Obese children are more likely to become obese adults and suffer lifelong physical and mental health problems. Obesity rates in low-income preschoolers, after decades of rising, began to level off from 2003 through 2008 and now are showing small declines in many states. However, too many preschoolers are obese. State and local officials can play a big part in reducing obesity among preschoolers.

**State and Local Officials can:**

◊ Create partnerships with community members such as civic leaders and child care providers to make community changes that promote healthy eating and active living.

◊ Make it easier for families with children to buy healthy, affordable foods and beverages in their neighborhood.

◊ Help provide access to safe, free drinking water in places such as community parks, recreation areas, child care centers, and schools.

◊ Help local schools open up gyms, playgrounds, and sports fields during non-school hours so more children can safely play.

◊ Help child care providers use best practices for improving nutrition, increasing physical activity, and decreasing computer and television time.

*Children are considered obese if their BMI is at or above the 95th percentile for children of the same age and sex according to the 2000 CDC Growth Charts.*

www [http://www.cdc.gov/vitalsigns](http://www.cdc.gov/vitalsigns)
Too many preschoolers are obese

1. 1 in 8 (12%) preschoolers is obese.
   ◦ About 1 in 5 (19%) black children and 1 in 6 (16%) Hispanic children between the ages of 2 and 5 are obese.
   ◦ Obese children are more likely to be obese later in childhood and adolescence. In these older children and adolescents, obesity is associated with high cholesterol, high blood sugar, asthma, and mental health problems.
   ◦ Children who are overweight or obese as preschoolers are 5 times as likely as normal-weight children to be overweight or obese as adults.

2. Obesity rates among preschoolers are improving, but there is more work to be done to continue this downward trend. Among low-income preschoolers (ages 2-4 years) from 2008-2011:
   ◦ Obesity rates decreased slightly in 19 of 43 states and territories.
   ◦ Obesity rates increased slightly in 3 of 43 states and territories.
   ◦ Obesity rates did not change in 21 of 43 states and territories.

Many states and US territories are showing decreases in childhood obesity

*Represents statistically significant annual decrease or increase in obesity.

To learn more about how childhood obesity is measured, see http://www.cdc.gov/obesity/childhood/basics.html.
WAYS TO PROMOTE HEALTH WITH PRESCHOOLERS

HOME:
Start with a healthy breakfast.

CHILD CARE:
Teacher leads indoor or outdoor physical activity, and children are served healthy meals and snacks during the day.

DOCTOR’S OFFICE:
Weight, height, and BMI are measured; nutrition and physical activity counseling are provided; and nutrition education support services are referred when appropriate.

COMMUNITY FARMERS’ MARKET:
Pick up fruits and vegetables to cook for dinner.

LOCAL SCHOOL PLAYGROUND AND/OR NEIGHBORHOOD PARK:
Children and parents walk to local school playground or neighborhood park to play.

What Can Be Done

**Federal government is:**

◊ Funding states and communities to implement programs that promote healthy eating and physical activity.

◊ Measuring trends in childhood obesity and its risk factors.

◊ Funding research to investigate the causes and effects of childhood obesity and to identify effective interventions.

◊ Providing training and resources for parents, child care centers and communities to help prevent childhood obesity through initiatives such as We Can! and the First Lady’s Let’s Move! initiative.

◊ Helping low-income families to get affordable, nutritious foods through programs such as the Supplemental Nutrition Program for Women, Infants, and Children (WIC) and the Child and Adult Care Feeding Program.

**State and Local Officials can:**

◊ Create partnerships with community members such as civic leaders and child care providers to make community changes that promote healthy eating and active living.

◊ Make it easier for families with children to buy healthy, affordable foods and beverages nearby.

◊ Help provide access to safe, free drinking water in places such as community parks, recreation areas, child care centers, and schools.

◊ Help local schools open up gyms, playgrounds, and sports fields during non-school hours so more children can safely play.

◊ Help child care providers use best practices for improving nutrition, increasing physical activity, and decreasing computer and television time.

**Doctors and nurses can:**

◊ Measure children’s weight, height and body mass index routinely.

◊ Counsel parents about nutrition and physical activity for their children.

◊ Connect families with community resources such as nutrition education and breastfeeding support services.

**Child care providers and parents can:**

◊ Serve fruits and vegetables and other nutritious foods for meals and snacks.

◊ Be role models by eating healthy meals and snacks with preschoolers.

◊ Make water easily available throughout the day.

◊ Limit the time preschoolers watch TV or use the computer in child care and the home.

◊ Support and encourage preschoolers to be physically active every day.

For more information, please contact

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Publication date: 08/06/2013