## 2012-2013 Early Childhood Weight Status Surveillance

## San Francisco Child Care Health Project

## WEIGHT STATUS OF CHILDREN AGES 3 & 4

	Ages 3-4		Age 3		Age 4	
	Number	Percent	Number	Percent	Number	Percent
Children enrolled in CCHP child care centers in Fall 2012 <sup>(1)</sup>	1,259	100%	519	100%	740	100%
Children screened in Fall 2012	1,141	91%	492	95%	649	88%
Children referred for follow-up in Fall 2012 for weight status <sup>(2)</sup> :						
Underweight	14	1%	-	-	-	-
Overweight	138	11%	66	13%	72	10%
Obese	142	11%	53	10%	90	12%
Declined	118	9%	27	5%	91	12%
Children re-screened in Spring 2013 for weight change <sup>(3)</sup>	745	100%	317	100%	428	100%
BMI percentile decreased>10% points	147	20%	62	20%	85	20%
BMI percentile maintained +/- 10% points	489	66%	198	62%	291	68%
BMI percentile increased>10% points <sup>(4)</sup>	109	14%	57	18%	52	12%
Children re-screened in the Spring who were overweight in the Fall	204	100%	89	100%	115	100%
Overweight in Fall, BMI percentile decreased <10% points	23	11%	13	15%	-	9%
Overweight in Fall, Still overweight in Spring <sup>(5)</sup>	177	87%	74	83%	103	90%
Children re-screened in the Spring who were normal weight in Fall	541	100%	228	100%	313	100%
BMI percentile increased >10% points <sup>(6)</sup>	109	20%	57	25%	52	17%
Normal weight in Fall, Became overweight	46	9%	16	7%	30	10%
Total children at risk of obesity (rapid BMI gain, overweight or obese) <sup>(7)</sup>	390	31%	176	34%	214	29%

- (1) First 5 San Francisco, ECE enrollment data. Reporting period is September 1 through June 30. Includes only child care centers served by the San Francisco Child Care Health Project (CCHP). Includes all children ages 3 and 4 who enrolled in the Fall and consented to optional BMI screening. Excludes records for children who declined screening. Data are not reported for groups with fewer than 10 records.
- (2) Body weight and height were measured following standardized protocol. BMI percentile was determined using CDC Epiinfo software and CDC 2000 age- and sex-specific growth curves. (<a href="http://www.cdc.gov/epiinfo/">http://www.cdc.gov/epiinfo/</a>). CDC BMI percentile cutoffs for underweight (<5), overweight (85-94) and obesity (≥95) were used to determine weight status. (<a href="http://www.cdc.gov/healthyweight/assessing/bmi/childrens-bmi/about-childrens-bmi.html">http://www.cdc.gov/healthyweight/assessing/bmi/childrens-bmi/about-childrens-bmi.html</a>). The proportion of children in each weight status category was calculated with total enrollment (1) as the denominator.
- (3) Excludes children who changed child care centers or enrolled in the Spring.
- (4) Any increase in BMI percentile before age 5 is a red flag signaling need for obesity prevention (<a href="http://pediatrics.aappublications.org/cgi/reprint/101/3/e5">http://pediatrics.aappublications.org/cgi/reprint/101/3/e5</a>). A 10 point jump in BMI percentile can shift a child from overweight status to obese status.
- (5) The AAP recommends Structured Weight Management if the BMI velocity does not improve after 3-6 months (http://www2.aap.org/obesity/pdf/COANImplementationGuide62607FINAL.pdf).
- (6) The AAP recommends early detection of excessive weight gain to prevent incident obesity (http://pediatrics.aappublications.org/content/112/2/424.full.pdf).
- (7) Rapid weight gain, overweight or obesity divided by the total number of children enrolled.

