

Analysis did attach a fiscal note to the bill which stated that a new subject “could result in a cost of up to \$5,000 per district, in FY 16, associated with researching and developing the necessary materials, and providing training to appropriate staff members, for a total of up to \$15,000 per district.”

Costs can in fact vary depending on the type of training utilized but **estimates show that the per-student cost approximately \$1.00**. In fact, some schools have been able to provide training at no cost using community volunteer instructors or video-based programs, donated equipment, and drawing support from businesses, foundations, civic organizations and public agencies. The amount of time required to offer effective CPR training takes less than the amount of time to watch a typical 30 minute TV sitcom.¹

CT is certainly not alone in requiring CPR in the public school curriculum. In fact there are currently 27 states with similar legislation as CT’s including: Alabama; Arkansas; Delaware; Georgia; Idaho; Illinois; Indiana; Iowa; Louisiana; Maryland; Nevada; New Jersey; North Carolina; Oklahoma; Rhode Island; Tennessee; Texas; Utah; Vermont; Virginia; Washington; West Virginia; and Wisconsin. As of January 6, 2016 the following states have had similar legislation introduced: Hawaii; Kentucky; Michigan; New York; Ohio; Oregon; Pennsylvania; and South Carolina.²

SB 378 also attempts to delete such electives as nutrition and physical education (also in lines 38-43). Connecticut now faces an obesity crisis that impacts citizens of all ages. Our states youth, in particular, are being negatively impacted by the crisis. The 2013 CT Department of Public Health Youth Risk Behavior Survey (YRBS) showed that 13.9% of students were classified as overweight (defined as a body mass index (BMI) at or above the 85th percentile up to the 95th percentile³) and 12.3% were classified as obese (defined as a BMI at or above the 95th percentile⁴).⁵ There also exists a large disparity, in terms of obesity rates, between white students and Black and Hispanic/Latino students. 18.1% of Black students and 18.9% of Hispanic/Latino students were categorized as obese compared to 9.8% of white students in the YRBS.⁶ Obese children are at least twice as likely as non-obese children to become obese adults.⁷

The evidence is also clear that the obesity crisis is affecting all age groups in our state. In the 2013 Centers For Disease Control and Prevention’s Behavioral Factor Surveillance Survey (BRFSS), 37.6% of adults were classified as overweight (defined as a BMI between 25.0-29.9) and 25% were classified as obese (defined as a BMI of 30.0 or above).⁸ The prevalence of overweight and obesity in Connecticut is a significant public health issue. Excess weight is associated with chronic diseases such as heart disease and type 2 diabetes.⁹

To conclude, while in the middle of a statewide obesity crisis it makes no sense to deemphasize the value of nutrition and physical education in the public school curriculum. Neither does it make sense not to require that a generation of kids learn the necessary skills necessary to become lifesavers in their communities. We respectfully request that the committee reject SB 378.

Sincerely,

Jim Williams
State Government Relations Director
American Heart Association

¹American Heart Association. “Hands Only CPR Fact Sheet.” Accessed at http://cpr.heart.org/idc/groups/heart-public/@wcm/@ecc/documents/downloadable/ucm_473563.pdf on 3/5/2016.

²schoolcpr.com. "States where CPR Training is Mandatory for High School Graduation." Accessed at <http://schoolcpr.com/about/states-where-cpr-training-is-mandatory-for-high-school-graduation/> on March 4, 2016.

³ Pediatrics Vol. 120 No. Supplement 4 December 1, 2007 pp S164-S19, <http://musckids.org/heart/health/physician%20resources/aap%20summary.pdf>

⁴ Pediatrics Vol. 120 No. Supplement 4 December 1, 2007 pp S164-S19, <http://musckids.org/heart/health/physician%20resources/aap%20summary.pdf>

⁵ CT Department of Public Health (2014). 2013 Youth Risk Behavior Survey Results CT High School Survey Summary Tables. Retrieved from: http://dph/lib/dph/hisr/pdf/yrbs2013ct_summary_tables.pdf

⁶ CT Department of Public Health (2014). 2013 Youth Risk Behavior Survey Results CT High School Survey Summary Tables. Retrieved from: http://dph/lib/dph/hisr/pdf/yrbs2013ct_summary_tables.pdf

⁷ U.S. National Library of Medicine: National Institutes of Health. "Do obese children become obese adults?" Accessed at <http://www.ncbi.nlm.nih.gov/pubmed/8483856> on 3/24/2016.

⁸ Centers for Disease Control and Prevention, Office of Surveillance, Epidemiology, and Laboratory Services. Behavioral Risk Factor Surveillance System. <http://apps.nccd.cdc.gov/brfss/display.asp?cat=OB&yr=2013&qkey=8261&state=CT>.

⁹ Connecticut Department of Public Health. April, 2014. Live Healthy Connecticut, A Coordinated Chronic Disease Prevention and Health Promotion Plan. Hartford, CT: Connecticut Department of Public Health. <http://www.ct.gov/dph/cwp/view.asp?a=3137&Q=543772>