

Childhood Obesity

DEFINITION

This indicator measures the percent of young, low-income children ages two to five who are obese. Health professionals define pediatric obesity as body mass index at or above the 95th percentile for age and sex (BMI for Age). Body mass index, an indirect measure of body fat, is calculated as a ratio of height in meters to weight in kilograms squared. The New Hampshire children ages two to five who were the subjects of the study cited here were enrolled in federally-funded nutrition programs.

CONTEXT

Childhood obesity rates have soared in the U.S. over the last three decades, tripling between 1980 and 2008 with a peak in 2004. In response, President Barack Obama created the White House Task Force on Childhood Obesity in 2010 to develop a plan for reducing the child obesity rate over the next 20 years from 19.6 percent to 5 percent. The Task Force report calls child obesity an epidemic and a “national crisis” (White House Task Force 2010).

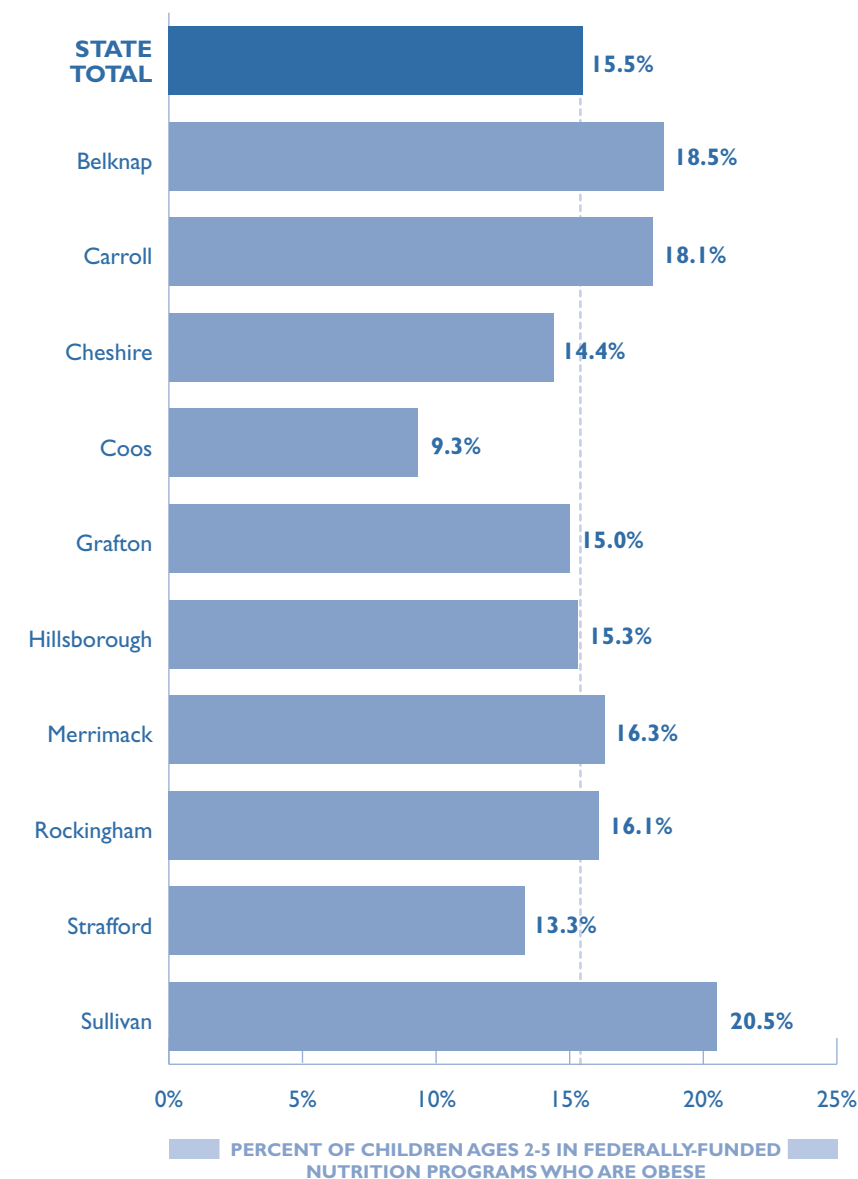
Governor John Lynch and his wife Dr. Susan Lynch have made child obesity a priority at the state level. In 2008 Governor Lynch established the Commission on the Prevention of Childhood Obesity which submitted legislation in 2010 for mandatory BMI screenings for school children, following the lead of states such as Arkansas and Massachusetts. Dr. Susan Lynch was a vocal supporter of the bill (HB1479) which failed to pass the New Hampshire House (Love 2010 and NH General Court).

Obese children are more likely to develop type 2 diabetes, heart disease, and asthma and are up to 10 times more likely than healthy-weight children to be obese as adults. Obesity in adulthood is linked to a host of serious, chronic health conditions including diabetes, heart disease and cancer. Depression and eating disorders in children have also been linked to childhood obesity (White House Task Force 2010). A recent study published in the New England Journal of Medicine found people who were obese as children were more than twice as likely to die before age 55 as those with low BMIs in childhood, and found obesity was a better predictor of early death than either type 2 diabetes or high blood pressure (Rabin 2010).

Smoking, diabetes and excessive weight gain in pregnancy may predispose children to obesity. Children with obese parents are more likely to become obese as are children with very high or very low birth weights. Child obesity rates vary considerably by race and ethnicity. In addition to genetics, studies have identified three key lifestyle

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By County, 2008



risk factors for child obesity: poor nutrition, physical inactivity, and excessive screen time (White House Task Force 2010).

NEW HAMPSHIRE FINDINGS

Obesity rates for children in New Hampshire vary by age group and geography and are consistently lower than the national average. In 2007, 12.8 percent of New Hampshire children ages 10 to 17 were obese compared to 16.4 percent of children nationally. In 2010 the New Hampshire Department of Health and Human Services compiled data on obesity in New Hampshire for three age groups: two to five year olds, third graders and high school students. This report focuses on county-level data for two to five year olds.

In 2008, 15.5 percent of low-income New Hampshire children ages 2 to 5 were obese and another 17.8 percent were overweight (BMI at or above 85th percentile for age and sex but less than the 95th percentile). Obesity rates varied widely across the state. Less than 10 percent of young, low-income children were obese in Coos County, while more than 20 percent of young, low-income children were obese in Sullivan County. Young, low-income children living in New Hampshire's most populous counties had rates around the state average of 15.5 percent. Obesity among young low-income children has decreased steadily in recent years from a high of 16.3 percent in 2004 to 15.5 percent in 2008. (see chart on previous page)

The obesity rate for third grade New Hampshire students was 18 percent with another 15.4 percent of third graders overweight. High school students in New Hampshire had lower rates of obesity (11.7 percent) than the national average (13 percent). High school boys in the state were more than twice as likely to be obese (15.9 percent) as high school girls (7.2 percent).

SOURCE OF DATA FOR ILLUSTRATION/METHODOLOGY

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