Early Childhood Obesity

Growing evidence points to the importance of preventing obesity in infants and young children, and a better understanding of obesity is key to solving this major health problem. The myths and realities below are based on the Institute of Medicine report Early Childhood Obesity Prevention Policies.

Myth: Childhood obesity isn’t really a problem until the elementary school years.
Reality: About 10 percent of infants and toddlers have high weights for their length, and more than 20 percent of children aged 2-5 already are overweight or obese. Preventing obesity in infants and young children could help reverse the epidemic of childhood obesity and reduce obesity in adulthood.

Myth: A chubby baby is a healthy baby and he or she will grow out of it.
Reality: Excess weight at a young age—even that of a baby or toddler—can hinder movement and normal levels of activity and ultimately compromise health and development later in life. In addition, rapid weight gain and obesity during the first years of life increases the risk of obesity into adulthood.

Myth: Parents recognize when their child is overweight or obese.
Reality: Studies show that mothers tend to underestimate their children’s weight. These misperceptions can be corrected with the objective input of a health care professional at well child visits, during which physicians can guide parents on actions to prevent obesity.

Myth: Only kids who are walking need physical activity to help them grow and develop.
Reality: Promoting opportunities for movement such as reaching, creeping, crawling, and cruising may be the most effective way to increase physical activity, improve motor skills, and “burn calories” in children less than 1 year of age. Adults can facilitate physical activity in infants by encouraging supervised “tummy time,” exploration, and free movement in safe spaces. They also can limit the time infants spend in confining equipment such as cribs, playpens, or high chairs while awake.

Myth: Requiring children to “clean your plate” and restricting the amounts of food children can eat are effective methods for teaching young children healthy eating habits.
Reality: Research indicates that young children have some ability to regulate their own food intake, even as early as infancy. A caregiver using “responsive” feeding practices—including offering a variety of healthy foods in appropriate portions and allowing children to determine how much they eat of the healthy foods offered—can be effective in promoting this self-regulation.

Myth: Most young children get enough sleep.
Reality: The obesity epidemic has been paralleled by a similar epidemic of sleep deprivation, with the most pronounced decreases seen in children under 3 years of age. In addition, evidence shows an association between inadequate sleep and increased risk of obesity. Parents and other caregivers can create environments that ensure restful sleep, such as no screen media (television, videogames, internet sites, and cell phones) in rooms where children sleep.

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