

# PEOPLE WITH DISABILITIES

## Healthy Weight and Obesity Prevention in Schools



### What Schools can do to Include Children with Disabilities

School administrators, teachers, and school health professionals have a vital role in implementing steps to help combat obesity among people with disabilities and assist them in achieving healthy weight and an improved quality of life.

### What is Healthy Weight?

Healthy weight is the weight appropriate for a person's height and is based on a balance of calories consumed and calories used. People with disabilities may have difficulty achieving and maintaining a healthy weight. While most who are not at a healthy weight are usually overweight or obese, some are underweight. This brief addresses the issue of disability and obesity.

### Considerations for School Initiatives

- **Ensure school wellness programs include children with disabilities.**
- **Provide training for teachers and other school personnel** on how to include children with disabilities in physical activity programs, recess, and active learning.
- **Include healthy eating/nutrition goals and physical activity goals in Individualized Education Plans (IEPs).**
- **Involve parents/families in healthy weight initiatives.**

### Potential Obesity Related Risk Factors in Children with Disabilities/Special Needs

Factors to consider may include:

- A More Complex Relationship with Food
  - Trouble chewing or swallowing, which can lead them to eat softer, more processed, and frequently less nutritious foods
  - An intense aversion to certain textures, temperatures, flavors or colors, limiting food choices
  - Use of food as means to express affection or win compliance
  - Peer influence that might negatively impact food choices or consumption
- Barriers to Exercise
  - May tire more easily
  - May be adversely affected by heat/cold
  - Significant mobility issues
  - Need for modifications to be able to participate in fitness activities or a lack of facilities or programs such as adaptive physical education
  - High cost of specialized programs and equipment



- Medications
  - Many medications, particularly certain antipsychotics, antidepressants, anticonvulsants, neuroleptics, and mood stabilizers are associated with weight gain
- Family Stress
  - Crowded schedules with medical and therapeutic appointments
  - Extra transportation needs for activities and services
  - Extra care-giving duties at home
- Health Disorders
  - Genetic disorders with obesity as clinical features: Prader-Willi syndrome, Bardet-Biedl syndrome, Cohen syndrome, Borjeson syndrome, Carpenter syndrome, and MOMO syndrome
  - Other: Down syndrome, spina bifida, and autism spectrum disorders (ASD) - conditions that place children at particular risk for obesity
- Perceived Risk
  - Parents, teachers, pediatricians, and coaches may feel that activities will be too difficult, too dangerous, or too disappointing
- Social Isolation
  - May have fewer friends and opportunity to play
- Screen Time
  - Children participate in sedentary diversions like television, video games and computers in lieu of physical activity

## Did You Know?

- Disability affects more than 56 million people in the United States.
- There are many types of disabilities, such as those that affect a person's: hearing, vision, movement, thinking, remembering, learning, communicating, mental health, and social relationships.
- Population estimates of children with disabilities in the U.S. differ according to the survey. The range of current estimates is 5-13%.
- Obesity has risen dramatically among children and adolescents, with their rate almost tripling since 1980.
- Obese children are more likely to be obese adults.
- Over one-third of adults in the United States are obese, a 122% increase from 1980.
- Adults with disabilities and chronic conditions receive fewer preventative services and are in poorer health than individuals without disabilities who have similar health conditions.
- Annual health care expenditures associated with disability are estimated at \$400 billion.
- Obesity-related health care expenditures for adults are estimated at \$147 billion annually, with annual per person spending almost \$1,500 more for someone who is obese compared with someone with a healthy weight.

***School-aged children with disabilities may need to overcome complex challenges to achieve a healthy weight, such as barriers to exercise, relationships with food, social, and family pressures.***

**CDC funds activities to evaluate physical activity and healthy weight management for people with limb loss/limb difference, paralysis, and Intellectual Disabilities.**

### RESEARCH:

CDC conducts research that describes rates of obesity in people with disabilities, including type of disability. Further research, testing, and evaluation could lead to developing more valid and reliable ways to accurately assess, measure, and/or reduce obesity and its related health risks among populations with disabilities.

### COLLABORATION:

Public health approaches that can reach large numbers of people in multiple settings—such as child care facilities, workplaces, schools, communities, and health care facilities—can help people make healthier choices.

**For more information,** please contact Centers for Disease Control and Prevention (CDC)  
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