# VIRTUAL kit: NUTRITION AND PREVENTING OBESITY

**Kit QT**

Positive attitudes and practices regarding nutrition and physical development of young children by early childhood professional can promote healthy growth and can decrease the incidence of obesity. These attitudes and practices will initiate and reinforce healthy eating habits that contribute to overall health and well-being, which can extend into later childhood and beyond. With more than one in five U.S. children ages 2–5 already overweight or obese, prevention efforts must target our youngest children. Child care providers are in a unique position to help in educating parents about healthy eating and activity habits, and also to provide a healthy environment for children to eat, play, and grow. They can serve children age-appropriate healthy foods, and limit junk food, sugary drinks, and juice. They can offer children lots of opportunities for active play, in fun, short bursts throughout the day. And child care providers can keep televisions turned off and away from areas where children sleep. When parents also adopt these practices at home, children are assured the best chance of growing into a healthy weight.

Childhood nutrition, physical development, and obesity are all serious health and development issues. According to the American Academy of Pediatrics, almost 10% of infants and toddlers have high weights for their length. Approximately one in five children are already carrying excess weight as he or she enters kindergarten. Children who are obese at age six have been found to have a greater than 50% chance of being obese as adults, regardless of parental obesity status. The CDC reports that “Childhood obesity has more than doubled in children and quadrupled in adolescents in the past 30 years. The percentage of children age 6-11 years in the United States who were obese increased from 7% in 1980 to nearly 18% in 2012.”

**Health Effects**

Obese youth are more likely to have risk factors for cardiovascular disease, such as high cholesterol or high blood pressure. In a population-based sample of 5-17-year-olds, 70% of obese youth had at least one risk factor for cardiovascular disease. Obese adolescents are more likely to have prediabetes, a condition in which blood glucose levels indicate a high risk for development of diabetes. Children and adolescents who are obese are at greater risk for bone and joint problems, sleep apnea, and social and psychological problems such as stigmatization and poor self-esteem.

Children and adolescents who are obese are likely to be obese as adults and are therefore more at risk for adult health problems such as heart disease, type 2 diabetes, stroke, several types of cancer, and osteoarthritis. One study showed that children who became obese as early as age two were more likely to be obese as adults. Overweight and obesity are associated with increased risk for many types of cancer, including cancer of the breast, colon, endometrium, esophagus, kidney, pancreas, gall bladder, thyroid, ovary, cervix, and prostate, as well as multiple myeloma and Hodgkin’s lymphoma.

This Virtual Kit contains resources that will assist you in learning more about the importance of obesity prevention in child care.

**SHOW ME NOW! (I NEED THIS TOMORROW)**

[Mayo Clinic Nutrition for Kids Guidelines for a Healthy Diet](http://www.mayoclinic.org/healthy-lifestyle/childrens-health/in-depth/nutrition-for-kids/art-20049335)

[Lets Move Child Care](https://healthykidshealthyfuture.org/)

[Early Child Care Obesity Prevention Recommendations](https://www.hsph.harvard.edu/obesity-prevention-source/obesity-prevention/early-child-care/early-child-care-obesity-prevention-recommendation-complete-list/)

[Zero to Three~ Healthy From the Start](https://www.zerotothree.org/resources/352-healthy-from-the-start)

[CACFP - Where Healthy Eating Becomes A Habit](http://www.kn-eat.org/cacfp/cacfp_menus/cacfp_home.htm)

**WHAT DOES THIS LOOK LIKE IN PRACTICE? (IHAVE A LITTLE MORE TIME TO READ ABOUT THIS?)**

[Team Nutrition](http://www.fns.usda.gov/tn/about-team-nutrition)

[NAP SACC Self-Assessment](https://gonapsacc.org/resources/nap-sacc-materials)

[Overweight and Obesity](https://www.cdc.gov/obesity/strategies/childcareece.html)

[Childhood Obesity Linked to Irregular Sleep and Skipping Breakfast](https://www.theguardian.com/society/2016/nov/11/childhood-obesity-linked-to-irregular-sleep-and-skipping-breakfast)

[MyPlate Food Guide](http://kidshealth.org/en/parents/myplate.html)

[Food and Nutrition](https://www.nutrition.gov/topics/audience)

**WHAT DOES THE ECRC HAVE ON THIS TOPIC?**

Below are selected resources from the Early Childhood Resource Center. For additional related resources [go to the KITS Early Child Resource Center](http://opac.libraryworld.com/opac/home.php).

Story, M., Holt, K., & Sofka, D. (2000). *Bright Futures in Practice, Nutrition*. National Center for Education in Maternal and Child Health.

Vermont Dept. of Health. (1996). *Count to 5… Count to 6!* Vermont Department of Health.

Satter, E. (1995). *Feeding with Love and Good Sense.* Kelcy Press.

Klein, M. (1994). *Feeding and nutrition for the child with special needs: Handouts for pants.* Tucson, AZ: Therapy Skill Builders.

**WHAT COURSES DOES KCCTO OFFER ONLINE?**

[**Harvest for Healthy Kids**](http://kccto.org/shop)

[**Movement Through Music**](http://kccto.org/shop/)

KCCTO classes are offered online. To inquire about a specific class, contact the KCCTO office by visiting the [KCCTO](http://kccto.org/) website and checking for their current contact information at the bottom of the page.

**HOW CAN I GET TRAINING ON THIS TOPIC?**

Visit these links to collaborative training calendars:

[KITS](http://kskits.org/) Collaborative Training Calendar

[KCCTO](https://kccto.org/) Training Calendar

**WHAT IF I STILL NEED HELP?**

You may request technical assistance from the KCCTO-KITS Infant Toddler Network Specialists. Contact the KCCTO office by visiting the [KCCTO](http://kccto.org/) website and checking for their current contact information at the bottom of the page.

**EVALUATION**

Please take a minute to complete a brief survey on the Virtual Kits page to let us know what you think about this virtual kit, and what other topics you would like to see addressed in the future.

**REFERENCES**

American Academy of Pediatrics. (2017). [The Case for Early Obesity Prevention](https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/HALF-Implementation-Guide/pages/The-Case-for-Early-Obesity-Prevention.aspx).

Centers for Disease Control and Prevention. [Early Care and Education (ECE)](https://www.cdc.gov/obesity/strategies/childcareece.html).

Cunningham, SA., Kramer, MR., & Narayan, KM. (2014). [Incidence of Childhood Obesity in the United States](https://www.cdc.gov/obesity/strategies/childcareece.html), *N Engl J Med*, 370(5) 403-411.

National Center for Education Statistics. (2008). [Early Childhood Program Participation Survey of the National Household Education Surveys Program](http://nces.ed.gov/programs/digest/d09/tables/dt09_044.asp) (ECPP-NHES:2005).

Ogden, CL., Carroll, MD., Kit, BK., & Flegal, KM. (2011-2012). [Prevalence of childhood and adult obesity in the United States](https://www.cdc.gov/obesity/strategies/childcareece.html). *JAMA*. 2014;311(8):806-814.