

Healthy People 2030

By Janel Galito, Sharonda Guttsen, Sara Hall,
Alyssa Manuel, Ariana Montemayor, Katherine
Nagorniuk





Healthy People 2030 Objective

Reduce the Proportion of Children and Adolescents with Obesity

- Many children and adolescents in the US have obesity. Obesity is linked to a higher risk for diseases and conditions like high blood pressure, high cholesterol, diabetes, asthma, anxiety, and depression
- Children with obesity are more likely to be bullied and to have obesity as adults
- Policy and school curriculum changes that make it easier for children and adolescents to eat healthy and get physical activity can also help reduce obesity

Most recent Data

- 17.8 percent of children and adolescents had obesity in 2013-16

Target

- Reduction in obesity to 15.5 percent

Relevant Research

Childhood Obesity: Causes and Consequences - Journal of Family Medicine and Primary Care

- Childhood obesity is considered an epidemic that is found in both developed and developing countries
- Childhood obesity results in several physical and psychological impacts on health and these children are likely to remain obese throughout adulthood
- Prevalence is a result of Environmental factors, lifestyle preferences, and cultural environment
- Has a significant impact on children's physical health, social, and emotional well-being, and self esteem
- Childhood obesity is associated with poor academic performance and a lower quality of life experienced by the child

Relevant Research

Cultural Influences on Childhood Obesity in Ethnic Minorities: A Qualitative Systematic Review - Journal of Transcultural Nursing

Cultural Factors Related to Childhood Obesity

- Family
- Child feeding
- Gender roles
- Healthy child appearance
- Physical activity
- Sedentary activity
- Food
- Food cost
- Obesogenic environment

Status of the Problem For Other Nations

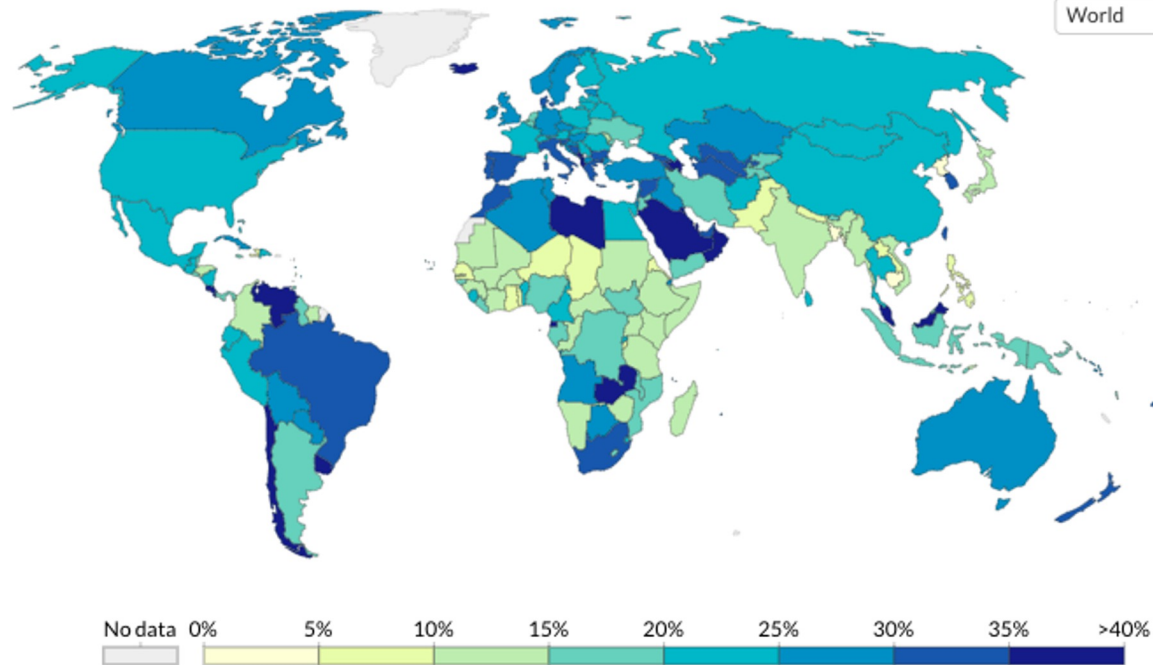
- Determining obesity in children is different than in adults
 - Weight categories are defined in relation to World Health Organization (WHO) Growth Standards
 - “A child is defined as overweight if their weight-for-height is more than two standard deviations from the median of the WHO Child Growth Standards” (Ritchie & Roser, 2017)
- A WHO report from 2016 listed Saudia Arabia has having the highest percentage of childhood obesity at 49.71% with Libya at 43.96%
- Some of the highest rates are found in the Pacific Islands
 - More than 30% of children living on these islands are obese
- <https://data.worldobesity.org/#SA|36|C|F>

Share of children who are overweight, 2016

Share of children aged 2-4 years old who are defined as overweight.

Our World
in Data

World



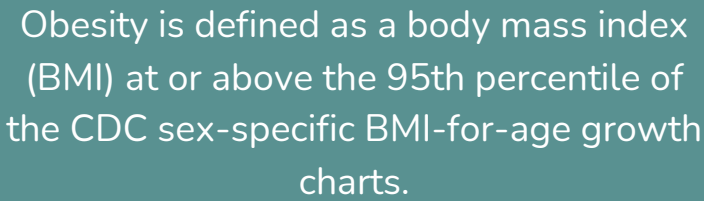
Source: Institute of Health Metrics and Evaluation (IHME)

OurWorldInData.org/obesity • CC BY

Note: A child is classified as overweight if their weight-for-height is more than two standard deviations from the median of the World Health Organization (WHO) Child Growth Standards.

▶ 1990

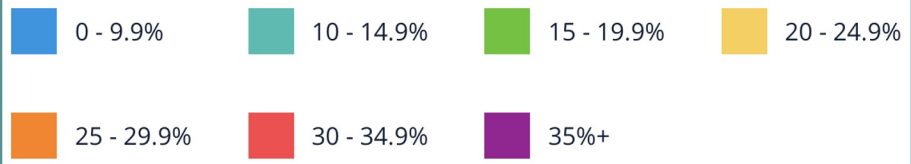
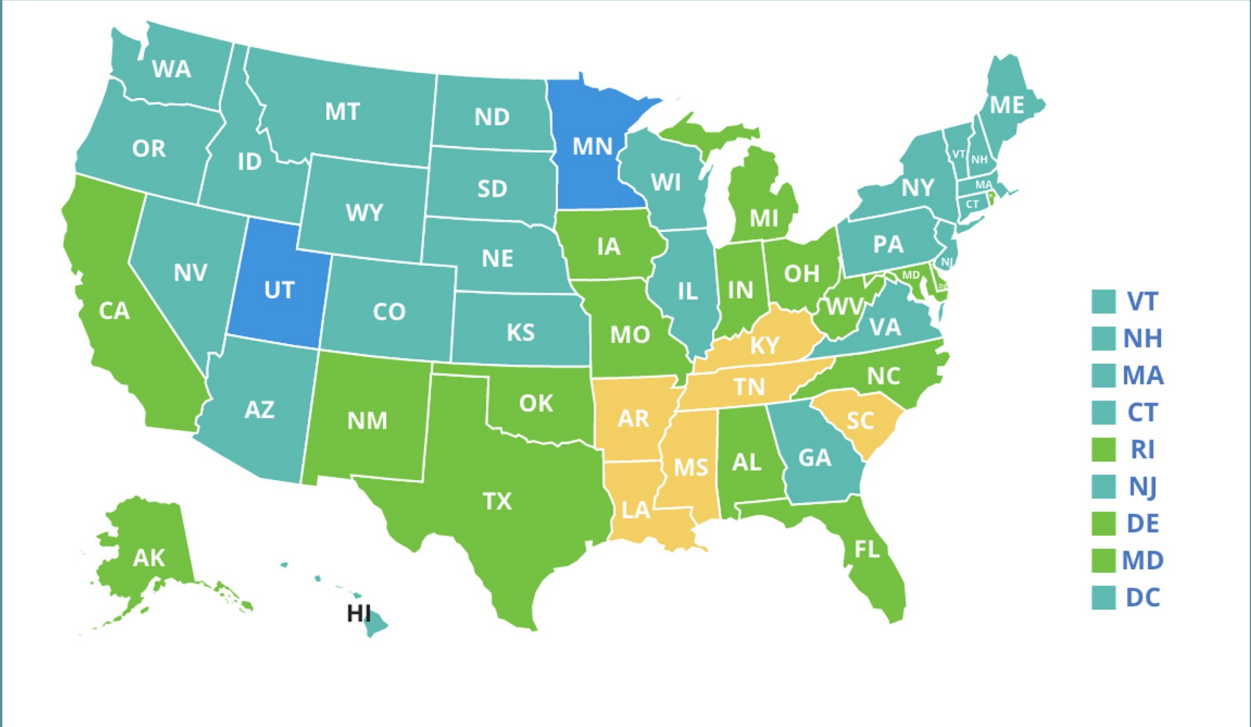
○ 2016



Status of the Problem for the U.S.

- Childhood obesity is a serious and growing concern in the U.S.
- CDC National Center for Health Statistics (NCHS) found that for children ages 2-19 in 2017-2018 obesity prevalence is 19.3%, affecting approximately 14.4 million children and adolescents
 - 3.4% among 2- to 5-year-olds
 - 20.3% among 6- to 11-year-olds
 - 21.2% among 12- to 19-year-olds.
- National Survey of Children's Health (NSCH)
 - In 2018-19, 15.5% of youth ages 10 to 17 had obesity
 - Prevalence influenced by racial and ethnic disparities, income, education level of the head of the household

Obesity Rates, Children Ages 10 to 17



Status of the Problem for Our Community

Virginia

- Obesity rate is 13% for children age 10-17
- Ranks 35 out of 50 states and Washington D.C.

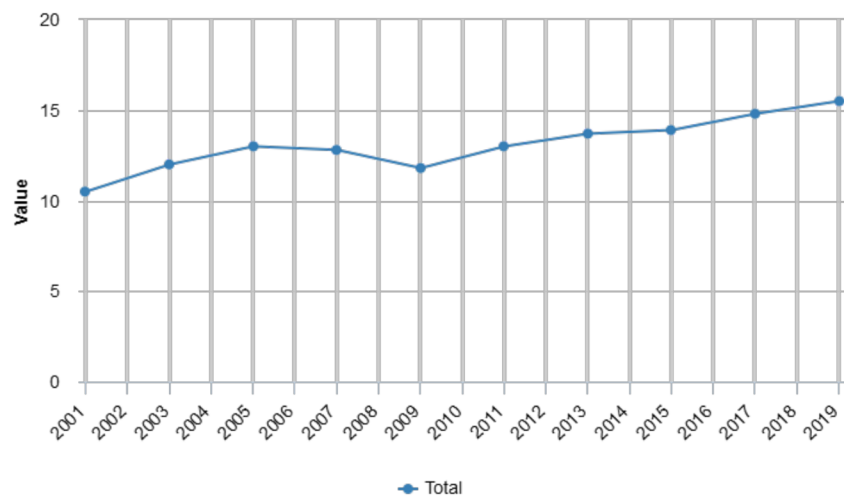
Hampton Roads

- CHKD Community Health Needs Assessment 2019
 - Identified childhood obesity as a significant health need
 - Contributing factors include food accessibility, food affordability, and school lunches high in carbohydrates
 - Stakeholders mention the need for initiatives that focus on prevention and early intervention

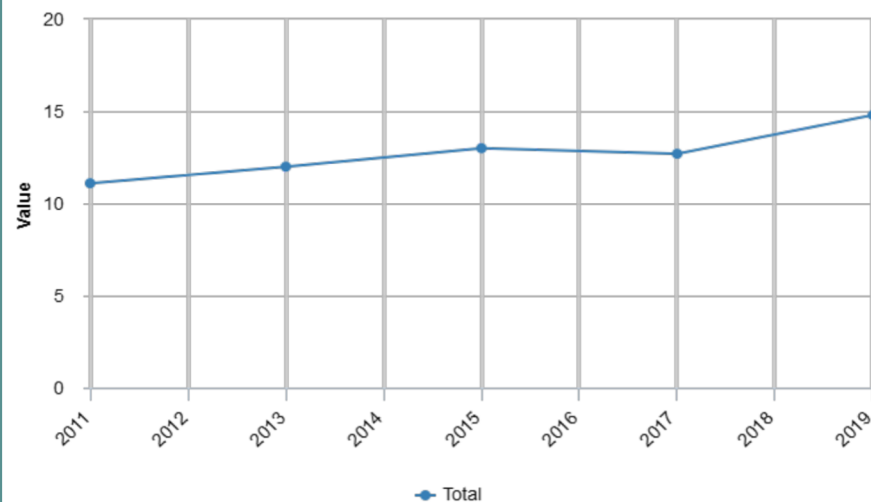


National and Local Trends for the Last 10 years

National - All available years
Percent of students in grades 9-12 who have obesity †
View by: Total



Virginia - All available years
Percent of students in grades 9-12 who have obesity †
View by: Total



Programs in our Area that Address the Problem

- The Virginia Department of Health
 - Whole School, Whole Community, and Whole Child
 - Comprehensive School Physical Activity Programming
 - Local School Wellness Policy
- CHKD's Healthy You for Life Weight Management Program
- Bon Secours In Motion Youth Fitness program
- EVMS Projects focused on obesity
 - Eastern Shore Healthy Communities
 - Healthy Kids
- Virginia Foundation for Healthy Youth workshops





Successful Programs in other Communities

- Women, infants, & children (WIC)
- National Institute of Food & Agriculture
 - Agriculture and Food research Initiative (AFRI) Childhood Obesity Prevention Challenge Area
 - Regional Nutrition Education & Obesity Prevention Centers of Excellence (RNECE)
- Nutrition, Physical Activity, & Obesity Prevention Program

Recommendations for Gaps in Service



WIC (Women, Infants, and Children)

- Eligible applicants for: a pregnant, breastfeeding, or postpartum women, infant, or child under five years of age
- Must also meet financial, residential, and nutritional risk requirements to apply

YMCA

- Joining fee: individuals 16+ years of age = \$50, fees vary by location
- Ages 14 and up may join as an individual

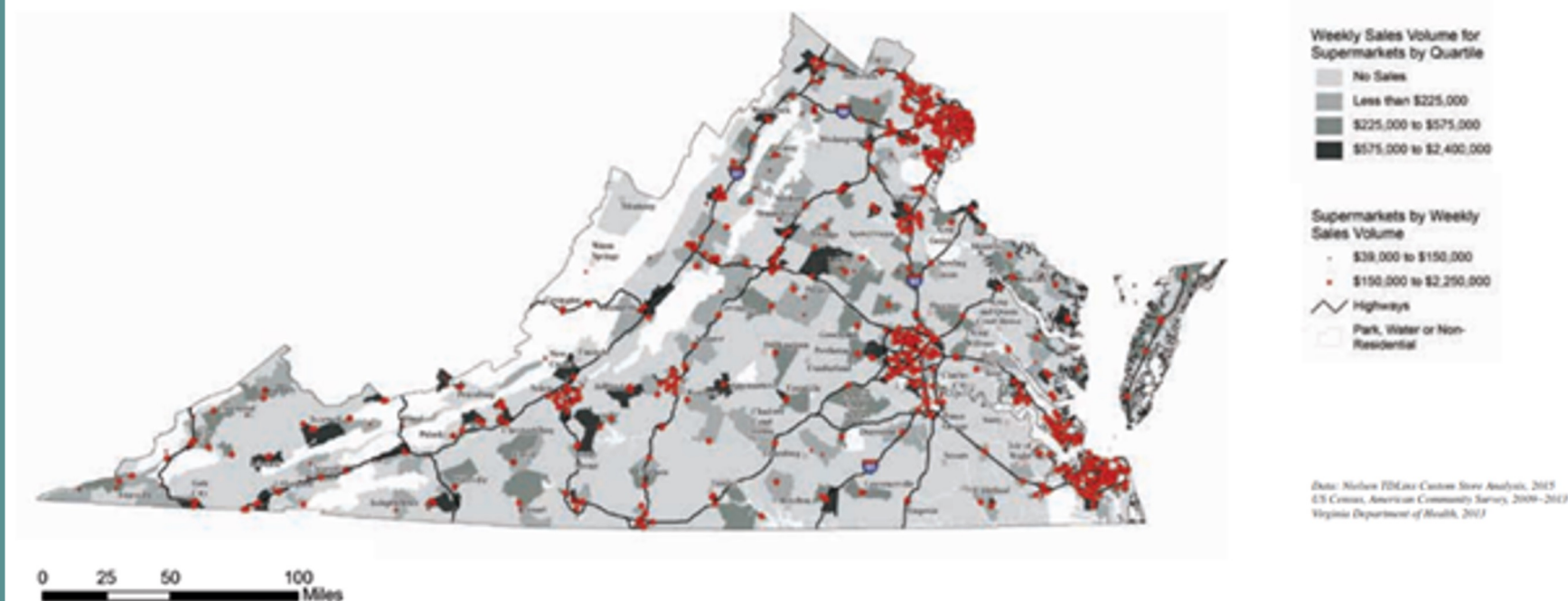
Meals on Wheels

- Only available Monday through Friday between the hours of 10:30 am and 1 pm

Barriers to Accessing Healthy Food

- More than 1.7 million Virginia residents in lower-income communities with limited access to supermarkets
- Sales tend to be concentrated in communities near major cities and along major transportation routes

1: Weekly Sales Volume for Supermarkets in Virginia





Recommendations for Program Improvement

SNAP: Improve State Timeliness Rates

- Clients should be able to participate in SNAP within 7 days for expedited cases and 30 days for regular cases
- Application processing timeliness (APT) rates of 95% and above are considered to be acceptable performance rates by the Food and Nutrition Service (FNS)

Increasing Funding for Local Business Initiatives

- Providing healthier options at convenience stores
- Healthy Corner Store Initiative
- Healthy Food Virginia

Improve Training and Education on Nutrition Assistance Programs

- Screening, referral, and community education
- Nurses should have basic knowledge of local, national, and community resources and educational programs
- The National Council Licensure Examination (NCLEX)

Recommendations for Additional Research Needed

- Best methods for nursing education
- Effectiveness of current curriculum guidelines
- Impact of food security on vulnerable populations
- Inconsistency in current research

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