

Lets move!!! end elementary obesity

[Health & Medicine](#), [Obesity](#)



Over the past several years childhood obesity in Elementary age children has been on the rise. This may be due to a decrease in physical activities as well as a lack of nutritional meals served in school cafeterias. Approximately 40 percent of children are at an increased risk of becoming overweight or are already overweight according to a report from Children in Balance (Demorris). The major group that are at a higher risk for childhood obesity are those from racial and ethnic minorities (Demorris). In an effort to tackle the problem of childhood obesity First Lady Michelle Obama has just launched a campaign called " Let's Move" which was designed to decrease the current childhood obesity rate to 5 percent which is what it was in the 1970's (Office of the Press Secretary). According to Mrs. Obama, " For the first time, the nation will have goals, benchmarks, and measureable outcomes that will help us tackle the childhood obesity epidemic one child, one family, and one community at a time, " (Office of the Press Secretary). In the most current data it was advised that nearly 20 percent of Elementary school children nationally are overweight. Based on a population-sample of 5- to 17-year-olds more than half of the overweight youths (70% to be exact) were at risk of developing heart disease (Center for Disease Control and Prevention). Additional complication that may develop for both obese Children and Adults include sleep apnea, joint and bone problems as well as psychological and social implications which may result in lower self esteem (Center for Disease Control and Prevention). During a survey that was conducted between 2006 and 2010 it was discovered that the vending machines found in almost half of all schools whether public or private sold only salty or sweet snacks (USA Today). In a comparison of schools in the

West versus schools in the South where the obesity rate is the highest it was revealed that the schools in the West were the least likely to sell chips, cookies or similar snacks in relation to schools in the South where those snacks were sold in abundance (USA Today). According to Lindsey Turner who is a health psychologist at the University of Illinois the majority of schools are not abiding by the recommendation of the Institute of Medicine who are known to be health advocates wherein 2007 they published a report appealing that all schools minimize the access of snacks outside the allotted mealtime especially those served in a vending machine which are high in salt, sugar and fat (USA Today). Most schools are now offering snacks that are low in fat and salt and moving towards more baked snacks such as pretzels and ice cream that is low in fat but are still not considered to be good choices due to their high sugar and salt compound (USA Today). Since the Anti obesity advocates launched their campaign to remove and have a ban imposed on the availability of sodas which are high in sugar from schools there has been a significant decline in the sale of these drinks in schools as was highlighted in a 2010 report (USA Today). The US Department of Agriculture (USDA) initiated a policy that had prohibited schools from providing meals " of minimal nutritional value" (USA Today). With a new change by the USDA the focus has now been targeted at providing more nutritional meals to be served in schools that will consist of more whole grains and less sodium as well as providing more nutritional snacks outside of mealtime to fruits and vegetables and cutting down on unhealthy (junk) snacks that may distract children from making the healthy choice (USA Today) With First Lady Michelle Obama on the attack of combating the

childhood obesity endemic she has partnered with the Domestic Policy Council as well as the Childhood Obesity Task Force to create an action plan entitled " Solving the Problem of Childhood Obesity Within a Generation "(Office of the Press Secretary). Based on the issues the committee cited a list of suggestions were presented most of which was put into motion with immediate effect. Among the suggestions included: * Offering proper prenatal care for pregnant mothers as well as promoting the benefits of breastfeeding which is natural and even in the nutrients it provides versus utilizing baby formula which may contain high sugar content (Office of the Press Secretary). * Parents as well as child care givers need to limit the amount of time the child spends in front of a screen such as on a computer, video game, television etc and get them involved in more physical activities as well as preparing more healthy meal choices (Office of the Press Secretary). * Providing simpler material available to parents which will assist them in making healthier meal selection based on dietary guidelines. This will include the improvement of labels found on food and menus that will provide both clear and concise information. Also the reduction of unwholesome products that is normally available to children. * Promoting nutrition education in schools and reinstating this by providing healthier meal options through the federally funded school meal program. * Incorporating more physical education programs during and after school which will promote and increase children's physical activity level. Also coming up with a solution that will improve safe access to playgrounds, park and other indoor or outdoor recreational activities (Office of the Press Secretary). It is up to parents and caregivers to help eliminate childhood

obesity by ensuring that a balance is maintained through healthy eating as well as increased physical activities. In order to promote healthy growth children need to have a balance of all the nutrients from the various food groups on a daily basis. With an increased physical activity level the risk factors associated with obesity will be minimized and a healthy weight will be maintained (Boehike). According to many obesity experts ' Kids will learn to make healthful food and drink choices if they have access to them and are motivated to do so' (Spake). Parents and care givers serve as the gap between children making the right healthy choices therefore they need to act as the model that the children can adapt (Boehike). The recommendation for parents and caregivers would be: * Placing the emphasis on healthy choices instead of focusing on a specific weight target (Spake). * By making it a family affair and changing both the physical activities as well as the food choices the result will be greater (Spake). * Instead of allowing children to have their meals sitting in front of the television (which will distract them and not allow them to recognize when they are full) and to just snack right around the clock establish meal times where the child has to sit around the table to have their meal as well as designate snack times (Spake). * Also making the child or children apart of the meal selection process will enable them to make the right choices once they are at school and not under the watchful eye of their parent or caregiver (Spake). Most Elementary schools are now trying to adapt and serve healthier meals to their student some of the choices still are still high in caloric intake and have high fat compound that still adds to obesity (Boehike). Most of the breakfast choices include bagels and English Muffins which are high in carbohydrate and they are

served with jelly, butter or cream. Lunch includes personal pizzas , hot dogs, cheeses steak sandwiches, chicken nuggets, spaghetti among other that are high in their caloric and fat content (Boehike). The best way to make sure that you child or children is getting healthy meals which has more whole grains, lean meat, fruits and vegetables is to pack their own lunches daily. While schools may come as close to this food model they may not be able to afford to provide it on a daily basis so it is best that parents take the first approach and get on board with what their children are eating which will in time reduce the obesity rate (Boehike). Another approach for parents would be to keep track of the meals served on a daily basis and then they can either substitute a day or two as well as they could add to the meals by providing their child with a fruit or vegetable on days when the menu does not allow for a little from all the food groups (Boehike).. Over the past several years childhood obesity in Elementary age children has been on the rise. This may be due to a decrease in physical activities as well as a lack of nutritional meals served in school cafeterias. Work Cited Page Boehlke, Julie. " Childhood Obesity & Elementary School Cafeteria Food. " Live Strong. 18 Aug. 2011. 9 May 2012 . " Junk foods widely available at elementary schools. " USA Today 6 Feb. 2012. 4 Apr. 2012 < <http://yourlife.usatoday.com/fitness-food/diet-nutrition/story/2012-02-06/junk-foods-widely-available-at-elementary-schools/52991654/1> >. Lee, Demorris A. " Elementary schools in pilot to fight childhood obesity. " Tampa Bay Times 23 Mar. 2008. 11 Apr. 2012 < <http://www.tampabay.com/news/education/k12/article427386>. ece >. Spake, Amanda. " Learning about fat: Tackling Childhood Obesity in the schools. " U. S. News. 3 Oct. 2004. 9 May 2012 . United States. Center for

Disease Control and Prevention. " Childhood Obesity Facts " Adolescent and School Health. 15 Sep. 2011. 11 Apr 2012 < <http://www.cdc.gov/healthyyouth/obesity/facts.htm> >. United States. Office of the Press Secretary. " Childhood Obesity Task Force Unveils Action Plan: Solving the Problem of Childhood Obesity Within a Generation. " The White House. 11 May 2010. 11 Apr. 2012 < <http://www.whitehouse.gov/the-press-office/childhood-obesity-task-force-unveils-action-plan-solving-problem-childhood-obesity-> >.