

## Testimony before the House Education Committee

March 9, 2005

Chairman Decker and Members of the Committee:

Thank you for the opportunity to provide testimony today in support of SB 154, relating to the adoption of standards for food and beverages available to Kansas students. My name is Teresa Schwab, and I am the Executive Director of Oral Health Kansas, Inc.

There has been a lot of discussion this session in Kansas as well as in other states about the negative effects of poor nutrition and physical inactivity and their associated health care costs. This is especially important for children as this is when habits and patterns begin to develop that will likely last a lifetime. Certainly, obesity is a critical health issue, but I would also like to add oral health to the discussion since one's oral health is integral to one's overall health and well-being.

According to the 2000 Report of the Surgeon General on Oral Health, dental caries is one of the most common childhood diseases, more than 5 times as common as asthma and 7 times as common as hay fever. In a recent study of Kansas third graders, more than 50 percent of children in the study had experience dental decay in their lifetime. Each year, an estimated 51 million school hours are lost because of dental-related illness.

The American Dental Association (ADA) reports that American consumption of soft drinks, including carbonated beverages, fruit juice and sports drinks, increased 500 percent in the past 50 years. Americans drank more than 53 gallons of soft drinks per person in 2000, surpassing all other beverages including milk, beer, coffee, and water.

Our mouths are filled with bacteria, and when these bacteria come into contact with sugar or starch, like those found in soft drinks and other foods, acid is produced that attack teeth. Bacteria are particularly fond of foods containing sugars and carbohydrates. These foods provide bacteria with energy to grow, reproduce, and create enamel-eating acid.

Thus, when children have a prolonged exposure to sugary foods and beverages, the risk of early childhood caries (ECC) increases. The financial impact of dental disease caused by the consumption of sugary snacks and soft drinks is considerable and especially frustrating because it is totally preventable.

For these reasons, Oral Health Kansas would like to add their support to the provisions of SB 154. We support the collaborative process proposed in this bill and look forward to oral health being a part of the discussion.

Once again, thank you for the opportunity to provide you with this testimony today. I would be happy to stand for questions.

Respectfully submitted,  
Teresa R. Schwab, LMSW