

CREATING AN IDEAL ENVIRONMENT: YOU CAN BE A PART OF THE SOLUTION

Look over the suggestions on the previous page and consider the following questions:

- ◆ What changes would you like to see happen in your school or community?
- ◆ Which changes would you be willing to devote time and energy toward accomplishing?
- ◆ Who can you get to work with you?
- ◆ Who are the key people who could make these changes happen?
- ◆ How could you convince them that it is important to work on effecting these changes?

University of California Resources on Overweight Children

For parents and caregivers:

If My Child is Overweight, What Should I Do About It?, pamphlet filled with advice to help children achieve a healthy body weight. Publication number 21455.

For nutrition professionals and paraprofessionals:

Kid's Module: Parents and Kids Sharing Food Tasks, teaching module with videotape, lesson plans and handout masters. The module discusses the division of responsibility in the feeding relationship and promotes encouraging children to eat in response to hunger and stop eating in response to satiety. Publication number 5500.

For pediatricians, nurses, dietitians and other health professionals:

Children and Weight: What Health Professionals Can Do About It, in-service training kit designed to increase knowledge and skills in diagnosing, assessing and treating pediatric overweight. #3416.

These can all be ordered by calling Communications Services at 1(800) 994-8849.

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OVERWEIGHT AMONG CHILDREN IN CALIFORNIA

A FACT SHEET FOR SCHOOLS AND COMMUNITIES

UNIVERSITY OF CALIFORNIA
BERKELEY

COOPERATIVE EXTENSION
DEPARTMENT OF NUTRITIONAL SCIENCES

Childhood Overweight Increasing

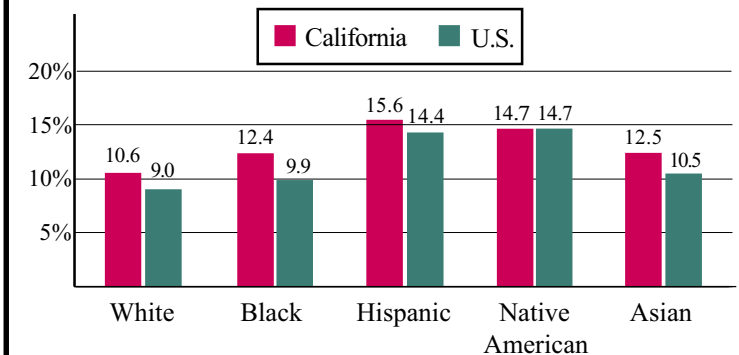
Overweight is increasing and fitness is decreasing among children in our state. The prevalence of overweight in children is higher in California than the national average and is creeping up annually. At the same time, sedentary activity, as measured by hours of television viewing, is also increasing. In national surveys, over one-quarter of the children reported averaging four or more hours of television watching per day. Native American, Mexican American, and African American children are especially vulnerable to the onset of overweight during childhood.

Pressuring youngsters to be thin has not helped reduce the prevalence of overweight. Instead it has resulted in a host of new health problems such as rampant body dissatisfaction, poor body image, low self-esteem, and eating disorders. Many youngsters are very unhappy with their bodies. They want the thin body that our society touts as the "perfect body."

Defining Childhood Overweight

Childhood overweight is defined as excess body weight per unit of height. The cut-off points are somewhat arbitrary. Children whose weight falls at or above the 85th percentile are considered "at risk of overweight." Children whose weight falls at or above the 95th percentile are considered "overweight." However, some children who are growing normally may fall above these percentiles. This is why it is important for each child's growth to be tracked and monitored by a health care professional.

Prevalence of Overweight in Low- Income
Children 0-12 Years Old
in California and the U.S.



Source: Pediatric Nutrition Surveillance Data (CDCPedNSS), 1999

Health Risks of Overweight in Childhood

The most serious problems associated with overweight in children are low self esteem and poor body image. Other children tease and torment large children. Well-intentioned adults pressure them to lose weight. This does not help them. Adults need to model and promote respect for the bodies of others, even when those bodies are smaller or larger than the norm.

The primary health risk of overweight in children is the probability that it will last into adulthood and result in increased risk of a variety of chronic diseases such as high blood pressure, Type II diabetes, stroke, and heart disease. Very large children need to be screened for a number of medical problems including asthma, sleep apnea, joint problems, high blood pressure, Type II diabetes, and hyperlipidemia. These children must be treated for these conditions as well as for their weight.

It is quite likely that children and adults will continue to become fatter unless we make a concerted effort to create an environment that promotes a healthy lifestyle.

Why Do Children Become Overweight?

To say that childhood overweight is due to poor diet and a sedentary lifestyle is too simplistic. We must recognize that in the past, human beings with a genetic propensity for storing body fat, had an evolutionary advantage - they were able to survive times of famine and food shortages. Even if they had a predisposition towards overweight, few children and adults actually became fat because food was of a lower caloric density and much energy was expended on survival activities. Everyone had to work hard in order to have the basic necessities of food, shelter, and clothing.

In the last century, we have created a very different environment. It is an environment of convenience, labor saving devices, and readily available food of high caloric density ~ an environment conducive to the genetic expression of obesity. It is quite likely that children and adults will continue to become fatter unless we make a concerted effort to create an environment that promotes a healthy lifestyle.

The Ideal Environment for Promoting Health

What would our communities be like if they were designed to promote a healthy lifestyle for children and adults of all sizes? Here are just a few ideas; you can add your own to this list.

- ◆ sidewalks and bike paths would encourage walking and bike riding;
 - ◆ every neighborhood would have accessible and safe parks for children and adults as well as accessible and safe schoolyards with play equipment;
 - ◆ parks and recreation agencies would sponsor a variety of activity programs at convenient times for children and adults;
 - ◆ community sports leagues would foster activities where children of all sizes could play on the same teams, learning skills and having a good time;
 - ◆ schools would have physical education programs based on the California Framework for Physical Education;
 - ◆ all schools would have comprehensive school health programs as described in the California Framework for Comprehensive School Health;
 - ◆ school breakfast and lunch programs would serve a variety of tasty, nutritious, fresh food that appealed to children;
 - ◆ children and adults would eat five servings of fruits and vegetables every day;
 - ◆ preschool teachers, day care providers, and others who care for young children would model and promote healthy eating and exercising habits;
 - ◆ no one would spend more than a total of two hours a day watching television, playing video games, or using the computer for recreational purposes;
 - ◆ there would be school and neighborhood gardens where everyone could participate in growing, harvesting, and eating freshly picked fruits and vegetables;
 - ◆ children and adults of all sizes and shapes would be depicted in a positive manner in the media;
 - ◆ children, especially teenagers, would no longer feel pressured to achieve a thin, idealized body;
 - ◆ every child would receive regular check-ups and care from a health care professional.
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