## 2013-2014 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 2013 <sup>(1)</sup>	1,386	100%	637	100%	749	100%
Children screened in Fall 2013	1,093	79%	465	73%	628	84%
Children referred for follow-up in Fall 2013 for weight status <sup>(2)</sup> :						
Underweight	16	1%	-	-	-	-
Overweight	161	12%	64	10%	97	13%
Obese	139	10%	61	10%	78	10%
Declined	293	21%	172	27%	121	16%
Children re-screened in Spring 2014 for weight change <sup>(3)</sup>	871	100%	354	100%	517	100%
BMI percentile decreased>10% points	169	19%	61	17%	108	21%
BMI percentile maintained +/- 10% points	606	70%	254	72%	352	68%
BMI percentile increased>10% points <sup>(4)</sup>	96	11%	39	11%	57	11%
Children re-screened in Spring 2014 who were overweight or obese in the Fall	243	100%	98	100%	145	100%
Overweight or obese in Fall & BMI percentile decreased >10% points	31	13%	11	11%	20	14%
Overweight or obese in Fall & Overweight or obese in Spring <sup>(5)</sup>	190	78%	77	80%	113	78%
Children re-screened in Spring 2014 who were normal weight in Fall	615	100%	249	100%	366	100%
BMI percentile increased >10% points <sup>(6)</sup>	94	15%	37	15%	57	16%
Normal weight in Fall, Became overweight or obese	36	6%	16	6%	20	6%
Total children at risk <sup>(7)</sup>	418	30%	175	27%	243	32%

- (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 by CCHP. 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) Children who were overweight or obese in Fall or normal weight in Fall with BMI percentile gain>10 or incident overweight or obesity.

