

# Childhood Overweight: Trends, Health Consequences, and Recommendations for Action

---

## Trends

- During the past two decades, the percentage of American children aged six to 11 who are overweight has more than doubled (from seven to 15 percent), and the percentage of adolescents aged 12 to 19 who are overweight has tripled (from five to 15 percent).<sup>1</sup>
- According to the Pennsylvania Department of Health, one study has shown that 18 percent of Pennsylvania youth were overweight in 2001 (nearly one in every five and notably above the national rate).<sup>2</sup>
- Almost 80 percent of young people do not eat the recommended five servings of fruits and vegetables each day.<sup>3</sup>
- Soft drink consumption among children of all ages has increased dramatically since the 1970s. It has especially increase among teenage boys, whose intake nearly tripled between 1977–78 and 1994.<sup>4</sup>
- In early 2002, only nine percent of Pennsylvania elementary students had access to the recommended 225 minutes or more of instructional physical education per week. Only one percent of secondary students had a schedule with more than the recommended 150 minutes.<sup>5</sup>
- Children spend more time watching television than they spend on exercise or other physical activity.<sup>6</sup>
- Over 60 percent of all advertisements during children’s programming are for foods and beverages,<sup>7</sup> and many advertised foods are high in caloric density and low in nutritional value.<sup>8</sup>

## Health Consequences

- Children who are obese as six- to nine- year-olds have a 55 percent chance of being obese as adults.<sup>9</sup> Overweight adolescents have a 70 percent chance of becoming overweight or obese adults.
- One quarter of children ages five to 10 years show early warning signs for heart disease (e.g., elevated blood cholesterol and high blood pressure).<sup>10</sup>
- Type II diabetes, formerly referred to as “adult-onset” diabetes, is a potentially life-shortening disease that is related to overweight. Until recently it was typically detected only in adults. Type II diabetes is increasingly being diagnosed among overweight children.<sup>11</sup>
- The Centers for Disease Control and Prevention estimate one in three children born in 2000 ultimately will develop diabetes because of eating too much and not exercising enough.<sup>12</sup>
- In addition to the physical consequences, overweight children may also suffer psychologically and emotionally, through discrimination, stigmatization, and a poor body image.<sup>13</sup>
- Overweight children are likely to miss four times more school than children who are not overweight.<sup>14</sup>
- Severely obese children rate their quality of life comparable to that of children with cancer being treated with chemotherapy.<sup>14</sup>



“Families and communities lie at the foundation of the solution to the problems of overweight and obesity.”

— *The Surgeon General’s Call to Action to Prevent and Decrease Overweight and Obesity 2001*



## Recommendations For Action

Recommendations for childhood obesity prevention strategies have focused on the home, the school, and the community. According to *The Surgeon General’s Call to Action to Prevent and Decrease Overweight and*



Obesity 2001, “families and communities lie at the foundation of the solution to the problems of overweight and obesity.”<sup>15</sup> Some highlights of the recommendations for action for families and communities identified in this report include the following:

- Form community coalitions to support the development of increased opportunities for physical activity.
- Encourage food outlets to increase availability of low-calorie, nutritious food items.
- Create community-based obesity prevention and treatment programs.
- Encourage parents to serve as good role models for healthy eating and regular physical activity.
- Create and implement public policy related to the provision of safe and accessible sidewalks, walking and bicycle paths, and stairs.

For more information on how parents can actively address childhood obesity, see *Healthy Habits for Healthy Kids: A Nutrition and Activity Guide for Parents*, which is included in this kit.

*The Surgeon General's Call to Action to Prevent and Decrease Overweight and Obesity 2001* identifies schools as a key setting for public health strategies to prevent and decrease the prevalence of overweight and obesity.<sup>15</sup> Schools provide numerous opportunities for children to learn about and engage in healthy eating and physical activity. The Surgeon General's report lists options for action steps that schools can take to address childhood obesity, but states that specific options should be decided upon at the local level. Some highlights of these options for schools include the following:

- Adopt policies ensuring that all foods and beverages available on school campuses and at school events contribute toward eating patterns that are consistent with the Dietary Guidelines for Americans.
- Provide age-appropriate and culturally sensitive instruction in health education.
- Prohibit or restrict student access to vending machines, school stores, and other venues that compete with healthy school meals.
- Provide children with quality daily physical education.
- Provide adequate time for school meals.
- Provide extracurricular physical activity programs.

For more information about the school's role in the issue of childhood obesity, see the following handouts in this kit: *School Meals: The Right Choice*; *Competitive Foods*, *Nutrition-Friendly Schools: Roles for Parents*; and *Healthy Fundraising*.

For recommendations for program planners, parents, teachers, school staff, and health professionals interested in addressing overweight and obesity prevention, see *Guidelines for Childhood Obesity Prevention Programs: Promoting Healthy Weight in Children*.

### References:

- <sup>1</sup> National Center for Health Statistics, Centers for Disease Control and Prevention. *Table 71. Overweight children and adolescents 6–19 years of age, according to sex, age, race, and Hispanic origin: United States, selected years 1963–65 through 1999–2000*. Available at <http://www.cdc.gov/nchs/data/hus/tables/2002/02hus071.pdf> (Accessed 7/28/03).
- <sup>2</sup> PA Department of Health. *Pennsylvania Nutrition and Physical Activity Plan*. Available at <http://www.dsf.health.state.pa.us/health/cwp/view.asp?A=190&Q=233201> (Accessed 7/25/2003).
- <sup>3</sup> U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. *Healthy Youth: An Investment in Our Nation's Future, 2003*. Available at [http://www.cdc.gov/nccdphp/aag/pdf/aag\\_dash2003.pdf](http://www.cdc.gov/nccdphp/aag/pdf/aag_dash2003.pdf) (Accessed 7/25/2003).



- <sup>4</sup> U.S. Department of Agriculture, Agricultural Research Service, Research News: *What and Where Our Children Eat: 1994 Nationwide Survey Results*. Available at <http://www.barc.usda.gov;bhnrc/foodsurvey/Kidspr.html> (Accessed 7/28/03).
- <sup>5</sup> The Pennsylvania State Association for Health, Physical Education, Recreation and Dance. *The Status of Physical Education in Pennsylvania Survey*. Available at <http://www.psahperd.org/execsumpart1.pdf> (Accessed 7/29/03).
- <sup>6</sup> Anderson, R.E., Crespo, C. J., Bartlett, S. J., et al. Relationship of physical activity and television watching with body weight and level of fatness among children: Results from the third national health and nutrition examination survey. *JAMA* 1998;279:938–942.
- <sup>7</sup> Story, M., Falkner, P. The prime time diet: A content analysis of eating behavior and food messages in television program content and commercials. *American Journal of Public Health* 1990;80:738–740.
- <sup>8</sup> Wilson, N., Quigley, R., Mansoor, O. Food ads on TV: A health hazard for children? *Australian and New Zealand Journal of Public Health* 1999;23:647–650.
- <sup>9</sup> Kolata, Gina. (2000, October 19). As children grow fatter, researchers try to find solutions. *New York Times Online*. Available at: <http://www.nytimes.com/2000/10/19/science/19FAT.html?ex=1059278400&en=aeb15881a5b0f840&ei=5070> (Accessed 7/25/2003).
- <sup>10</sup> Freedman, D., Dietz, W., Srinivasan, S., Berenson, G. The Relation of Overweight to Cardiovascular Risk Factors Among Children and Adolescents: The Bogalusa Heart Study. *Pediatrics* 1999;103:1175–1182.
- <sup>11</sup> Goran M. Metabolic precursors and effects of obesity in children: a decade of progress, 1990–1994. *American Journal of Clinical Nutrition*. 73:2, 158–171. Feb. 2001.
- <sup>12</sup> National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention. *Preventing Diabetes and Its Complications*. Available at [http://www.cdc.gov/nccdphp/pe\\_factsheets/pe\\_ddt.htm](http://www.cdc.gov/nccdphp/pe_factsheets/pe_ddt.htm) (Accessed 8/25/03).
- <sup>13</sup> Dietz, W. H. Health Consequences of Obesity in Youth: Childhood Predictors of Adult Disease. *Pediatrics* 1998;101:518–525.
- <sup>14</sup> Schwimmer, J. B., Burwinkle, T. M., Varni, J. W. Health-Related Quality of Life of Severely Obese Children and Adolescents. *JAMA* 2003; 289(14):1813.
- <sup>15</sup> U.S. Department of Health and Human Services. The Surgeon General's call to action to prevent and decrease overweight and obesity. [Rockville, MD]: U.S. Department of Health and Human Services, Public Health Service, Office of the Surgeon General; [2001]. Available from: U.S. GPO, Washington.



# Guidelines for Childhood Obesity Prevention Programs

---

The Society for Nutrition Education has published *Guidelines for Childhood Obesity Prevention Programs: Promoting Healthy Weight in Children*, which encourage a health-centered rather than a weight-centered approach to childhood obesity prevention. The guidelines emphasize active lifestyles, healthful eating, and creation of nurturing environments. The guidelines reflect the recognition that safe and effective obesity prevention programs should include measures to prevent problems such as eating disorders, unhealthy weight loss, nutrient deficiencies, and stigmatization of overweight children. Recommendations are offered for program planners, parents, teachers, school staff, and health professionals. Some key points of these recommendations appear below.

- Decision-making groups addressing healthy weight and obesity prevention should be diverse groups of individuals and include representation from among health professionals, teachers, eating disorder specialists, health-at-any-size advocates, and the general public. Programs should focus on promoting healthful lifestyles for children at home, in school, and in the community.
- Goals should be set for health, not weight. Goals should focus on healthy weight, defined as the natural weight the body adopts, given a healthful diet and meaningful levels of physical activity.
- Nurturing environments are needed to promote children's physical, mental, and social growth and development and foster self-esteem, body satisfaction, and a positive body image.
- Goals for healthy eating should consider both what and how children eat. Focus on following the Dietary Guidelines, eating a variety of foods, eating family meals together, and taking the time to relax, enjoy the food, and feel satiety.
- Goals for physical activity should aim for at least one hour of physical activity a day for children, limiting sedentary activities, increasing strength, endurance and fitness, promoting enjoyment of movement, and helping children learn skills for sports and activities that they can continue to enjoy throughout their lives.
- Promote self-worth and avoid messages that suggest to children that their personal worth is related to their body size.
- Weighing and measuring of children should be conducted under private conditions, with special thought given to avoiding stigmatization and humiliation.
- Placing children on weight loss diets is seldom safe or effective. Obesity treatment and prevention should focus on positive lifestyle changes for the whole family, creating an environment in which the child can be physically active, eat to satiety, and grow into his or her weight.

Source: *Guidelines for Childhood Obesity Prevention Programs: Promoting Healthy Weight in Children* Weight Realities Division of the Society for Nutrition Education. *Journal of Nutrition Education and Behavior*; Volume 35, Number 1, January/February 2003.



# Nutrition–Friendly Schools: Roles for Parents

---

Parents can support schools' efforts to establish and maintain healthy nutrition environments in a variety of ways. Listed below are some examples.

- Support the school meals programs and encourage your children to participate. (*See School Meals: The Right Choice.*)
- Eat breakfast or lunch at school with your kids. (Contact the school foodservice director in advance to make sure this is allowed.)
- Get to know the school foodservice staff, and let them know you value the services they provide.
- Provide healthy snacks for school parties and special events.
- Volunteer to serve on school health and/or nutrition committees. Start one, if one is not available in your school or school district.
- Help identify ways to raise money for the school, other than selling foods. (*See Healthy Fundraising* for ideas.)
- Talk to your children about what they are learning concerning nutrition and physical activity at school. You can reinforce these messages by planning family activities that include physical activity and healthy food choices.
- Stay informed about school activities and policies, possibly by attending parent organization meetings.
- Serve as a role model for healthy eating and regular physical activity.
- Talk to school administrators about the importance of a healthy school nutrition environment for your children.

## **Sources:**

Food and Nutrition Service, United States Department of Agriculture. "Ten Steps for Parents." January 2002. Available: [http://www.fns.usda.gov/tn/Resources/tenstep\\_flyer.html](http://www.fns.usda.gov/tn/Resources/tenstep_flyer.html) (Accessed 12/03).

Food and Nutrition Service, United States Department of Agriculture. "Attn: Parent." From *Changing the Scene: Improving the School Nutrition Environment*. Available: <http://www.fns.usda.gov/tn/Healthy/support.pdf>. (Accessed 12/03).



# School Meals: The Right Choice

---

## **What is the National School Lunch Program? What is the School Breakfast Program?**

Both programs are federally assisted meal programs operating in public and non-profit private schools and residential child care institutions. The National School Lunch Program (NSLP) began in 1946 as a measure of national security. Selective Service figures indicated that one-third of all men rejected for military service during World War II were physically unfit because of nutritional deficiencies. The federal government responded with the institution of the NSLP. The School Breakfast Program (SBP) began as a pilot project in 1966, and was made permanent in 1975.

## **How do the Programs Work?**

School districts and independent schools that choose to take part in the NSLP receive cash subsidies and donated commodities from the U.S. Department of Agriculture (USDA) for each meal they serve. In return, they must serve meals that meet Federal nutrition standards, and they must offer free or reduced price lunches to eligible children. School foodservice directors face the challenge of operating nutritionally sound programs that meet federal requirements, are cost effective, and are acceptable to children.

## **What are the Nutritional Requirements for School Meals?**

In 1995, the USDA launched the School Meals Initiative for Healthy Children in an attempt to improve the nutritional quality of school meals by promoting consistency with the Dietary Guidelines for Americans. This initiative included nutrition standards for school meals that maintained the long-standing goals of providing one-third of students' daily needs for calories and key nutrients for lunch and one-fourth of students' daily needs for calories and key nutrients for breakfast. In addition, the standards include goals for fat (no more than 30 percent of calories) and saturated fat (less than 10 percent of calories).

## **Why are School Meals “the Right Choice”?**

Data from the School Nutrition Dietary Assessment Study II have highlighted the benefits of school meals:

- Students in 82 percent of elementary schools and 91 percent of secondary schools had the opportunity to select lunches that were consistent with School Meals Initiative standards for fat and saturated fat.
- School lunches were also providing more than one-third of the Recommended Dietary Allowances for all targeted nutrients.<sup>1</sup>

A recent USDA analysis has shown that students who participate in the school lunch program:

- Consume over twice as many servings of vegetables at lunch than nonparticipants,
- Consume four times as much milk as nonparticipants, and
- Have substantially lower intakes of added sugars than do non-participants.<sup>2</sup>

Research conducted in Michigan elementary schools indicated that reimbursable school lunches provided children with three times as many dairy products, twice as much fruit, and seven times the vegetable amounts as lunches brought from home, which provided three times as many snack items.<sup>3</sup>

A study examining the relationship between participation in federal nutrition programs and childhood obesity found that girls in low-income households had a significantly lower risk of being overweight if they participated in the National School Lunch, School Breakfast, and Food Stamp Programs.<sup>4</sup> Participation in



these programs did not increase or decrease the odds of being overweight for girls at other income levels or for boys at any income level.

### **How do Children Qualify for Free and Reduced-Price Meals?**

Children from families with incomes at or below 130 percent of the poverty level are eligible for free meals. Those with incomes between 130 percent and 185 percent of the poverty level are eligible for reduced-price meals. Children from families with incomes over 185 percent of poverty pay the full price.

### **Who Administers the School Meal Programs?**

At the national level, the USDA administers the NSLP and the SBP through the Food and Nutrition Service. The Division of Food and Nutrition, Pennsylvania Department of Education (PDE) administers the programs for Pennsylvania.

### **For more information:**

**Pennsylvania Department of Education  
Division of Food and Nutrition**

333 Market Street, 4<sup>th</sup> Floor  
Harrisburg, PA 17126-0333  
Phone: 1-800-331-0129  
Web: [http://www.pde.state.pa.us/food\\_nutrition](http://www.pde.state.pa.us/food_nutrition)

**US Department of Agriculture  
Food and Nutrition Service**

Public Information Staff  
3101 Park Center Drive, Room 914  
Alexandria, VA 22303  
Phone: 703-305-2286  
Web: <http://www.fns.usda.gov/cnd>

### **References:**

- <sup>1</sup> Fox, M.K., Crepinek, M.K., Connor, P. and Battaglia, M. School Nutrition Dietary Assessment Study-II. Final report submitted to the USDA of Agriculture, Food and Nutrition Service, Cambridge, MA, Abt Associates, Inc., January 2001.
- <sup>2</sup> Mathematica Policy Research, Inc. Final report submitted to the USDA of Agriculture. Children's Diets in the Mid-1990s. Dietary Intake and Its Relationship with School Meal Participation. 2001.
- <sup>3</sup> Rainville, Alice Jo. Nutritional Quality of Reimbursable School Lunches Compared to Lunches Brought From Home in Elementary Schools in Two Southeastern Michigan Districts. *The Journal of Child Nutrition & Management*. Spring 2001.
- <sup>4</sup> Jones, S. J., Jahns, L., Laraia, B. A., Haughton, B. Lower Risk of Overweight in School-aged Food Insecure Girls Who Participate in Food Assistance. *Archives of Pediatric and Adolescent Medicine*. 2003;157:780-784.

Adapted from: National School Lunch Program, Nutrition Program Facts, Food and Nutrition Service, USDA; August 2002. <http://www.fns.usda.gov/cnd/Lunch/AboutLunch/NSLPFacts02.pdf> and School Breakfast Program, Fact Sheet, Food and Nutrition Service, USDA, August 2002. <http://www.fns.usda.gov/cnd/Breakfast/AboutBFast/faqs.htm>.



# Competitive Foods

---

## **What are Competitive Foods?**

Competitive foods are foods offered at school, other than meals served through USDA's school meals programs. USDA defines two categories of competitive foods:<sup>1</sup>

- **Foods of Minimal Nutritional Value (FMNV)** belong to specific categories described in the regulations for the National School Lunch Program and include soda water, water ices, chewing gum, hard candy, jellies and gums, marshmallow candies, fondant, licorice, spun candy, and candy-coated popcorn. *Current federal regulations prohibit the sale of FMNV in the food service area during the school meals periods.*
- **All other foods offered for individual sale** range from second servings of foods that are part of the reimbursable school meals to foods that students purchase in addition to or in place of a reimbursable school meal, such as a la carte sales and other foods and beverages purchased from vending machines, school stores, and snack bars. *Regulations do not prohibit the sale of these foods at any time during the school day anywhere on the school campus, including the food service areas.*

Some states have created regulations regarding competitive foods that go beyond the federal regulations described above. (For descriptions of State Competitive Food Policies, go to: [http://www.fns.usda.gov/cnd/HealthyEating/CF\\_State.htm](http://www.fns.usda.gov/cnd/HealthyEating/CF_State.htm)). Pennsylvania has no regulations on the sale of competitive foods beyond those established by USDA.

## **What is the Current Status of Competitive Food Sales in Schools?**

Studies of national trends in competitive foods have determined that:

- Ninety percent of schools had food and beverages available as a la carte items.<sup>2</sup>
- School stores and snack bars were present in nine percent of elementary schools, 35 percent of middle schools, and 41 percent of high schools.<sup>2</sup>
- Vending machines were available in 15 percent of elementary schools, 55 percent of middle schools, and 76 percent of high schools.<sup>2</sup>
- Eight-two of schools allowed organizations such as student clubs, sports teams, or parent groups to sell food at school or in the community to raise money during the 12 months preceding the study.<sup>3</sup>
- The most common items sold for fund-raising were chocolate candy, baked goods that were not low in fat, and non-chocolate candy.<sup>3</sup>

A recent study of school food policies and practices funded by the Pennsylvania Department of Health found the following:<sup>4</sup>

- Ninety-four percent of Pennsylvania's high schools have vending machines available to students. In 68 percent of these schools, students have access to the vending machines during lunch.
- Approximately 20 percent of Pennsylvania's high schools with vending machines offer milk to students through vending machines. Nearly three times as many (58.5 percent) offer carbonated beverages through vending machines. Almost 72 percent report offering bottled water.
- Nearly half of the school districts in Pennsylvania have exclusive contracts with soft drink bottlers.

## **Why are Competitive Foods Sold?**

The decisions for schools to provide competitive foods have been driven by a variety of factors:<sup>1</sup>





- Student preferences. Students come to school with established preferences for fast foods, sweetened beverages and salty snacks.
- Increased financial demands. Many schools are compensating for the funds lost through budget cuts by selling competitive foods. Profits from the sale of competitive foods are often used to support athletics, educational programs, and other activities.
- Support for school meals programs. In most cases, school foodservice programs are required to be self-supporting, with no financial support provided by the school districts. The sale of competitive foods, such as a la carte items, by school foodservice programs is often used to maintain the financial stability of the program.
- “Pouring rights” contracts. Many schools have exclusive contracts with soft drink companies, which offer higher payments for higher sales, thus encouraging schools to promote soft drink sales.

### **What are the Issues Associated With Competitive Foods?**

Competitive foods are often low in nutritional value and high in fat, sugars and calories. Therefore, they may contribute to poor dietary habits and result in obesity. Sales of competitive foods may stigmatize and affect the viability of the school meal programs.<sup>1</sup> Since only children with money can buy competitive foods, students may perceive that school meals are primarily for poor children rather than for all children. Increases in the sales of competitive foods, in the absence of regulated nutrition standards, may result in decreases in participation in school meals programs that must meet nutrition standards.<sup>1</sup> Students may be receiving a mixed message if they are taught about good nutrition in the classroom, but this message is not reinforced throughout the school environment.

### **References:**

- <sup>1</sup> Food and Nutrition Service, USDA. *Foods Sold in Competition with the USDA School Meal Programs: A Report to Congress*. 2001. Available at [http://www.fns.usda.gov/cnd/Lunch/CompetitiveFoods/report\\_congress.htm](http://www.fns.usda.gov/cnd/Lunch/CompetitiveFoods/report_congress.htm) (Accessed 06/11/03).
- <sup>2</sup> Fox, M.K., Crepinsek, M., Connor, P., Battaglia, M. School Nutrition Dietary Assessment Study–II: Summary of Findings. Available at <http://www.fns.usda.gov/oane/MENU/Published/CNP/FILES/SNDAllfind.pdf> (Accessed 06/11/03).
- <sup>3</sup> Wechsler, H., Brener, N.D., Kuester, S., Miller, C. Food Service and Foods and Beverages Available at School: Results from the School Health Policies and Programs Study 2000. *Journal of School Health*. Vol. 71, No. 7, Sept. 2001.
- <sup>4</sup> Probart C., McDonnell E., Hartman T. *Assessment of Competitive Foods Sold in Pennsylvania High Schools*. Final Report submitted to the Pennsylvania Department of Health. 2003.



# Healthy Fundraising

---

Food items are often sold in schools to generate funds for programs and activities. However, often these foods are low in nutritional value, widely available to students, and in competition with school meals. This handout provides some creative ideas for “healthy” fundraisers.

Listed below are some proven ideas for raising funds, excerpted from *Twenty Ways to Raise Funds without Candy*, developed by the Illinois Nutrition Education and Training Program.<sup>1</sup>

1. **Sled-a-thon** — Every student can seek pledges for each sled trip down the hill. A school that conducted this fundraiser raised over \$2,000.
2. **Plant Sale** — Ask parents to donate plants for a sale. A garden club raises \$1,000–2,000 each year from this type of entrepreneurship.
3. **G.S.T. Auction (goods, services, and talents)** — Solicit local businesses, parents, community members or groups of school children to provide donations for an auction. One school that held an auction such as this had a number of items available for auction including a week at a time share, a week at a cottage, hair care services, a lawn tractor, furniture, food, and restaurant gift certificates. This school raised \$20,000.
4. **Administrative Fun** — Have money jars available for the students to place money into. On a daily basis, have the school secretary count the amount in the jars and post the total. At set increments (for example, \$100, \$200, \$500), the principal and/or vice-principal could be required to do stunts, such as dress as a cheerleader, do cheers, act out a scene from a play, etc. One school earned over \$3,300 in one year through this type of fundraiser.
5. **Halloween Insurance** — One organization sold insurance for \$1 and guaranteed to clean up any soaped windows, cars, etc. the day after Halloween. The organization, consisting of seven members, received six “clean-up calls” and raised over \$1,000.
6. **Spring Yard Work** — One soccer team offered to rake yards and spread compost at a bargain rate. Ten players worked for 3 1/2 days each, and each boy made \$240 for the soccer team.
7. **Community Job Fair** — Ask local companies to rent a booth space for a fee and solicit free advertisements from local radio stations and/or newspapers. One school held a job fair, charged \$4 for admission, and raised \$24,000 in the two years they have held the fair.
8. **School Event Planners** — One school sold school event planners for \$7 each at school registration. The planners included event dates such as football games, holidays, national tests, dances, and band events. Fifty percent of the sales were profit.
9. **Advertisements on Seat Cushions** — Sell advertising space on seat cushions to local businesses. Sell the seat cushions at sporting events.
10. **Basketball Tournament** — Charge teams of three to four players entrance fees and solicit prize donations from local businesses.



Below are some creative fundraising ideas excerpted from *Creative Financing & Fun Fundraising for Schools, Sports & Clubs* developed by the California Department of Education, California Project LEAN.<sup>2</sup>

#### Items You Can Sell

- Batteries
- Bumper stickers/decals
- Buttons, pins
- Candles
- Cookbook made by school
- Crafts
- Emergency kits for cars
- Erasers
- First aid kits
- Greeting cards
- Magazines
- Megaphones
- Pet treats/toys
- Rent a special parking space
- School frisbees
- School supplies
- Souvenir cups
- Student directories
- Trendy pencils
- T-shirts with school insignia
- Valentine flowers

#### Events that Involve the Community

- Car wash
- Conference
- Gift wrapping
- Golf tournament
- Magic show
- Recycling
- Singing telegrams
- Talent show
- Treasure/scavenger hunt
- Walk-a-thon
- Workshop/class

#### Healthy Food Items

- Frozen bananas
- Fruit and nut baskets
- Fruit and yogurt parfaits
- Fruit smoothies
- Trail mix

#### Activities that Support Academics

- Read-a-thon
- Science fair
- Spelling bee

#### References:

- <sup>1</sup> Illinois Nutrition Education and Training Program. Twenty Ways to Raise Funds without Candy. <http://www.kidseatwell.org/flyers/twentywaystoraisefunds.pdf> (Accessed 12/03).
- <sup>2</sup> California Department of Education, California Project LEAN, Epidemiology and Health Promotion Section, Contract #01-15285. *Creative Financing and Fun Fundraising, Alternatives to selling candy for schools, sports and clubs*. <http://www.newenglanddairyCouncil.org/PDF/CreativeFinancing.pdf> (Accessed 12/03).



# Resources Related to Childhood Overweight

---

## Websites

### **Project PA — <http://nutrition.psu.edu/projectpa>**

Information and resources for school foodservice personnel, parents, teachers, and school administrators are available through the “Nutrition–Friendly Schools” and “Resources” links on the Project PA website. Information is available about Project PA’s Master Instructors and Breakfast Brigade members, who provide free training for school foodservice personnel in Pennsylvania.

### **Action For Healthy Kids — <http://www.actionforhealthykids.org/>**

Action for Healthy Kids (AFHK) is a nationwide initiative dedicated to improving the health and educational performance of children through better nutrition and physical activity in schools. An integrated grassroots network of AFHK State Teams is launching state–level action plans focused on improving nutrition and physical activity opportunities in schools. Vonda Fekete, M.S., R.D., L.D.N. ([vfekete@state.pa.us](mailto:vfekete@state.pa.us)), Pennsylvania Department of Education, serves as Pennsylvania’s AFHK co–chair.

### **Active Living By Design — <http://www.activelivingbydesign.org/>**

Active Living by Design is a national program of The Robert Wood Johnson Foundation and is a part of the University of North Carolina School of Public Health in Chapel Hill, North Carolina. The program will establish and evaluate innovative approaches to increase physical activity through community design, public policies and communications strategies.

### **American Cancer Society — <http://www.schoolhealth.info/>**

Consult the “Healthy Schools, Healthy Kids” website, sponsored by the American Cancer Society (ACS), for ideas and resources to support efforts to create Nutrition–Friendly Schools. Local chapters of the ACS can provide assistance with forming and operating Coordinated School Health Programs. You can use tools at the main ACS website, [www.cancer.org](http://www.cancer.org), or locate your local chapter by calling 800–ACS–2345.

### **American Dietetic Association — <http://www.eatright.org>**

The American Dietetic Association (ADA) is the nation’s largest organization of food and nutrition professionals. ADA serves the public by promoting optimal nutrition, health and well–being. The site provides links to ADA’s position papers, brochures, and fact sheets, some of which are related to children’s nutrition and childhood overweight issues.

### **American Obesity Association — <http://www.obesity.org>**

The American Obesity Association’s website provides educational and advocacy information related to the topic of obesity. Click on “News” for the latest news related to obesity. The “Childhood Obesity” section discusses how obesity affects children and what families and schools can do to combat the problem.

### **American School Food Service Association — <http://www.asfsa.org>**

The website of the American School Food Service Association provides updates on child nutrition and school foodservice issues in the news.

### **Center for Science in the Public Interest — <http://www.cspinet.org/schoolfood>**

The Center for Science in the Public Interest has developed and made available for printing from this website the *School Foods Toolkit: A Guide to Improving School Foods & Beverages*. The Toolkit provides a wide range of tips for parents and others about improving the nutritional quality of foods and beverages in their local schools.



**Centers for Disease Control and Prevention: Adolescent and School Health, Program for Healthy Youth — <http://www.cdc.gov/nccdphp/dash/nutrition/guidelines/index.htm>**

School health programs are one of the most efficient means of shaping our nation's future health, education, and social well-being. This site outlines all aspects of school health programs, with comprehensive information about the shape of school nutrition.

**Children's Nutrition Research Center — <http://www.bcm.tmc.edu/cnrc/index.htm>**

This site from the Children's Nutrition Research Center at the Baylor College of Medicine answers questions, reports on new research, and provides advice about feeding children. In the "Consumer News" section, you will find the *Nutrition and Your Child* newsletter, which is published online three times per year. "Facts and Answers" is a collection of short articles and Q&As related to child nutrition.

**Eat Smart, Play Hard — <http://www.fns.usda.gov/eatsmartplayhard/>**

This is the site for USDA's "Eat Smart, Play Hard" campaign. "Eat Smart, Play Hard" is a national nutrition education and promotion campaign designed to convey science-based, behavior-focused and motivational messages about healthy eating and physical activity.

**National Association of State Boards of Education – Safe and Healthy Schools — <http://www.nasbe.org/HealthySchools/>**

NASBE has developed policy guides on a variety of school health issues. Ordering information, executive summaries, and links to other sites and resources can be accessed.

**National School Boards Association — <http://nsba.org/schoolhealth>**

To assist policymakers and others in the school community to make informed decisions, NSBA has developed the School Health Resource Database, an ever-expanding source of up-to-date information and materials, including sample school district policies, journal articles, research summaries, fact sheets, and more.

**"Pick a Better Snack and Act" Campaign — <http://www.extension.iastate.edu/food/>**

This is a social marketing campaign developed by Iowa State University Extension encouraging children and their families to balance food choices with physical activity to stay fit.

**The President's Council on Physical Fitness and Sports — <http://www.fitness.gov/>**

The President's Council on Physical Fitness and Sports serves as a catalyst to promote, encourage and motivate Americans of all ages to become physically active.

**The Surgeon General's Call To Action To Prevent and Decrease Overweight and Obesity — <http://www.surgeongeneral.gov/topics/obesity/default.htm>**

Health problems resulting from overweight and obesity could reverse many of the health gains achieved in the U.S. in recent decades, according to this Surgeon General's "call to action." The report outlines strategies that communities can use to address these challenges.

**TAKE 10!® Program — <http://www.ilsa.org/index.cfm?pubentityid=39>**

TAKE 10!® is an innovative teaching tool, for grades K–5, that capitalizes on a child's natural desire to be active. The program, developed and validated by the International Life Sciences Institute Center for Health Promotion, is designed to reduce sedentary time during the school day while promoting positive health messages about physical activity and nutrition.

**USDA's Healthy School Nutrition Environments — <http://www.fns.usda.gov/tn/Healthy/index.htm>**

This site describes USDA's Healthy School Nutrition Environments initiative, explains what a healthy school nutrition environment is, and provides ordering information for the "Changing the Scene" kit.



## **Educational Material**

### ***Childhood and Adolescent Obesity in America: What's a Parent to Do?***

Betty Holmes – Booklet, 12p.

Wyoming: Cooperative Extension Services, College of Agriculture, University of Wyoming, 1998.

Website: <http://www.nal.usda.gov:8001/Training/c&aobe.pdf>

### ***Helping Your Overweight Child***

Booklet, 15p.

Bethesda MD: Weight Control Information Network, 1997.

Phone: (301) 984-7378 or 1-800-WIN-8098

Website: <http://www.niddk.nih.gov/health/nutrit/pubs/helpchld.htm>

### ***If My Child is Overweight, What Should I Do About It?***

Joanne Ikeda – Booklet, 20p.

Oakland CA: Division of Agriculture and Natural Resources, University of California, 1998.

Phone: 800-994-8849

Website: <http://anrcatalog.ucdavis.edu/merchant.ihtml?pid=491&step=4>

### ***If Your Child Is Overweight: A Guide for Parents***

Sharon M. Kosharek – Booklet 32p.

Chicago, IL: American Dietetic Association, 1993.

Phone: 800-877-1600 ext. 5000

Website: <http://www.eatright.org/catalog/consumer/child.html>

### ***YourSELF Middle School Nutrition Education Kit***

1 videocassette, 2 posters, 1 set reproducible masters, 1 teacher's guide, 30 magazines, 30 student activity guides.

Washington, D.C.: U.S. Department of Agriculture, Food and Nutrition Service, 1998.

Also available in full text at website: <http://www.fns.usda.gov/tn/Resources/yourself.html>

Also available from the National Food Service Management Institute (Item no. EX 33-99);

Phone: 800-321-3054

Website: <http://www.nfsmi.org/>

### ***Child of Mine: Feeding With Love and Good Sense.***

Ellyn Satter – Book

Palo Alto, CA: Bull Publishing; 2000.

### ***How to Get Your Child to Eat, But Not Too Much***

Ellyn Satter – Book

Palo Alto, CA: Bull Publishing; 2000.

### ***Underage and Overweight: America's Childhood Obesity Epidemic—What Every Parent Needs to Know***

Frances M. Berg and Andrew Flach – Book

New York: Hatherleigh Press; 2004.

### ***Food Fight : The Inside Story of the Food Industry, America's Obesity Crisis, and What We Can Do About It***

Kelly Brownell and Katherine Battle Horgen – Book

New York: McGraw-Hill/Contemporary Books; 2003.

