The prevalence of childhood obesity in the United States has become a health crisis that not only affects children’s healthy growth and development, but one that can create increased risks for serious health problems later in life. In response to this crisis, the U.S. Surgeon General has issued *The Surgeon General’s Vision for a Healthy and Fit Nation* (2010), by the Office of the Surgeon General, Public Health Service, U.S. Department of Health and Human Services. The report provides the following statistics about obesity among children:

- “Seventeen percent of the nation’s children, 12.5 million, are overweight.”
- “Two-thirds of adults and nearly one in three children are overweight or obese.”
- “Seventy percent of American Indian/Alaska Native adults are overweight or obese.”
- “The prevalence of obesity in the U.S. more than doubled (from 15% to 34%) among adults and more than tripled (from 5% to 17%) among children and adolescents from 1980 to 2008.”
- “An obese teenager has over a 70% greater risk of becoming an obese adult.”
- “Obesity is more common among non-Hispanic black teenagers (29%) than Hispanic teenagers (17.5%) or non-Hispanic white teenagers (14.5%).”


The Office of Child Care’s National Center on Child Care Quality Improvement does not endorse any non-Federal organization, publication, or resource.

**Presidential Task Force**

*Let’s Move!*

The White House
[http://www.letsmove.gov](http://www.letsmove.gov)

In February 2010, President Barack Obama established the Task Force on Childhood Obesity to develop an interagency plan to address and solve the Nation’s childhood obesity problem within a generation. The task force will make recommendations on how to achieve the following most effectively:

- Ensuring access to healthy, affordable food;
- Increasing physical activity in schools and communities;
- Providing healthier food in schools; and
- Empowering parents with information and tools to make good choices for themselves and their families.

A national public awareness effort, including a comprehensive fitness agenda, is led by First Lady Michelle Obama.

Let’s Move Child Care
http://www.HealthyKidsHealthyFuture.org

In 2011, First Lady Michelle Obama announced the launch of Let’s Move! Child Care, an effort to promote children’s health by encouraging and supporting healthier physical activity and nutrition practices for children in all child care settings. Providers, trainers, and parents can complete interactive quizzes, access free resources, and share success stories through the Let’s Move! Child Care website. The effort focuses on five goal areas: increasing physical activity, reducing screen time, improving food choices, providing healthy beverages, and supporting infant feeding.

- **Physical Activity:** Provide 1-2 hours of physical activity throughout the day, including outside play when possible.
- **Screen Time:** No screen time for children under two years. For children age two and older, strive to limit screen time to no more than 30 minutes per week during child care, and work with parents and caregivers to ensure children have no more than 1-2 hours of quality screen time per day, the amount recommended by the American Academy of Pediatrics.
- **Food:** Serve fruits or vegetables at every meal, eat meals family-style when possible, and no fried foods.
- **Beverages:** Provide access to water during meals and throughout the day, and do not serve sugary drinks. For children age two and older, serve low-fat (1%) or non-fat milk, and no more than one 4-6 ounce serving of 100% juice per day.
- **Infant feeding:** For mothers who want to continue breastfeeding, provide their milk to their infants and welcome them to breastfeed during the child care day; and support all new parents in their decisions about infant feeding.

Multiple groups, including both federal agencies and private sector organizations, have committed to implementing Let’s Move! Child Care in their facilities. The US Department of Defense, General Services Administration, and in the private sector, Bright Horizons, the nation’s second largest child care provider, among others, have committed to implement the checklist which could reach over 280,000 children.

In 2011, the Let’s Move! Child Care State Challenge was launched — a nationwide challenge to recognize the states and territories with the strongest participation in Let’s Move! Child Care. More information on the State Challenge and free flyers are available online: http://www.naccrra.org/news/lets-move-cc-state-challenge.php

Registration, interactive quizzes, free resources, and more can be found on the Let’s Move! Child Care website: http://www.HealthyKidsHealthyFuture.org

**Federal Initiatives**

**I Am Moving, I Am Learning (IMIL)**
Administration for Children and Families (ACF)
U.S. Department of Health and Human Services (DHHS)
215-592-1684
http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/health/Health/Nutrition/Nutrition%20Program%20Staff/IamMovingIam.htm

The ACF Office in Region III initiated a pilot project, I Am Moving, I Am Learning (IMIL), in FY 2005 to prevent and reverse the negative consequences of obesity in Head Start children. The original pilot project focused on 17 Head Start programs in Virginia and West Virginia, where the rate of obesity in elementary school children nearly doubled the national average. In 2007, the program was expanded to all Federal regions and IMIL Phase I training was delivered to approximately 500 Head Start grantees.
In 2009, the Office of Head Start enlisted Head Start Body Start National Center for Physical Development and Outdoor Play (HSBS) to update IMIL. A national needs assessment and gap analysis were conducted. Facilitators from each region were chosen to participate in the Training of Facilitators (TOF) program to enable them to deliver Phase II training to grantees. Beginning in 2010, representatives from both Head Start and child care participated in a series of trainings across the country. Three hundred new facilitators were trained through the TOF in 2010–2011. In May through September 2011, child care professionals along with Head Start and Early Head Start grantees participated in free training at 14 sites nationwide.


**Centers for Disease Control and Prevention (CDC)**

**DHHS**  
800-311-3435  

CDC is recognized as the lead Federal agency for protecting the health and safety of Americans. It serves as the national focus for developing and applying disease prevention and control, environmental health, and health promotion and education activities designed to improve the health of citizens.

The following is information about CDC’s obesity prevention initiatives:

- **Healthy Youth!**  
  Healthy Youth! is a Web-based resource providing statistical information about rates of obesity among school-age children, school programs, and activities to encourage healthy eating and physical activity, policy guidance, and research-based strategies. This information is available at [http://www.cdc.gov/HealthyYouth/obesity/](http://www.cdc.gov/HealthyYouth/obesity/).

- **Nutrition and Physical Activity Program to Prevent Obesity and Other Chronic Diseases**  
  This initiative is based on a cooperative agreement among the CDC’s Division of Nutrition, Physical Activity and Obesity (DNPAO) and 23 State health departments. In July 2008, NPAO funded 23 States for a 5-year period to establish State infrastructures; plan obesity prevention and control efforts; identify data sources to monitor the prevalence of obesity; collaborate and coordinate with partners; begin implementing interventions; and report annually to the CDC on lessons learned. More information about this initiative is available at [http://www.cdc.gov/obesity/stateprograms/index.html](http://www.cdc.gov/obesity/stateprograms/index.html).

**Food and Nutrition Service (FNS)**

U.S. Department of Agriculture (USDA)  
703-305-2062  
[http://www.fns.usda.gov/fns/](http://www.fns.usda.gov/fns/) (in English)  

FNS provides children and families better access to food and a more healthy diet through its food assistance programs and comprehensive nutrition education efforts. A major function of FNS is the oversight and management of Federal food programs, such as Food Stamps; the Special Supplemental Nutrition Program for Women, Infants and Children (WIC); the Child and Adult Care Food Program; School Meals (i.e., National School Lunch Program, School Breakfast Program, and Special Milk Program); the Summer Food Service Program; and the Food Assistance for Disaster Relief program. FNS’s Web site provides contact information for State agencies.

The FNS Web site also provides information about several obesity prevention initiatives funded by USDA:

- **Eat Smart. Play Hard.**
  This campaign provides information and practical suggestions to encourage healthy eating and exercise every day. The Eat Smart. Play Hard. Web site provides information and resources for kids, parents, and professionals who work with children. More information is available at http://www.fns.usda.gov/eatsmartplayhard/.

- **Fit WIC**
  In 1998, USDA funded a childhood obesity prevention initiative called Fit WIC to examine how the WIC program could better respond to the issue of childhood obesity. The USDA recognized that WIC has widespread access to the population of young children from low-income families that is at greatest risk for obesity, and that reaching very young children is critical to any prevention strategy. The Fit WIC implementation manual contains the experiences of the five Fit WIC project teams, their procedures, requirements, challenges, suggested solutions, outcomes, lessons learned, and recommendations. This resource is available at http://www.nal.usda.gov/wicworks/Sharing_Center/statedev_FIT.html.

- **Team Nutrition**
  Team Nutrition is an initiative of FNS to support USDA Child Nutrition Programs through training and technical assistance for food service, nutrition education for children and their caregivers, and school and community support for healthy eating and physical activity. The Web site includes information about nutrition, physical activity, recipes for child care facilities and schools, and an interactive computer game to help children learning the components of the food pyramid. This resource is available at http://www.fns.usda.gov/tn/.

**U.S. National Library of Medicine (NLM)**
National Institutes of Health (NIH), DHHS
888-346-3656
http://www.nlm.nih.gov/

- **MedlinePlus**
  MedlinePlus provides information from NLM, NIH, and other government agencies and health-related organizations. Extensive resources, research, and statistics about childhood obesity are provided. Included is information about symptoms and diagnosis, treatment, clinical trials, prevention and screening, and a body mass index (BMI) calculation tool. This information is available at http://www.nlm.nih.gov/medlineplus/obesityinchildren.html.

**Office of the Surgeon General**
DHHS
301-443-4000
http://www.surgeongeneral.gov/

- **Healthy Youth for a Healthy Future**
  This initiative focuses on recognizing communities that are addressing childhood obesity prevention by encouraging kids to eat right and exercise. It provides strategies that can be used by adults who are often the most influential in children’s lives, including parents, teachers, caregivers, and community leaders. Materials provided in English and Spanish include a pledge to make healthy food choices and engage in regular physical activity and checklists to assist adults with supporting children in healthy lifestyle choices. More information is available at http://www.surgeongeneral.gov/obesityprevention/index.html.
National Resources

National Policy and Legal Analysis Network to Prevent Childhood Obesity (NPLAN)
Public Health Law and Policy
http://nplanonline.org/

NPLAN provides focused legal research, model policies, fact sheets, toolkits, and training and technical assistance involving legal issues related to public health. Following a comprehensive needs assessment, NPLAN identified the following three areas of focus:

- Marketing to children;
- The child care and kindergarten through 12th-grade environment; and
- The built environment (low income urban communities).

More information, including goals and next steps, is available at http://www.nplanonline.org/nplan/content/about-us.

Robert Wood Johnson Foundation
http://www.rwjf.org

- **Healthy Kids, Healthy Communities**
  Since 2008, the Robert Wood Johnson Foundation has awarded a total of 50 grants to communities across the country in an effort to reverse childhood obesity. The initiative supports local efforts to improve access to healthy food and promote the importance of regular physical activity. Communities will focus on neighborhoods where the risk factors are greater due to poverty, unemployment, and lack of access to wholesome food. More information is available athttp://www.rwjf.org/childhoodobesity/product.jsp?id=53468.

- **Robert Wood Johnson Center to Prevent Childhood Obesity**
  This is a national organization dedicated to reversing the childhood obesity epidemic through public policy analysis and coordination with community stakeholders, including policymakers, to create healthier environments in schools and communities by identifying and promoting promising prevention strategies. More information is available at http://www.reversechildhoodobesity.org/.

State Initiatives

Arkansas

Arkansas Center for Health Improvement (ACHI)
http://www.achi.net/index.asp

ACHI was formed in 1998 and works with public- and private-sector partners to improve the health of Arkansans through research, advocacy for changes in health policies, and program development, and sustainability.

In response to the high incidence of childhood obesity among Arkansas children and the associated long-term health risks, the Arkansas Legislature passed Act 1220 of 2003, which mandates activities through the public school system to promote the importance of healthy diet and physical exercise, and provide oversight of food and beverage availability to students.

One provision of Act 1220 is to facilitate the reporting of the students’ BMI to their parents on an annual basis, along with practical information about sound nutrition and the importance of regular exercise. Funded by the Robert Wood Johnson Foundation, ACHI worked with State policymakers and school personnel to develop a
system for collecting the weight and measurements of students, calculating BMI, and reporting it confidentially to parents. The data were collected from 99 percent of public schools over a period of 3 years. At the end of the 3-year period, analyses of the BMI data revealed that the progression of the childhood obesity epidemic had stopped. Although the analyses indicated that 37 percent of children and adolescents in the State continued to be at risk for obesity (according to CDC’s criteria), the overall findings represented a decline in students who were overweight or at risk. More information, including a BMI calculator, is available at http://www.achi.net/childob.asp.

**California**

In 2005, in response to the increasing incidence of obesity in California, the State legislature mandated a statewide strategic plan in response to the epidemic. The result was the *California Obesity Prevention Plan: A Vision for Tomorrow, Strategic Actions for Today* (2006), by the California Department of Health Services, which included a 10 Step Vision for a Healthy California and the 2005 Summit on Health, Nutrition, and Obesity. More information is available at http://www.cdph.ca.gov/programs/Pages/COPP.aspx.

**New York**

The New York State Department of Health provides the following nutrition and physical activity resources to the public:


- The Eat Well Play Hard initiative aims to prevent childhood obesity and reduce long-term risks for chronic disease through promotion of targeted dietary practices and increased physical activity beginning at age 2 years. More information is available at http://www.health.state.ny.us/prevention/nutrition/resources/eat_well_play_hard/index.htm.

For more information about these initiatives, contact the New York State Department of Health by calling 518-402-7090 or visiting http://www.health.state.ny.us/.

**North Carolina**

Color Me Healthy is a joint effort between the North Carolina Cooperative Extension Service and the North Carolina Division of Public Health. Color Me Healthy is designed to reach children age 4 to 5 years with fun, interactive learning opportunities. It provides caregivers with quick and easy tools to teach young children about healthy eating and physical activity. For additional information about Color Me Healthy, call the North Carolina Cooperative Extension Service at 919-515-9142 or visit http://www.colormehealthy.com/.

**Oregon**

Oregon’s Physical Activity and Nutrition Program, operated by the Department of Human Services, offers multiple initiatives and resources to Oregonians to assist them in living a healthy life at a healthy weight. These activities include multiple reports about preventing obesity in children; a five-year, statewide physical activity and nutrition plan; a report from the State Obesity Prevention Task Force; and additional toolkits and training presentations. These resources are available at http://www.oregon.gov/DHS/ph/pan/index.shtml.
Additional Resources


- Preventing Childhood Obesity in Early Care and Education Programs, Selected Standards From Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs, 3rd Edition (July 2010), by the American Public Health Association (APHA), the American Academy of Pediatrics (AAP), and the Health Resources and Services Administration (HRSA), U.S. Department of Health and Human Services. [http://nrckids.org/CFOC3/PREVENTING_OBESITY/index.htm]


- Group-based, Culturally Sensitive Weight-loss Program for Families Leads to Improvements in Children’s Health-related Behaviors and Declines in Body Mass Index (September, 2008), by the Agency for Healthcare Research and Quality, DHHS. [http://www.innovations.ahrq.gov/content.aspx?id=2147]


