CDC is partnering with the National Association of Community Health Centers to increase implementation of an evidence-based childhood weight management program in Federally Qualified Health Centers.

Childhood obesity is a serious public health concern for our nation

Obesity among children of all ages is too high. In 2015-2016, among children and adolescents aged 2–19 years:

- The prevalence of obesity was 19%—that’s nearly 1 in 5 U.S. children.
- The prevalence of obesity was higher among Hispanics (26%) and non-Hispanic blacks (22%) than among non-Hispanic whites (14%) and non-Hispanic Asian youth (11%).
- The prevalence of obesity was higher among 6- to 11-year-olds (18%), and 12- to 19- year-olds (21%) than among 2- to 5-year-olds (14%).

Childhood obesity has serious and costly consequences—undermining the physical, social, and mental well-being of children.

- A collective approach to address our nation’s high levels of childhood obesity will require prevention and care management options delivered in community venues, clinics, and hospital-based settings.
- The U.S. Preventive Services Task Force (USPSTF) recommends that providers screen children and adolescents aged 6 years or older for obesity and provide referrals to evidence-based, family-centered childhood weight management programs and services that include nutrition and physical activity counseling and behavioral modification techniques.
- Despite recommendations, many U.S. children still do not receive evidence-based care for obesity.
- Many communities, health systems, and healthcare providers lack the resources and guidance on how to implement evidence-based, family-centered childhood weight management programs and services.

The USPSTF defines comprehensive, intensive behavioral interventions as those that provide 26 contact hours or more of family-centered lifestyle counseling on nutrition, physical activity, behavior modification techniques and skill building.

Commit! Childhood Obesity Management with MEND Implementation Teams

All children deserve to grow up at a healthy weight

https://www.cdc.gov/obesity/initiatives/commit/index.html
CDC’s Division of Nutrition, Physical Activity, and Obesity and the Office of The Assistant Secretary for Planning and Evaluation (ASPE) are funding, and CDC is providing technical expertise to the National Association of Community Health Centers (NACHC). This project is part of CDC’s broader strategy to adapt proven childhood weight management programs—including Childhood Obesity Research Demonstration Projects—to work for low-income communities. NACHC will work with state partners to implement childhood weight management programs that meet the USPSTF Recommendations in Federally Qualified Health Centers (FQHCs), community-based healthcare providers that receive funds from the HRSA Health Center Program to provide primary care services in underserved areas.

- The programs serve low-income children aged 7-13 years who have obesity (or are at risk for having obesity) and their families.
- To achieve the project goals, NACHC engaged FQHCs to support implementing a childhood weight management program called MEND (Mind, Exercise, Nutrition, Do It!).
- MEND is an evidence-based pediatric weight management program that has helped over 100,000 children and families.
- CDC, ASPE, and NACHC will use information gathered during this project to identify the key components of successful program delivery and develop an implementation guide to support the expansion of similar programs.

**Together we can make a difference**

- Health systems can ensure appropriate screening for healthy growth among children.
- Organizations can adopt the implementation guidance, when available, to support an evidence-based, childhood weight management program in their community.
- Public health and health systems can engage key audiences to share messages about the benefits of childhood obesity prevention efforts and childhood weight management programs.

**We are committed to helping children grow up at a healthy weight across the nation**

- Year One included 16 programs in 13 organizations across MS, IL, AZ, and FL. Year Two will include sites from AZ, IL, MS, and NC.