Schools Can Help Children Eat Healthy and Be Active

Top Takeaways

Nearly 17 percent of children and adolescents are obese, but early interventions in nutrition and physical activity can prevent that number from increasing. This snapshot explores how schools can enact policies to help students develop healthy habits early in life.

- Providing children with healthy food and opportunities for physical activity at school can have a positive impact on their health and academic achievement.
- Updated nutrition standards for school meals and snacks have resulted in schools serving and children selecting healthier choices.
- Interventions in preschool years can help children reach a healthy weight by the time they enter kindergarten.
Key Facts

Nearly 1 in 3 children and adolescents are overweight or obese in the United States.

An obese 10-year-old can expect to pay an estimated 33% more in lifetime medical costs than a 10-year-old of healthy weight.

No more than 1/2 of children in the United States meet the recommended 60 minutes of daily physical activity.

Why Target Schools?

More than one in three children is overweight or obese in the United States, with even higher rates among black and Hispanic children. This occurs when a child is well above the normal weight for his or her age and height. Most children’s diets in the United States exceed recommended limits of added sugar, fat, and sodium, and are deficient in fruits, vegetables, and whole grains. Moreover, the majority of children do not meet the expert-recommended 60 minutes per day of physical activity.

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Schools have a unique opportunity to help children become more healthy and active. Children can spend up to seven hours—or up to half their waking hours—in school, and consume up to half their daily calories at school. Research links physical activity to improved academic performance, enhanced attention and memory, and reductions in unhealthy behavior among students.
Early Childhood Programs

The battle for children’s health begins in early childhood: more than one in five children ages 2 to 5 years in the United States are overweight or obese, according to the Centers for Disease Control and Prevention (CDC).

Regulations regarding nutrition and physical activity practices in child-care settings are limited and vary widely across the country, according to a research synthesis sponsored by the Robert Wood Johnson Foundation. The report also found that many preschools do not follow best practices for physical activity, including at least 90 minutes of active playtime per eight-hour day.

On a more encouraging note, of the 17 interventions studied in the report, 11 demonstrated a positive impact on nutrition and physical activity outcomes, including two which were shown to reduce risk for obesity. Furthermore, proposed updates to the Child and Adult Care Food Program (CACFP) nutrition standards are also expected to have a positive effect on those families who depend on early childhood programs that work with CACFP. More stringent nutrition guidelines will help ensure that children in these programs receive well-balanced meals and nutritional education.

Spotlight on Healthier School Foods

Recent national and state policies to update nutrition standards for school meals and snacks have resulted in a wider variety of healthier foods and beverages for students to choose from. In fact, 97 percent of schools nationwide have already met these new standards.

Implementation of updated nutrition standards for school breakfast and lunch programs—which provide meals to more than 50 million children every day—began during the 2012–2013 school year. By the spring of 2013, 70 percent of elementary school administrators nationwide reported that students generally liked the new meals. One study of 12 middle schools in a low-income urban area found that the percentage of children choosing fruit increased from 54 percent to 66 percent, and entrée consumption increased from 71 percent to 84 percent.

In the largest study of healthier school meal standards to date, a study conducted from 2011–2014 in Washington state middle and high schools showed that students chose healthier meals following implementation of the updated standards, with improvements attributed to increased variety of fruits and vegetables being offered.
Spotlight on Physical Activity

As children grow, their level of physical activity tends to decline. For example the Institute of Medicine (IOM) found that in Massachusetts almost all students in grades 1 through 6—but fewer than one-third of high school students—performed the recommended 60 minutes of vigorous-to-moderate-intensity physical activity at least five days per week. Declining levels of physical activity among older children may be part of the reason why obesity rates tend to rise into adolescence.

The IOM found that opportunities for physical education and activity during the school day have been declining at all school levels due to fiscal pressures and “the demand for better standardized test scores through increased classroom academic time.” To more effectively integrate physical activity in the course of the weekday, the IOM recommends that schools take a “whole-of-school approach,” promoting activity during physical education classes, recess, classroom breaks, and before- and after-school activities.
The Agenda

The Robert Wood Johnson Foundation supported passage of the Healthy, Hunger-Free Kids Act, the 2010 law that ushered in updated nutrition standards for school meals and snack foods and beverages. The law tackles nutrition standards at the institutions where young children spend most of their waking hours and consume the majority of their daily calories. RWJF plans to continue supporting policies that help schools meet or exceed these nutritional standards.

In February 2015, the Foundation announced it would commit $500 million over the next 10 years to reversing the childhood obesity epidemic. Building on a $500 million commitment made in 2007, the Foundation pledged to support research, action, and advocacy focused on the following priorities over the next decade:

- Ensure that all children enter kindergarten at a healthy weight.
- Make a healthy school environment the norm and not the exception across the United States.
- Make physical activity part of the everyday experience for children and youth.
- Make healthy foods and beverages the affordable, available, and desired choice in all neighborhoods and communities.
- Eliminate the consumption of sugar-sweetened beverages among 0- to 5-year-olds.

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Obesity Rates Among Children Aged 2 to 19

- Boys
- Girls
- Both

<table>
<thead>
<tr>
<th>Year</th>
<th>Boys</th>
<th>Girls</th>
<th>Both</th>
</tr>
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<tbody>
<tr>
<td>1988–1994</td>
<td>10.2</td>
<td>9.8</td>
<td>10.0</td>
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<tr>
<td>1999–2000</td>
<td>13.9</td>
<td>13.8</td>
<td>13.9</td>
</tr>
<tr>
<td>2001–2002</td>
<td>14</td>
<td>14.3</td>
<td>14</td>
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<tr>
<td>2003–2004</td>
<td>16.4</td>
<td>15.4</td>
<td>15.9</td>
</tr>
<tr>
<td>2005–2006</td>
<td>17.1</td>
<td>16.6</td>
<td>17</td>
</tr>
<tr>
<td>2007–2008</td>
<td>15.9</td>
<td>15.4</td>
<td>15.9</td>
</tr>
<tr>
<td>2009–2010</td>
<td>17.7</td>
<td>16.8</td>
<td>16.9</td>
</tr>
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</table>
Background

Obesity rates in the United States started to rise sharply in the 1980s among both adults and children, and particularly among certain racial and ethnic groups. Adolescents, Hispanic children, and non-Hispanic black children consistently have a higher prevalence of overweight, obesity, and extreme obesity.

Among the causes of the epidemic are the increasing availability and marketing of high-calorie, low-nutrient and inexpensive food and beverages, the prevalence of car-dependent communities, and cutbacks in school physical education programs. The proliferation of entertainment content has also lured more people into sedentary lifestyles: most children ages 2 to 17 spend at least 20 hours a week in front of a television, plus additional time spent online or playing video games.

Recent data suggest that obesity rates among youth ages 2 to 19 has leveled off since 2003–2004, and the prevalence of obesity among children ages 2 to 5 has dropped nearly 40 percent since 2003–2004. While these promising numbers do not account for obesity rates among black and Hispanic children, who still suffer from the highest rates among children, 18 states and one United States territory have measured declines in obesity rates among preschool children from low-income families, according to the CDC. Comprehensive, far-reaching changes that support healthy eating and regular physical activity may help to reduce childhood obesity rates. Adult obesity rates have also leveled off, but overall rates remain high for both children and adults.

Want to Know More?

The Many Rewards of Physical Activity
Declining Childhood Obesity Rates
Preventing Obesity Among Preschoolers
Improvements in School Lunches
Parents Support Healthier School Food
The State of Obesity: Better Policies for a Healthier America
Signs of Progress