Weight Management

Why is Weight Management so Controversial?

The subject of weight is a complex and controversial public health issue for all individuals. Most people agree that overweight and obesity have risen and that poor nutrition and physical activity habits play an important role. However, not everyone agrees on how to reverse this trend.

Some researchers and clinicians argue that the health risks for overweight and obese individuals are so great that the only way to decrease the risk is weight loss. Others point to study results indicating that overweight/obese individuals can reduce their health risks by becoming physically fit through exercise and healthy food choices, but not necessarily losing weight.

Weight management becomes even more complicated for adolescents because they are experiencing rapid growth and development that may be jeopardized by unsupervised caloric intakes and restrictions reinforced by the media. Pregnant adolescents may face additional health risks for themselves and the developing fetus.

June 2013

California
Nutrition and Physical Activity
Guidelines for Adolescents

Inside this Section

Page

WM-1 Why is Weight Management so Controversial?

WM-2 How are Overweight and Obesity Defined?

WM-3 Who is Affected by Obesity?

WM-3 What Factors Contribute to Obesity?

WM-5 What are Healthy Weight Recommendations?

WM-6 What are Adolescents Doing about Weight?

WM-7 Interventions/Referrals

WM-8 Interventions/Referrals for Pregnant Adolescents

WM-8 Follow-Up

WM-9 Web Links Referenced/Additional Resources

WM-11 References

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How are Overweight and Obesity Defined?

The Body Mass Index (BMI) (see Figure WM-1) is a screening tool that uses weight in relation to height to identify an individual's weight status category. For children and most adolescents, percentile rankings are used to assess weight status based on age and sex in addition to height and weight. The percentile indicates the relative position of the adolescent's BMI number among others of the same sex and age.

To determine an individual's weight category, height and weight measurements need to be obtained from health records or measured at home. For individuals who are pregnant, **pre-pregnancy weight** should be used.

Once height and weight is collected, weight categories can be determined using an online calculator (quick method) or mathematically (if internet is not available).

For individuals 2-19 years of age:

- **Quick method:** Use the BMI calculator for children and teens, which incorporates age and sex. The calculator will automatically provide the percentile and weight category. Growth charts are not needed.

Or

- **If internet is not available:**
  1. Calculate the individual's BMI using the equation in Figure WM-1.

Figure WM-1 Calculating BMI

Formula:
weight (lb) / [height (in)]^2 x 703

Calculate BMI by dividing weight in pounds (lbs) by height in inches (in) squared and multiplying by a conversion factor of 703.

Example:
Weight = 150 lbs
Height = 5'5" (65")
Calculation: [150 ÷ (65)^2] x 703 = 24.96

  2. Use CDC BMI-for-age growth charts to obtain a percentile ranking. Charts for females and males are available in Appendix D.
  3. Use the percentile ranking in Table WM-1 to the weight category to identify the weight category.

Table WM-1 BMI Percentiles and Weight Categories - Ages 2-19 Years

Percentile	Weight Category
Less than the 5th	Underweight
5th to less than the 85th	Healthy weight
85th to less than the 95th	Overweight
95th or greater	Obese

Source: Centers for Disease Control and Prevention[1]

For individuals 20 years of age and older:

- **Quick method:** Use the online BMI calculator for adults. It will automatically provide the BMI and weight category.

Or

- **If internet is not available:**
  1. Calculate the individual's BMI using the equation in Figure WM-1.
  2. Use Figure WM-2 to identify the weight category based on BMI.

Table WM-2 BMI & Weight Categories - Ages 20 Years and Older

BMI	Weight Category
Below 18.5	Underweight
18.5 to 24.9	Healthy weight
25.0 to 29.9	Overweight
30.0 or above	Obese

Source: Centers for Disease Control and Prevention[2]

Consider:

- Body fatness varies greatly within healthy weight individuals. Everyone should eat healthfully and engage in regular physical activity, even if BMI is in the healthy range.
- BMI does not measure the percentage of weight due to bone or muscle, which weighs more than fat. Bigger, more muscular teens can be perfectly healthy.

Overall, BMI is accepted as an effective screening tool. Alone, it is not a diagnostic tool. Adolescents should be referred to their primary health care provider for diagnosis and to assess for underlying medical/psychological conditions that resulted in underweight or overweight/obesity.

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Who is Affected by Obesity?

According to the California Health Survey administered in 2009:[*3]

- About 16.7% of adolescents 12-17 years old were overweight and about 11.9% were obese.
- About 31.8% of males were overweight or obese, versus 25.1% of females.
- African-American (38%) and Latino (38.2%) adolescents are more than twice as likely to be overweight or obese as their White counterparts (17.7%).

What Factors Contribute to Overweight/ Obesity?

Genetics

The term "genetics" refers to the molecular codes that exist in all human beings. Genes are expressed to carry out a variety of functions throughout the body. Research is emerging on how gene expression can be altered by factors outside of the body (epigenetics). For example, a woman's nutritional habits in pregnancy may be able to alter the genes expressed in her fetus.[4]

Some studies show that children who have parents who are obese or overweight are at a higher risk of becoming obese or overweight themselves, even if they are not living in the same home.[5]

Some genes have been identified that may affect appetite or metabolic rate.[6-8] These genes exist in various combinations in humans because they probably offered survival advantage. During periods of food availability, these genes may have increased the efficiency of fat deposition so an individual can survive longer during periods of food insecurity.[9]

The interplay between genetics and environmental causes for overweight and obesity can be confusing. Families may share genetics and behaviors.

Despite the presence of some genetic factors, it is unlikely that genetics are responsible for the obesity epidemic, which correlates with changing lifestyle patterns. Genetics take generations to change (although changes in gene expression are being studied). Even for those who feel they are genetically predisposed, genes do not supersede all other factors in terms of achieving a healthier weight.

Environment

In the context of genetics, "environment" refers to any factor that is not determined by genes.

- **Lack of physical activity:** Many adolescents do not meet physical activity recommendations. Also, many spend much of their day sitting (being sedentary) whether it is at school/work or leisure time spent in front of a television, computer, etc. See the *Physical Activity* section for more information.
- **Poor nutrition:** Many adolescents do not consume healthy foods and consume too many high-calorie and low-nutrient foods, which are often readily available. See the *Adolescent Nutrition* section for more information.
- **Food as a coping strategy:** Adolescents may respond to uncomfortable emotions related such as neglect, abuse, bullying, or poor body image with compulsive overeating or excessive inactivity (e.g. watching too much television). For more information on body image, see the *Body Image and Disordered Eating* section.
- **Built Environment:** Often, community design is not conducive to physical activity and healthy eating, especially in low-income neighborhoods.[10] There may not be safe and inviting opportunities for physical activity. Healthy foods may not be conveniently located or affordable for low-income families. On the other hand, unhealthy foods and beverages are widespread and are heavily marketed to youth through multiple media channels, such as through television commercials, billboard advertisements, social media, etc.[11,12]

  For more information on food marketing to youth, visit the Weight of the Nation: Marketing Food to Children.

[*] Using the 2013 CDC's weight interpretations for children and teens. Data was originally analyzed using older terminology.

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Health Issues

Health issues, such as medical or psychological issues, can interfere with weight in many ways. Some examples are listed below:

- **Asthma/Allergies:** To avoid asthma attacks and other allergies, adolescents may reduce their physical activity levels.
- **Orthopedic problems:** Like asthma, these may interfere with an adolescent's ability to meet physical activity recommendations.
- **Polycystic Ovary Syndrome (PCOS):** One of the most common female endocrine disorders, PCOS can result in weight gain.
- **Prescription drug side effects:** Some drugs affect weight by increasing appetite. Others may have hormonal effects that cause weight gain.

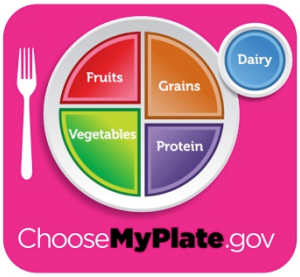
Adolescents with medical or psychological issues should receive ongoing clinical care and counseling as needed. Other adolescents may have underlying and undiagnosed conditions. Refer to an appropriate health care provider if underlying medical or psychosocial issues are suspected.

Contraceptives

Side effects of hormonal contraceptives, such as the Combination oral contraceptive pill, progestin-only contraceptive pill and the Depo-Provera™ injection can include nausea, changes in appetite, bloating and/or weight gain or loss. These may also interfere with breastfeeding. For details, visit the California Department of Public Health's Contraception during Breastfeeding webpage.

If concerned about side effects, adolescents should discuss other effective forms of contraception with their primary health care provider and use another one that meets their needs.

More information about birth control choices is available from Family PACT.



What are Healthy Weight Recommendations?

Interventions for overweight and obese adolescents should not promote the achievement of thinness as the goal or unhealthy weight loss practices (e.g. vomiting, skipping meals/food groups or using pills/powders/laxatives). Diets are often not sustainable and may result in inadequate dietary intake and various deficiencies. These can lead to poor body image, disordered eating and health problems.

Weight management should be healthful and sustainable by improving nutrition and physical activity. Goals should be realistic, so small steps are usually required. Tips for healthy lifestyle changes are listed below:

Redesign the plate. Make half the plate colorful vegetables and fruits, about one quarter whole grains, about one quarter healthy protein and include nonfat or lowfat dairy or other calcium-rich foods. Eat a variety of different foods—for examples, see www.choosemyplate.gov or the MyPlate for Moms handout (also available in Spanish).

Make healthy choices most of the time. Choose foods that are high in fiber and low in sugar, solid fats and salt (sodium). Substitute unhealthy ingredients with a healthier choice. For example, use avocado instead of mayonnaise, nonfat yogurt instead of sour cream and choose 100% whole grain products.

Control portions. At home, serve food on a plate. To avoid overindulging, do not eat straight from the package and do not place serving dishes on the table. Keep healthy foods at eye-level and unhealthy foods out-of-sight. When eating out, share a large entrée, or put some into a to-go box before enjoying your meal.

Rethink your drink. Choose water and nonfat or lowfat milk instead of sugary drinks, like soda, which is a source of hidden calories and extra sugar. Try water chilled or with a slice of lemon or other fruit. For more information on healthy beverages, see the Rethink Your Drink campaign resources.

Balance healthy eating with regular physical activity. Limit screen time, whether it is from a television, computer or phone.

Encourage adolescents who are not meeting physical activity recommendations to gradually improve their physical activity. Help them explore something they enjoy, such as walking with a friend or dancing. It all counts!

Adolescents who are under 18 years of age (and not pregnant) need at least one hour of physical activity daily. The American College of Obstetricians and Gynecologists recommends consulting with a physician on when one can safely begin exercising during and after pregnancy.

For more physical activity recommendations and resources tailored to pregnancy and postpartum, see the *Physical Activity* section.

Achieving weight management goals can be challenging. The amount of adolescent physical activity tends to decrease with age, while consumption of high-calorie/low-nutrient foods and beverages often increases as adolescents spend more time away from home.

A family approach to improving nutrition and physical activity habits has been used successfully in some cases. This approach may not be as effective with adolescents who may spend less time with their family and may resist parental influence. However, for others, this period may increase bonding with family members who can support healthy habits.

Pregnant and parenting adolescents may be especially inspired to engage in such behaviors for a healthier pregnancy and to model these behaviors for their child(ren).

For more information and resources on healthy eating, see *Adolescent Nutrition* section.

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What are Adolescents Doing about Weight?

Adolescents overweight or not, are at risk of using unhealthy weight-loss practices. Weight-control methods used may include: very low-calorie and unbalanced diets, over-the-counter diet pills, diuretics, laxatives, and self-induced vomiting. Adolescents were surveyed about their weight loss practices and the results are shown in Table WM-3:

Table WM-3 Weight Beliefs and Unhealthy Weight Loss Practices among 9th-12th Grade Students in the U.S.

Percentage who…	Females	Males
Described themselves as slightly or very overweight	34.8	23.9
Were trying to lose weight	61.2	31.6
Did not eat for 24 or more hours to lose weight or to keep from gaining weight	17.4	7.2
Vomited or took laxatives to lose weight or to keep from gaining weight during the 30 days before the survey	6.0	2.5
Took diet pills, powders or liquids to lose weight or to keep from gaining weight	5.9	4.2

Source: Youth Risk Behavior Surveillance – United States, 2011[13]

Female and male adolescents indicated they are trying to lose weight and many resorted to unhealthy weight loss practices. Adolescents are vulnerable to such practices because of their changing bodies and social environments. Additionally, they may desire quick weight loss and are surrounded by a marketing environment that advertises extreme thinness as ideal.

Unhealthy weight loss claims abound in such an environment: some promise a large amount of weight loss in a short period of time and yet others suggest that one can eat anything and/or not exercise and still lose weight. For more examples of bogus weight loss claims and to report them, visit the Federal Trade Commission's website.

Some consequences of unhealthy weight loss are described below.

What are the Consequences of Unhealthy Weight Loss Practices?

Weight loss and "dieting" are big business in the United States. The weight loss industry (including diet books, diet fads, diet programs, and other weight loss gimmicks) generates more than $40 billion in income per year. Adolescents are especially vulnerable to the marketing techniques of this industry at great cost to their health.

All adolescents who diet are at risk for compromised health and well-being.

Unhealthy weight loss practices, such as skipping meals, eating very low-calorie and unbalanced diets, using over-the-counter diet pills, diuretics, laxatives, and self-induced vomiting, can result in poor body image, eating disorders and health problems.

Some serious side effects include:

- Delayed sexual development
- Weakness
- Dizziness
- Persistent irritability
- Poor concentration
- Bad breath, hair loss, dry skin
- Permanently stunted growth
- Menstrual irregularities
- Fatigue
- Depression
- Constipation
- Sleep difficulties
- Poor pregnancy outcome

Mental and social consequences may be undetected.

For more information about body image and eating disorders, see the *Body Image and Disordered Eating* section.

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Interventions/Referrals

All Adolescents

Help adolescents appreciate themselves as they are and realize they are not defined by their body type.

Help the client measure their weight and height (if possible). Identify the client's weight category using their current height and weight. If they are pregnant, use the pre-pregnancy weight. See page WM-2.

For healthy weight, encourage the healthy behaviors described on page WM-5 and use the 13 Tips for a Healthy Weight handout to discuss healthy habits.

Help adolescents recognize bogus weight loss claims. Talk about dieting. Discuss why this is not a healthy way to lose weight and often does not work. Use the handouts, The Truth about Dieting and Why Many Diets Do Not Work....

Encourage healthy beverages. Use the Teens, Soda and Weight handout to discuss how drinking soda can affect body weight. Fill an empty 20-oz plastic soda bottle with 1/3 cup of sugar to demonstrate soda's high sugar content.

Review the What Are My Snack Choices handouts with clients who have limited access to healthy snacks.

Use the My Action plan for Weight Management handout to help the client identify choose realistic healthy steps to take.

Follow the directions below if applicable.

Dieting or Poor Body Image

If the client considers herself or himself overweight: This could be a sign of poor body image. Use the BMI calculator (page WM-2) and growth charts to reassure them that their weight is appropriate for their age and height.

If they are not reassured, refer to their primary health care provider. Use the *Body Image and Disordered Eating* section for interventions and referrals.

If the client is dieting or may be using unhealthy weight loss methods: Use The Truth about Dieting and Why Many Diets Do Not Work.... handouts to discourage low-calorie diets.

Refer to the health care provider or a Registered Dietitian for nutrition assessment and counseling or Medical Nutrition Therapy.

Underweight

Refer to the primary health care provider.

Overweight or Obese

Refer to the primary health care provider.

Adolescents who desire weight loss should be referred to a Registered Dietitian or health care provider for nutrition assessment, counseling, and treatment.

Find a Registered Dietitian!
To find a registered dietitian nearby, ask the health care provider or use the Academy of Nutrition and Dietetics' Find a Registered Dietitian Locator.

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Interventions/Referrals for Pregnant Adolescents

For adolescents who are pregnant, Table WM-4 is a reference for appropriate weight gain.

Table WM-4 Pregnancy Weight Gain Recommendations

Prepregnancy BMI	BMI (kg/m^2)	Total Weight Gain (lbs)
Underweight	Less than 18.5	28-40
Normal weight	18.5-24.9	25-35
Overweight	25.0-29.9	15-25
Obese	Greater than or equal to 30.0	11-20

Source: Institute of Medicine, Institute of Medicine (US) and National Research Council (US) Committee to Reexamine IOM Pregnancy Weight Guidelines, 2009 [14]

Do not advise the client to lose weight. Even overweight adolescents need to gain weight in pregnancy.

If you suspect that weight gain or loss differs from what is in this table, refer the client to her primary health care provider who will evaluate.

The handouts provided in this section can be used to provide education.

Refer to the California WIC Program!
Women, Infants and Children Program (WIC)
WIC helps eligible pregnant women, new moms, infants and children up to age 5 to stay healthy, eat well, and be active.

WIC provides:

- Healthy foods
- Nutrition and health education
- Education and support for breastfeeding moms
- Help to find health care and other services

WIC has offices across the state. Many offices are open in the evenings and on Saturdays.

To learn more and find a local WIC office, visit the California WIC website. Information is also available in Spanish.

Or call toll-free 1-888-WIC-WORKS (1-888-942-9675).

Follow-Up

Review the My Action Plan for Weight Management handout with the client to determine if goal(s) for behavior change were met.

If the client did not make any changes, ask what may have prevented them from doing so. Validate their feelings. Review the importance of weight management and ask about which benefits (if any) are important to the client. Together, identify strategies for removing or reducing barriers.

If the client made changes but still falls short of the recommended intake, provide praise and encouragement for the changes that were made. Together, revise their action plan (change or add goals).

If the client has made changes and achieved the recommendations, provide praise and encouragement for the changes that were made. Help the client choose a new action plan from another section in the Guidelines.

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Web Links Referenced/Additional Resources

Title	Resource Type	URL
Measuring Height and Weight Accurately At Home	Webpage	www.cdc.gov/healthyweight/assessing/bmi/childrens_bmi/measuring_children.html
BMI Calculator for Children and Teens	Webpage - interactive tool	http://apps.nccd.cdc.gov/dnpabmi/
About BMI for Children and Teens	Webpage	www.cdc.gov/healthyweight/assessing/bmi/childrens_bmi/about_childrens_bmi.html
Adults BMI Calculator	Webpage - interactive tool	www.cdc.gov/healthyweight/assessing/bmi/adult_BMI/english_bmi_calculator/bmi_calculator.html
About BMI for Adults	Webpage	www.cdc.gov/healthyweight/assessing/bmi/adult_BMI/index.html
Weight of the Nation: Marketing Food to Children	Webpage	http://theweightofthenation.hbo.com/themes/marketing-food-to-children
Polycystic ovary syndrome (PCOS) fact sheet	Webpage	http://womenshealth.gov/publications/our-publications/fact-sheet/polycystic-ovary-syndrome.cfm
Family Planning and Contraception during Breastfeeding	Webpage	www.cdph.ca.gov/HealthInfo/healthyliving/childfamily/Pages/FamilyPlanningandContraceptionDuringBreastfeeding.aspx
Family PACT: Choosing a Birth Control Method	Webpage	www.familypact.org/Clients/choosing-a-birth-control-method
United States Department of Agriculture's website: Choose My Plate	Website	www.choosemyplate.gov
MyPlate for Moms	Document (PDF)	www.cdph.ca.gov/programs/NutiritionandPhysicalActivity/Documents/MO-NUPA-MyPlateforMoms.pdf
MyPlate for Moms (Spanish)	Document (PDF)	www.cdph.ca.gov/programs/NutiritionandPhysicalActivity/Documents/MO-NUPA-SP_MyPlateHandout.pdf
California *Rethink Your Drink Campaign* materials (two websites) Shows the hidden sugar in common beverages	Webpages	www.californiaprojectlean.org/ryd/default.html www.cdph.ca.gov/programs/wicworks/Pages/WICRethinkYourDrink.aspx
Youth Risk Behavior Surveillance – United States, 2011	Document (PDF)	www.cdc.gov/mmwr/pdf/ss/ss6104.pdf
Federal Trade Commission: Bogus Weight Loss Claims	Webpage	www.ftc.gov/bcp/edu/microsites/redflag/falseclaims.html
13 Tips for a Healthy Weight	Document (PDF)	www.cdph.ca.gov/HealthInfo/healthyliving/nutrition/Documents/MO-NUPA-TipsForAHealthyWeight.pdf
The Truth about Dieting/Why Many Diets Do Not Work …	Document (PDF)	www.cdph.ca.gov/HealthInfo/healthyliving/nutrition/Documents/MO-NUPA-Dieting.pdf
Teens, Soda and Weight	Document (PDF)	www.cdph.ca.gov/HealthInfo/healthyliving/nutrition/Documents/MO-NUPA-Soda.pdf

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What are my Snack Choices?	Document (PDF)	www.cdph.ca.gov/HealthInfo/healthyliving/nutrition/Documents/MO-NUPA-SnackChoices.pdf
My Action Plan for Weight Management	Document (PDF)	www.cdph.ca.gov/HealthInfo/healthyliving/nutrition/Documents/MO-NUPA-WMActionPlan.pdf
The Dietary Guidelines for Americans	Document (PDF)	www.cnpp.usda.gov/Publications/DietaryGuidelines/2010/PolicyDoc/PolicyDoc.pdf
SuperTracker Free tool for nutrition and physical activity tracking	Webpage - interactive tool	www.choosemyplate.gov/SuperTracker/createprofile.aspx
Celebrating Diversity: Approaching Families through Food	Document (PDF)	www.mchlibrary.info/pubs/pdfs/CelebratingDiversity.pdf
California Food Guide: Fulfilling the Dietary Guidelines for Americans	Webpage	www.dhcs.ca.gov/formsandpubs/publications/Pages/CFGTableofContents.aspx
California Food Guide: Fulfilling the Dietary Guidelines for Americans – Life Cycle: 9-18 Year Olds	Document (PDF)	www.dhcs.ca.gov/dataandstats/reports/Documents/CaliforniaFoodGuide/12.9-18YearOlds.pdf
Recipes/cookbooks for adolescents	Webpage	www.cdph.ca.gov/programs/NutiritionandPhysicalActivity/Pages/EasyMealsandSnacks.aspx
Farmers markets search tool	Webpage - interactive tool	http://apps.ams.usda.gov/FarmersMarkets/
Worksite nutrition and physical activity	Webpage - resources	www.cdph.ca.gov/HealthInfo/healthyliving/nutrition/Pages/WorksiteNutritionandPhysicalActivity.aspx
Nutrition and Physical Activity Initiative - Maternal, Child and Adolescent Health	Webpage	www.cdph.ca.gov/programs/nutiritionandphysicalactivity/Pages/default.aspx
Comprehensive website for adolescent girls' health	Website	www.girlshealth.gov/
Los Angeles obesity campaign website Includes an interactive calculator to show the amount of sugar in sugary drinks and costs of sugary drinks	Website	www.choosehealthla.com/
Weight Management and Obesity Resource List A resource list of websites, with information for adults and adolescents	Document (PDF)	www.nal.usda.gov/fnic/pubs/weight.pdf
Understanding Nutrition Labels Tools to teach how to read nutrition labels	Webpage	www.nutrition.gov/shopping-cooking-meal-planning/food-labels

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The Truth about Dieting

What is Dieting?

Dieting is not eating a certain type of food or eating a very low number of calories. For example, some popular diets may tell you not to eat "carbs." They often promise you quick and easy results.

Health Effects of Dieting

Dieting is not a healthy way to lose weight and can cause health problems. Here are some possible effects:

- Bad breath
- Yellow teeth
- Hair loss
- Dry skin
- Constipation
- Growth problems
- Delayed sexual development
- Irregular periods
- Feeling weak and tired
- Feeling dizzy
- Feeling sad
- Feeling irritated often
- Poor concentration
- Sleep problems
- **If you are pregnant, there can be serious health problems for you or your baby.**

For a Healthy Weight the *Healthy* Way:

- Eat plenty of colorful vegetables and fruits
- Choose whole grains most of the time
- Eat or drink nonfat or lowfat dairy and calcium foods
- Go lean or lowfat with your protein foods
- Quench your thirst with water, not soda
- Be physically active every day

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Why Many Diets Do Not Work …

When you do not give your body the energy that it requires, it thinks you are starving.

- Then, your body slows down how fast it burns calories.
- So rather than helping you to lose weight, very low-calorie diets can actually make it **easier to gain weight.**

If you do not give your body adequate fuel, it will resort to using its own supplies.

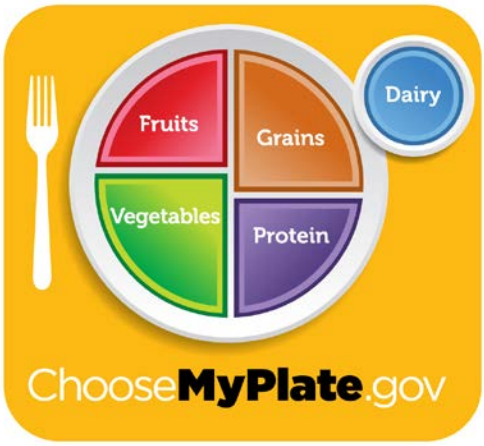
- Instead of burning only fat, it will also burn muscle tissue, which is the very thing you want to keep! Burning muscle tissue will make you feel tired, depressed, and without energy.
- You will have less energy to be active, which is one of the best ways to keep your body toned, strong and healthy.
- Popular diets are often not balanced. You may lose or not get enough of the nutrients you need. **Your hair, nails, skin and teeth may suffer and look sickly.**

Dieting often can make it harder to lose weight.

- Your body may get used to fewer calories and slow everything down.
- Trying to change your weight too often is not good for your health. It may make it harder for you to keep a healthy weight.
- **If you are pregnant, dieting can be even more dangerous.**

The bottom line: It's not a diet, it's a lifestyle!

- Keep a healthy weight by eating **balanced meals and being physically active every day.**
- Make half your plate vegetables and fruits, about one quarter grains and one quarter protein. **Use the MyPlate icon to guide you.**
- Choose foods that are high in fiber and low in sugar, solid fats and salt (sodium).
- For tips and free nutrition and physical activity trackers, visit www.choosemyplate.gov .



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13 Tips for a Healthy Weight

1. Do not go on a very low-calorie diet!

When your body does not get the calories it needs, it slows down how fast it burns the calories. And you might get so hungry you eat a lot at once (binging). So rather than helping you to lose weight, fad diets or very low-calorie diets can make it easier to gain weight.

2. Try not to skip meals, especially breakfast.

When you skip meals, you put stress on your body. You may feel tired and grumpy. When you are very hungry, you may eat more later, especially foods that are not healthy.

3. Eat foods from all the food groups.

Eating a variety of foods gives your body what it needs -- energy and nutrients -- to look good and feel great. For more information, visit www.choosemyplate.gov .

4. Squeeze in vegetables and fruits throughout your day.

- When you are thirsty, grab some fruit instead of soda or juice.
- Grab a fruit or vegetables as a snack-to-go.
- Eat cut-up, fresh vegetables like broccoli with a yogurt dip for a snack or at parties.
- Make half your plate vegetables and fruits, like in the picture at the top of this page.
- Add spinach and tomatoes to your sandwiches. Use avocado instead of mayonnaise.
- Try fresh salsa or avocado instead of dressing on salads.
- Eat your vegetables at dinnertime.

5. Keep healthy foods ready for snacks and to take with you.

That way when you are hungry or on the go, you will have something prepared. You will not have to rely on whatever is available, which may not be healthy. Also, you can save money!

Some ideas for healthy snacks:

- Carrot sticks (or other vegetables) with hummus or peanut butter
- Your favorite fruit, fresh or dried
- Plain popcorn
- Hard-boiled egg
- Nonfat or lowfat yogurt with fruit
- Nuts, such as slivered almonds or pistachios
- Whole wheat tortilla with nonfat or lowfat cheese
- Keep water with you in a reusable bottle

6. Enjoy your favorite foods. Just enjoy them a little at a time.

When you deny yourself something you like to eat, you may spend time and energy thinking about it. Later, you may end up eating more than you would have if you had just eaten a little of it in the first place. Moderation is best.

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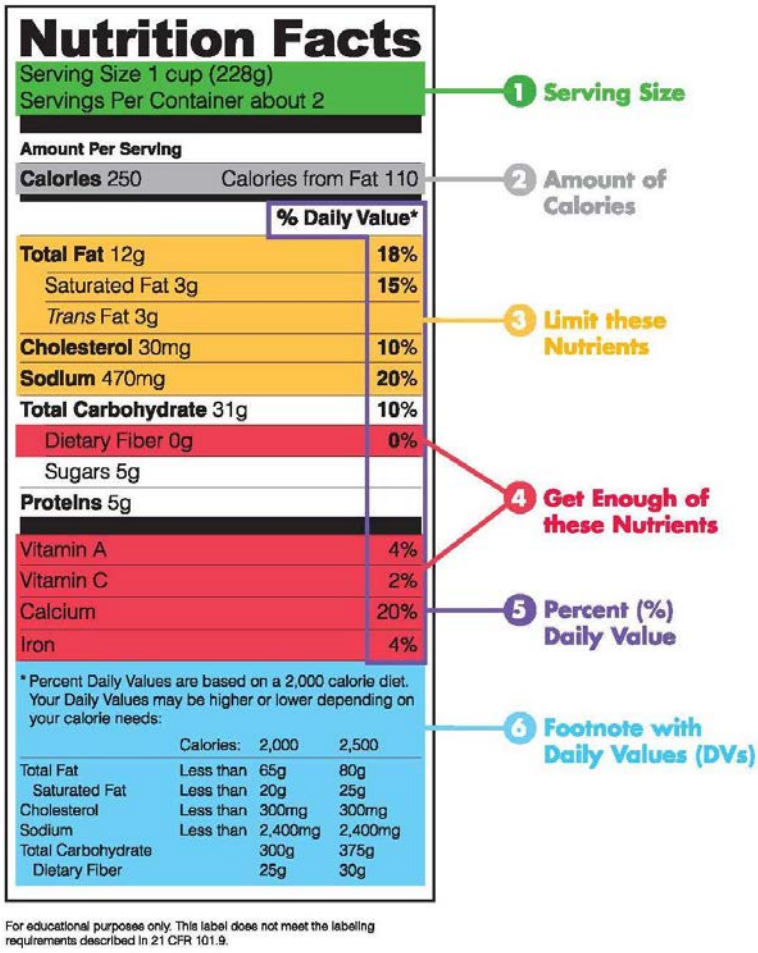
7. Read nutrition labels.

Choose foods with less saturated and trans fat, salt (sodium) and sugar. Note that Total Fat can include healthy fats and oils (low in saturated fat and no trans fat, such as safflower and olive oil).



8. Listen to your body's hunger cues.

- Eat when you are hungry.
- Stop eating when you are full. Not sure if you are still hungry? Wait 20-30 minutes. If you are still hungry, then serve yourself another small portion.
- Try not to eat when you really want something else.
  - Sleep when you are tired.
  - Be physically active when you need energy.
  - Breathe deeply when you are stressed.
  - Do an activity you enjoy when you are bored.

9. Do not trick your body into thinking you are hungrier than you are.

- Do not leave prepared food at the table.
- Do not put food on very large plates.
- Serve yourself the correct portion size. You can always take more later.

10. Be mindful while you eat!

Eat slowly and consciously, savoring each bite. Try not to mix eating with other activities, like watching TV or using other electronics. This can help you from overeating without realizing it. If you have to snack while watching TV, choose healthy snacks like plain popcorn, pretzels, fruit salad, or vegetables with a yogurt dip.

11. Have fun moving your body.

Being physically active — whether in sports, dancing in your room, taking a walk — is a great way to feel and look good. Physical activity also helps reduce stress.

12. Try to get enough sleep.

Getting enough sleep can help you focus in school, give you energy and may even help you have a healthier weight! Most teens need about 9 hours of sleep every night.

13. Show yourself some love!

Appreciate your body for all that it does for you. Discover your unique beauty, inside and out!

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Part I - What are my Snack Choices?

Every day, you make choices about what you eat. What snack options do you have? Assess your environment —at school, home, and any other place you usually eat. Write down the healthy foods you find to snack on. As you do, list each option under its food group. Check out www.choosemyplate.gov for more information on food groups!

		Vegetables	Fruits	Grains	Protein	Dairy	Healthy Beverages	Combination Foods
School	Cafeteria							
	Vending Machine							
	School Store							
	Other							
Home	Refrigerator							
	Freezer							
	Cabinet/ Pantry							
Other Places	Convenience Store							
	Fast Food							
	Other							

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Part II - What are my Snack Choices?

Now that you know what your snack options are, these may - or may not - be all the food choices you need. This is your chance to put a plan in place to expand your food world and to get the food group snacks you want or need.

Consider Your Options. Of all the options you have now, what snacks would you choose today or tomorrow? Write down your choices and why they are best for you.

Choice	Why?

Plan for Change: What would be easy to change? What would be hard to change?

	At Home	At School	Other Places
Easy			
Hard			
Impossible			

Find **Partners for Change** who can help you.

At Home	At School	Other Places

Make a Difference:
Share your plan of action with your family, friends, teachers and others who can help you.

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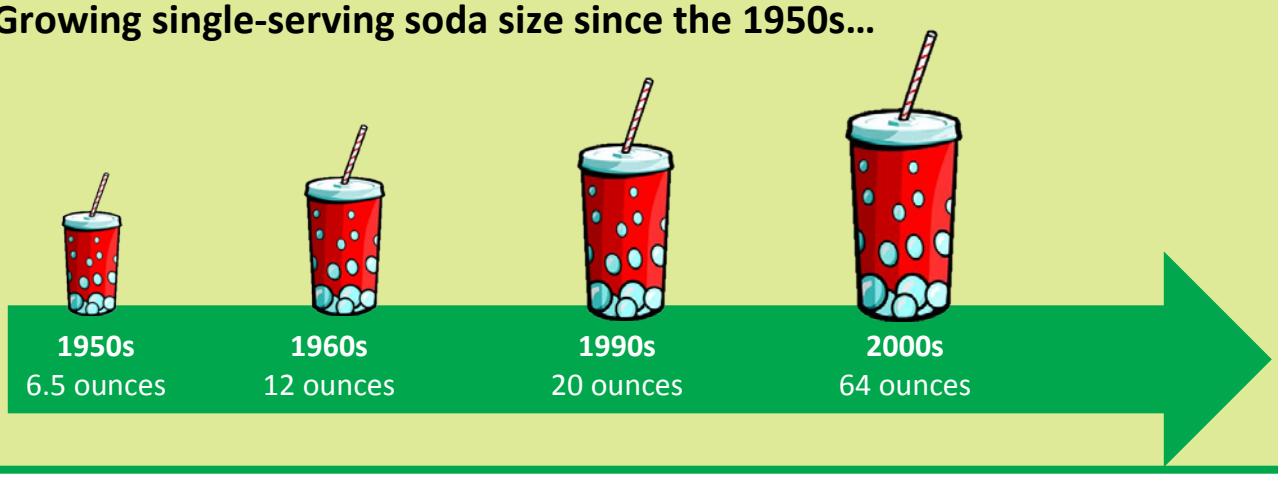
Teens, Soda and Weight

Did you know that sugary drinks, such as soda, are often a source of hidden calories and sugar?

Amount of regular (non-diet) soda an average teen drinks each day

Year	Boys (12-18 years old)	Girls (12-19 years old)
1977-78	7 ounces	6 ounces
1987-88	12 ounces	7 ounces
1994-96	19 ounces	12 ounces

Growing single-serving soda size since the 1950s…



How can soda or other sugary drinks affect your weight?

It takes about an extra 3,500 calories to make 1 pound of body weight.

- One 12-oz can of soda is about 150 calories. One can of soda per day for one year is about 55,000 calories. Therefore, one 12-oz soda per day translates into about 16 pounds of extra body weight over one year!
- One 20-oz bottle is about 250 calories. One bottle of soda per day for one year is about 91,000 calories. This translates into about 26 pounds of extra body weight over one year.

A 20-ounce soda has about 22 packets of sugar! You would not eat that much sugar, so why drink that many?

Find out how much sugar you are drinking and how much money you are spending on sugary drinks: http://www.choosehealthla.com/multimedia/sugar-calculator/ .

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My Action Plan for Weight Management

Name: _____

Check the box for each step you are doing now to manage your weight. Check the boxes for the steps you plan to take. Write down other ways you plan to manage your weight.

Things that I can do to manage my weight:	Am Doing	Steps I Will Take
I will make a snack change (from high-sugar/high-fat snacks to low-sugar/low-fat snacks)	☐	☐
I will increase my fruit and vegetable intake by _____per day.		
Instead of skipping breakfast, I will try some new ideas for quick and easy morning meals.	☐	☐
I will reduce my soda consumption by _____cans or _____bottles per day.	☐	☐
I will cut back on the time I spend watching television, going online or playing video games by _____hours per day.	☐	☐
When eating at my favorite fast food restaurant, I will look at the calories per serving to make healthier choices.	☐	☐
Instead of eating fast food, I will plan a meal and prepare it at home.	☐	☐
I will be physically active daily.		
My ideas for managing my weight:		
_____	☐	☐
_____	☐	☐

Signature: _____ Date: _____

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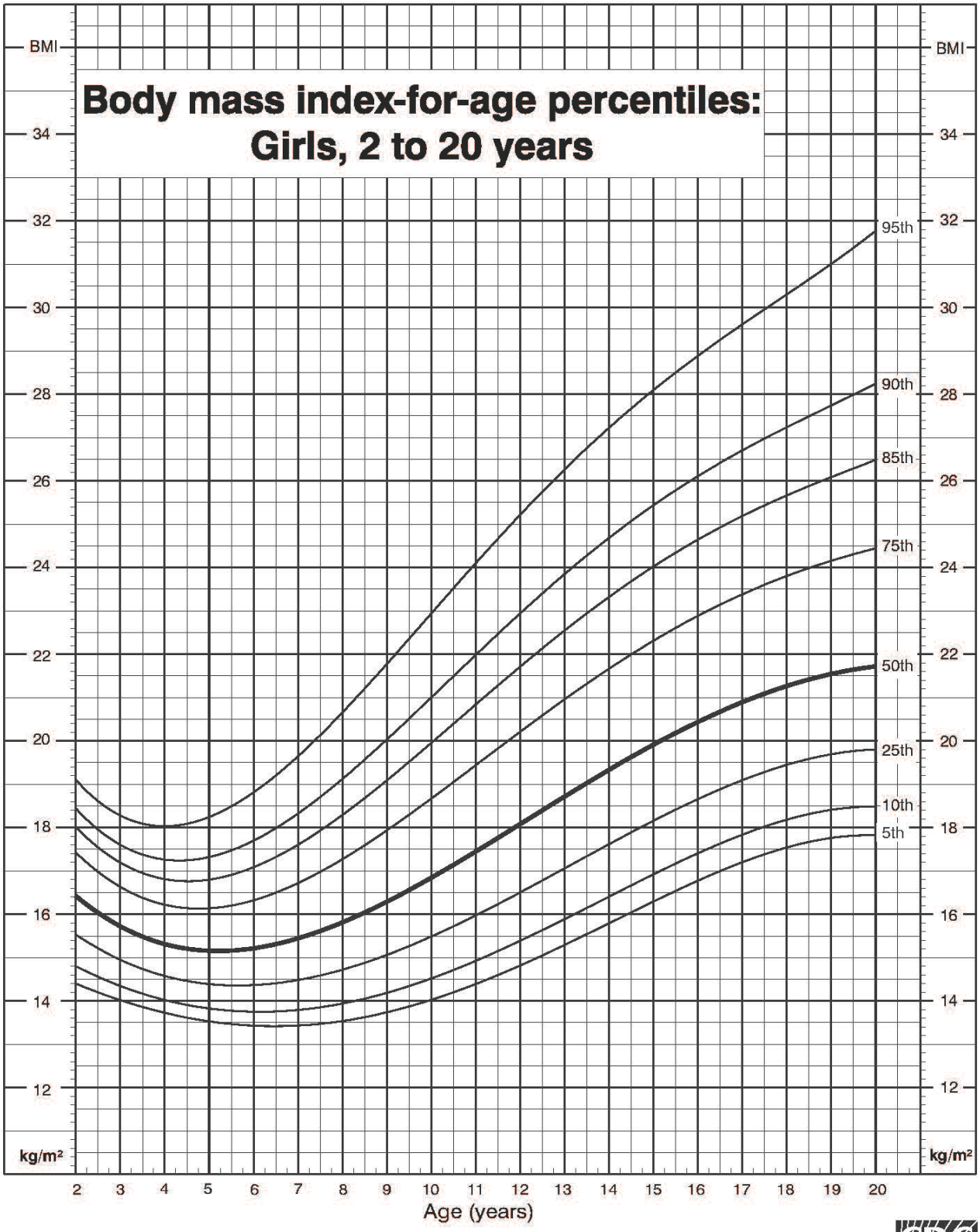
Appendix D

CDC Growth Charts: United States



Published May 30, 2000.

SOURCE: Developed by the National Center for Health Statistics in collaboration with the National Center for Chronic Disease Prevention and Health Promotion (2000).

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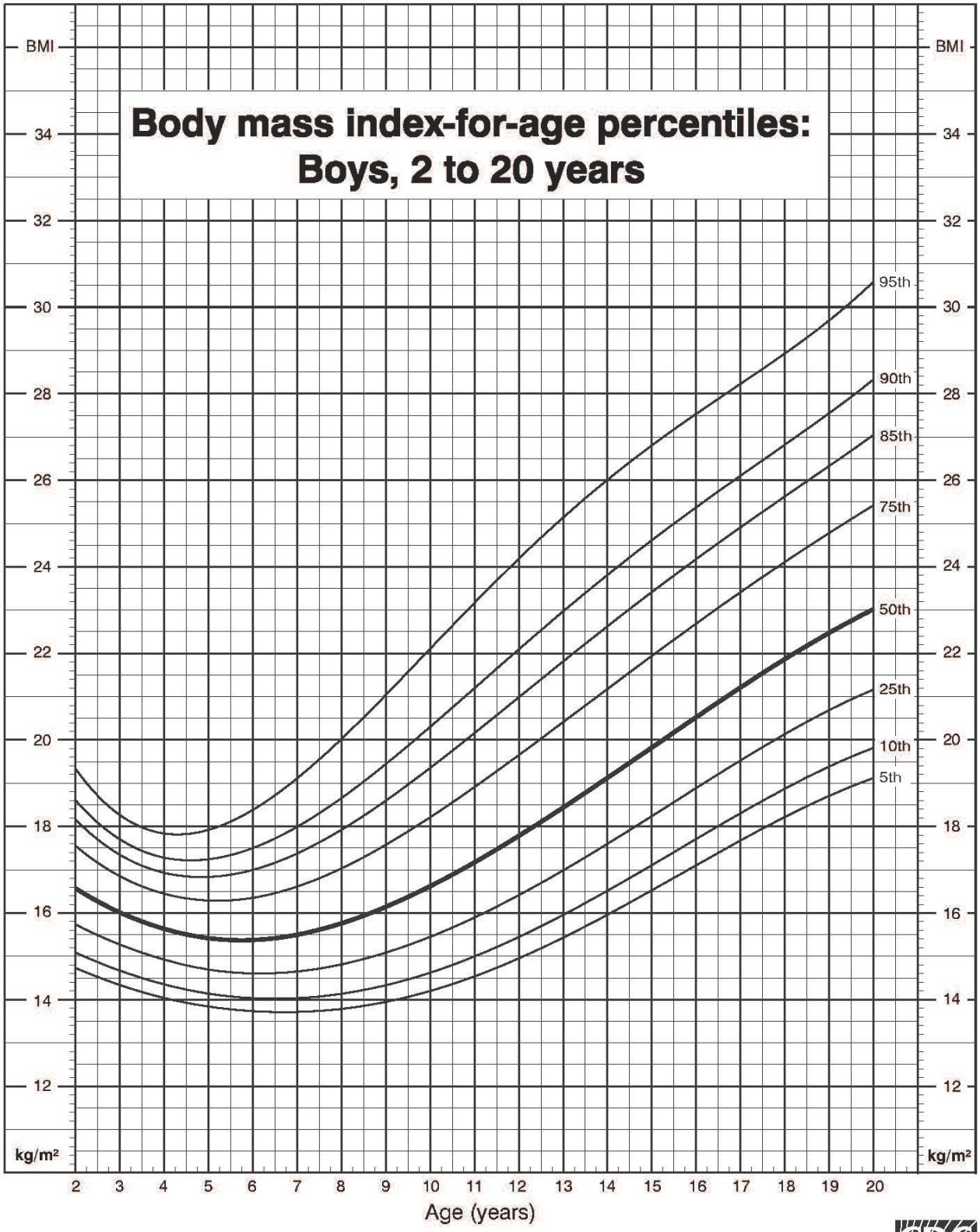
CDC Growth Charts: United States



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