Jump IN for Healthy Kids is a collective effort to reduce childhood obesity in central Indiana.

Obesity is a serious health threat for too many of our children. Because the challenge is so complex, no individual, program or organization can single-handedly tackle this issue. But working together, with a shared vision, common goals and measurable outcomes, a community of diverse stakeholders can make a difference. That’s what’s happening in central Indiana.

Jump IN for Healthy Kids is leading this effort: a community-wide initiative of civic, academic and business groups working together to reduce childhood obesity in central Indiana. Jump IN will be the catalyst for evidence-based best practices that will measurably improve our children’s health.

JUMP IN AS CONVENER, CONNECTOR, FACILITATOR

Jump IN connects everyone in the community: schools, families, employers, health care providers, nonprofits and faith-based organizations. The whole community is involved, because we all must work together to address the problem.

Sustained improvement requires a change in culture — something that even the best individual programs cannot do on their own. Jump IN for Healthy Kids will serve as a catalyst to achieve the vision that central Indiana children and their families will enjoy and experience a healthy lifestyle within a community environment that supports health, wellness and vitality.

Although Jump IN is focusing its initial efforts on central Indiana, we will freely share research, materials and data with other groups in Indiana working to set up similar initiatives in their areas.
MEASURING THE NEED

Indiana has the eighth-highest percentage of children who are obese, and trends continue to move in the wrong direction:

- One in three Hoosier children is overweight or obese, and childhood obesity rates have tripled in the last three decades.
- 60-65 percent of obese children will grow up to become obese adults.
- Medicaid data show that annual health care costs for an obese child average $6730 – nearly three times the average cost for all children. Indiana spends $1.6 billion per year in overall obesity-related medical costs — and the figure is rising.
- Nationally, estimates of obesity-related costs for decreased productivity top $225 billion per year.

Evidence strongly links obesity to Type 2 diabetes, cardiovascular disease and some types of cancer, among other health problems. The effects of obesity on individual quality of life, academic achievement, mental health and other measures are equally sobering. And, obesity often is a lifelong condition that progresses into adulthood and becomes a common thread afflicting families for generations. Together we must do more to influence the factors that lead to increasing obesity rates — for our children and for the future of our community.

COMPREHENSIVE ANSWERS TO A COMPLEX ISSUE

The factors that have led to this obesity epidemic are varied and complex. Jump IN for Healthy Kids will target its efforts in six focus areas that work together to achieve better health outcomes for children:

PUBLIC AWARENESS CAMPAIGN – Educating the community about the problem of childhood obesity in Indiana and the healthy behaviors needed to combat it.

SHARED POLICY AGENDA – Advocating at the local, state and federal levels for policy changes that will lead to healthier communities.

SCHOOL INITIATIVES – Helping schools improve nutritional offerings and provide sufficient physical activity in the setting where kids work, learn, play and develop lifelong habits.

EMPLOYER WELLNESS – Working with employers to ensure their wellness programs provide consistent counseling, resources and incentives to support healthy families.

CLINICIAN TRAINING – Educating health professionals across many disciplines to candidly and appropriately discuss healthy weight and lifestyles issues with children and their families.

INTEGRATED COMMUNITY-BASED HEALTH PILOTS – Providing neighborhood-centered resources that enhance education, health care, nutrition and fitness.
ENSURING SUCCESS – REPLICATING BEST PRACTICES

In places as diverse as Mississippi, Philadelphia, California, West Virginia, New York City and New Mexico, coordinated community initiatives have begun turning the trend lines. For example:

- **PHILADELPHIA** adopted better school nutrition policies – such as policies banning deep fryers in school kitchens – and required additional physical activity for students. Stores in low-income neighborhoods became partners and increased offerings of fresh produce. Overall childhood obesity rates dropped 4.7 percent in Philadelphia between 2006 and 2010. Rates for African-American boys plunged 7.6 percent, while those for Hispanic girls were lowered 7.4 percent during the same period.

- **MISSISSIPPI** cut the percentage of elementary school students who are overweight or obese from 43 percent to 37.7 percent in six years. School-based strategies include nutrition standards, wellness policies, health education, physical education, physical activity breaks and walking/bicycling to school. Faith-based communities encourage healthy meals and physical activity.

- **NEW YORK CITY** helped make fresh produce available in neighborhoods and required calorie information on menus. Guidelines help architects and urban designers create built environments that support active lifestyles. Child care centers are required to improve nutrition and nutrition education and increase physical activity. Obesity rates among the city’s K-8 students dropped 5.5 percent over four years.

- **CALIFORNIA** removed sugar-sweetened beverages from schools, restricted unhealthy snacks in schools, and required calorie labels on chain restaurant menus. Other tactics included BMI screening, healthy-lifestyle education and Complete Streets initiatives. Childhood obesity rates dropped in 26 counties between 2005 and 2010.

- **NEW MEXICO** piloted a program that now is rolling out across the state. Residents are encouraged to walk or bike to school, work and shopping. Schools serve healthier meals, snacks and drinks and open their facilities for active recreation by community members. Obesity rates for New Mexico third-graders dropped 5.3 percent from 2010 to 2012.

- **WEST VIRGINIA** instituted wellness policies and supported healthy eating, physical education and physical activity in public schools. The state began conducting BMI assessments in public schools in 1998 and created an Office of Healthy Lifestyles. Obesity among the state’s fifth-graders dropped 8.6 percent in six years.

Jump IN will work with our community partners to bring these and other evidence-based best practices to improve our children’s health.
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