



Children's Diets—a Prescription for Ill health

- More than one-third of American children and adolescents ages 6 to 19 are overweight or obese. The prevalence of childhood obesity in 2009–2010 was about 17 percent,¹ three times as high as in 1976–80.²
- Obesity has immediate effects on a child's health, including increasing the risk of fatty liver disease, causing breathing or joint problems, and possible social discrimination. In the long-term, obese children are more likely to be obese as adults, which can increase the risk of diabetes, heart disease, some cancers, and other chronic diseases.³
- Small, but promising, drops in obesity rates have occurred among young children and adolescents in New York City and Los Angeles.^{4,5}
- Up to 1 in 3 new cases of diabetes diagnosed in youths under age 18 are obesity-related type 2 diabetes (formerly called adult-onset diabetes).⁶ The prevalence of type 2 diabetes in Americans under 20 years old increased by 21 percent from 2001 to 2009.⁷
- More than 80 percent of adolescents aged 12 to 18 do not eat the recommended five or more servings of fruits or vegetables each day.⁸
- The top sources of calories for children aged 2 to 18 are grain desserts (cakes, cookies, donuts, etc.), pizza, and sugar drinks (regular soda, sports drinks, fruit drinks, etc.).⁹
- Boys (9–18) consume an average of 27 teaspoons of added sugar per day and girls (9–18) consume an average of 21 teaspoons (2003–2006).¹⁰
- About 17 percent of boys and 20 percent of girls aged 14 to 18 consume more than a quarter of their daily calories from added sugars. For children and adults, age 4 and older, who consume more than a quarter of their calories from added sugars, about 60 percent of the added sugars comes from regular soft drinks and fruit ades.¹¹
- Boys and girls aged 12 to 19 consume an average of 273 and 171 calories, respectively, per day from sugary drinks. That is more than any other age group.¹²
- Among low-income children aged 2 to 11, the average number of cavities increased from about 4 in 1988–1994 to about 6 in 1999–2004.¹³ That increase may be partially explained by poor nutrition.¹⁴
- Children aged 8 to 18 consume nearly 3,400 milligrams of sodium per day; twice the recommended amount. High sodium intake is associated with the risk of high blood pressure in children and adolescents.¹⁵ High-sodium diets may raise blood pressure even in infants.¹⁶
- Artificial food dyes increase hyperactivity in children with Attention Deficit Hyperactivity Disorder (ADHD) and other problem behaviors.¹⁷



¹Ogden, C.L. et al. *JAMA*. 307, 483–490 (2012).

²Ogden, C.L. et al. *NCHS Health E-Stat*. June (2010). http://www.cdc.gov/nchs/data/hestat/obesity_adult_09_10/obesity_adult_09_10.htm. Accessed June 24, 2013.

³CDC. <http://www.cdc.gov/obesity/childhood/basics.html>. Accessed March 18, 2013.

⁴CDC. *MMWR Morb Mortal Wkly Rep*. 62, 17–22 (2013).

⁵CDC. *MMWR Morb Mortal Wkly Rep*. 60, 1673–1678 (2011).

⁶Copeland, K.C. et al. *Pediatrics*. 131, 364–382 (2013).

⁷Dabelea, D. et al. Abstract. 72nd Scientific Sessions (2012) – American Diabetes Association. June 8–12, 2012, Philadelphia, PA.

⁸Lorson, B.A. et al. *J Am Diet Assoc*. 109, 474–478 (2009).

⁹Reedy, J. & Krebs-Smith, S.M. *J Am Diet Assoc*. 110, 1477–1484 (2010).

¹⁰Marriott, B.P. et al. *Crit Rev Food Sci Nutr*. 50, 228–258 (2010).

¹¹*Ibid*.

¹²Ogden, C.L. et al. *NCHS Data Brief*. 71, 1–8 (2011).

¹³Dye, B.A. et al. *Vital Health Stat* 11. 248, 1–92 (2007).

¹⁴Shenkin, J.D. *J Public Health Dent*. 71, 1–5 (2011).

¹⁵Yang Q. et al. *Pediatrics*. 130, 611–619 (2012).

¹⁶He, F.J. & MacGregor, G.A. *J Hum Hypertens*. 23, 363–384 (2009).

¹⁷Food Advisory Committee: Certified Color Additives in Food and Possible Association with Attention Deficit Hyperactivity Disorder in Children, March 30–31, 2011.