods appeal to cash-strapped districts, many of which are eager to accept money from fast-food companies to open franchises right on campus**.

## These contracts are key to keep the schools afloat

## New Standard ‘5

http://newstandardnews.net/content/index.cfm/items/1585

According to the Centers for Disease Control and Prevention?s School Health Policies and Programs Study 2000, fully **20 percent of schools surveyed offer brand name fast foods to students**. Additionally, Channel One, a daily television news program containing two minutes of ads -- a portion of which are for soda, fast food and junk food companies -- is shown to 40 percent of all junior high and high school students in the US. And **as schools search desperately to find funding, corporate sponsorship and exclusive beverage deals have become an integral part of school funding**.

# Extensions to School Contracts cause Obesity

## Pouring contracts is the health equivalent of promoting smoking to minors.

Howard & Kinnaird, ‘2

[Julia & Ellie, North Carolina Medical Journal, November/December 63:6, 2002, <http://ncmedicaljournal.com/nov-dec-02/ar021109.pdf>]

We were very concerned by the mounting research showing that childrens' increased consumption of soft drinks is contributing to growing rates of obesity, diabetes, dental caries, and even osteoporosis. We felt confident that parents and school boards weren’t completely aware of the health consequences of this easy access to soft drinks in schools, and we felt that, with more information, they would be convinced, as were we, that continuing to substitute soft drinks for nourishing beverages would lead to even greater overall health problems among our children. Quite clearly, soft drinks rob children of the nutrients found in milk and juices. Even if sold in the vending machines, bottled water is a better beverage for children than soft drinks, which, besides providing empty calories, contribute with their high sugar content to behavioral problems in the classroom as well as to numerous other health concerns. It is unconscionable to continue to encourage children to consume soft drinks by allowing vending machines to be places in schools. Such an act could be considered the health equivalent of the advertising of tobacco to minors years ago.

## Pouring rights compete with school lunch programs collapsing viability of school food services.

## Nestle, 2k

[Marion, Professor and Chair, Department of Nutrition and Food Studies, New York University “Soft Drink Pouring Rights Contracts” Public Health Reports, July/August 2000 <http://www.pubmedcentral.nih.gov/picrender.fcgi?artid=1308570&blobtype=pdf>]

At first glance, the financial advantages to the schools of pouring rights contracts seem impressive, not least because a significant part of the funding comes in an immediate lump sum and is not tied to sales. Most schools use the funds for sports facilities-scoreboards seem a particular favorite-but some buy furniture, sound systems, or computers, and occasionally pay for scholarships. 28 But because the contracts provide additional benefits for consumption levels that surpass quotas, school administrators can find themselves in the position of "pushing" soft drinks to faculty, staff, and students. In a now infamous letter circulated on the Internet and published in a national magazine, a Colorado district administrator referring to himself as the "Coke Dude" announced payments of $3000 to elementary principals, $15,000 to middle school principals, and $25,000 to high school principals who sold enough sodas: [W]e must sell 70,000 cases of product...at least once during the first three years of the contract. If we reach this goal, your school allotments will be guaranteed for the next seven years.... If 35,439 staff and students buy one Coke product every other day for a school year, we will double the required quota. Here is how we can do it: ... Allow students to purchase and consume vended products throughout the day.... I know this is "just one more thing from downtown," but the long-term benefits are worth it.37 Given the financial benefits of such contracts, it is understandable that many school administrators would find it convenient to avoid considering their health or ethical implications. They justify the contracts as breaking no new ground and argue that soft drink vending machines already exist in schools, soft drinks already pervade American culture, children are not forced to drink them, and contracts can be written with safeguards that protect students' rights to drink other kinds of soda.35 From this standpoint, the benefits of soft drink pouring rights contracts would seem to outweigh any concerns they might raise. The administrator of an Ohio school district with a new PepsiCo contract explained this reasoning: We have worried about whether we're forcing students to pay for their education through the purchase of soft drinks. In the end, though, we have decided that is not the case, because each student has the option to buy or not to buy.... Americans drink 13.15 billion gallons of carbonated drinks every year-which means somebody is making a lot of money. Why shouldn't schools get their share? In the end, everyone wins: the students, the schools, the community. And for once, even taxpayers get a break.38 Early in 1999, I attended a conference of New York State school food service directors at which participants expressed strong disagreement with such views. They were deeply troubled by a broad range of issues related to the length, exclusivity, and financial terms of contracts, to the lack of adequate federal oversight of foods sold in competition with school meals, and to the widespread failure of schools to enforce even the weak rules that do exist. They also viewed the contracts as threatening the economic viability of school food service operations, the integrity of schools' educational mission, and-not least-children's health. These opinions grew out of their understanding of the lengthy history of attempts to obtain adequate federal regulations to deal with the nutritional quality of foods served in schools.

# Extensions to School Contracts cause Obesity

## Turns you eating attitudes arguments – soft drinks in school undermines the effectiveness of alternative message and obesity prevention.

## Nestle, 2k

[Marion, Professor and Chair, Department of Nutrition and Food Studies, New York University “Soft Drink Pouring Rights Contracts” Public Health Reports, July/August 2000 <http://www.pubmedcentral.nih.gov/picrender.fcgi?artid=1308570&blobtype=pdf>]

Soft drink companies' more recent attention to children in grades K-12 can be seen as part of the increasing intrusiveness of commercial interests into US schools.3"64 Companies routinely use the methods summarized on page 311 (see "Examples of Methods Used by Soft Drink Companies...") to market food products to children in school; these activities are now so common as to be taken for granted. Soft drink companies-and school officials who contract with them implicitly assume that soft drinks are appropriate fare for school-age children rather than milk, juice, or water, any of which would be a better nutritional choice. The level of cynicism revealed in these marketing efforts is especially disturbing. What are we to make of statements like the one attributed to a consultant who helps schools obtain soft drink contracts? In his view, pouring rights contracts make schools more realistic for children. "If you have no advertising in schools at all, it doesn't give our young people an accurate picture of our society. "3 Pouring rights contracts clearly teach students that school officials are willing to compromise nutritional principles for financial reasons,2 even when the linking of payments to higher consumption goals puts them in the position of advocates for soft drink consumption. When a school administrator tells a reporter that nutrition is important, but he is "ambivalent about it," 65 he says a lot about his priorities; this kind of ambivalence contributes to student attitudes that nutrition and health are not important concerns. It is an all too rare school administrator who is willing to state that "matters involving money properly stop at the schoolhouse door."66 The well-financed promotion in schools of soft drinks and other foods of poor nutritional quality directly undermines federal efforts to improve the dietary intake of children and reduce rates of obesity.' Even though colleges (and now even cities such as Huntington Beach, California67' 68) have become advertising vehicles for soft drink companies, elementary and secondary school students deserve some protection against commercial interests that contribute to poor nutrition.

# Extensions – School Nutrition causes eating habits outside of school

## pouring right have a direct effect on eating habits outside of schools.

## Farmer, ‘4

[Kyle, “Policy Page: Pouring Rights” Virginia School Board Association, Number 93, 2-2004, <http://www.vsba.org/pageFeb04.pdf>]

Health concerns: While there are no scientific studies directly linking childhood obesity with the increase in exclusive vendor contracts, there is no dispute that childhood obesity has increased in recent years. The Center for Disease Control reported that 15 percent of adolescents between the ages of 6-19 were overweight as of 2000. This figure represents a 4-percent increase since 1994. Beyond the fact that overweight children face greater chances of being overweight adults, childhood obesity has been directly linked to an increase in childhood diabetes. Almost 20 percent of childhood diabetes cases in the United States today are labeled type II diabetes. This form of diabetes, previously considered an exclusively adult disease, is directly linked to obesity and has risen at an alarming rate in children. Other health risks include heart disease, high blood pressure and high cholesterol. Along with physical health risks, overweight and obese children face numerous social and psychological risks including low self-esteem, depression and social discrimination. A wide variety of groups have begun to speak out against “pouring rights” contracts, such as the National PTA, the National Education Association and the American Dental Association. These groups argue that allowing corporations to exclusively sell soda pop and “junk food” during school hours has a direct effect on the eating habits and poor health of our nation’s school children. “The real solution to the obesity problem,” counters the National Soft Drink Association, “is daily physical education and more nutrition education for every school-aged student.”

# Extension to Soft Drinks cause Obesity

## Soft-drinks are a core cause of empty calories and obesity in school aged children.

## Nestle, 2k

[Marion, Professor and Chair, Department of Nutrition and Food Studies, New York University “Soft Drink Pouring Rights Contracts” Public Health Reports, July/August 2000 <http://www.pubmedcentral.nih.gov/picrender.fcgi?artid=1308570&blobtype=pdf>]

Dietary intake surveys, on the other hand, tend to underestimate actual consumption, but such surveys also indicate increasing levels of consumption of soft drinks by children, and especially by teenagers. A national survey reported that children ages 2 to 17 increased their average daily intake of sugar-sweetened soft drinks from just under 7 ounces to 9.5 ounces from 1989-1991 to 1994-1995.1' USDA data for 1994-1995 show that children begin consuming soft drinks early in life and steadily increase the amounts they drink through adolescence and young adulthood. 9 Girls ages 12 to 19 drank 12 ounces of regular soda (160 calories) per day on average in 1994-1995, and boys drank an average of 21 ounces (280 calories). Girls drank an additional 2 ounces per day of diet soda, and boys one ounce per day on average.9 For children at the higher levels of consumption, soft drinks can contribute many hundreds of "empty" calories a day.'0 These extra calories replace calories from more nutritious foods'9 and could be more than sufficient to account for rising rates of obesity'6 and obesity-related chronic-disease risk factors among American schoolchildren. 17 One recent study found that nearly one-fourth of adolescents consume 26 or more ounces of soft drinks per day (350 or more calories) and that these heavy users take in 600 daily calories more from all sources than nonusers and drink much less milk or fruit juice.'8

# They say: School lunches are unhealthy

## It is the contracts that make school lunches extremely unhealthy

Newman et al, ‘8

[Constance,” Balancing Nutrition, participation, and cost in the national school lunch program” Amber Waves, 9-2008, <http://www.ers.usda.gov/AmberWaves/September08/Features/BalancingNSLP.htm>]

Revenues for school meal programs come from various sources: USDA subsidies, student payments for NSLP meals, sales of other foods, and State and local funds. According to the FNS cost study, 45 percent of revenues for the average SFA came from per meald reimbursements in 2005-06; 5 percent from commodity donations; 24 percent from student payments for NSLP meals; 16 percent from other food sales; and 10 percent from local and State government funds and other cash revenues. The sales of other foods have become a flash point for SFAs: The foods are less nutritious in general and yet their sales are considered necessary by many SFAs for financial survival. These other foods, known as “competitive” or “nonreimbursable” foods, can include a wide variety of foods available at or near schools, including a la carte items sold in the cafeteria and snacks sold in vending machines. Vending machines were in 98 percent of senior high schools, 97 percent of middle/junior high schools, and 27 percent of elementary schools in 2004-05. A la carte items were available for sale in 75 percent of elementary schools and over 90 percent of middle and high schools. Competitive foods are generally lower in key nutrients and higher in fat than the NSLP reimbursable meal. USDA requires only that “foods of minimal nutritional value” not be sold in foodservice areas during mealtimes. However, this requirement covers a limited number of foods, a small area of the school, and a short part of the day. The availability of competitive foods in a school has been found to reduce participation in NSLP, decrease nutrient intake from lunches, and increase the amount of food left uneaten and thrown away by students. The availability of unhealthy foods also sends a mixed message to students about the importance of nutrition.

## When cafeterias lack money nutrition only decreases

**Bird, ’02** (LAURA BIRD, Staff Reporter of THE WALL STREET JOURNAL. “School Lunches Face Scrutiny As Nation's Kids Get Fatter” Wall Street Journal Online, June 14, 2002, http://www.karlloren.com/diet/p30.htm)

If they attend public school, there's a good chance the answer is pizza -- or chicken nuggets, or a cheeseburger. In a nation of foodies, school lunch generally remains a bastion of processed, full-fat meat and cheese. On some days, school lunch is no healthier than what is sold at a fast-food chain -- and in some cases, that's exactly what it is.

The school lunchroom has long been a battleground for food activists and parents concerned about the nutritional quality of their children's midday meal. Now, with rising unease over the fast-growing rates of obesity, criticism is escalating from legislators, researchers and consumer groups who say fast-food, vending machines and the troubled economics of school cafeterias are culprits in the alarming growth of children's waistlines. Some 14% of teenagers were overweight in 1999, almost triple the rate of the late 1970s, according to the latest figures from the Centers for Disease Control and Prevention. Among children ages six to 11, 13% were overweight, almost double the rate two decades ago.

Most public schools offer students a government-subsidized lunch that is supposed to adhere to certain fat, caloric and nutritional standards. But 20% of schools also sell branded fast foods such as Pizza Hut and Little Caesars pizza or McDonald's burgers and fries, according to a 2000 study of school health policies and programs by the Centers for Disease Control and Prevention. Vending machines are present in 43% of elementary schools, 74% of middle schools and nearly all of high schools. The machines aren't supposed to operate in lunchrooms during lunch hours, but in practice they often do. The CDC study found beverage vending machines operated during lunch in 68% of schools that had them.

## Reducing access to competitive options essential to better child health.

## Newman et al, ‘8

[Constance,” Balancing Nutrition, participation, and cost in the national school lunch program” Amber Waves, 9-2008, <http://www.ers.usda.gov/AmberWaves/September08/Features/BalancingNSLP.htm>]

Studies have identified several supporting factors as necessary complements to lunch program changes. First, eliminating or greatly reducing competitive foods has been essential. Students eat more healthful foods and purchase more NSLP meals when their options are reduced. Second, school lunch programs can benefit from buy-in from all stakeholders: superintendents, principals, school foodservice personnel, parents, and students. Efforts to improve nutritional quality have proven successful when everyone is onboard, and particularly when leadership is energetic.

## Soft-drink and vending machine standards competes with school lunch

## Nestle, 2k

[Marion, Professor and Chair, Department of Nutrition and Food Studies, New York University “Soft Drink Pouring Rights Contracts” Public Health Reports, July/August 2000 <http://www.pubmedcentral.nih.gov/picrender.fcgi?artid=1308570&blobtype=pdf>]

As part of an effort to counteract the rising prevalence of overweight and obesity among children and adolescents, one Healthy People 2010 objective calls for an increase in "the proportion of children and adolescents aged 6 to 19 years whose intake of meals and snacks at schools contributes proportionally to good overall dietary quality."' As the accompanying text explains, today's students have "increased food options" at school. Although the US Department of Agriculture (USDA) requires federally subsidized school meal programs to meet established nutritional standards and dietary guidelines, this requirement does not apply to foods sold outside of school cafeterias in snack bars, school stores, or vending machines. The quality of "competitive" foods sold outside the cafeteria has long been a source of concern to nutritionists and school food service directors, as these foods often are higher in fat, sugar, and sodium than is desirable and students consume them instead of the more nutritious foods provided by federally supported school meal programs.24 Thus, one purpose of the Healthy People objective is to establish an environment in schools that will encourage a good overall diet and, therefore, contribute to learning readiness as well as to short- and long-term disease prevention and health promotion.

# They Say: OTHER THINGS LEAD TO OBESITY

**Even if there are alternate causalities to obesity, school diets are the key foundation. They are where kids get a surplus of calories which enables obesity in the first place.**

Stephen D. **Sugarman ‘7** & Nirit Sandman, Professor of Law and PhD Mathematics, Cal Berkeley, 2007, Duke Law Journal, April, 56 Duke L.J. 1403, p. 1433

Even apart from the role of food companies in enticing children to eat too much, food itself remains a necessary cause of obesity. To be sure, other factors beyond calorie consumption can play a role in outcomes for individuals -- such as exercise and genes.104 But without high caloric intake, people do not become obese.105 We think this basis alone morally justifies requiring the food industry to address the problem of childhood obesity -- just as one might justify requiring the auto industry to address the problem of highway accidents through PBR, even if alcohol and driver carelessness also play important roles. In a similar vein, we can imagine shifting the problem of work injuries toward a PBR scheme aimed at employers, instead of relying on the traditional regime that combines workers' compensation and occupational health and safety regulation. To those whose first reaction is that food is only part of the story,106 we want to emphasize that we are not proposing that the food industry eliminate childhood obesity, only that it take responsibility for substantially reducing its incidence.

# Obesity Impact - Economy

## A) Increasing obesity will crush the economy

**Kahan & Roberts, ’07** (SCOTT KAHAN is a physician and postdoctoral fellow with the Johns Hopkins School of Public Health and works part-time for the Center for Science in the Public Interest in Washington, D.C. SUSAN ROBERTS is a registered dietitian and attorney from Ankeny. Aug 22, 2007, “Save dollars, improve health with better options in school food” Des Moines Register, Access World News database)

Congress is struggling with how to address rising health-care costs, which are busting federal and state budgets and eating into corporate profits. Already nearly $1 of every $6 of our economy is spent on health care. Then there are the staggering epidemics of obesity and chronic disease.

These are intimately linked: The best way to decrease health-care costs is to prevent the most costly diseases.

Poor diet and obesity are key causes for diabetes, high blood pressure, heart disease, stroke, numerous cancers and other chronic diseases. Given kids' poor diets, the majority of American teens already have some degree of atherosclerosis (clogged arteries). Eighty percent of diabetes cases and at least one-third of heart-disease cases and cancers could be avoided by lifestyle changes, including improved nutrition and maintaining a healthy weight.

Obesity and diet-related diseases threaten the health of our economy. The Department of Health and Human Services estimates obesity costs American families, businesses and governments more than $115 billion yearly.

And the problem is getting worse. One-third of American children and two-thirds of adults are overweight or obese. Obesity rates have tripled in children and doubled in adults over the past two decades.

If the progression of obesity and related chronic diseases continues to grow unchecked, it will break the bank .

**B) Economic collapse leads to extinction.**

**Bearden 2000** Retired US Army, Director Association of Distinguished American Scientists,[Thomas, The Unnecessary Energy Crisis: How to solve it quickly, www.seaspower.com/energycrisis-bearden.htm]

“History bears out that desperate nations take desperate actions. Prior to the final economic collapse, the stress on nations will have increased the intensity and number of their conflicts, to the point where the arsenals of weapons of mass destruction (WMD) now possessed by some 25 nations, are almost certain to be released. As an example, suppose a starving North Korea {[7]} launches nuclear weapons upon Japan and South Korea, including U.S. forces there, in a spasmodic suicidal response. Or suppose a desperate China — whose long-range nuclear missiles (some) can reach the United States — attacks Taiwan. In addition to immediate responses, the mutual treaties involved in such scenarios will quickly draw other nations into the conflict, escalating it significantly. Strategic nuclear studies have shown for decades that, under such extreme stress conditions, once a few nukes are launched, adversaries and potential adversaries are then compelled to launch on perception of preparations by one's adversary. The real legacy of the MAD concept is this side of the MAD coin that is almost never discussed. Without effective defense, the only chance a nation has to survive at all is to launch immediate full-bore pre-emptive strikes and try to take out its perceived foes as rapidly and massively as possible. As the studies showed, rapid escalation to full WMD exchange occurs. Today, a great percent of the WMD arsenals that will be unleashed, are already on site within the United States itself {[8]}. The resulting great Armageddon will destroy civilization as we know it, and perhaps most of the biosphere, at least for many decades.”

# Obesity Impact - Hegemony

**A) Obesity significantly undermines the military in 3 ways: retention, recruits, and spending on healthcare**

**Almond, et al ’08** (Almond, Nathaniel Kahwati, Leila; Kinsinger, Linda; Porterfield, Deborah, 15 July 2008,, “The Prevalence of Overweight and Obesity Among U.S. Military Veterans” http://www.redorbit.com/news/health/1478028/the\_prevalence\_of\_overweight\_and\_obesity\_among\_us\_military\_veterans/)

Increases in the prevalence of overweight (body mass index [BMI] >/=25 kg/m^sup 2^) and obesity (BMI >/=30 kg/m^sup 2^) in the United States since 1960 are well known.1~3 Clinical examination data from the National Health and Nutrition Examination Survey (NHANES) found the prevalence of overweight in U.S. adults increased from 45% in 1960 to 1962 to 66% in 2003 to 2004, while obesity prevalence increased from 13% in 1960 to 1962 to 32% in 2003 to 2004.1,4,5 Obesity and overweight are associated with increased morbidity and mortality as well as increased economic burden to society. The mortality attributed to obesity has been estimated to be between 111,919 and 365,000 deaths annually.6-9 Comorbid conditions associated with obesity include hypertension, dyslipidemia, stroke, gallbladder disease, diabetes, coronary heart disease, and osteoarthritis, as well as breast, prostate, colorectal, gall bladder, and endometrial cancer.10 The economic cost of obesity exceeds $90 billion dollars annually.11

The epidemic of obesity significantly affects the military. First, the potential pool of recruits is decreased due to the increasing proportion of young adults who do not meet military entry standards for weight, estimated at 13 to 18% of U.S. men and 17 to 43% of U.S. women in the general population.12 Retention of active military personnel is also decreased secondary to the disease burden, with 1,419 personnel discharged in 2002 due to failing the body weight standard.13 Lastly, overweight and obesity add to health care costs for the Department of Defense, whose total health care budget is currently estimated at $36 billion with projected costs in 5 years to be $61 billion annually.14

**B) The effects of obesity threaten national security and military readiness**

**Severson, ’03** (Kim, Chronicle Staff Writer, JANUARY 7, 2003, TUESDAY, FINAL EDITION “Obesity 'a threat' to U.S. security” The San Francisco Chronicle, lexis)

An overweight America is killing itself with excess, and all that can save it is a major cultural transformation led by individuals and families, the U.S. surgeon general said Monday.

Speaking to more than 1,000 educators, doctors and public health officials in San Diego at the largest-ever conference on childhood obesity, Dr. Richard Carmona called obesity the fastest growing cause of illness and death in the United States and said it deserved more attention than any other epidemic.

"We need to lead a cultural transformation, and we can't let it be dwarfed by the other headlines of the day," he told the gathering.

The health implications in a country where two out of three adults are obese or overweight and the number of overweight kids has jumped by 50 percent in the decade are severe enough to **threaten national security**, he said.

"Our preparedness as a nation depends on our health as individuals," he said, noting that he had spent some of his first months in office working with military leaders concerned about obesity and lack of fitness among America's youth. "The military needs healthy recruits," he said.

# OBESITY BAD IMPACTS - Lives

**Obesity causes 300,000 deaths a year.**

Douglas **Besharov**, American Enterprises Institute, 200**3**, Testimony before Committee on Agriculture, April 3,

http://www.aei.org/publications/pubID.16861,filter.all/pub\_detail.asp

Being overweight is ,,,300,000 deaths per year).[9]

Being overweight is not simply a matter of aesthetics. The growing girth of Americans is a major health catastrophe. Overweight people are three times more likely to have coronary artery disease.[5] two to six times more likely to develop high blood pressure, [6] more than three times as likely to develop type 2 diabetes, [7] and twice as likely to develop gallstones than normal weight people.[8] Obesity, of course, is more serious, causing an estimated 50 to 100 percent increase in premature deaths (estimated to be 300,000 deaths per year).[9]

**Obesity undermines overall life expectancy – the impact is greater than pandemics or wars.**

**Lalasz ‘5** [Robert, Senior Editor at Population Reference Bureau, http://www.prb.org/Articles/2005/WillRisingChildhoodObesityDecreaseUSLifeExpectancy.aspx?p=1]

A new study contends that rising childhood obesity rates will cut average U.S. life expectancy from birth by two to five years in the coming decades—a magnitude of decline last seen in the United States during the Great Depression. The study, published in the March 18 issue of the New England Journal of Medicine, contradicts recent government projections that U.S. life expectancy will reach at least the mid-80s by the year 2080.1 Such forecasts, write lead author S. Jay Olshansky and his nine co-authors, are a "simple but unrealistic extrapolation of past trends in life expectancy into the future." In turn, other demographers have characterized the Olshansky team's analysis as largely unsupported by evidence, and the article has spotlighted a long-standing debate about whether there are biological limits to an individual human lifespan—all amidst a recent flurry of contradictory research about how obesity effects morbidity and mortality rates. One new study from the Centers of Disease Control and Prevention (CDC) even argues that being overweight has a positive effect on life expectancy.2 But Olshansky, a professor of epidemiology and biostatistics at the University of Illinois-Chicago, remains convinced by his team's conclusions. "If anything, we're being conservative in our estimates," he says. "We're assuming no change in obesity levels from 2000 levels, and actually, they've gotten worse." Obesity and the Future of Medicine Projecting life expectancy is more than an academic exercise. Many U.S. government agencies—including the Social Security Administration, Congress, and the military—use such forecasts to guide policymaking on issues from tax rates to the solvency of age-based entitlement programs. And almost all these projections assume that U.S. life expectancy will continue to rise as steadily as it has since the 1930s, spurred by new medical approaches and technology as well as behavioral shifts towards healthier lifestyles. But Olshansky and his co-authors question whether medicine and public health interventions can counter the rapid increases in U.S. obesity rates over the last two decades, especially among children. The incidence of obesity—which researchers have linked to an elevated risk of type-2 diabetes, coronary heart disease, cancer, and other health complications—rose approximately 50 percent in the United States in both the 1980s and 1990s. Two-thirds of all U.S. adults are now classified as overweight or obese, as are 20 percent to 30 percent of all children under age 15. And Olshansky argues that this rapid rise in obesity rates will cause a "pulse event" of mortality in the United States—akin to the large number of deaths caused by an influenza pandemic or a war, but spread out over the next four or five decades. "Any time there's an increase in early-age mortality [deaths before age 50], it has an effect on overall life expectancy," says Olshansky. "And when these children reach their 20s, 30s, 40s, and 50s, they'll face a higher risk of death. It's roughly equivalent to discovering that a large segment of our young people who never smoked suddenly decided to smoke." The Surprising Impact of Obesity Today To demonstrate the future effects of rising obesity levels, Olshansky and his co-authors first calculated how current rates of adult obesity are diminishing overall U.S. life expectancy. Using studies that argue being obese reduces your life expectancy by nearly 13 years, the researchers estimated by how much overall rates of death would fall if every obese person in the United States lost enough weight to reach the optimal Body Mass Index (BMI) of 24. (Obesity is generally defined as having a BMI of 30 or above.) "In other words, to find out the effects of obesity, we statistically wiped out obesity," says Olshansky.

# Academic Achievement Answers

## 1. Nutrition is not the key factor in academic achievement

## A. Peer Attitude is more important and its low in poor schools

Ryan and Heise, Professors of Law at Virginia and Case Western, 2002

The Yale Law Journal Vol. 111: 2043, <http://www.yalelawjournal.org/pdf/111-8/RyanFINAL.pdf>, “The Political Economy of School Choice” accessed 7/23/06 jg

There are a number of reasons why high-poverty schools tend to produce such dismal academic records. One of the most important is peer influence. In 1966, James Coleman released a mammoth and controversial report on the nation’s schools, which concluded that in determining student achievement, family background matters the most, followed by the characteristics of the student body.321 What mattered very little, he concluded, was school spending.322 Although scores of social scientists continue to debate the influence of spending,323 a remarkable consensus has formed on the point that the socioeconomic status of one’s peers matters a great deal.324 Indeed, study after study confirms that the social composition of the student body is more highly related to achievement, independent of the student’s own social background, than is any other school factor.325 Education commentators of every stripe acknowledge the robustness and consistency of these findings.326 Simply put, “ [i]f there is one thing that is more related to a child’s academic achievement than coming from a poor household, it is going to school with children from other poor households.” 327 The explanation for this effect is both straightforward and intuitive. Students from higher socioeconomic backgrounds, like their parents and teachers, tend to have higher expectations and aspirations regarding academic achievement. In schools, as in other communities, most participants tend to conform to the dominant culture. In schools that are majority middle-class, that culture typically is one that values academic achievement and generally expects students to attend college. This school environment is contagious; it affects most students and thus tends to raise the aspirations and motivation of poorer students. In schools that are majority poor, by contrast, expectations and motivations tend to be fairly depressed.328 Indeed, in poor inner-city schools, researchers have found that the dominant school culture often actively denigrates academic success, associating success in school with “ acting white.” 329 To be sure, this results not from some moral failing of poor or minority students, but rather from the starkly different realities confronting many of these students. Presented with few positive role models and surrounded by poverty and despair, poorer students have little reason to expect that hard work in school could lead to success afterward, and some poor, minority students may come to define themselves in opposition to white, middle-class culture.330

## B. Lack of funding causes low academic acheivement

Erwin Chimerinsky, former NDT Champion and National Constitutional Scholar, 2004

<http://www.wcl.american.edu/journal/lawrev/52/chemerinskyessay.pdf?rd=1> “SEPARATE AND UNEQUAL: AMERICAN PUBLIC EDUCATION TODAY” accessed 7/24/06 jg

In addition to resegregation, there is substantial disparity in school funding. A study by the General Accounting Office (“GAO”) described the importance of this disparity with respect to myriad factors such as enrollment numbers, availability and number of library books and resources, varying levels of teacher experience, availability of technology and computer resources, and the extent of parental involvement.40 The study noted that inner city schools were typically older than suburban schools, often with higher enrollments of students, and far fewer resources, books, technological support, and lower teacher quality.41 On average, the study noted that student achievement scores were typically lower in inner city schools than in suburban schools, where there is a greater percentage of less experienced first-year teachers and overall lower teacher quality.42

C – Family income is more important than schools **-**

Michael Lewyn, John Marshall Law School, 2000

Why Sprawl Is a Conservative Issue, <http://www.walkablestreets.com/conservative.htm>, accessed 7/22/06

Third, the common complaint that "bad schools" drive people out of cities illustrates how federal policies cause "bad" municipal services. As explained above, the courts' failed attempt to desegregate suburban schools has caused urban schools to become dominated by children from poor households. As a general matter, poor children are more difficult to educate, even in integrated schools. For example, P.S. 24, in Riverdale (one of the Bronx's few remaining affluent neighborhoods) has two educational programs: a regular program for relatively gifted students and a "special" program for slower students. The "special" programs are dominated by children who are poor enough to qualify for government free-lunch programs, whereas the regular program is dominated by students from middle-class households. Similarly, in affluent Shaker Heights, Ohio, White students average 1,100 on their SAT, whereas Black students average 800; because many of the latter live in middle-class households, the racial gap would no doubt be even larger if only low-income Black students' test results were considered. Academic studies support the proposition that gaps between students arise out of family background rather than poor schooling. For example, a 1960s survey by sociologist James Coleman showed that everything schools did accounted for only 5% to 35% of the variation in students' academic performances; he concluded, "The inequalities imposed on children by their home neighborhood and peer environment are carried along to become the inequalities with which they confront adult life at the end of school." Similarly, the Harvard sociologist Christopher Jencks concluded in his 1972 book, *Inequality*, that desegregation could close the Black-White academic gap by no more than 10% to 20%. In another study published in 1995, Scott Miller, a scholar now affiliated with the College Board, wrote, "There is little evidence that any existing strategy can close more than a fraction of the overall achievement gap" (as cited in Traub, 2000, p. 52) separating children from high-income and low-income households. In sum, it may be the case that if suburban children and urban children switched schools, school boards, teachers, and administrators, the suburban-urban achievement gap would be as large as it is now.

# Nutrition Advantage Answers

## 1 - Host of factors are at the root of obesity – including decreasing support for physical education.

## Nestle & Jacobson, 2004

[Marion & Michael, Professor and Chair, Department of Nutrition and Food Studies, New York University. Dr. Jacobson is the Executive

Director, Center for Science in the Public Interest “Halting Obesity Epidemic: A Public Health Approach” Public Health Reports, January/February 200, Volume 115, <http://www.cspinet.org/reports/obesity.pdf>]

Energy expenditure. Influencing Americans to increase energy expenditure is as daunting a task as encouraging reductions in energy intake. Twentieth-century labor-saving devices, from automobiles to e-mail, are ubiquitous and have reduced energy needs, as has the shift of a large proportion of the workforce from manual labor to white-collar jobs that require nothing more active than pressing keys on a computer.50 Wonders of modern civilization such as central heating lessen the energy cost of maintaining body temperature, and air conditioning makes it much more comfortable on hot summer days to stay inside and watch television or play computer games than to engage in outdoor activities. Dangerous neighborhoods—or the perception of danger— discourage people from walking dogs, pushing strollers, playing ball, jogging, or permitting children to play outdoors. 51 Many suburban neighborhoods are structured for the convenience of automobile drivers; they may not have sidewalks and may lack stores, entertainment, or other destinations within walking distance. Meanwhile, the decline in tax support for many public school systems and the need to fulfill competing academic priorities have forced them to relegate physical education to the category of “frill.” Many school districts have had to eliminate physical education classes entirely, and fewer and fewer schools offer any opportunity for students to be physically active during the school day.6 Such barriers make it clear why an attempt to “detoxify” the present environment and create one that fosters healthful activity patterns deserves far more attention than it has received since the 1977 recommendations in Obesity in America.20,22

## 2. Soft-drinks are targeted at parents and infant children – you can’t solve this.

## Nestle, 2k

[Marion, Professor and Chair, Department of Nutrition and Food Studies, New York University “Soft Drink Pouring Rights Contracts” Public Health Reports, July/August 2000 <http://www.pubmedcentral.nih.gov/picrender.fcgi?artid=1308570&blobtype=pdf>]

Competition among soft drink companies and increasing competition from sweetened juice drinks'5 have forced soft drink companies to seek new markets among younger and younger children.28 They approach this task through the various methods shown on page 311 (see "Examples of Methods Used By Soft Drink Companies..."). Because the overall strategy is to establish brand loyalty as early in life as possible,29 marketing efforts begin with the parents of young infants. Some soft drink companies have even licensed their logos to makers of baby bottles. One manufacturer explains that the bottles are "designed to be fun and enjoyable for the parents and the baby... [such that] the positive effects of the bonding experience will be increased for both parent and child" (Personal communication, Steven B. Dunn, President, Munchkin Bottling, Inc., August 1993) Studies show that parents who buy such bottles are significantly more likely to feed soft drinks to infants.30 PepsiCo states explicitly that its strategy is to expand soft drink consumption among children ages 6-1 1.

# Nutrition Advantage Answers

## 3 - School lunches are inherently are not healthy – Regulations are not followed

Yeoman ‘3

Mother Jones Magazine, Jan/Feb

**The USDA insists that school lunches are getting healthier. "There have been tremendous moves to reduce the fat content in school meals**," says department spokes-woman Jean Daniel. In recent years, the government has lowered the acceptable fat levels for ground beef and pork, introduced light cheeses and ground turkey, and eliminated tropical oils from its peanut butter. **For the most part, though, fat levels remain dangerously high. Based on USDA recommendations, an adolescent girl who eats a 730-calorie lunch should receive no more than 24 grams of fat, and no more than 8 grams of saturated fat.** Yet one portion of USDA surplus chuck roast, plus a glass of whole milk, delivers 31 grams of fat, including 14 grams of saturated fat. Buttered rolls and a side dish of cheesy broccoli bump those figures even higher. And **if a school wants to cut animal fat by eliminating whole milk, it can't: Federal law requires that schools continue offering it as long as 1 percent of the students purchase it.** As a result**, school lunches routinely fail the government's own nutritional standards.** By law**, schools are supposed to restrict fat content in lunches to 30 percent of the calories served each week**. But according to the USDA, **81 percent of schools exceed that limit.** Worse, **85 percent fail the standard for saturated fat, a leading contributor to coronary disease. Half of all schools serve whole milk**, which further drives up the saturated-fat content. On any given day, **less than 45 percent of schools serve cooked vegetables other than potatoes** -- which are often prepared in the form of french fries -- **and less than 10 percent serve legumes**, a healthy, low-fat form of protein.

## 4 - Cola is pervasive in high schools – students freely purchase them.

## Johnston, Delva & O’Malley, ‘7

[Lloyd, Jorge & Patrick, From the Survey Research Center, Institute for Social Research (Johnston, Delva, O’Malley) and School of Social Work (Delva), University of Michigan, Ann Arbor, Michigan, “Soft-Drink Availability, Contracts and Revenues in American Secondary Schools” American Journal of Preventative Medicine, 33(4s), 2007]

Availability of beverages. The great majority of secondary school students attend schools that have soft drinks sold in vending machines—65% of middle school students and 88% of high school students (p0.001) (Figure 1). However, relatively few schools have completely unrestricted access throughout the day to regular soft drinks in vending machines—only 10% of middle school students and 23% of high school students (p0.01) are in schools that do (Table 1D). The corresponding numbers for diet soft drinks are similar (6% and 22%, respectively), likely because both classes of soft drink are located in the same vending machines. Bottled water, on the other hand, is accessible throughout the day through vending machines to only 18% of middle school students but to about half of high school students (47%) (p0.001). All of the beverage classes are significantly less available throughout the day to middle school students compared to high school students, including 1% or skim milk (3% vs 12%, respectively), whole or 2% milk or flavored milk (4% vs 16%), and 100% fruit or vegetable juice (6% vs 25%). As shown in Table 1D, at lunchtime, when many students make beverage choices, the majority of secondary school students have access to soft drinks in the à la carte offerings in the cafeteria (48% in middle school and 59% in high school), as well as to whole or 2% milk or flavored milk (78% and 83%). Of the various beverages, the lowest availability measured was for diet soft drinks, with middle schools having significantly less access (8% and 24%, p0.001). Modestly higher percentages are observed in high schools for all these classes of beverages, although only fruit and vegetable juices and diet soft drinks reach statistical significance. (No question was included on the availability of bottled water in the cafeteria.) Table 2 shows the percentages of students who are in schools offering beverages through vending machines, and more detail on when during the day the different beverages are available. About two thirds (65%) of middle school students attend schools that have vending machines that dispense regular soft drinks versus 88% of high school students (p0.001). Significant proportions attend schools that dispense diet soft drinks (49% and 83%, p0.001). Bottled water is the most widely available beverage from vending machines (83% vs 97% of students have access, p0.001) and 100% fruit or vegetable juice is also widely available (61% vs 83%, p0.001). Whole milk (58% vs 64%) and skim milk (52% vs 56%) are slightly less available (differences by grade not significant). All beverages have lower reported availability in middle schools than in high schools.

# Nutrition Advantage Answers

## 5 - Advertising is a key reason for obesity – banning advertising in schools focused on students solves the case.

## Ankberg-Nobis, ‘7

[Trulie, dietitian with the Physicians Committee for Responsible Medicine, “Fast Food in Schools Fuels the Obesity Epidemic” News and Media Center, December 18, 2007, <http://www.pcrm.org/news/commentary071218.html>]

Advertisements are part of why most children in the United States don't eat the recommended five servings of fruits and vegetables per day. Coupled with an increasingly sedentary lifestyle and a decrease in physical education, America has a serious health problem on its hands. In the United States, more than 9 million girls and boys are now overweight. In a study recently published in the New England Journal of Medicine, researchers estimate that by 2035, the prevalence of heart disease will have increased by 5 to 16 percent because of the increasing obesity rates among young people. Free Happy Meals are making the problem worse. But schools aren't exactly innocent players in the childhood obesity epidemic, either. Many school lunch menus are still too high in saturated fat and cholesterol, and too many schoolchildren still find foot-long hot dogs, "Colossal Burgers," sodas, and junk food vending machines in the cafeteria. Children aren't offered high-fiber, nutrient-rich fruits, vegetables, whole grains, beans and other low-fat vegetarian options often enough. Some countries have already banned the marketing of soda and junk food to children, but the United States is only just beginning to set regulations for food marketing aimed at youngsters. McDonald's has pledged to only advertise its healthier options to children under 12 and to stop advertising all food or beverage products in elementary schools by January 2008. The Seminole Country advertisements will continue until the end of 2007 -- apparently McDonald's is trying to squeeze every last drop out of its in-school marketing to the very youngest schoolchildren. Fast-food corporations have a long history of marketing their high-fat, high-calorie products in school systems. But that doesn't mean it's a tradition that should continue. Schools should refuse to partner with fast-food corporations or at least ban advertisements for foods high in fat, sugar and cholesterol. Most schools could also do a lot more to improve the food served in their own cafeteria lines and lunch rooms. Schools that allow fast-food companies to send advertisements home on a child's report card sabotage parents' attempts to promote healthy eating at home. This isn't the first time schools in Seminole County or elsewhere have traded free advertising with McDonald's or other corporations for money, but it should be the last.

**6 – Turn - School lunches are especially fatty and contribute to obesity**

**Whitmore, ’04** (Diane Whitmore, University of Chicago, October 5, 2004, “Do School Lunches Contribute to Childhood Obesity?” http://www.aeaweb.org/annual\_mtg\_papers/2005/0107\_0800\_0104.pdf)

The most recent figures show that 13 percent of children aged 6-11 are overweight – almost twice the rate of overweight in the early 1980s. There are few straightforward policy tools to combat the high level of overweight. Almost three quarters of school children eat a National School Lunch Program lunch, and consume about one-third of their total calories from this meal. Previous studies have established that the school lunch program lunches often fail to meet nutrition requirements, and have an **especially high fat content**. In this project, I assess whether the National School Lunch Program plays a role in the incidence of childhood overweight. I then employ a panel data set to follow children over time, and find that children who consume school lunches are about 2 percentile points more likely to be obese than those who brown bag their lunches. But since both groups of children enter kindergarten with the same obesity rates, the panel data suggests that the difference in obesity rates is not merely a function of fixed differences between children who select into the school lunch program. To assess the plausibility of this finding, I investigate the additional calories consumed by those in the school lunch program. Using NHANES food diary data, I find that children who eat school lunch consume 40-120 more calories at lunch than those who brown bag, but that both groups of children consume the same amount of calories the rest of the day (not including lunch). I estimate that for children an extra 40-120 calories per day would increase the incidence of overweight by 2 to 4 percentile points – the same as the observed increase in overweight. I estimate that if school lunches were made healthier and consistently met the nutrition requirements set for them, the childhood obesity rate would decline.

# Extension to #5 - Advertising

## Marketing to school aged children conditions eating habits

## Ankberg-Nobis, ‘7

[Trulie, dietitian with the Physicians Committee for Responsible Medicine, “Fast Food in Schools Fuels the Obesity Epidemic” News and Media Center, December 18, 2007, <http://www.pcrm.org/news/commentary071218.html>]

About 27,000 Seminole County, Fla., schoolchildren in kindergarten through fifth grade were recently sent home with report cards adorned with a picture of the ubiquitous red-headed clown and a promise for a free Happy Meal to any child with good grades, behavior or attendance. The report card specifically says that Happy Meals include a choice of fries, soft drink, and a hamburger, cheeseburger or chicken nuggets. Seems like in-school fast-food marketing has a hit a new low. But it's even more shocking that the Seminole County School Board agreed to partner with McDonald's. Sure, McDonald's picked up the $1,600 printing bill for the cards, but aren't schools and parents supposed to be working together to improve our kids' diets? McDonald's often tries to tout its handful of low-fat menu items, but how many kids go to a fast-food joint and choose the apple slices? As a parent and a dietitian, I know that many children are conditioned -- thanks in part to effective billion-dollar marketing campaigns -- to opt for fries and soda with their burger or nuggets. Children don't know that a Happy Meal could potentially contain 28 grams of fat and more than 700 calories. Neither do most parents. McDonald's spends about a billion dollars each year marketing its products, and it aggressively targets children. But McDonald's isn't alone in its efforts. Most fast-food corporations market their products to children through schools, movies, video games, books, Web sites, text books and television.

# Ext to # 6 - SCHOOL LUNCH PROGRAMS → OBESITY

**Kids who eat school lunch have higher obesity rates**

**Whitmore, ’04** (Diane Whitmore, University of Chicago, October 5, 2004, “Do School Lunches Contribute to Childhood Obesity?” http://www.aeaweb.org/annual\_mtg\_papers/2005/0107\_0800\_0104.pdf)

In this paper, I show that school lunch eaters consume more calories at lunch – but not at other times of the day – than brown baggers. These additional calories could lead to a 2-4 percentage point higher obesity rate among school lunch eaters. Furthermore my results show that, holding all else constant, there was no difference between school lunch eaters and brown baggers when they entered kindergarten, before they were exposed to school lunches. After they have been in school for a couple of years, though, school lunch eaters do experience **higher obesity rates** than brown baggers. If school lunches were made healthier, a significant decline in childhood obesity would likely occur.

**Eating school lunches increases obesity 2% by the first grade.**

**Whitmore, ’04** (Diane Whitmore, University of Chicago, October 5, 2004, “Do School Lunches Contribute to Childhood Obesity?” http://www.aeaweb.org/annual\_mtg\_papers/2005/0107\_0800\_0104.pdf)

Table 2 shows regression-adjusted results. When children enter kindergarten, the type of school lunch they will go on to eat in kindergarten and first grade is not associated with any differences in obesity rates, whether or not covariates are controlled. By the end of first grade, however, school lunch eaters are 2.4 percentage points more likely to be overweight, controlling for observable characteristics and school-by-mother’s-employment fixed effects. When baseline obesity is included as an explanatory variable, the difference in obesity rates edges down to about 2 percentage points.10 In either case, after two years of exposure to school lunches children are 2 percentage points (on a base of 9 percent) more likely to be overweight than their classmates who brown bag their lunch.

**School lunches have too many calories and increase obesity.**

**Whitmore, ’04** (Diane Whitmore, University of Chicago, October 5, 2004, “Do School Lunches Contribute to Childhood Obesity?” http://www.aeaweb.org/annual\_mtg\_papers/2005/0107\_0800\_0104.pdf)

I find that children who eat a National School Lunch Program lunch for two school years are 2 percentage points more likely to be overweight. In this section, I provide evidence that this is a plausible magnitude. On average, students eating a school lunch consume an extra 40 calories per day – all at lunch – and holding all else constant, that increase could account for the observed weight gain.

# UQ Wall – 2NC 1/3

## Schools are increasingly banning cola and junk food on campuses.

## Lewellyn, ‘7

[Kisha, “Lunch Becomes a Delicious Lesson with Farm to School Programs” New West Missoula, 9-11-2007, <http://www.newwest.net/city/article/lunch_becomes_a_delicious_lesson_with_farm_to_school_programs/C8/L8/>]

No matter who you sit with at the cafeteria lunch table, if you eat the school lunch you are likely tasting the same chicken-fried steak, potato-based, pizza on Friday meal as every other kid in America. For more than thirty years most lunchrooms around the country have been serving processed and pre-cooked food in an effort to make decreasing school lunch budgets go further and still meet federal nutrition requirements. So the beefy chili is precooked and frozen in plastic bags along with the brocolli and corn that are all ready to heat and eat. Even granny smith apples come sliced and shrink wrapped on a mini Styrofoam tray. But as kids around America return to school this year, more are finding unexpected delicacies like fresh broccoli and home-made chili on the lunch menu. With the rise of diabetes and obesity, many schools are removing the pop and candy machines and replacing the school lunch with local food. To do so, they are implementing the Farm to School program, which works with local farmers, ranchers and school staff to provide local food to students that will improve student nutrition. These programs are also intended to improve students’ understanding of the food system while putting lunch money back into the local economy. For instance, schools purchase eggs, honey, fruit and vegetables from local farmers who are able to expand their markets and even hold farm tours for students.

## School districts cracking down on junk food and cola.

## New York Times, ‘7

[Andrew Martin, “The School Lunch on a Diet” New York Times, 9-5-2007, <http://www.nytimes.com/2007/09/05/business/05junkfood.html?ex=1346731200&en=99290c56d6e1fac0&ei=5124&partner=permalink&exprod=permalink>]

School districts across the country have been taking steps to make food in schools healthier because of new federal guidelines and awareness that a growing number of children are overweight. In California, deep fryers have been banned, so chicken nuggets and fries are now baked. Sweet tea is off the menu in one Alabama school. In New Jersey, 20-ounce sports drinks have been cut back to 12 ounces. Food and beverage companies have scrambled to offer healthier alternatives in school cafeterias and vending machines, and some of the changes have been met with a shrug by students. The whole-wheat chocolate-chip cookies? “Surprisingly, the kids have kind of embraced them,” said Laura Jacobo, director of food services at Woodlake Union schools in California.

## More than half the states have taken a hard line approach.

## New York Times, ‘7

[Andrew Martin, “The School Lunch on a Diet” New York Times, 9-5-2007, <http://www.nytimes.com/2007/09/05/business/05junkfood.html?ex=1346731200&en=99290c56d6e1fac0&ei=5124&partner=permalink&exprod=permalink>]

As a result, more than half of the states have adopted tougher guidelines for what can be sold or given away during school hours. For instance, New Jersey adopted its own nutrition guidelines, which take effect at the beginning of this school year, though more than half the school districts have already complied. That means that when students return to Millburn High School in northern New Jersey tomorrow, pizza will still be on the menu, but it will be low-fat. Water has replaced soda in the vending machines, and sports drinks are sold in smaller bottles. At Spain Park High School in Hoover, Ala., a local favorite called Milo’s Famous Sweet Tea has been banned from the cafeteria. So have regular potato chips; now baked chips are sold. In central California, the Woodlake Union district pulled out its deep fryers over the summer and replaced them with a convection oven. “My staff thought they were going to lay everyone off because there wouldn’t be anything to cook,” said Ms. Jacobo, who explained that she discovered baked alternatives to the fried standbys. “The food is still acceptable to the kids.”

## Bans on junk food and soda are becoming nearly universal in state codes.

## New York Times, ‘7

[Andrew Martin, “The School Lunch on a Diet” New York Times, 9-5-2007, <http://www.nytimes.com/2007/09/05/business/05junkfood.html?ex=1346731200&en=99290c56d6e1fac0&ei=5124&partner=permalink&exprod=permalink>]

If there is a constant in the states’ nutrition policies, it is restrictions on soda. In New Jersey, for instance, all foods and beverages with little or no nutritional value are banned, ruling out soda and candy. In Alabama, soft drinks are banned from elementary and middle schools, while only diet soda is allowed in the high schools. In Kentucky, 100 percent fruit and vegetable juices and low-fat milk are allowed, but no other beverages are permitted to have more than 10 grams of sugar per serving.

# AT: OBESITY HURTS THE ECONOMY

**Statistics that claim obesity costs the U.S. billions of dollars are wrong – they are based on faulty data**

**Center for Consumer Freedom, ’04** (“AN EPIDEMIC OF OBESITY MYTHS” June, 2004, http://www.consumerfreedom.com/downloads/promotional/docs/040602\_obesitymyths.pdf)

In 2003, there were more than 400 media mentions of the statistic that obesity costs $117 billion every year.106 Where does this figure come from? In March 1998, the journal *Obesity Research* published a study that arrived at this estimate for the costs of both direct medical expenses and indirect costs like lost productivity.107 In December 2001, “The Surgeon General’s Call to Action to Prevent and Decrease Overweight and Obesity” cited that figure, and the myth was born.108

The $117 billion study has serious limitations, as the authors themselves admit: “We are still uncertain about the actual amount of health utilization associated with overweight and obesity.” They write: “Height and weight are not included in many of the primary data sources.” What’s more, the authors acknowledged that their methodology allowed for the “double-counting of costs,” which “would inflate the cost estimate.” If, for example, an obese person were hospitalized with hypertension, cancer, and diabetes, their bill would have been counted three times. Finally, the authors used the wrong definition of obesity. Traditionally, a BMI of 30 or more makes you obese, but the authors decided to set their threshold at 29. A small error? Not at all. They wrongly included the costs of more than 10 million Americans, including Bruce Willis, Harrison Ford,

and George Clooney.109

# AT: OBESITY LEADS TO DISEASE

**There is no link between obesity and disease - - studies are misleading**

**Chaudhry, ’05** (Lakshmi Chaudhry, is a senior editor at In These Times and a former senior editor of AlterNet. Posted July 15, 2004.” Keep Yer Flab On” http://www.alternet.org/mediaculture/19235/)

What's more, according to Campos, there is no documented relationship between weight loss and health. He claims that medical studies that link obesity to wide range of diseases, including heart disease and cancer, are misleading and often self-serving. The result is a cultural hysteria that uses a dangerous and pervasive myth to demonize all – especially poor people of color – who do not fit the shrinking standards of the ideal body weight.

Campos talked to AlterNet from his office at the University of Colorado, Boulder.

Your central claim is that major epidemiological studies show little or no link between weight and health, be it risk for cancer or heart disease. That sounds kind of kooky to a lay person.

For the vast majority of people in the United States, their weight does not give you any meaningful information about their likely overall health. You can look at the roughly 75 percent of the population that has a Body Mass Index (a measure of your weight relative to your height) between 18.5 and 32 or so. That entire range, which represents about 80 pounds for an average height woman (5 ft. 4 in.), you will not see any significant variation in terms of risk (of contracting a disease).

# UQ Wall – 2NC 2/3

## New federal rules are propelling the shift.

## Gourmet Retailer, ‘6

[Grain counsel supporting junk food crackdown in schools” 8-3-2006, <http://www.allbusiness.com/retail-trade/food-stores/4213477-1.html>]

New federal rules that will be in effect July 1, 2006, will require schools to serve healthier foods and drinks in their vending machines and cafeterias in September when students return to classes. Schools challenged by this massive makeover, and therefore, are scrambling to meet the deadline are turning to Oldways and the Whole Grains Council (WGC) for help. Rallying key members of the food industry, the WGC has assembled a detailed guide to whole grain meal options and snacks for schools. These are whole grain products for the 21st century that combine the tastes and textures kids want with the healthy nutrients the law now requires. The Whole Grains Council’s 125 industry members are working to make sure whole grains are appealing. “Children need healthier food choices, including whole grains,” says Oldways President K. Dun Gifford, “and now, whole grains are being packaged in kid-friendly colors, shapes and sizes. Plus, they taste great.” In the cafeteria, schools can now choose 100 percent whole grain buttermilk biscuits or blueberry waffles for breakfast, and whole wheat pasta or pizza with whole grain crust for lunch, among dozens of other whole grain choices. In vending machines, choices will now include bite-sized Snackimals Oatmeal Cookies, Graham Crackers in a fun box with a handle and Pumpkin Granola Cereal in kid-size “cereal cups.”

## New laws lead school districts to rethink coke and candy in schools.

## Mehta, ‘6

[Seema, Times Staff Writer, “Sorry, Cupcake, you’re not welcome in Class” teacher web, 9-27-2006, <http://www.teacherweb.com/MO/MontgomeryCountyRII/HealthServices/Nutrition.pdf>]

The days of the birthday cupcake — smothered in a slurry of sticky frosting and with a dash of rainbow sprinkles — may be numbered in schoolhouses across the nation. Fears of childhood obesity have led schools to discourage and sometimes even ban what were once de rigueur grammar-school treats. "They can bring carrots," said Laura Ott, assistant to the superintendent of Orange County's Saddleback Valley Unified School District, which this month started allowing non-nutritious classroom treats only three times per year. "A birthday doesn't have to be associated with food." Such nutritional dictates have ignited a series of mini cupcake rebellions across the country, and Texas has led the way. The Texas Legislature last year passed the so-called Safe Cupcake amendment, which guarantees parents' right to deliver unhealthful treats to the classroom — such as sweetheart candies on Valentine's Day and candy corn on Halloween. Rep. Jim Dunnam sponsored the legislation after a school in his district booted out a father bringing birthday pizzas to his child's class. "There's a lot of reasons our kids are getting fat," said Dunnam, a Democrat from Waco. "Cupcakes aren't one of them." Whether cookies, cakes and other birthday treats at school are the culprits or not, however, the nation's children are definitely packing on the pounds. Nearly 19% of children ages 6 to 11 and more than 17% of adolescents ages 12 to 19 were overweight in 2003-04, according to the U.S. Centers for Disease Control and Prevention. Extra weight carries added health risks, as seen in the increasing childhood diagnoses of Type 2 diabetes, once considered an adult disease. Obesity concerns led to California's historic ban on junk-food and soda sales in schools that was signed into law last year. Recent laws by the state and federal government also have prompted school districts throughout the nation to overhaul their nutrition and wellness policies. "It is a very serious problem, and some districts are looking not only to change what is offered and sold during lunchtime, but what is being provided during" the rest of the school day, said Martin Gonzalez, assistant executive director of the California School Boards Assn. Districts are looking well beyond school lunches: vending machines, band fundraisers, boosterclub sales, treats as rewards from teachers, concession stands at football games — and the ubiquitous birthday parties.

## Schools are imposing stricter junk food standards in response to health concerns.

## New York Times, ‘7

[Andrew Martin, “The School Lunch on a Diet” New York Times, 9-5-2007, <http://www.nytimes.com/2007/09/05/business/05junkfood.html?ex=1346731200&en=99290c56d6e1fac0&ei=5124&partner=permalink&exprod=permalink>]

One reason that standards are needed is the rapid growth of food sales at schools, said Katie Wilson, president-elect of the School Nutrition Association, a nonprofit organization that represents school nutrition employees. Sales from vending machines, fund-raisers and school stores often sustain parent-teacher associations, sports teams and student clubs. “It’s cheap and it’s quick and you make money really fast,” Ms. Wilson noted. But as more and more children became overweight, it became apparent that stricter policies were needed to address sales of things like candy bars, she said.

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## NSLP does not even meet the minimum requirements for fat content.

## Newman et al, ‘8

[Constance,” Balancing Nutrition, participation, and cost in the national school lunch program” Amber Waves, 9-2008, <http://www.ers.usda.gov/AmberWaves/September08/Features/BalancingNSLP.htm>]

Despite Federal regulations, many NSLP lunches do not actually meet fat and nutrient requirements. The most recently available data, the 2005 School Nutrition Dietary Assessment (SNDA), showed improvement in saturated fat content from the 1998-99 SNDA, but it found that only one in four elementary schools served lunches that met the standard for fat and one in three met the standard for saturated fat. For high schools, the numbers were even lower: 1 in 10 for fat and 1 in 5 for saturated fat.