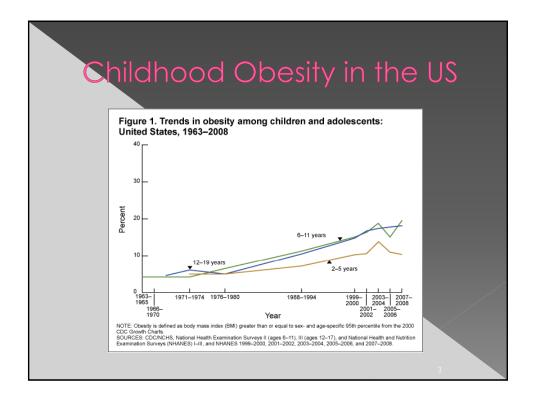
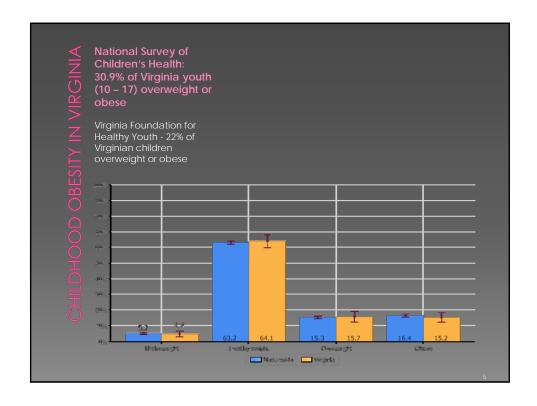
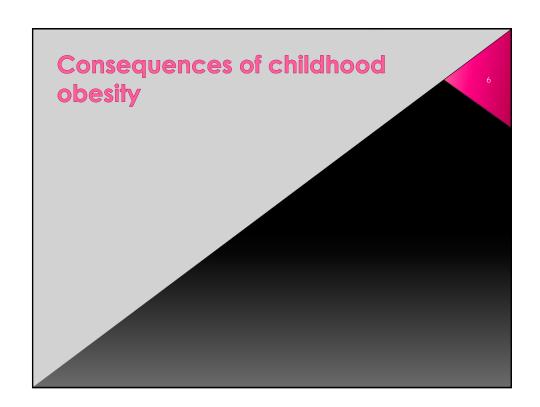
Rolicy Recommendations: Childhood Obesity Elena L. Serrano, PhD, Associate Professor, Human Nutrition, Foods, & Exercise, Virginia Tech





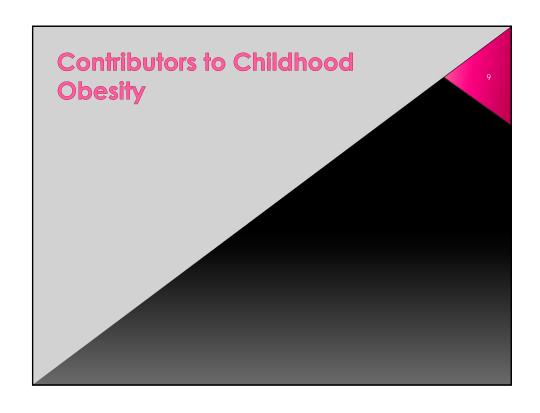
| Age (in years) ¹ | 1965 1966- 1970 ² | 1971- 1974 | 1976- 1980 | 1988- 1994 | 1999- 1900 | | 2003- 2004 | 2005- 2006 | 2007- 2008 |
|---|------------------------------------|---------------|---------------|---------------|---------------|--------------|---------------|---------------|---------------|
| Total | (3) | 5.0 | | 10.0 | | | | 15.5 | 16.9 |
| 2-5 6-11 | | 5.0 | | | | | | 11.0 | |
| 12-19 | 4.2 | 4.0 6.1 | 6.5 5.0 | 11.3 | 15.1 14.8 | 16.3 16.7 | 18.8 | 15.1 17.8 | 19.6 18.1 |
| ² Data for adolescer ³ Children | nts aged | 12-17, n | ot 12-19 | years. | | | | | |
| | | | | | | | | | |

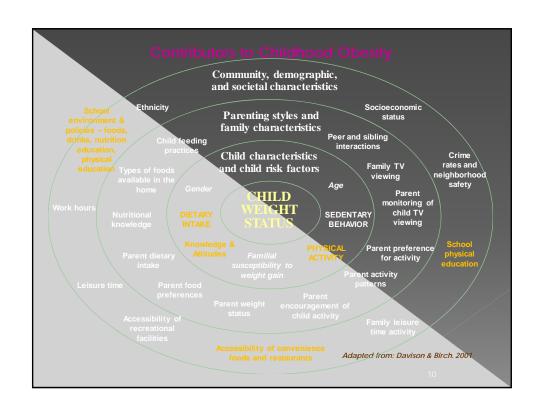




Diabetes High blood pressure Osteo-arthritis Adult overweight Sleep disorders Absenteeism at school Feelings of isolation Self-esteem Perceived quality of life

Estimated medical expenses attributed to obesity (for adults): \$1.47 billion per year. Overweight/obese children more likely to participate in more primary care sick visits and mental health-related visits over 1-year. Cost: approx. \$72 more per year than a healthy weight child (Finkelstein, 2009: Estabrooks, 2007)





Sugar Sweetened Beverages

- Daily calories from sugar sweetened beverages increased:
 - > 55 kcal in 1965
 - > 204 kcal in 1999-2004
- Strong link between sweetened beverages (soda, soft drink, fruit drink, etc.), especially sugar-sweetened, and:
 - Dental caries
 - Increase in overall calories
 - > Weight status

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Sugar Sweetened Beverages The CDC has identified 6 evidence-based strategies for preventing and reducing overweight and obesity. "Decreasing the consumption of sugar sweetened beverages." One of the only consistent behaviors linked to weight

HYSICAL ACTIVITY

Of all U.S. deaths from major chronic diseases 23% are linked to sedentary lifestyles

A recent study showed that the plaque buildup in the neck arteries of obese children is similar to those levels seen in middleaged adults.

Children's physical activity level drops dramatically between the ages of 9 and 15

The US military reports tha 27% of young Americans are too overweight to join, and around 15,000 potential recruits fail their physicals every years because they are too heavy

- Physical activity offers young people many health benefits:
 - aerobic endurance
 - > muscular strength
 - > build lean muscle
 - > reduce fat
 - prevents or reduces high blood pressure
 - weight control

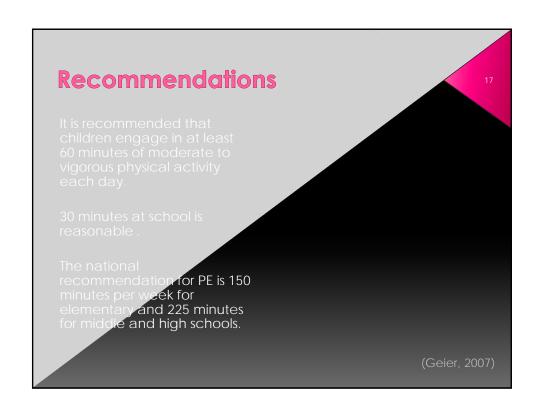
(G Raghuveer, 2008

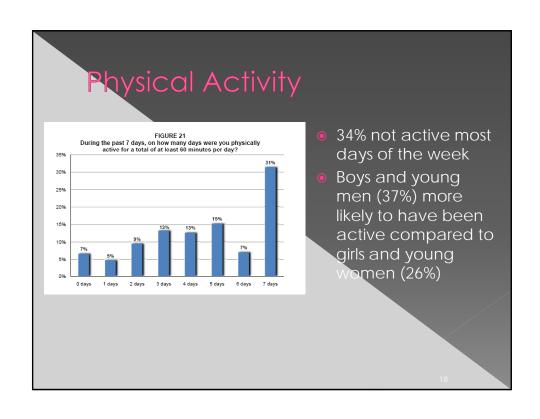
Academic achievement Cognitive ability Absenteeism Insomnia Depression Anxiety (Active Living Research, 2009: Shore, et al., 2008: Geier & coll., 2007)

Physical Education

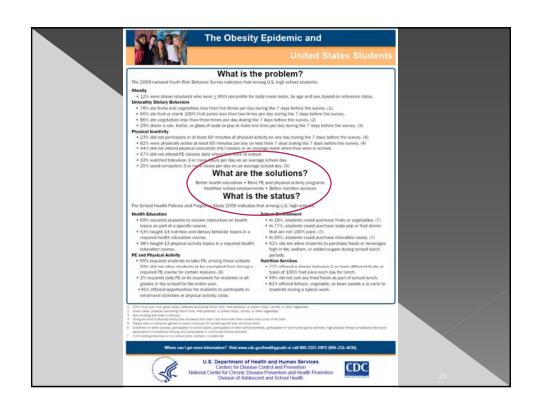
- Daily physical education only offered by:
 - > 3.8% of elementary schools
 - > 7.9% of middle schools
 - > 2.1% of high schools
 - > 22% do not require students to take ANY P.E.
- Regular participation in physical education classes helps reduce obesity in low-income teenagers

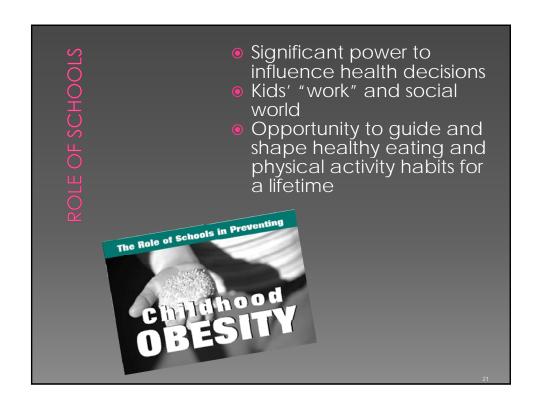
(CDC, 2006; Madsen KA. et al., 2009)

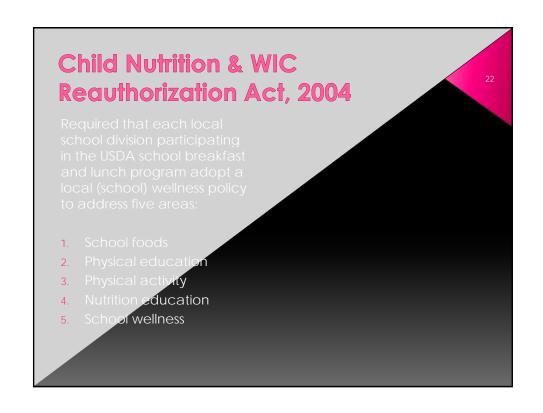














Foods, Drinks, and Schools

- Students consume up to 50% of their daily calories at school
- The sale of low-nutrition foods in schools outside of school meals is associated with higher weight status
 - > 1/5 of average increase in BMI between 1994 and 2000 is due to increased availability of 'junk foods' in schools

(Kubik, Lytle, Story, 2005)

Drinks at Schools

- Between 1991 and 2005, the percentage of schools with vending machines increased from:
 - > 42% to 82% in middle schools
 - > 76% to 97% in high schools
- The most common items sold at schools (outside of school meals) include candy, sugar-sweetened beverages, chips, cookies, and snack cakes

(USDA, 2007)

2!

New Virginia Legislation Requires nutrition standards for snacks and competitive foods sold in schools, based on guidelines set by the Alliance for a Healthier Generation or the Institute of Medicine Beverages not included in legislation

Summary

- Childhood obesity prevalence rates are growing...and will likely continue to grow
- There are several contributing factors, including sugar-sweetened beverages and physical education
- Schools can play a critical role in promoting healthy eating and active living for a lifetime

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Policy Recommendations

 Require nutrition standards for beverages sold in schools, based on guidelines set by the Alliance for a Healthier Generation or the Institute of Medicine

Policy Recommendations

- Require every student in grades K-8 to participate in daily physical education for the entire school year, including students with disabling conditions and those in alternative education programs.
 - Students in the elementary schools shall participate in physical education for at least 150 minutes during each school week
 - Students in middle schools shall participate for at least 225 minutes per week

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Policy Recommendations

- 3. Require local (school) wellness policies (that were mandated as part of the Child Nutrition & WIC Reauthorization Act of 2004) to contain language that 'requires' policies in the following areas:
 - School foods
 - Physical education
 - Physical activity
 - Nutrition education
 - School wellness