Promoting Healthy Weight

Childhood and adolescence offer an opportunity to learn healthy habits that support an individual’s lifelong health and wellness. A child’s or adolescent’s weight status is the result of multiple factors working together—heredity, behavior, and environment. Over the last 30 years, dramatic increases in the rate of obesity, particularly for young children, older adolescents, and children and youth with special health care needs, show a need for more attention from health care professionals.

The health supervision visit presents a unique opportunity to address the rapid increase of obesity through health promotion activities. Efforts for preventing, assessing, and treating children and adolescents with overweight and obesity start early. Health care professionals can monitor growth and partner with families to find ways to promote nutrition and physical activity in culturally responsive ways that promote positive parenting.

Obesity rates rose from 5.0% to 13.9% in children ages 2 to 5, 6.5% to 18.4% in children and adolescents ages 6 to 11, and 5.0% to 20.6% in adolescents ages 12 to 16 from the late 1970s to the mid-2010s.

The role of the health care professional is to

- Monitor and routinely document the weight-for-length (WFL) percentile and growth trajectory for children under age 2 and the body mass index (BMI) percentile and weight status for children ages 2 above (see box below).
- Assess dietary, physical activity, sedentary, and sleep behaviors.
- Assess risk factors based on family history and medical examination.
- Assess attitude and emotional state, including any socioeconomic stressors.
- Conduct laboratory screenings per age recommendations and other diagnostic tests, as indicated.
- Depending on risk level, provide prevention counseling, schedule follow-up visits, and/or make appropriate referrals.
- Establish procedures to deliver obesity prevention messages to children and adolescents.
- Involve and train interdisciplinary teams regarding their roles and responsibilities in addressing obesity prevention.

ABOUT BRIGHT FUTURES

Bright Futures is a national health promotion and prevention initiative, led by the American Academy of Pediatrics (AAP) and supported by the Maternal and Child Health Bureau, Health Resources and Services Administration. The Bright Futures Guidelines provide theory-based and evidence-driven guidance for all preventive care screenings and well-child visits. Bright Futures content can be incorporated into many public health programs such as home visiting, child care, school-based health clinics, and many others. Materials developed especially for families are also available. Learn more about Bright Futures and get Bright Futures materials by visiting brightfutures.aap.org.
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MONITORING GROWTH

The WFL percentile is the current standard used to assess weight status in the first 2 years after birth and should be assessed at every health supervision visit before age 2. The BMI is defined as weight (kilograms) divided by the square of height (meters$^2$): weight (kg)/[height (m$^2$)].$^3$ Although the BMI does not directly measure body fat, it is a useful screening tool because it correlates with body fat and health risks.$^3$ In addition, measuring the BMI is clinically feasible. Using the BMI, children ages 2 and above and adolescents may fall into four categories: underweight, normal or healthy weight, overweight, or obese. Although children’s bodies develop and grow, these percentiles define the norm for healthy weight and allow health care professionals to identify children who may be at risk because of significantly high or low levels of body fat.

BMI Percentile Categories for Children and Adolescents$^4$

<table>
<thead>
<tr>
<th>BMI Percentile Range</th>
<th>Weight Status Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 5th percentile</td>
<td>Underweight</td>
</tr>
<tr>
<td>5th &lt; 85th percentile</td>
<td>Normal or Healthy Weight</td>
</tr>
<tr>
<td>85th &lt; 95th percentile</td>
<td>Overweight</td>
</tr>
<tr>
<td>≥ 95th percentile</td>
<td>Obese</td>
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</tbody>
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GUIDELINES FOR PREVENTION APPROACHES

Based on the notion that obesity prevention is complex, there are several key ideas to keep in mind when providing anticipatory guidance and counseling for children and adolescents and their families. The following proven strategies support screening and treatment:

- **Communicate effectively**: By choosing words carefully, health care professionals can guide and support families in ways that engage them. Using neutral words to identify concerns and support family values or circumstances, minimizes the chance of offending or upsetting a family while offering them useful information.

- **Sensitivity to cultural traditions**: Culture has many implications for food choice and body image. Understanding a family’s cultural values helps health care professionals establish common ground about weight-related health concerns.

- **Encouraging active parenting**: Offering parents the tools to promote routines and activities that realistically fit within their daily lives can make an important impact. Recommendations that support responsive feeding, sleep, family meals, physical activity, and limited screen time build healthy environments for children to develop and grow.

- **Accommodating stages of change (readiness to change)**: Health care professionals use the context of a child’s or adolescent’s life to determine his or her ability to implement changes. By working with families, they can determine alternatives to support safe play and healthy eating in realistic and appropriate ways.

- **Using motivational interviewing (MI)**: This strategy offers health care professionals an opportunity to ask nonjudgmental questions and use reflective listening to determine child, adolescent, and/or family beliefs and values that have implications for healthy weight. Studies show that when used effectively, MI supports individuals in developing their own plans for maintaining a healthy weight.

- **Using cognitive behavioral techniques**: Supporting children, adolescents, and families in setting goals, monitoring behaviors, and using positive reinforcement can assist families in promoting healthy weight.

Keeping these guidelines in mind when working with families can help set the stage for success.

AGE-SPECIFIC GUIDANCE FROM HEALTH SUPERVISION VISITS

Throughout a child’s life, health care professionals review factors for healthy weight and screen children and adolescents for weight-related concerns. Anticipatory guidance includes age-appropriate information and strategies for each stage of development during health supervision visits. The following table illustrates the critical components of these visits as they relate to healthy weight.
### Stage Summary of Anticipatory Guidance

#### Infancy (Prenatal to 11 months)
- Nutritious maternal diet and physical activity approved by a health care professional can positively impact prenatal development.
- In the early months of infancy, health care professionals guide families to
  - Understand how to support optimal child nutrition.
  - Make informed choices about breastfeeding.
  - Use responsive feeding practices.
  - Practice developmentally appropriate physical activities.
- As an infant reaches 6 months, health care professionals offer information that support families in building safe and health routines. These include
  - Introducing a variety of healthy foods and/or complementary foods with an emphasis on a variety of colors and textures.
  - Appropriate drinks (water, human milk, or formula).
  - Creating infant sleep routines and self-calming strategies.
  - Making careful screen-time decisions.
  - Preparing for crawling, cruising, climbing, and walking.

#### Early Childhood (1 to 4 years)
- Routines are a critical component of early childhood and support a child’s healthy weight by
  - Encouraging independent feeding of healthy food choices and beverage consumption (ie, avoid sugar-sweetened drinks).
  - Establishing healthful bedtime routines and screen-time rules consistent with the recommendations of the American Academy of Pediatrics.
  - Encouraging physical activity through both structured and unstructured physical play.
- Health care professionals help families create safe environments for healthy eating and play by providing information about health and safety concerns at various developmental stages.

#### Middle Childhood (5 to 10 years)
- Guidance during middle childhood provides families with information about children’s changing bodies and how to determine whether their child’s growth is healthy.
- Health care professionals focus on food security and nutrition and establishing habits and routines to support healthy weight. As children become more independent, guidance helps families
  - Facilitate healthy food and beverage choices.
  - Model healthy eating routines (eg, family mealtimes).
  - Establish routines for sleep, physical activity, and learning.
  - Build healthy screen-time practices.

#### Adolescence (11 to 21 years)
- Health care professionals shift conversations during adolescent years to help youth understand
  - Positive body image.
  - Healthy eating (nutritious food and beverage choices).
  - The importance of physical activity and sleep.
  - Screen-time boundaries and creating a balance with other daily activities.
- As young adolescents grow, the guidance shifts to focus on conversations with them rather than their families. This supports independence in late adolescence and early adult years.
MAKE THE MOST OF HEALTH SUPERVISION VISITS BY USING THE BRIGHT FUTURES TOOL & RESOURCE KIT

The Bright Futures Tool & Resource Kit, 2nd Edition, provides the forms and materials that health care professionals need to carry out preventive health supervision and health screening for infants, children, and adolescents. These materials can help health care professionals discuss healthy weight with families.

The Toolkit’s Core Tools provide valuable resources that help health care professionals focus on healthy weight during the health supervision visit. Reviewing parents’ and adolescents’ responses on the Previsit Questionnaires gives insights related to healthy weight, providing a foundation for discussion during the visit. The Visit Documentation Form is a convenient resource for documenting activities during the visit. This form can be adapted for use in electronic health record systems. The Parent-Patient Education Handout can help reinforce the discussion and provide additional information on promoting healthy weight.

FOR MORE INFORMATION

Several key resources are available to health care professionals as they work with children, adolescents, and their families to promote healthy weight. Consider reviewing these resources for more information.

- **Obesity Prevention, Assessment, and Treatment Algorithm**: This algorithm, based on the 2007 Expert Committee Recommendations and informed by the most recent research and consensus statements, was specifically developed to assist primary care providers in assessing and managing obesity prevention and assessment for patients ages 2 and older. It supports a comprehensive approach at the point of care and simplifies existing guidance into algorithm.

- **Childhood Obesity in Primary Care Continuing Education Modules**: This series of modules on the obesity epidemic and the role of primary care in health promotion; obesity prevention; and screening, diagnosis, and management can be used in residency training and other professional settings like Grand Rounds. Continuing medical education credits are available.

- **ChangeTalk—MI Skill-Building Module**: This simulation module helps build professional skills to elicit and strengthen motivation to improve healthy behaviors.
  - iTunes
  - Google Play

- **Conversations About Care Podcast**: In partnership with Bright Futures, this podcast series highlights pragmatic conversations among health care professionals about healthy childhood weight including practical strategies and resources to support patient-centered care.

- **Resources Focused on Early Obesity Prevention (infant to age 5)**:
  - **Continuing Education Modules**: This series of 15 continuing education modules for primary care professionals supports the adoption of healthy active living to prevent obesity during early childhood.
  - **Educating and Engaging Parents and Families**: A library of infographics, social media assets, videos, and additional resources is available for health care professionals guiding families in key topics related to early obesity prevention including but not limited to responsive feeding, complementary food introduction, and picky eating.
  - **Healthy Growth App (iTunes)**: This app allows a health care professional and parent to identify healthy active living topic areas that are important to the family during a health supervision visit to tailor a series of action strategies that can be printed or emailed directly to the parent. Content is available in English and Spanish.
The recommendations contained in this publication do not indicate an exclusive course of treatment or serve as a standard of medical care. Variations, taking into account individual circumstances, may be appropriate. Any websites, brand names, products, or manufacturers are mentioned for informational and identification purposes only and do not imply an endorsement by the American Academy of Pediatrics (AAP). The AAP is not responsible for the content of external resources. Information was current at the time of publication. The AAP does not review or endorse any modifications made to this form and in no event shall the AAP be liable for any such changes.

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