

**SMARTER
LUNCHROOMS:
USING ENVIRONMENT TO
NUDGE KIDS INTO
HEALTHIER CHOICES**

Jessica Graumann, MS, RD, LD
Clinical Dietitian

University of Minnesota Amplatz
Children's Hospital

Pediatric Weight Management Clinic

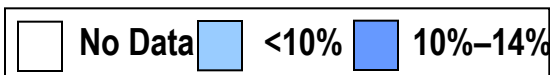
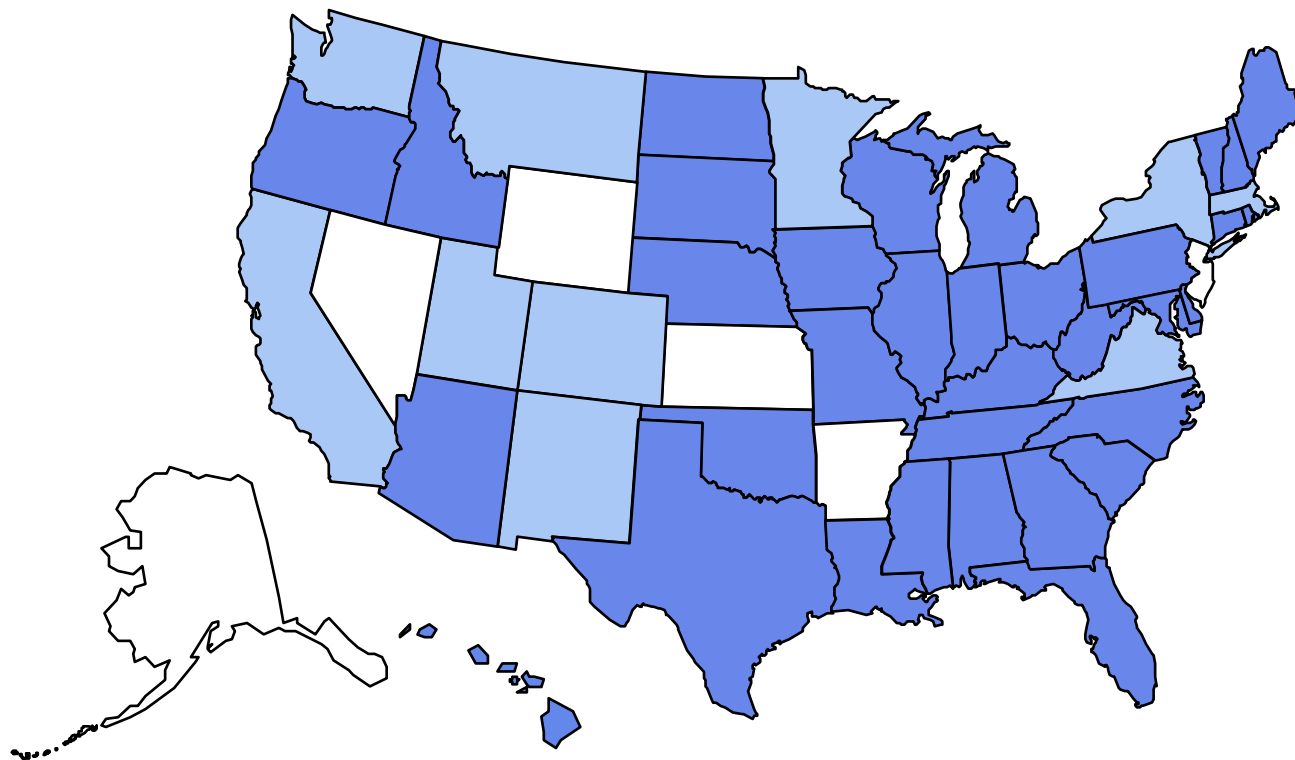
OUTLINE



- Childhood Obesity
- My Job Responsibilities
- How you can help!

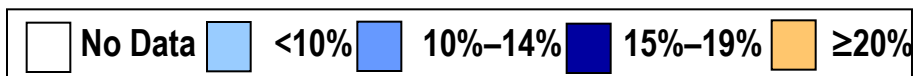
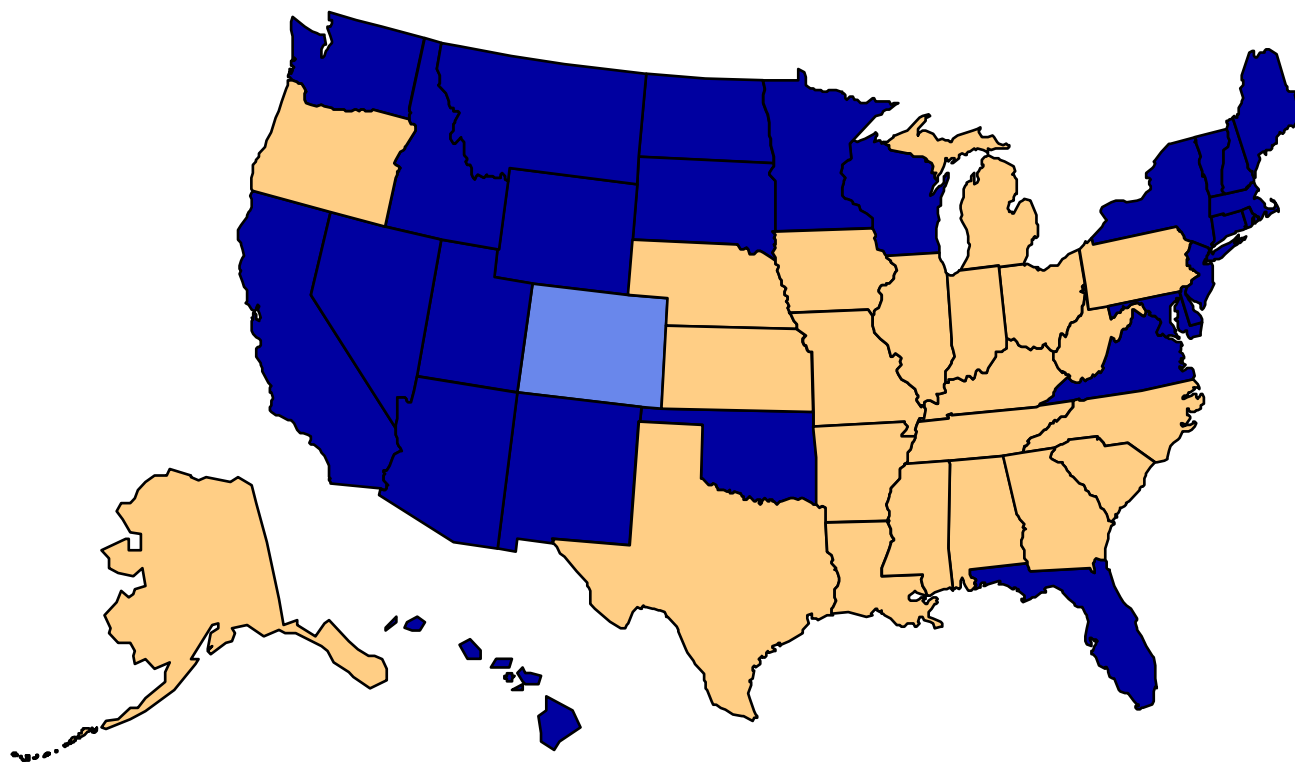
OBESITY TRENDS* AMONG U.S. ADULTS BRFSS, 1990

(*BMI ≥ 30 , or ~ 30 lbs. overweight for 5' 4" person)



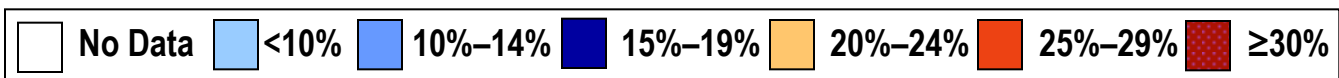
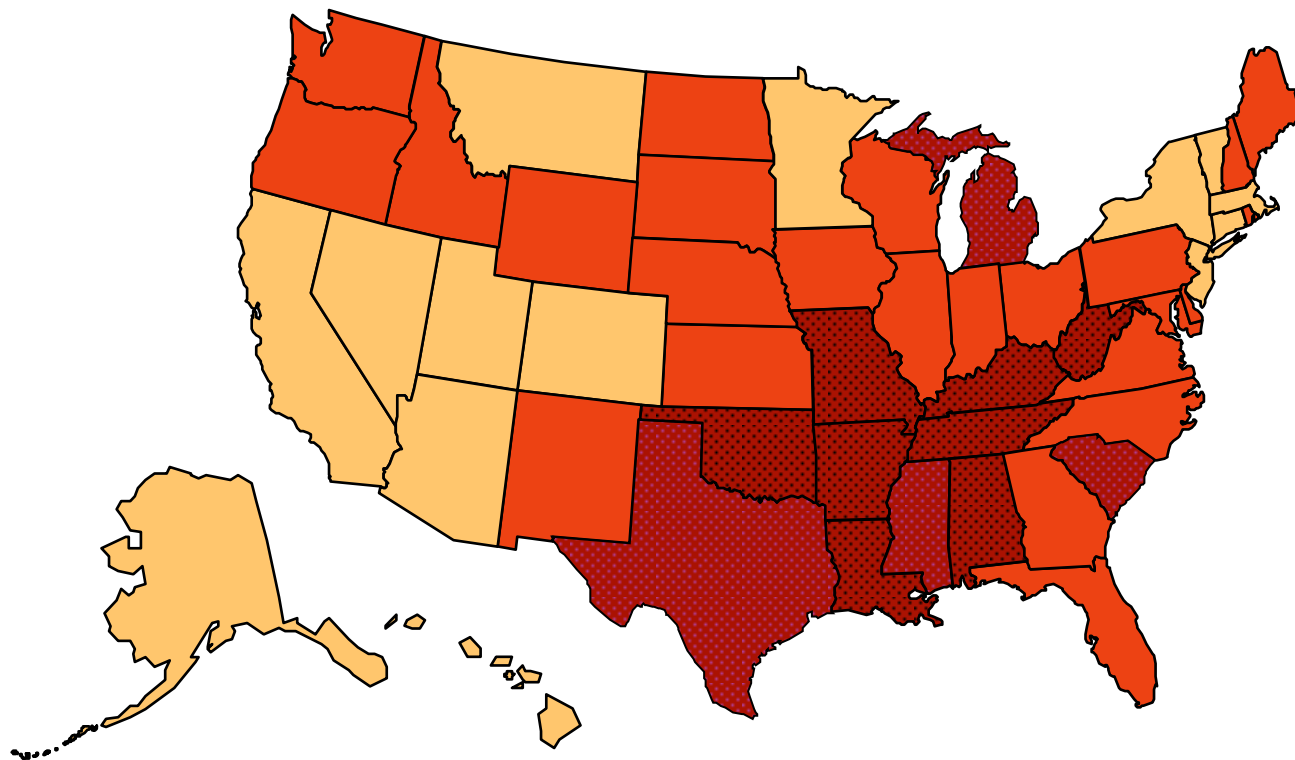
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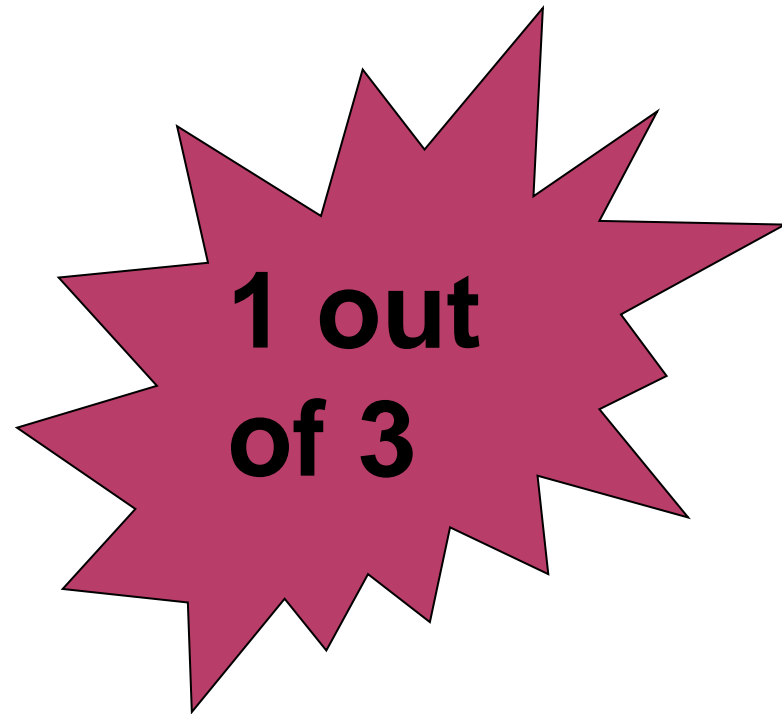
OBESITY TRENDS* AMONG U.S. ADULTS BRFSS, 2010

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NATIONAL RATES OF CHILDHOOD OBESITY

- Childhood obesity has tripled in 6-19 year olds
 - Non-Hispanic Blacks and Hispanics at higher risk
- 2-19 year olds:
 - 12% BMI \geq 97th %
 - 17% BMI \geq 95th %
 - 32% BMI \geq 85th %



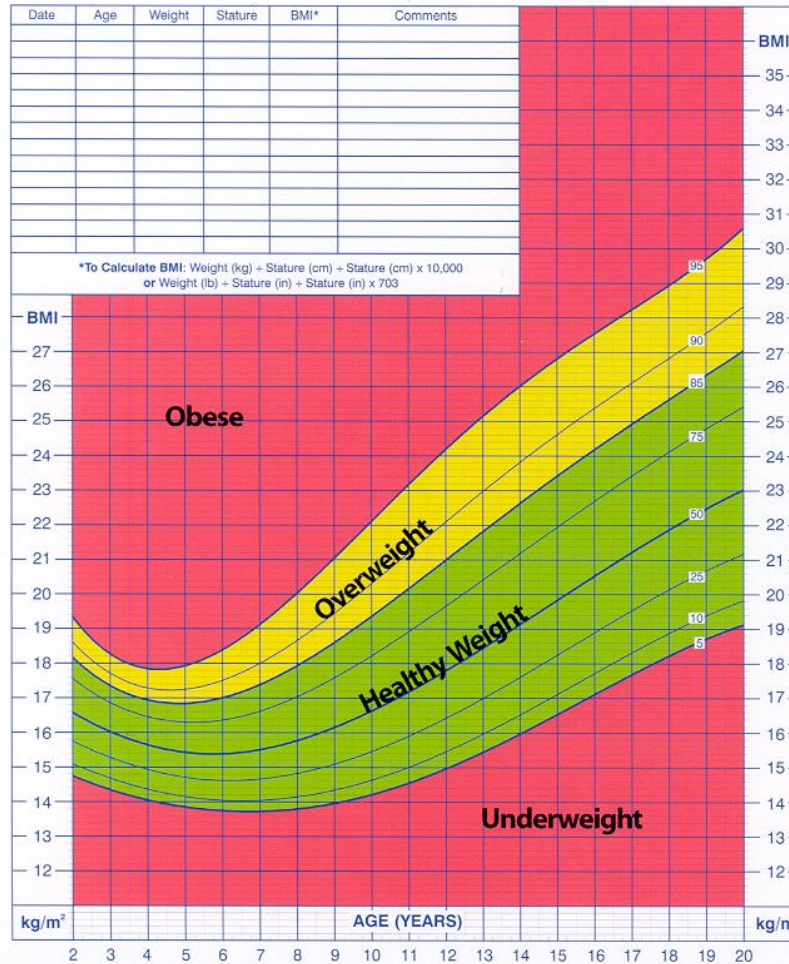
HOW DO YOU KNOW IF A CHILD IS OBESE?

2 to 20 years: Boys

Body mass index-for-age percentiles

NAME _____

RECORD # _____



Published May 30, 2000 (modified 10/16/00)

SOURCE: Developed by the National Center for Health Statistics in collaboration with the National Center for Chronic Disease Prevention and Health Promotion (2000). <http://www.cdc.gov/growthcharts>



SAFER • HEALTHIER • PEOPLE™

WHY WE SHOULD CARE?

○ Increased risk of:

- Cardiovascular Disease
- Diabetes
- High Blood Pressure
- Early Puberty
- Low Self Esteem/Depression
- Sleep Apnea
- Cancer (prostate, breast, colon)
- Joint pain



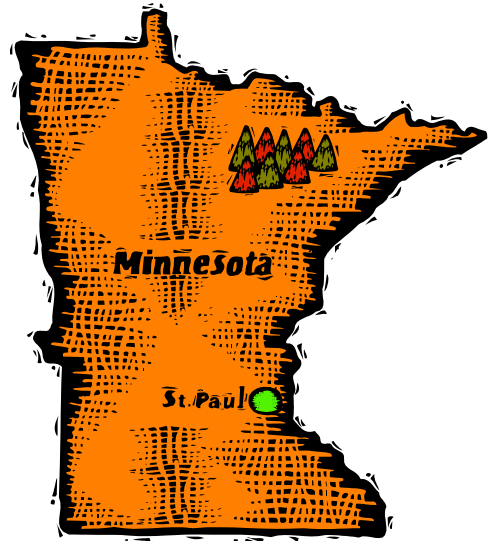
○ Overweight & obese kids are more likely to become obese adults

- More severe!

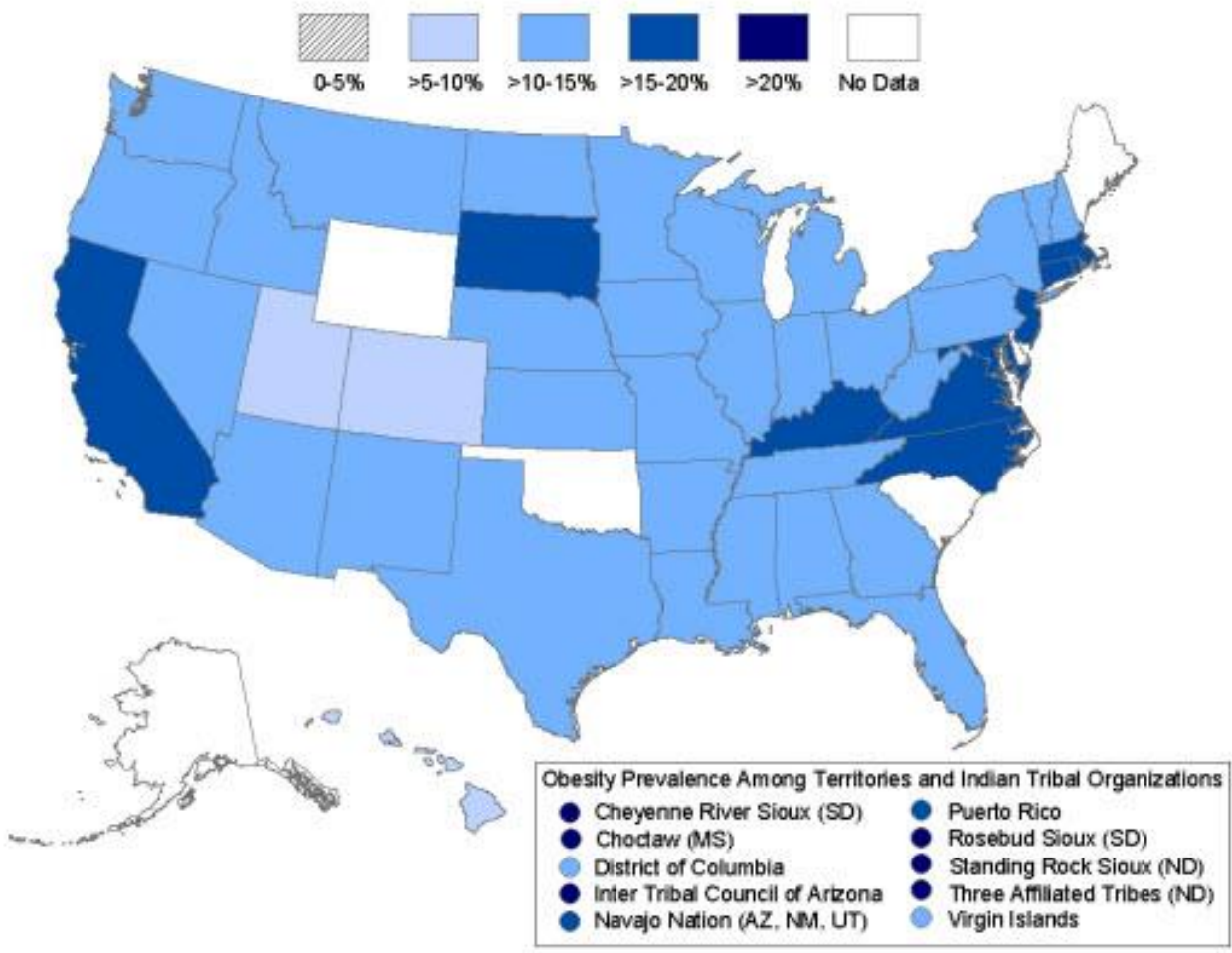
MINNESOTA'S PROFILE

Children (6-11 years) 9th Graders:

- 16.4% were overweight
 - 12.7% were obese
- 15% of boys and 12% of girls are overweight
 - 12% of boys and 6% of girls are obese



2008–2010 STATE OBESITY PREVALENCE AMONG LOW-INCOME CHILDREN AGED 2-4 YEARS



Obesity Prevalence: 1 of 7 (13.4%)

www.cdc.gov/obesity/data/childhood.html

SCHOOL LUNCH PROGRAM CHANGES

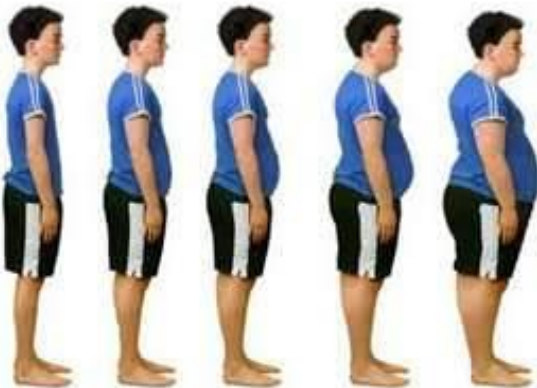
HEALTHY HUNGER FREE KIDS ACT

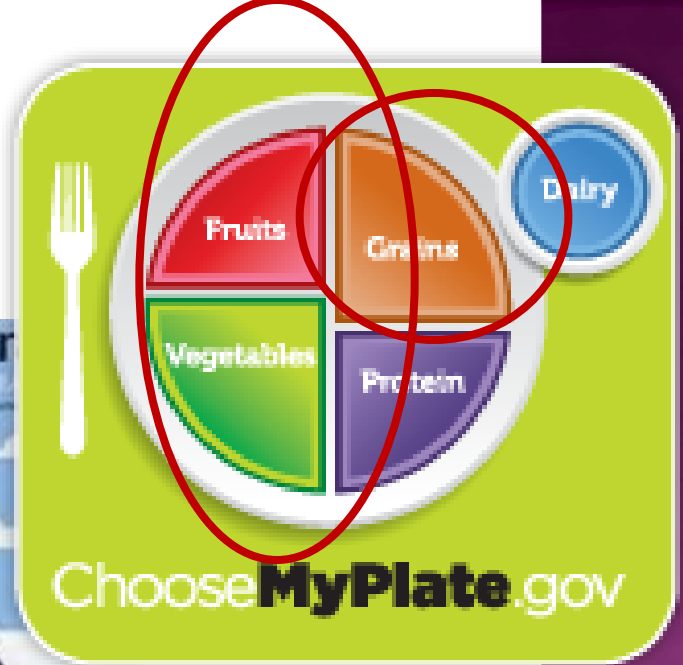
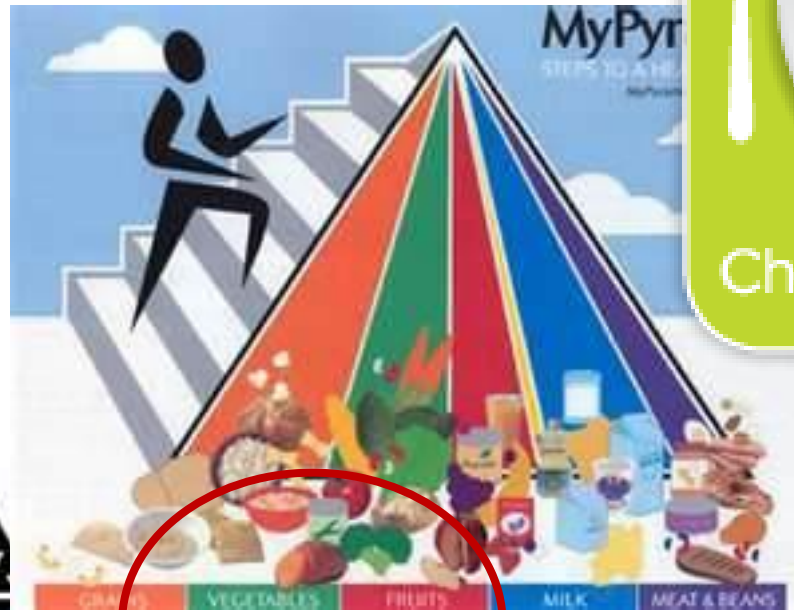
President Obama signed into law the Healthy, Hunger-Free Kids Act in December 2010.

Flyer Distributed in the Osseo School District

“...students must now take at least 1/2 cup of fruit or vegetable with their lunch.”

“Students who do not accept the required fruit/vegetable serving on their tray must be charged more expensive a la carte prices.”





MY JOB RESPONSIBILITIES

○ Education

- Portion sizes
- Breakfast
- Meals
- Sugar sweetened drinks
- Fast food/Going out-to-eat
- Fruits and vegetables
- Junk food intake

○ School lunches



HOW CAN YOU HELP?



THE “CAN” APPROACH

C - Convenient

A - Attractive

N - Normative

C - Convenient

- Healthy choices NEED to be made convenient!
 - To see, to find, to grab and to eat
- Prepackaged healthy entrees and foods
 - Salads, sandwiches, fruits and vegetable sides



C - Convenient

- Top reasons why kids don't eat more apples, oranges or pears?!?!?!?
 - Too big for their mouths
 - Gets stuck in braces
 - Messy to eat (adolescent girls)



C - Convenient



Children took 70% more fruit when it was cut up versus when it was whole.



A - Attractive



A - Attractive



A - Attractive

- ◉ Descriptive names
 - Dinosaur Trees
 - Broccoli
 - Big Bad Bean Burrito
 - Vegetarian burrito



N - Normative

- Healthy choices **NEED** to appear to be a more normal choice.
 - White milk vs chocolate milk



When over 50% of milk is white in cooler, kids were nearly 3x likely to take white instead of chocolate.

N - Normative

Location, Location, Location!!

- Put healthy options at beginning of the lunch line and in front of cash register.



HEALTHY LUNCHROOM RE-DESIGN

- ⦿ http://www.nytimes.com/interactive/2010/10/21/opinion/20101021_Oplunch.html?_r=0

Moving from Can't to CAN

- ⦿ Challenge yourselves!
- ⦿ Get rid of Can't mentality
- ⦿ Focus more on leading kids to what is healthier!

REFERENCES

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