

2013 Child Behaviors and Health in Pava'ia'i Preliminary Results

The US Department of Agriculture (USDA)-supported Children's Healthy Living Program, or CHL, has been working with your community to understand the behaviors and health of children 2-8 years of age. During April 2013, parents, teachers, community members, and project partners gathered data in your community. A total of 157 children from Pava'ia'i participated in this study. Here we have some preliminary results from our joint work. With this information, parents and community leaders can see where things are going well and where additional energy, leadership, and resources will need to be placed to raise the next generation of healthy, happy children.

Child sex, age, race distribution

Among the 157 children, 155 had information on child's sex, of which 70 (45%) were girls and 85 (55%) were boys. All 157 children had information on child's age, of which 146 (93%) were of age group 2-5 years and 11 (7%) were of age group 6-8 years. All 157 children had information on race, of which 152 (97%) were Native Hawaiian/Pacific Islander (NHPI) and 5 (3%) were of more than one race.

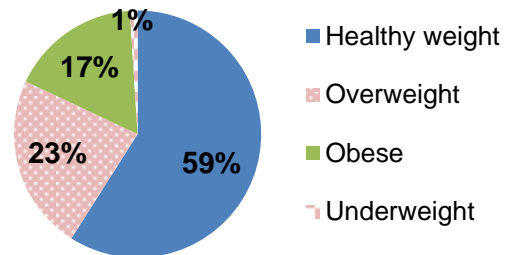
Potential outliers with extreme values (defined as those with a value of 3 standard deviations (sd) above or below the mean) were also excluded from this report. Data was looked at by child's sex and age group.

Children's Body Mass Index by Category as defined by the Center for Diseases Control and Prevention (CDC)

A total of 155 children were included for this analysis. Among them, 59% were healthy weight, 23% were overweight, 17% were obese, and 1% were underweight (Figure 1).

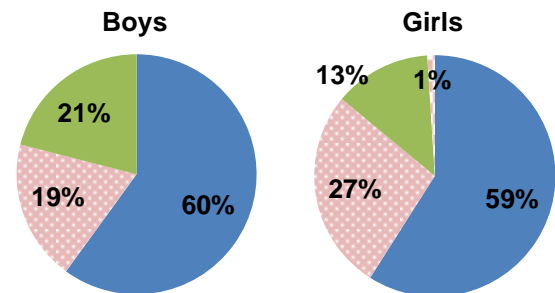
No difference of BMI distribution was observed between boys and girls (Figure 2), or between those aged 2-5 years and those 6-8 years old (Figure 3).

Figure 1. Prevalence of overweight and obesity of all study children from Pava'ia'i (n=155)



No difference of BMI distribution was observed between boys and girls (Figure 2),

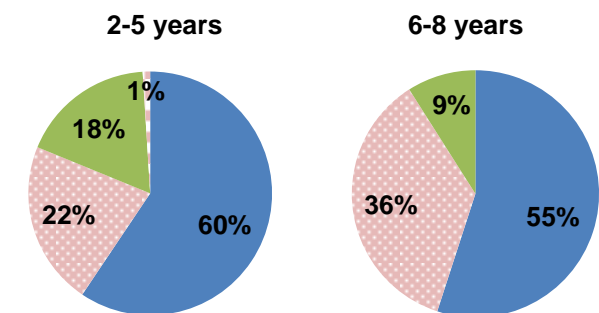
Figure 2. Prevalence of overweight and obesity comparing boys (n=85) to girls (n=70)



■ Healthy weight ■ Overweight ■ Obese ■ Underweight

No difference was found between children aged 2-5 and those aged 6-8 years old (Figure 3).

Figure 3. Prevalence of overweight and obesity comparing 2-5 years (n=144) to 6-8 years (n=11)



■ Healthy weight ■ Overweight ■ Obese ■ Underweight

Strategies that have found to be effective in the prevention of childhood obesity include: (1) A healthy lifestyle, which encourages children to move more, sleep more and spend less screen time (2) A healthy diet, which encourages children to drink more water, eat more fruit and vegetables and consume fewer sugar sweetened beverages.

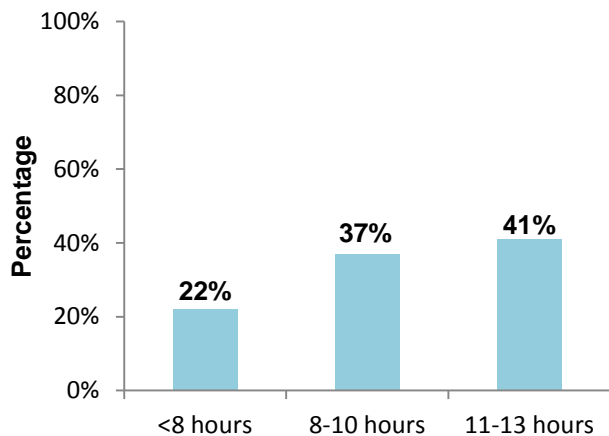
Parents were asked about their children's' sleeping duration on a typical day. Let's see how the kids are doing on sleeping and on achieving national sleep recommendations in Pava'ia'i.

Children Sleep Duration

A total of 145 children were included in the analysis of sleep duration. The average sleeping time in hours per day among those 145 children was 8.6 (sd=3.8). No difference was found between boys and girls. However, the average was higher for those aged 2-5 years old (8.8 hours; sd=3.6) than those aged 6-8 years old (6.3 hours; sd=4.9).

Among the 134 two to five year olds, 41% met the national recommendation of sleep of between 11-13 hours daily (11-13 hours in the graph). Another 37% of children slept more than 8 hours but less than 11 hours daily (8-10 hours in the graph) and 22% slept less than 8 hours (<8 hours in the graph) (Figure 4).

Figure 4. Percent of children 2-5 years old among 3 groups of sleep duration



Over half (59%) of our younger children (2-5 years old) did not meet the national recommendation of 11-13 hours daily of sleep! This is an opportunity for both parents and educators to intervene to help children get more sleep.

Acknowledgements

We would like to thank all the families of participants who completed our assessments so that we could make this important information available, as well as all our community partners for working with us to improve the health of children across the Pacific.

For more about this data or the CHL Program, contact:

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