

Colorado WIC Healthy Weight Focus Areas

Your Name

Date



Let's take a poll!

Which of the following factors is most strongly linked with obesity risk in young children?

- 1) Fruit and vegetable intake
- 2) Physical activity
- 3) Juice intake
- 4) Maternal pre-pregnancy BMI



Answer

4) Maternal pre-pregnancy BMI



Colorado ECOP focus areas

Pre-
pregnancy
BMI

Gestational
Weight Gain

Screen Time

Physical
Activity

Infant Feeding
Practices

Sleep

Breastfeeding



Colorado ECOP Focus Areas

We can also potentially prevent:

Low & High
Birth weight

Rapid
Weight Gain
in Infancy



Pre-pregnancy BMI

- Women of higher weight at the onset of pregnancy have infants & children who are more likely to be obese.
- This relationship is a strong dose-response gradient.
- Why? Possibly an interplay of:
 - 1) Metabolic programming of the fetus
 - 2) Genetic predisposition
 - 3) Unfavorable maternal behavior in childrearing



In WIC, the inter-conception period
is the opportunity for impact.

Gestational weight gain

- High gestational weight gain increases risk for obesity in the child.
- Why? Possibly an interplay of:
 - 1) Metabolic programming of the fetus
 - 2) Shared maternal & infant tendency to gain weight
 - 3) Common dietary habits among mother & child



Messaging focuses on appropriate gestational weight gain.



Birth weight

Birth weight is in the middle!

High GWG

High birth weight

Increased risk of obesity

Low GWG

Low birth weight

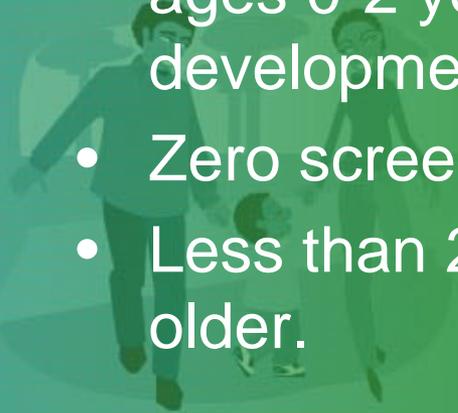
Increased risk of obesity
(catch up growth)

Pre-pregnancy BMI & gestational weight gain are target factors to achieve healthy birth weight.

A faint illustration of a family consisting of a man, a woman, and a child walking together, positioned in the bottom left corner of the slide.

Screen time

- TV viewing of more than 2 hours per day is significantly associated with increased BMI & body fatness in young children. TV in the bedroom is also a factor.
- Why?
 - 1) Sedentary behavior
 - 2) Food and beverage marketing
 - 3) Increased snacking
- Evidence relating to obesity risk is limited for children ages 0-2 years, but strong in other important areas of development.
- Zero screen time recommended for 0-2 years.
- Less than 2 hours per day for children ages 2 years & older.



Physical activity

- Logical and accepted strategy for preventing excess weight gain. Some research exists for young children and limited research exists for infants.
- Important strategy for meeting developmental milestones.

Messages target physical play for children, and family active lifestyles.



Infant feeding practices

Responsive feeding

- ❖ Responding to cues of hunger and satiety in infants.
- ❖ Division of responsibility (Ellyn Satter) for toddlers and preschoolers.
- ❖ The ability to self-regulate is present in infants. Responsiveness of caregivers predicts continued ability to self-regulate & risk of overweight.

Breastfeeding

- ❖ The longer an infant is breastfed, risk of overweight is reduced further.

These feeding practices may prevent rapid infant weight gain, which is a strong risk factor for obesity.



Sleep

- Shorter sleep duration is a strong risk factor for obesity in children.
- Why? Theories include:
 - 1) Metabolic dysfunction
 - 2) Increase in hunger and appetite
 - 3) Insulin resistance
 - 4) Fatigue and reduced physical activity
- Short sleep duration is mostly about poor “sleep hygiene”: irregular patterns, inappropriate napping, stimulation or stress before bedtime, or disruptive environment (TV in bedroom!).



Resources

Institute of Medicine, Committee on Obesity Prevention Policies for Young Children, *Early Childhood Obesity Prevention Policies*, June 2011.

<http://www.iom.edu/Reports/2011/Early-Childhood-Obesity-Prevention-Policies.aspx>

CDPHE 2011 Early Childhood Obesity Prevention Literature Review Report

<http://www.coprevent.org/search?q=early+childhood+obesity+prevention+report#!/2011/11/2011-colorado-early-childhood-obesity.html>



Questions?



Thank you!

