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Center for State Health Policy

New Jersey Childhood Obesity Survey

*Chartbook | Camden
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About Rutgers Center for State Health Policy

Rutgers Center for State Health Policy (CSHP) is a policy research center dedicated to helping leaders and decision-makers examine complex state health policy issues and solutions. The Center, established in 1999, is an initiative within Rutgers Institute for Health, Health Care Policy and Aging Research, and its mission is to inform, support, and stimulate sound and creative state health policy in New Jersey and around the nation.

The Center's current research focus includes:

- Access to care and coverage,
- Health systems performance improvement,
- Long-term care & support services,
- Health & long-term care workforce,
- Obesity prevention.

In order to accomplish its mission, CSHP marshals the expert resources of a major public research university to:

- Identify and analyze emerging state health policy issues,
- Conduct rigorous, impartial research on health policy issues,
- Provide objective, practical, and timely evaluation of programs and policy choices,
- Convene the health policy community in a neutral forum to promote an active exchange of ideas on critical issues,
- Educate current and future health policy makers, researchers, and administrators,
- Promote the practical application of scholarship in health policy,
- Foster wide understanding of health policy choices.

CSHP was established with a major grant from the Robert Wood Johnson Foundation. The Center is also supported by grants and contracts from other foundations, public agencies and the private sector. A selection of these funders includes: the Commonwealth Fund, the Agency for Healthcare Research & Quality, the NJ Department of Human Services, the NJ Department of Health & Senior Services, and the NJ Department of Banking & Insurance.

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Executive Summary

The New Jersey Childhood Obesity Study was designed to provide vital information for planning, implementing, and evaluating interventions aimed at preventing childhood obesity in five New Jersey municipalities: Camden, Newark, New Brunswick, Trenton, and Vineland. These five communities are being supported by the Robert Wood Johnson Foundation's New Jersey Partnership for Healthy Kids program to plan and implement policy and environmental change strategies to prevent childhood obesity.

Effective interventions for addressing childhood obesity require community-specific information on who is most at risk and on contributing factors that can be addressed through tailored interventions that meet the needs of the community. Based on comprehensive research, a series of reports are being prepared for each community to assist in planning effective interventions. The main components of the study were:

- A household telephone survey of 1700 families with 3–18 year old children,
- De-identified heights and weights measured at public schools,
- Assessment of the food and physical activity environments using objective data.

This report presents the results from the household survey. Reports based on school body mass index (BMI) data and food and physical activity environment data are available at www.cshp.rutgers.edu/childhoodobesity.htm.

The survey respondent was an adult most knowledgeable about food shopping for the household. Questions were asked from the following five domains:

1. Weight and height of a randomly selected child,
2. Perceptions about the food and physical activity environments around their homes,
3. Barriers related to access to healthy food and physical activity facilities,
4. Food and physical activity behaviors of the index child,
5. Demographic information.

Major findings from the survey are presented in four sections of the chartbook: child food behaviors, food environment, child physical activity behaviors, and physical activity environment. Also included are charts describing demographic characteristics of the sample and presenting BMI estimates for the city based on school-measured heights and weights. Key findings presented include:

SCHOOL BMI: Camden children are more likely to be overweight or obese compared to their national counterparts. The rates are highest among Hispanic children and among the youngest (3–5 years) and the oldest (12–18 years) age groups.

FOOD BEHAVIORS: The majority of Camden children do not meet recommendations for vegetable consumption. They also frequently consume energy-dense foods such as fast food, sugar-sweetened beverages, and sweet and salty snacks. Non-Hispanic black children tend to consume these energy-dense foods most frequently.

FOOD ENVIRONMENT: Although most parents shop at supermarkets and superstores, they report limited availability of fresh produce and low-fat items at these stores. Almost half of the families do not shop in their neighborhood. Cost, quality, and lack of stores in the neighborhood are main barriers identified by the parents.

PHYSICAL ACTIVITY BEHAVIORS: Most children do not meet the guidelines for being physically active for 60 minutes each day. In addition, a large proportion spend more than 2 hours a day watching television, using the computer, and playing video games. The majority of children do not walk or bike to school and many do not use the sidewalks, parks, and exercise facilities available in their neighborhoods. More than half do not live near exercise facilities and a fifth do not have parks nearby.

PHYSICAL ACTIVITY ENVIRONMENT: Although many neighborhoods have sidewalks and some have parks and exercise facilities, a large number of parents report that their children do not use these facilities to be active. Crime level, pleasantness of neighborhoods and parks, and condition of sidewalks are the most commonly reported barriers.

Effective interventions will require changes in the neighborhood environment by creating new opportunities, improving existing features, and addressing barriers associated with practicing healthy behaviors. Efforts are also needed to raise awareness about the issue of childhood obesity and associated behaviors among parents and caregivers.

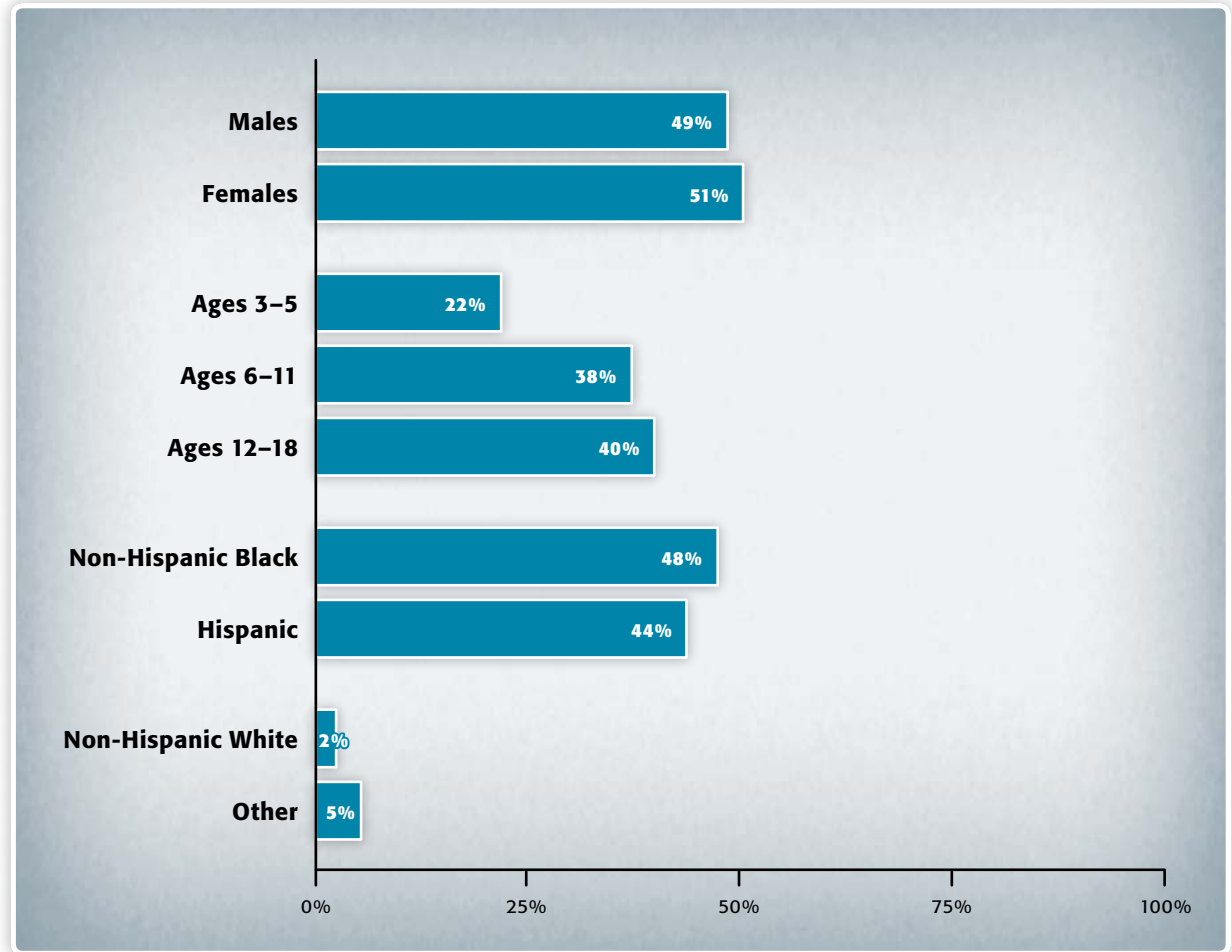
Survey Methods

- Random-digit-dial landline telephone sample of 400 households from Camden (and similar samples from Newark, New Brunswick, Trenton, and Vineland).
- A household was eligible if it was within city limits and had at least one child in the age range 3–18 years.
- Fieldwork was conducted between June 2009 and March 2010.
- Average survey length was 36 minutes.
- Worksheets and tape measures were mailed to each home to weigh and measure 3–18 year old children and the respondent.
- Overall response rate was 49%.
- Conducted by the Rutgers Center for State Health Policy (survey fieldwork by Abt-SRBI) and funded by the Robert Wood Johnson Foundation.

Definitions and Notes

- A **family** is defined as all people living in the household related by blood (including adopted, guardianship, or foster children), marriage, or living as married.
- The survey **respondent** is the person 18 years or older who lives in the household and makes most of the decisions about food shopping for the household (usually parent). In 94% of the families, this person was either the parent or grandparent of the randomly selected “**index child**”. Hereafter, this person shall be referred to as “**the parent**”.
- The **index child** was randomly selected from each household.
- Body mass index (**BMI**) categories are defined by comparing heights and weights data to growth charts specific to age and gender:
 - Not overweight: <85th percentile,
 - Overweight: 85th percentile to <95th percentile,
 - Obese: 95th percentile and up.
- The **neighborhood** was defined for the respondent as the area within a 20 minute walk, a 5 minute drive, or about 1 mile in all directions around the respondent’s home.
- **Food consumption recall time frame** was the past month, with frequency of consumption reported on a daily, weekly, or monthly basis. Responses were used to calculate frequency of consumption per day. **Physical activity recall time frame** was the past 7 days (active 30 minutes/day, 60 minutes/day) or a typical weekday or weekend day during the school year (TV/computer/video game time).
- All charts present survey data from Camden, with the exception of the three BMI charts which use data measured (and provided) by public schools in Camden.

Demographics of Camden Index Children (N=400)



NOTE: Due to the small number of children in the “Non-Hispanic White” and “Other” categories, separate estimates for these groups will not be provided in this chartbook. However, these groups are included in all other estimates (e.g., by age, gender, citywide).

Camden Children's Weight Status

Charts in this section present data obtained from Camden public schools.

De-identified data on students' heights and weights, measured by school nurses, are used to compute body mass index (BMI).

BMI data by age, gender, and race/ethnicity are compared to national US data obtained from the 2007–2008 National Health and Nutrition Examination Survey (NHANES).

The last chart in this section presents parental perceptions of child weight status obtained from the household survey.



Childhood weight status by age: Camden public schools vs. US

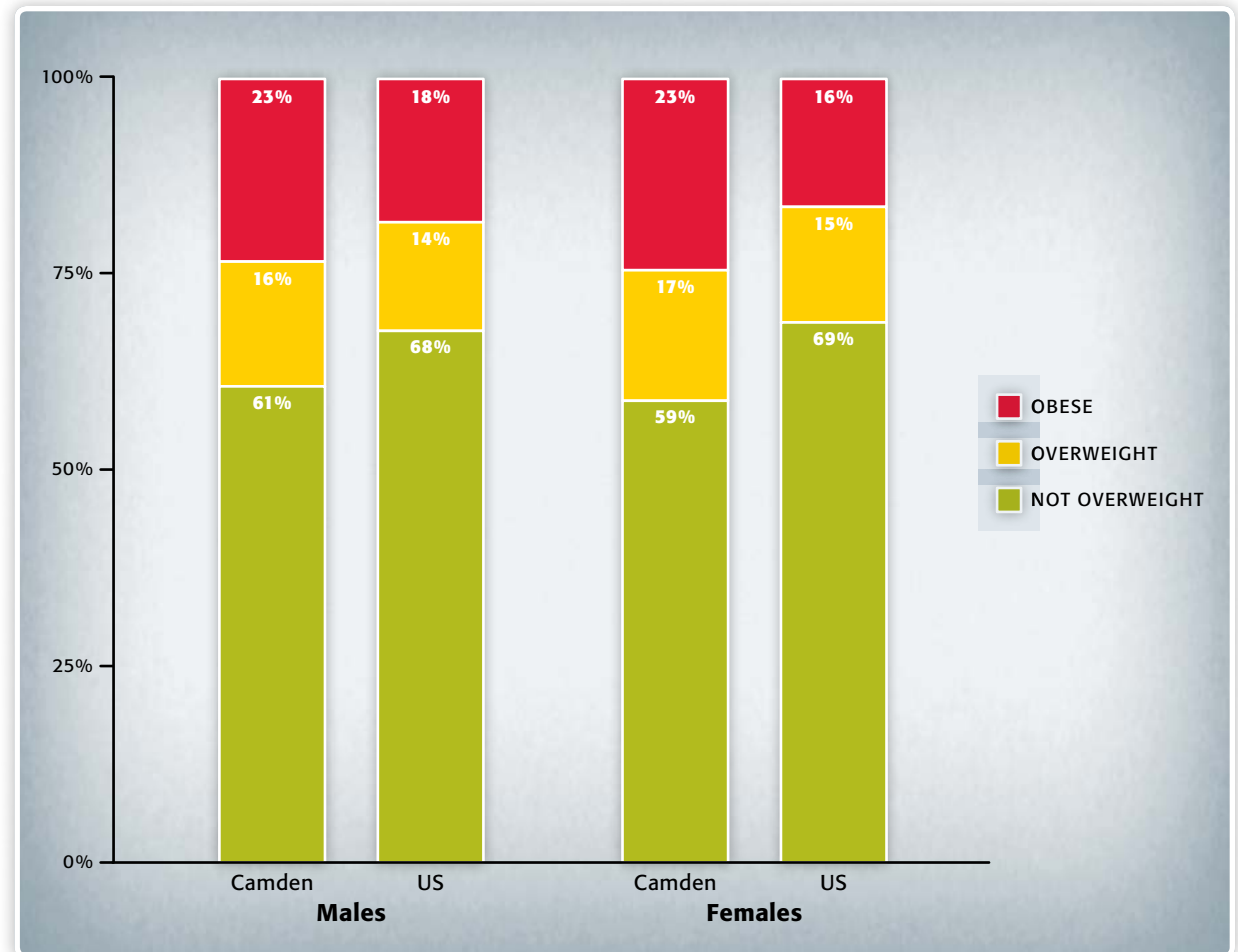
- Compared to the national data, a higher percentage of Camden public school children in all age categories are overweight or obese.
- The largest differences between Camden public school children and national estimates are seen among the youngest children (35% in Camden vs. 21% nationally for overweight and obese).



NOTE: This chart presents data from Camden public schools (2008–2009), NOT survey data. National data (NHANES, 2007–2008) are based on 2–5 year-olds, while the Camden data are based on 3–5 year-olds. Bar totals may not equal 100% due to rounding.

Childhood weight status by gender: Camden public schools vs. US

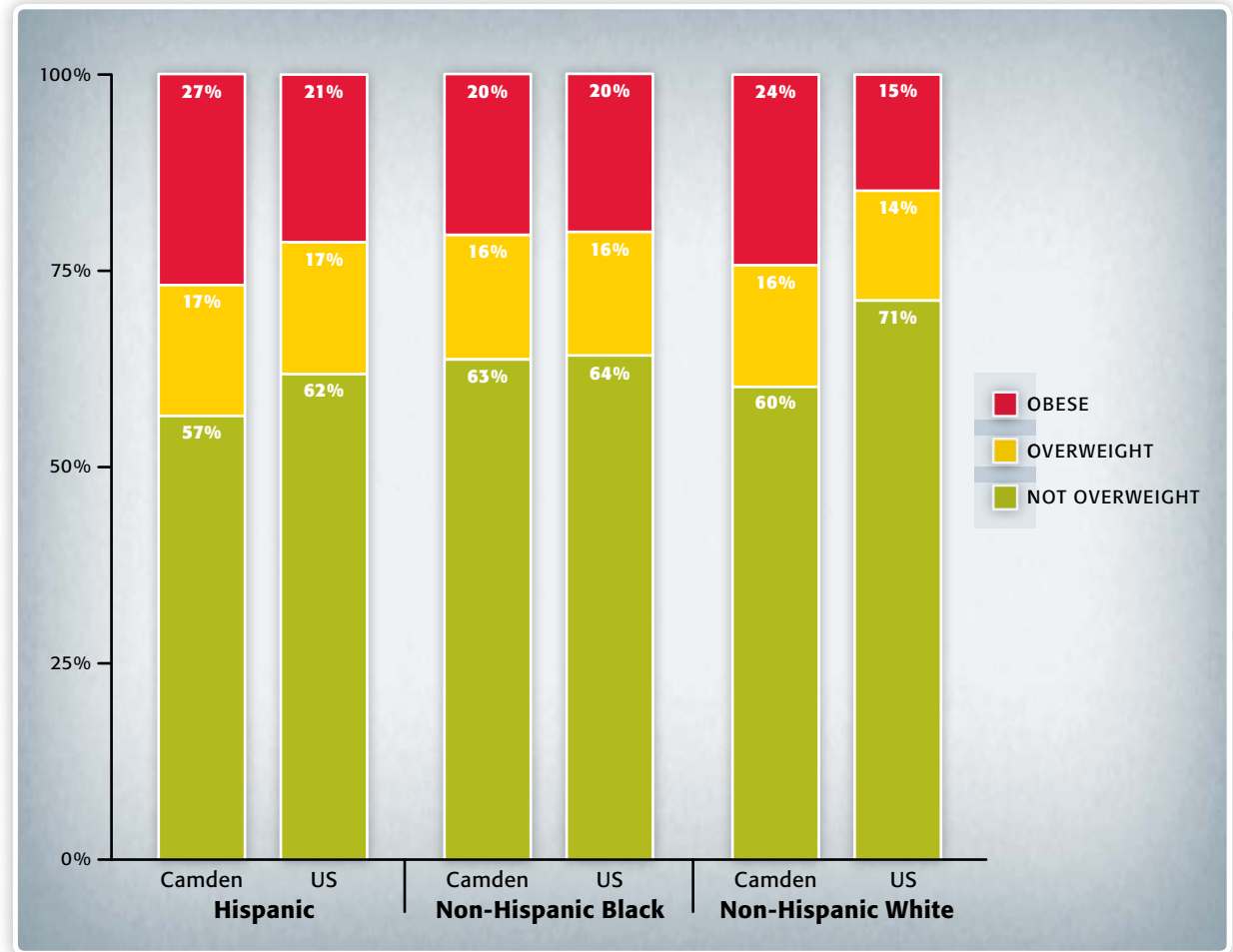
- Compared to the national data, a higher percentage of both boys and girls in Camden are overweight or obese. Weight status does not differ by gender.
- 39% of Camden boys and 40% of Camden girls are either overweight or obese compared to 32% boys and 31% girls nationally.



NOTE: This chart presents data from Camden public schools (2008-2009), NOT survey data. National data (NHANES, 2007-2008) are based on 2–18 year-olds, while the Camden data are based on 3–18 year-olds. Bar totals may not equal 100% due to rounding.

Childhood weight status by race/ethnicity: Camden public schools vs. US

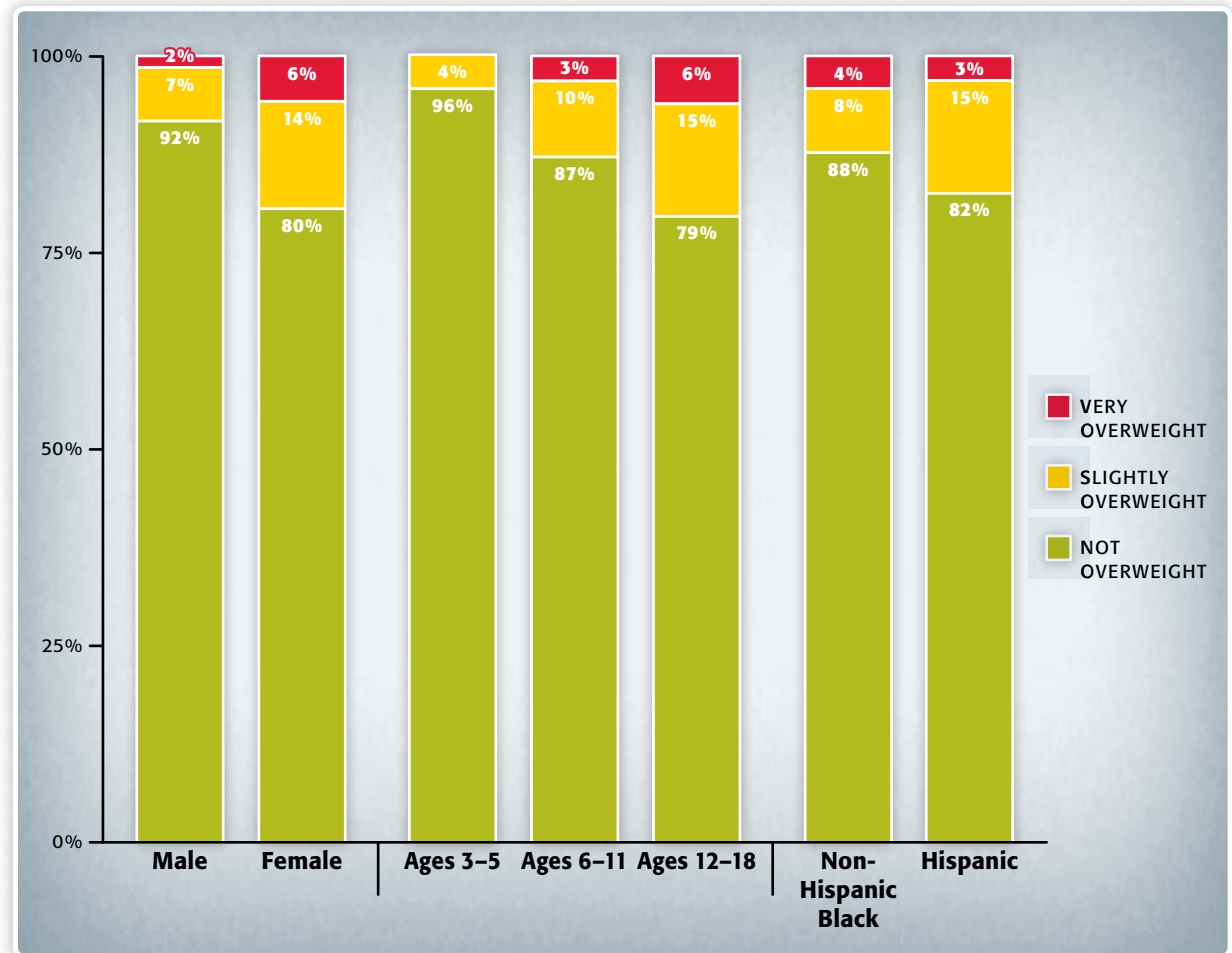
- Compared to the national data, a higher percentage of Hispanic children in Camden are obese, although the rates of overweight children are similar to national data.
- The rates of overweight and obesity for non-Hispanic black children in Camden are similar to national rates.



NOTE: This chart presents data from Camden public schools (2008–2009), NOT survey data. National data (NHANES, 2007–2008) are based on 2–18 year-olds, while the Camden data are based on 3–18 year-olds. Bar totals may not equal 100% due to rounding.

Parent's perception of child's weight status (based on survey data)

- Despite the high prevalence of overweight and obesity among children attending Camden public schools, when asked about their child's weight status on the survey, a vast majority of parents of Camden children do not think their children are overweight or obese. This chart (and the remainder of the chartbook) is based on survey data.



NOTE: Bar totals may not equal 100% due to rounding.

Key findings from data on children's weight status

- Based on measured heights and weights data obtained from public schools in the city, Camden children have high rates of overweight and obesity. Compared to the national data, the rates are particularly high among Hispanic children and those in the oldest (12–18 years) and youngest (3–5 years) age groups. National data for the youngest age group are based on 2–5 year olds while the Camden data includes only 3–5 year olds.
- Despite these high rates of overweight and obese children, the vast majority of parents of children ages 3–18 in Camden think that their children are not overweight.

Food Behaviors

Parents were asked to report on the food behaviors of the randomly selected index child.

Respondents were asked to think about the past month and report frequency of consumption of specific types of foods on a daily, weekly, or monthly basis.

Consumption data are compared to established recommendations, where available.



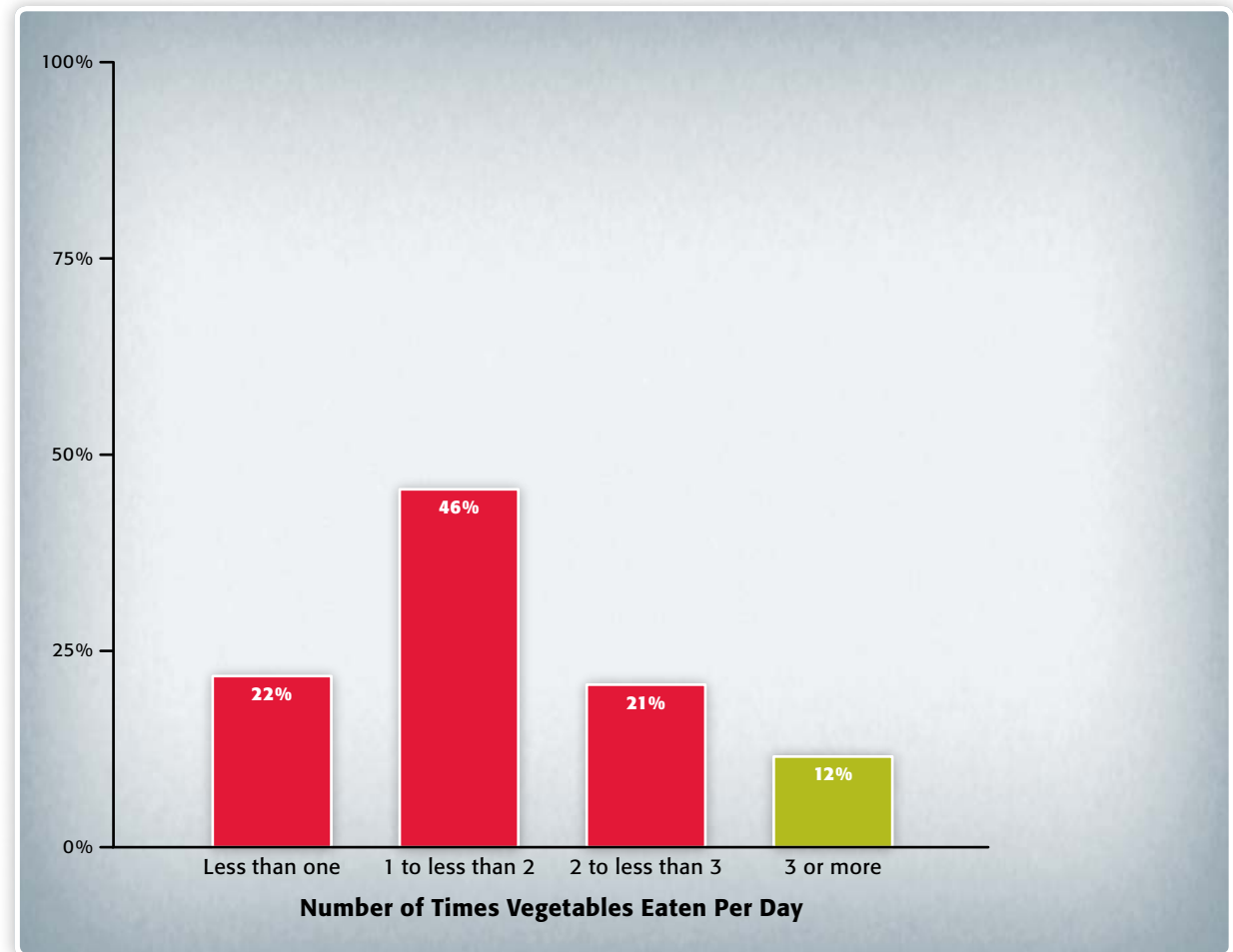
Number of times vegetables eaten per day*

The U.S. Department of Health and Human Services' Healthy People 2010 objectives state that individuals 2 years and older should eat vegetables at least 3 times a day.

In Camden

- Only 12% of the children meet the Healthy People 2010 recommendation.
- 22% of the children eat vegetables **LESS THAN ONE** time per day.

* Includes green leafy or lettuce salad, potatoes (baked, boiled, mashed), cooked or canned dried beans, other vegetables (e.g., tomatoes, green beans, carrots, corn, cooked greens, sweet potatoes, broccoli). Excludes french fries, potato chips, tater tots, or other fried potatoes.

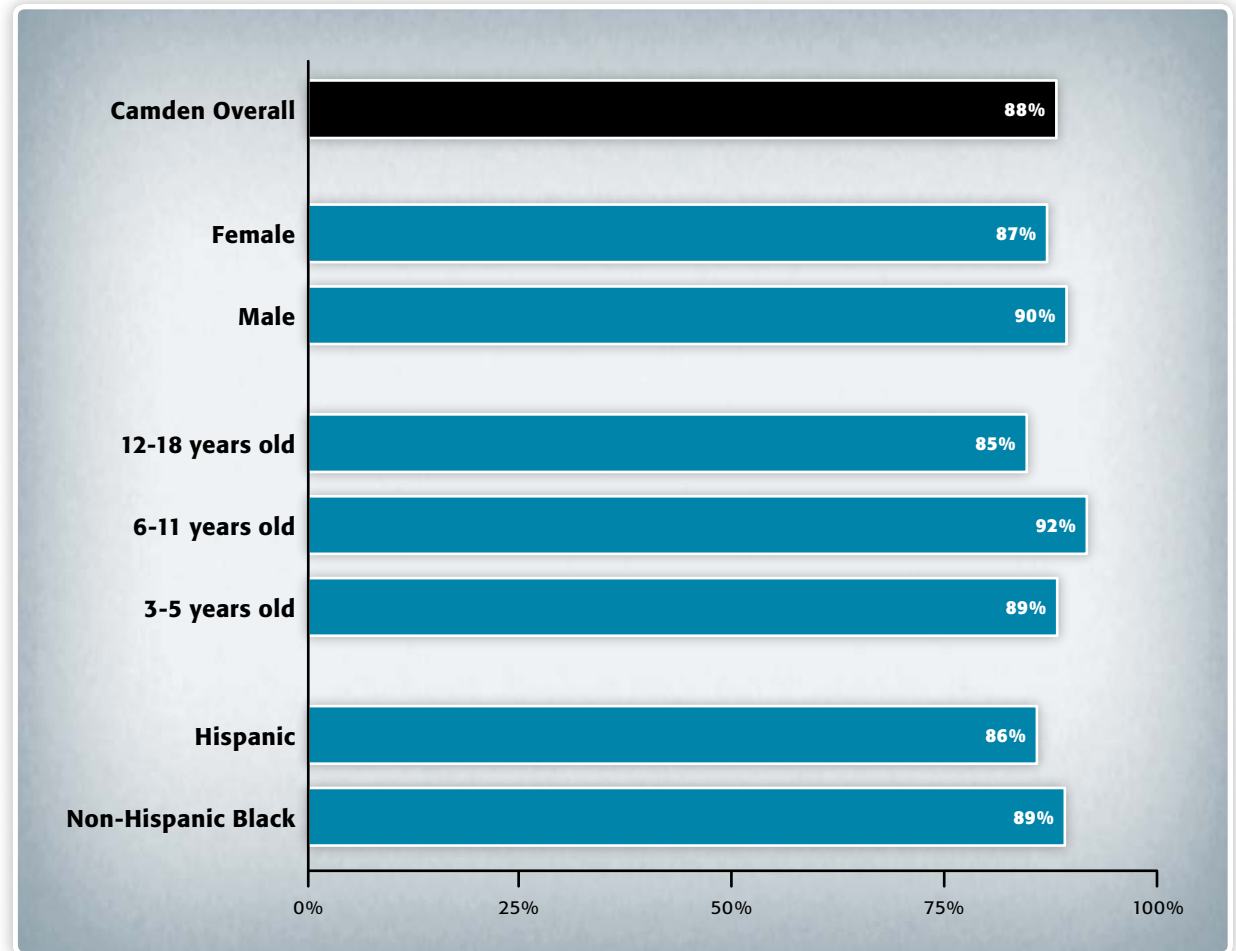


Almost all Camden children eat vegetables less than 3 times a day*

The vast majority (88%) of 3–18 year old children in Camden do not eat vegetables 3 times a day, as recommended by DHSS.

- This behavior varies little by gender or race/ethnicity.

* Includes green leafy or lettuce salad, potatoes (baked, boiled, mashed), cooked or canned dried beans, other vegetables (e.g., tomatoes, green beans, carrots, corn, cooked greens, sweet potatoes, broccoli). Excludes french fries, potato chips, tater tots, or other fried potatoes.



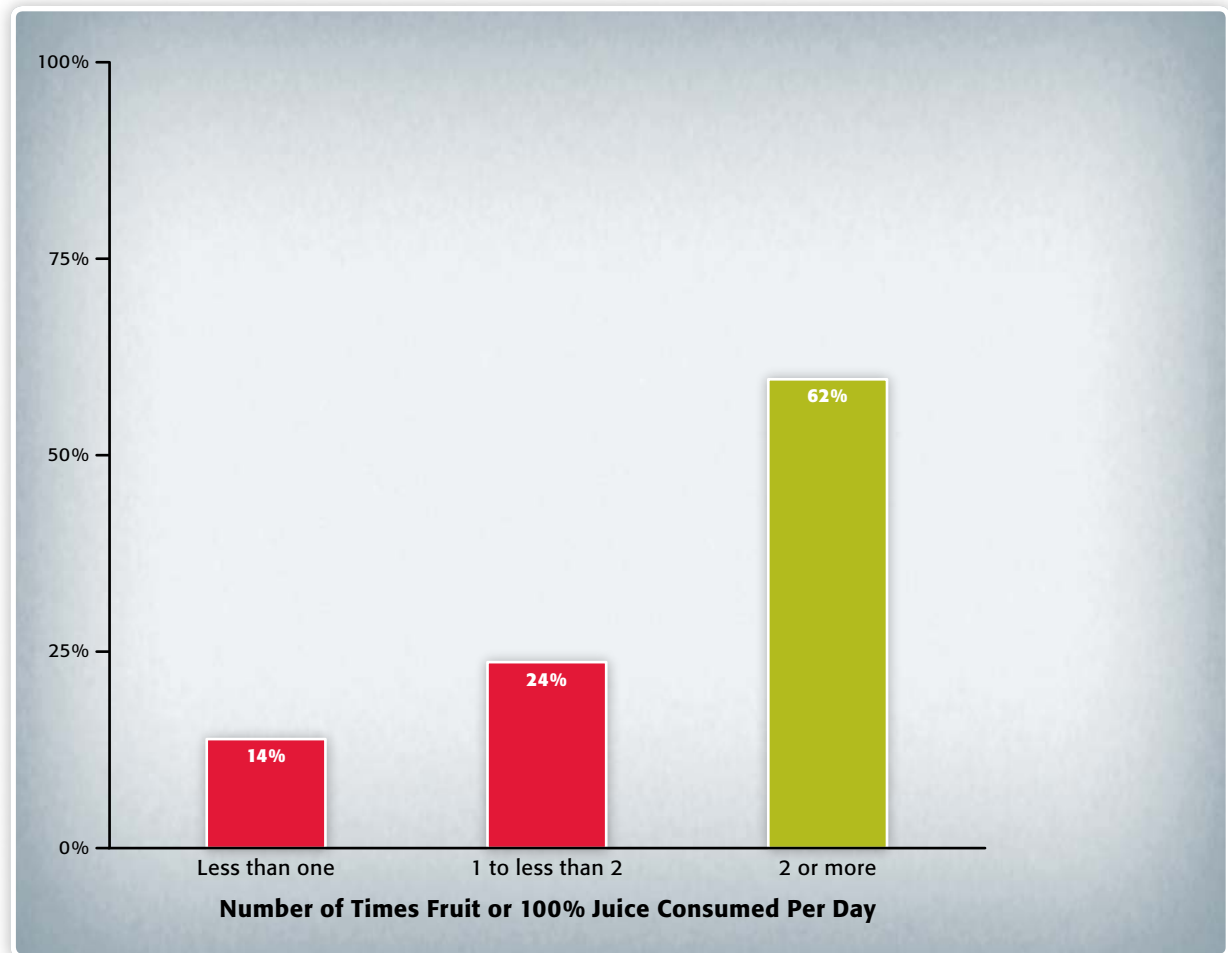
Number of times fruit or 100% juice consumed per day*

The U.S. Department of Health and Human Services' Healthy People 2010 objectives state that individuals 2 years and older should eat fruit or 100% juice at least two times per day.

In Camden

- 62% of children meet this requirement.
- 14% of children consume fruit or juice less than once per day.
- Fruit juice comprises a larger proportion of the total as overall fruit (fruit + 100% fruit juice) consumption increases (not shown in chart).

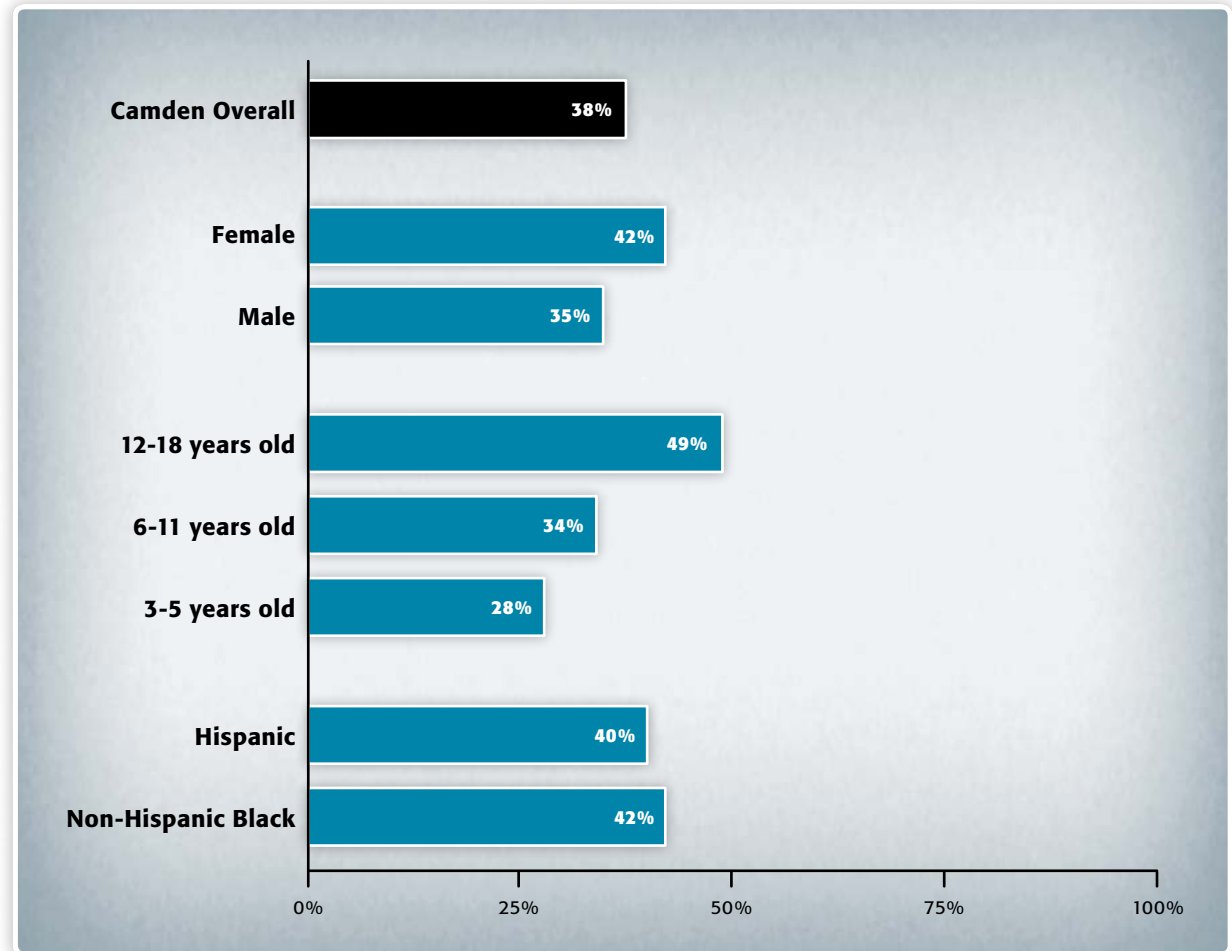
* Includes fresh, frozen, canned, or dried fruits and 100% fruit juice such as orange, apple, or grape juice. Excludes fruit-flavored drinks with added sugar like Hi-C, Gatorade, or fruit punch.



Percentage who do not consume fruit or 100% juice at least 2 times a day*

- Overall, 38% of 3–18 year old children in Camden consume less than the recommendation of fruit or 100% juice at least two times a day.
- Nearly half (49%) of Camden adolescents do not consume fruit or 100% juice two times a day, compared to 34% of children ages 6–11 and 28% of children ages 3–5.
- This behavior varies little by race/ethnicity.

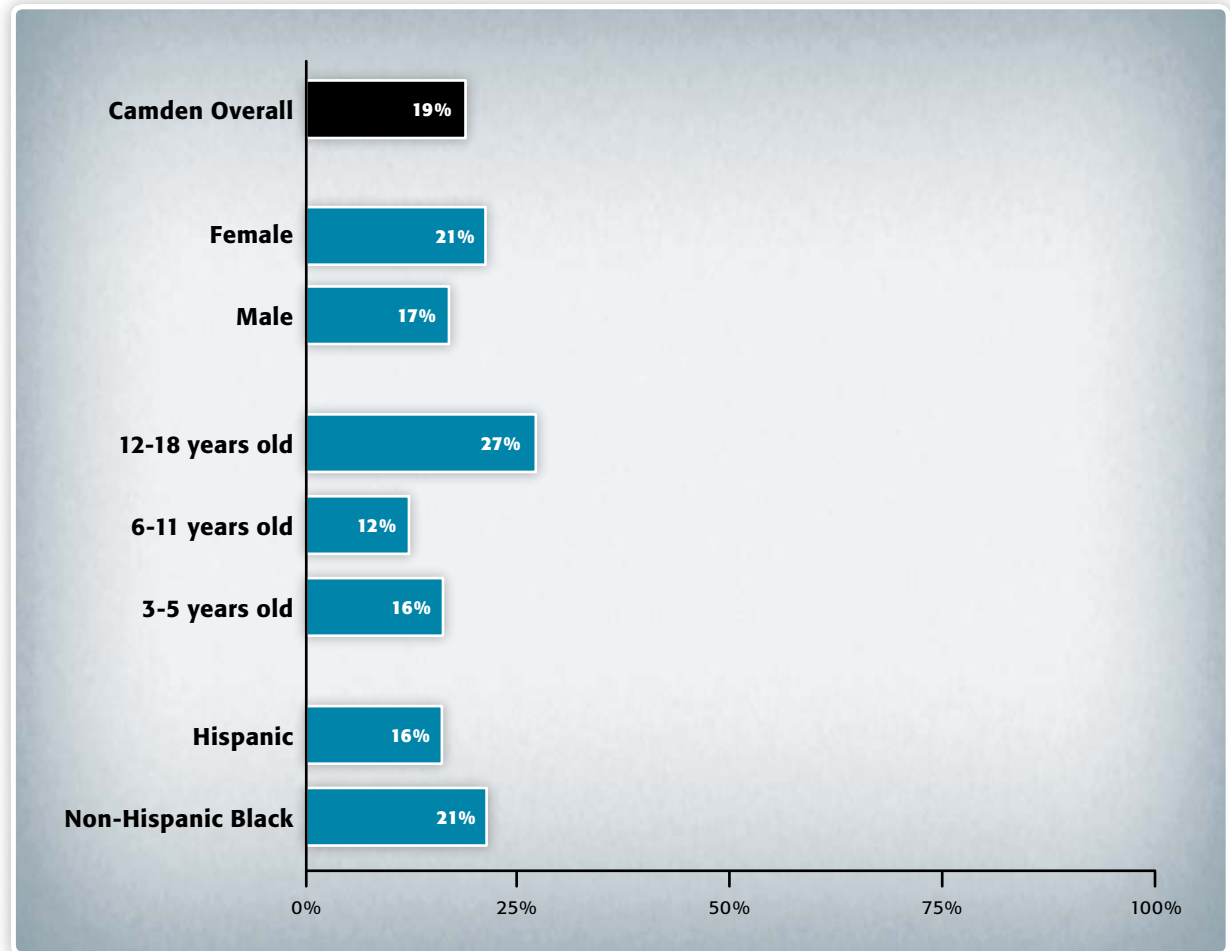
* Includes fresh, frozen, canned, or dried fruits and 100% fruit juice such as orange, apple, or grape juice. Excludes fruit-flavored drinks with added sugar like Hi-C, Gatorade, or fruit punch.



Percentage with two or more fast-food* visits per week

- Overall, 19% of 3–18 year old children in Camden eat at fast-food restaurants 2+ times a week.
- 27% of Camden adolescents eat at fast-food restaurants 2+ times a week, compared to 12% of children ages 6–11 and 16% of children ages 3–5.
- This behavior varies little by gender and race/ethnicity.

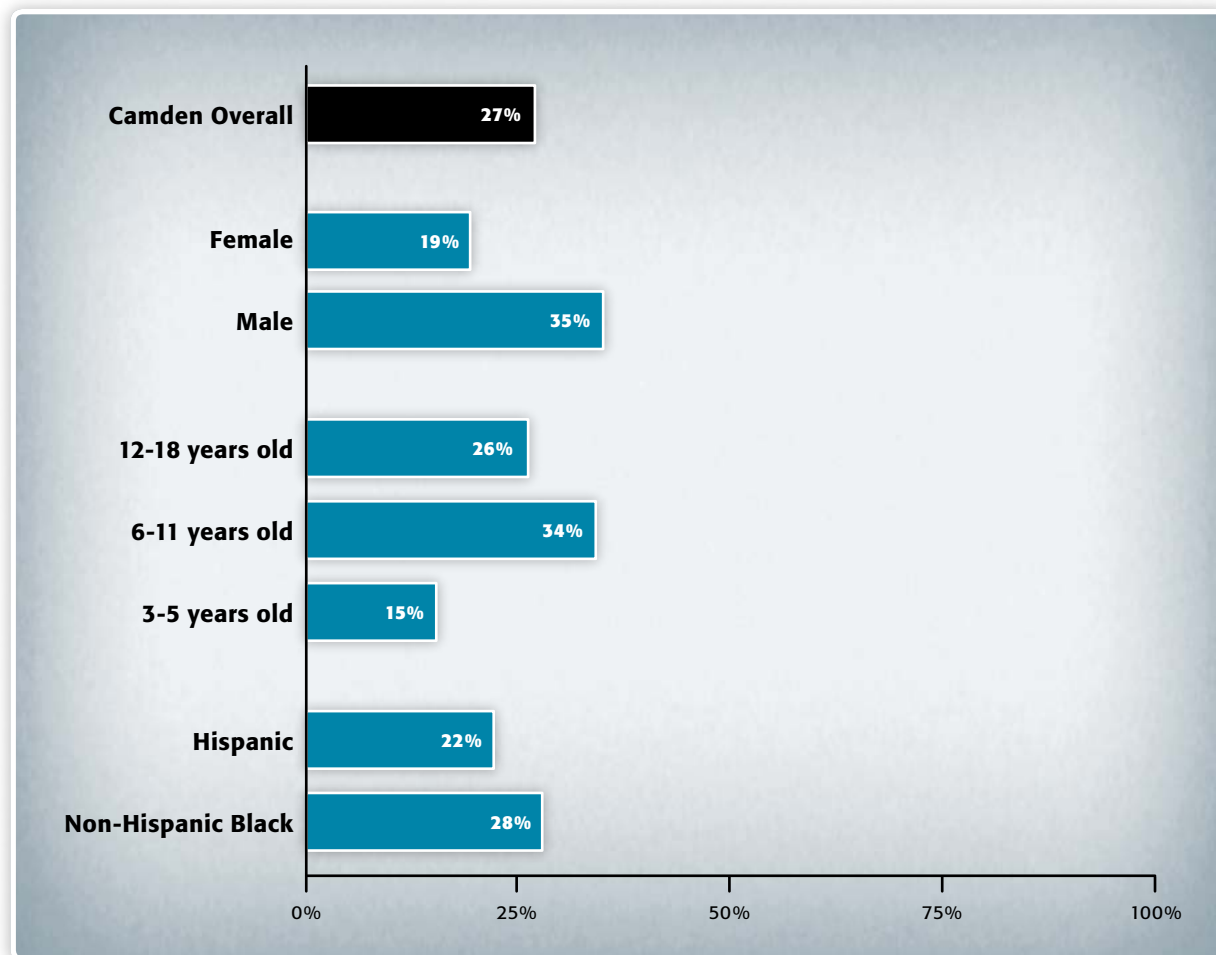
* Includes any fast food restaurant, deli, or pizza, burger, taco, or chicken place where you pay before you eat.



Percentage who drink two or more sugar-sweetened beverages* per day

- Overall, 27% of 3–18 year old children in Camden drink 2 or more sugar-sweetened beverages per day.
- 35% of Camden boys drink 2 or more sugar-sweetened beverages per day, compared to 19% of girls.
- Consumption of sugar-sweetened beverages is higher among the older age groups (26% of children aged 12–18 and 34% of those aged 6–11 consume 2 or more sugar-sweetened beverages per day) than the youngest group (15% of those aged 3–5).
- This behavior varies little by race/ethnicity.

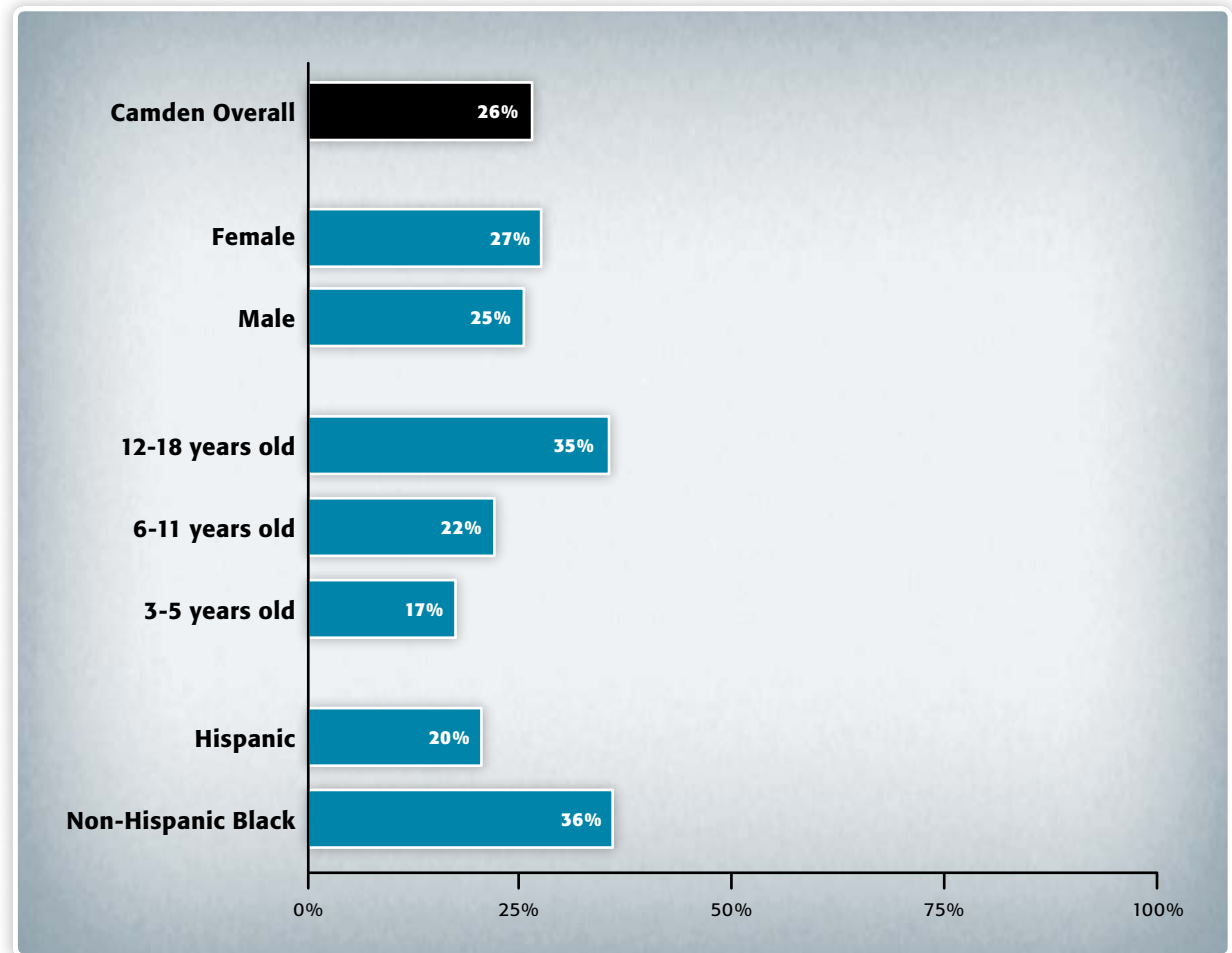
* Includes fruit-flavored drinks (e.g., lemonade, Sunny Delight, Kool-aid, Gatorade, sweet iced teas) or sweetened soft drinks (e.g., Coke, Pepsi, 7-up). Excludes diet drinks.



Percentage who eat energy-dense **sweet*** snacks daily

- Overall, 26% of 3–18 year old children in Camden eat energy-dense sweet snacks daily.
- Consumption of energy-dense sweet snacks increases with age: 35% of Camden adolescents eat energy-dense sweet snacks daily, compared to 22% of children ages 6–11 and 17% of children ages 3–5.
- 36% of non-Hispanic black children in Camden eat energy-dense sweet snacks daily, compared to 20% of Hispanic children.
- This behavior varies little by gender.

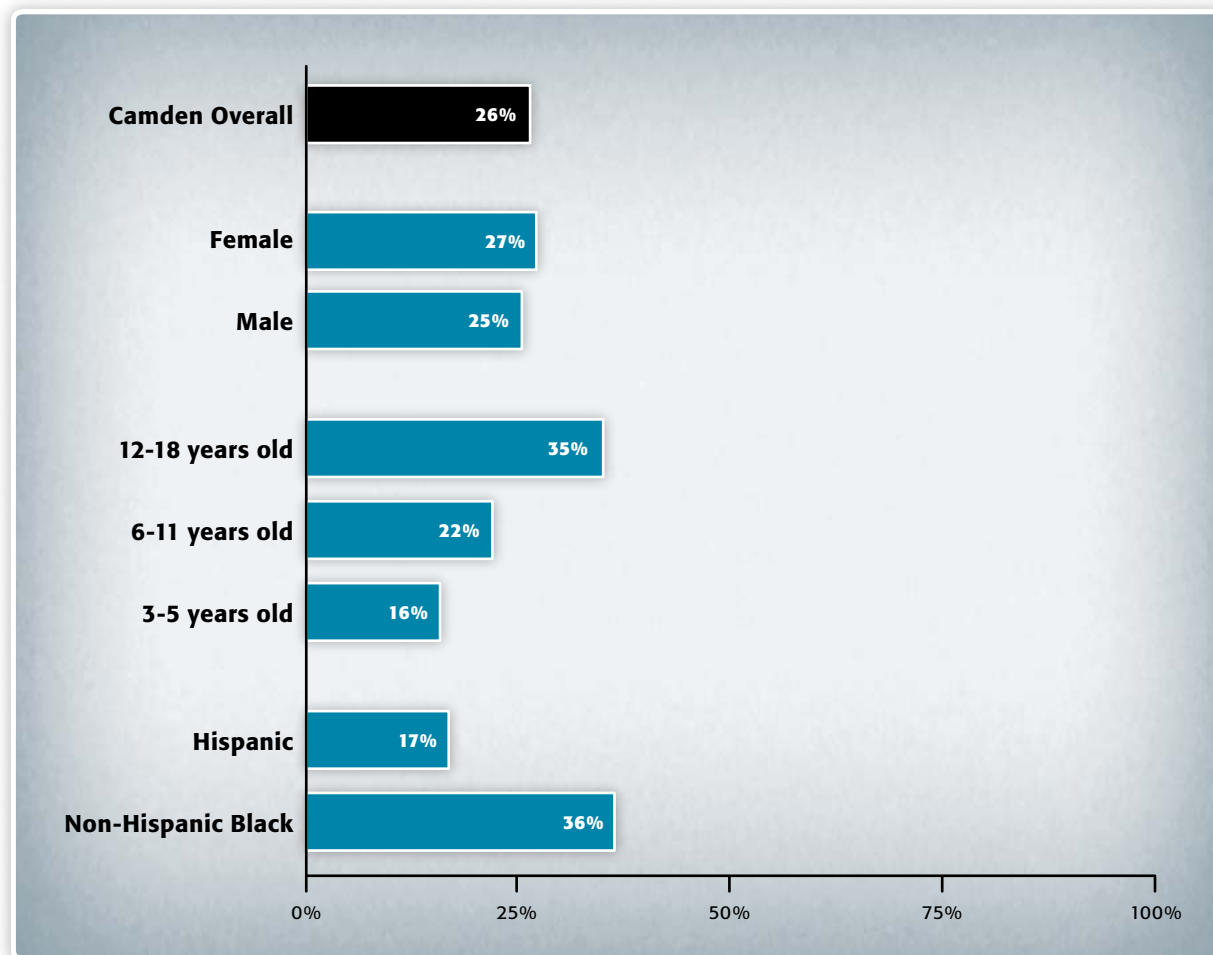
* Includes any sweets such as cookies, cakes, candy, or pies.



Percentage who eat energy-dense **salty*** snacks daily

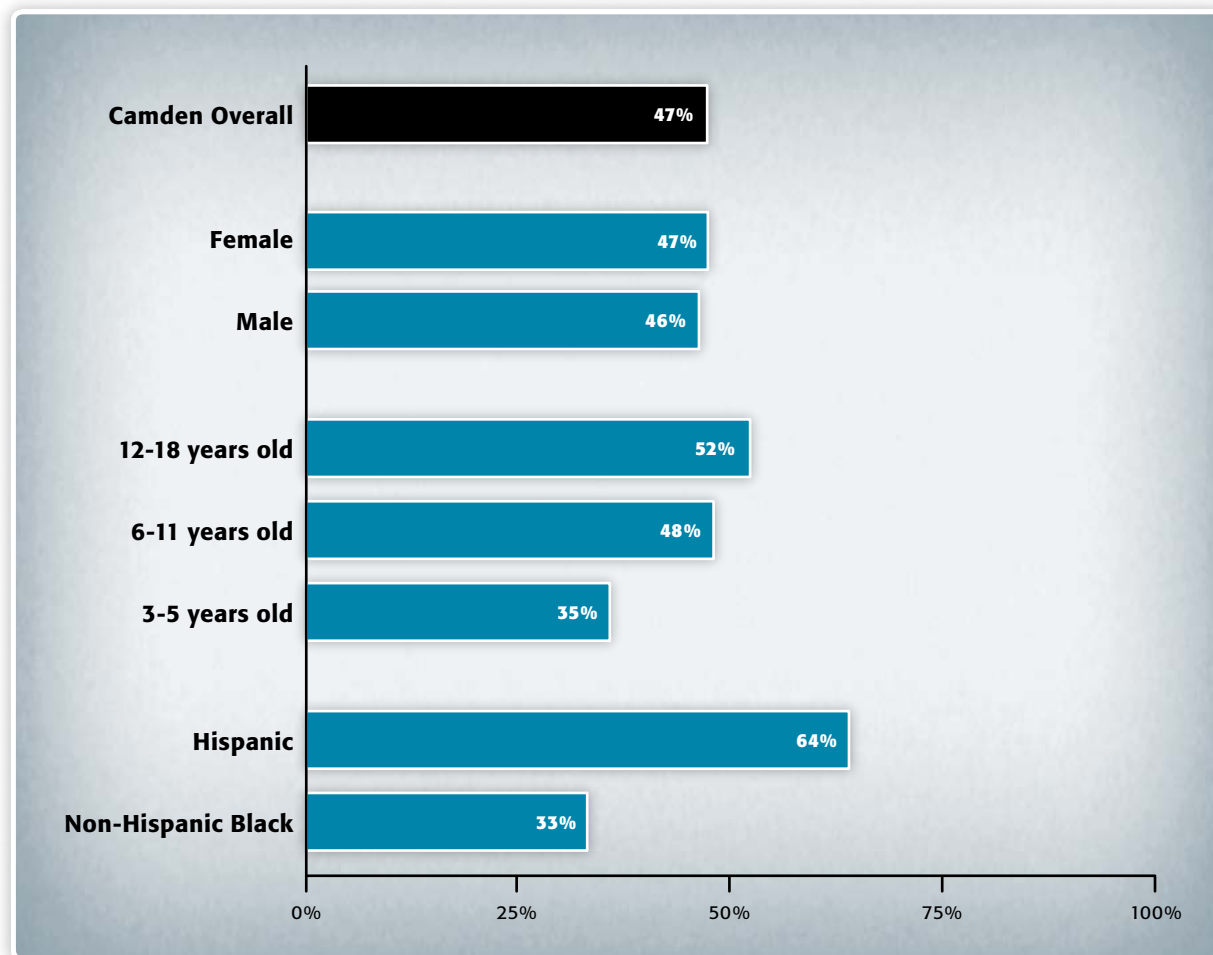
- Overall, 26% of 3–18 year old children in Camden eat energy-dense salty snacks daily.
- Consumption of energy-dense salty snacks increases with age: 35% of Camden adolescents eat energy-dense salty snacks daily, compared to 22% of children ages 6–11 and 16% of children ages 3–5.
- 36% of non-Hispanic black children in Camden eat energy-dense salty snacks daily, compared to 17% of Hispanic children.
- This behavior varies little by gender.

* Includes any salty snacks such as chips, Doritos, or nachos.



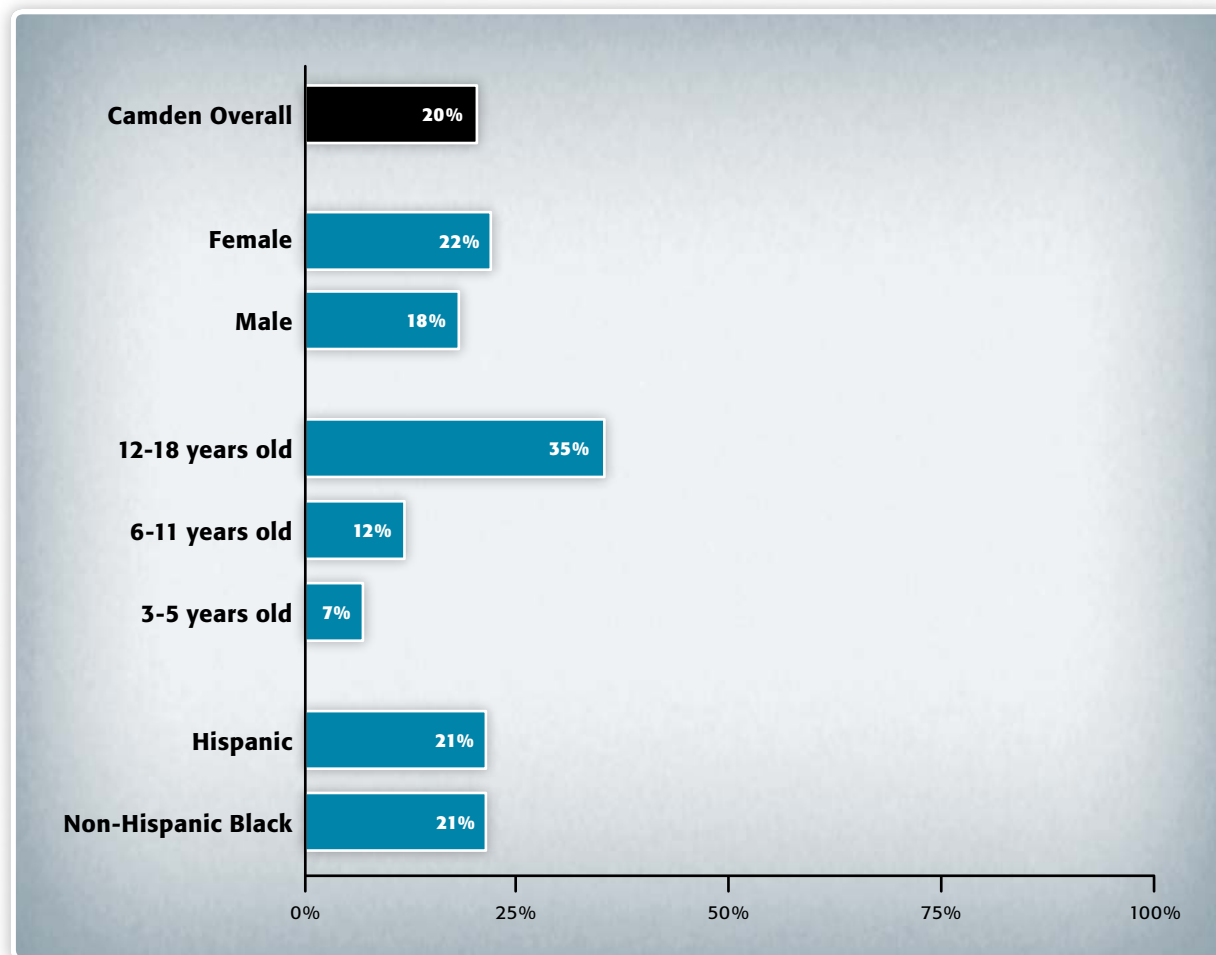
Percentage who do not eat fruits and vegetables as snacks daily

- Overall, 47% of 3–18 year old children in Camden do not eat fruits and vegetables as snacks daily.
- Consumption of fruits and vegetables as snacks decreases with age: 52% of Camden adolescents and 48% of children ages 6–11 do not eat fruits and vegetables as snacks daily, compared to 35% of children ages 3–5.
- 64% of Hispanic children in Camden do not eat fruits and vegetables as snacks daily, compared to 33% of non-Hispanic black children.
- This behavior varies little by gender.



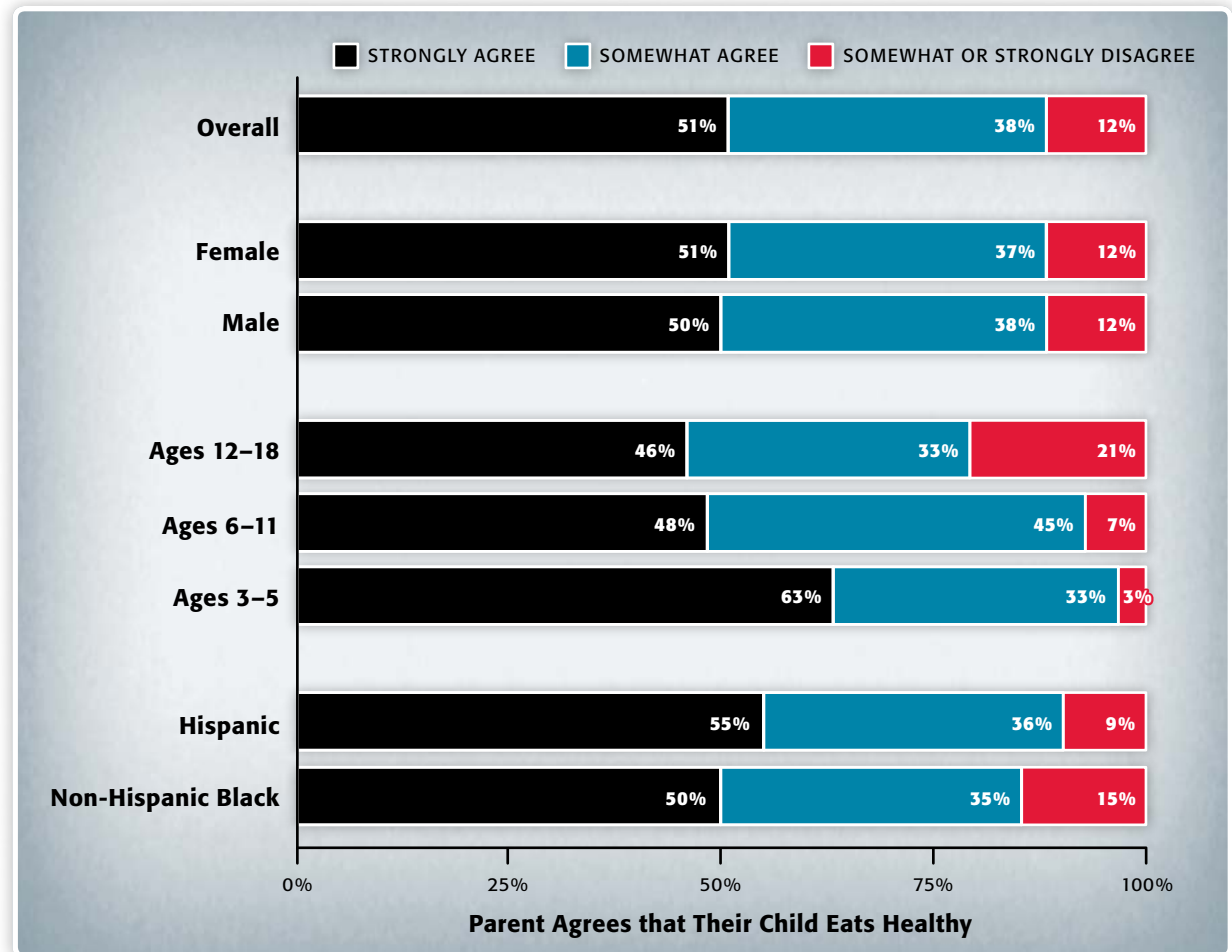
Percentage who do not eat breakfast daily

- Overall, 20% of 3–18 year old children in Camden do not eat breakfast daily.
- Eating breakfast daily decreases with age: 35% of Camden adolescents do not eat breakfast daily, compared to 12% of children ages 6–11 and 7% of children ages 3–5.
- There is little variation by gender and race/ethnicity.



Despite what the previous charts show, parents think their children eat healthy

- Overall, 88% of parents strongly agree or somewhat agree that, in general, their child eats healthy.
- This finding is consistent across gender and race/ethnicity.
- Parents of older children are less likely to think that their children eat healthy.



NOTE: Bar totals may not equal 100% due to rounding.

Key findings from food behavior section

- Only 12% of the children meet the Healthy People 2010 recommendations for eating vegetables three times per day. While 62% of the children meet the recommendations for fruit, the consumption of 100% juice, a more concentrated source of calories, is higher among those who consume more total fruit (fruit + 100% juice).
- Fast-food consumption is highest among adolescents in Camden, with over a quarter eating at a fast-food restaurant two or more times per week.
- Consumption of energy-dense foods such as sugar-sweetened beverages and sweet and salty snacks is prevalent among children in Camden, especially among non-Hispanic blacks and among adolescents.
- Overall, almost half the children do not eat fruits and vegetables as snacks daily, and even a larger number of Hispanic children (64%) do not eat fruits and vegetables as snacks.
- More than a third of adolescents in Camden do not eat breakfast on a regular basis.
- Consumption of sugar-sweetened beverages and energy-dense salty and sweet snacks increases with age, while consumption of fruits and vegetables as snacks and daily breakfast decreases with older age.
- Despite these findings, the majority of parents (88%) in Camden think that their children eat healthy.

Food Environment

Charts in this section describe parents' perceptions of the food environment as well as reported barriers to accessing healthy foods in their neighborhood.

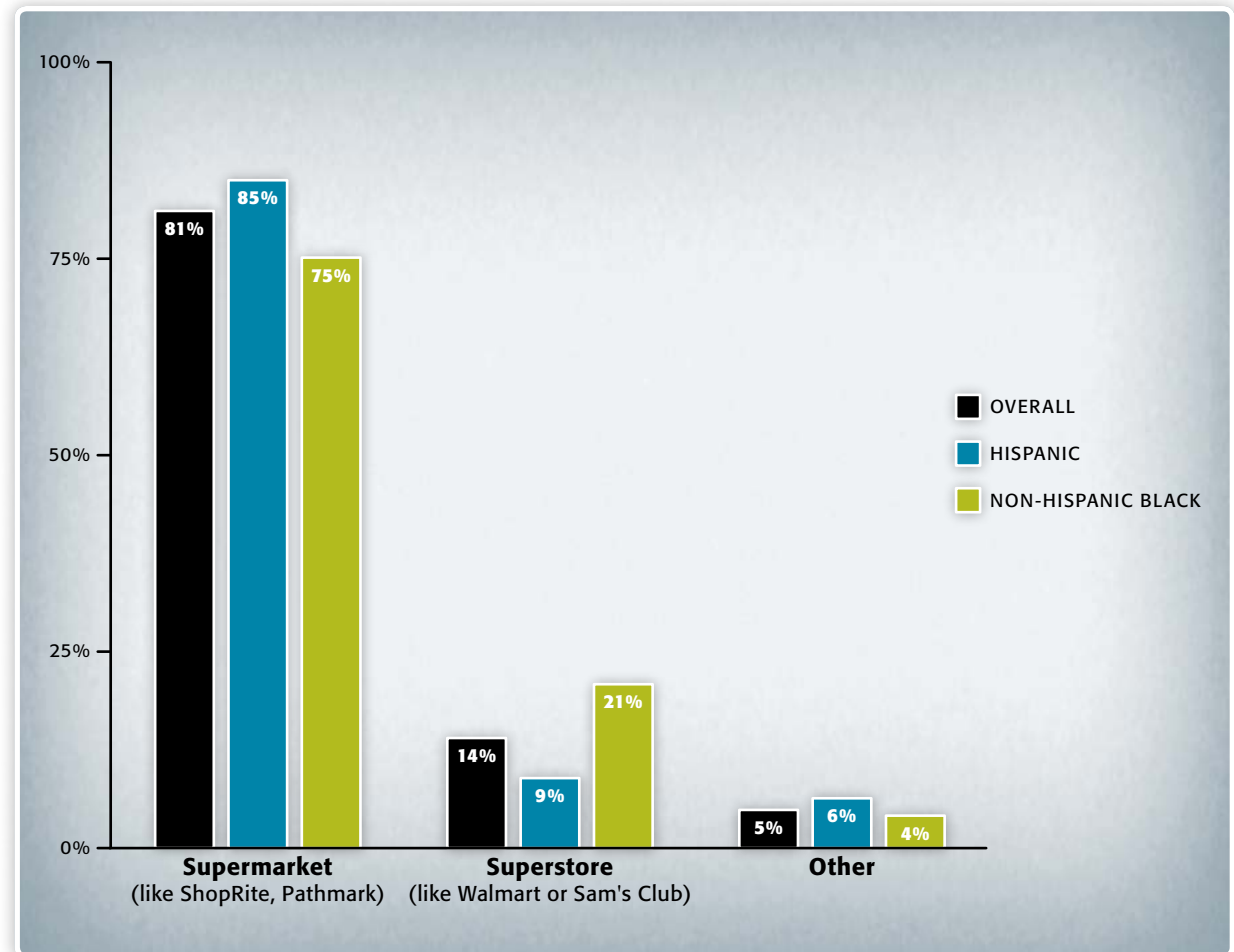
Neighborhood is defined as the area within a 20 minute walk, a 5 minute drive, or about 1 mile in all directions around the respondent's home.

Food shopping practices and preferences are presented, including desirable features of the food store where parents do most of their food shopping.



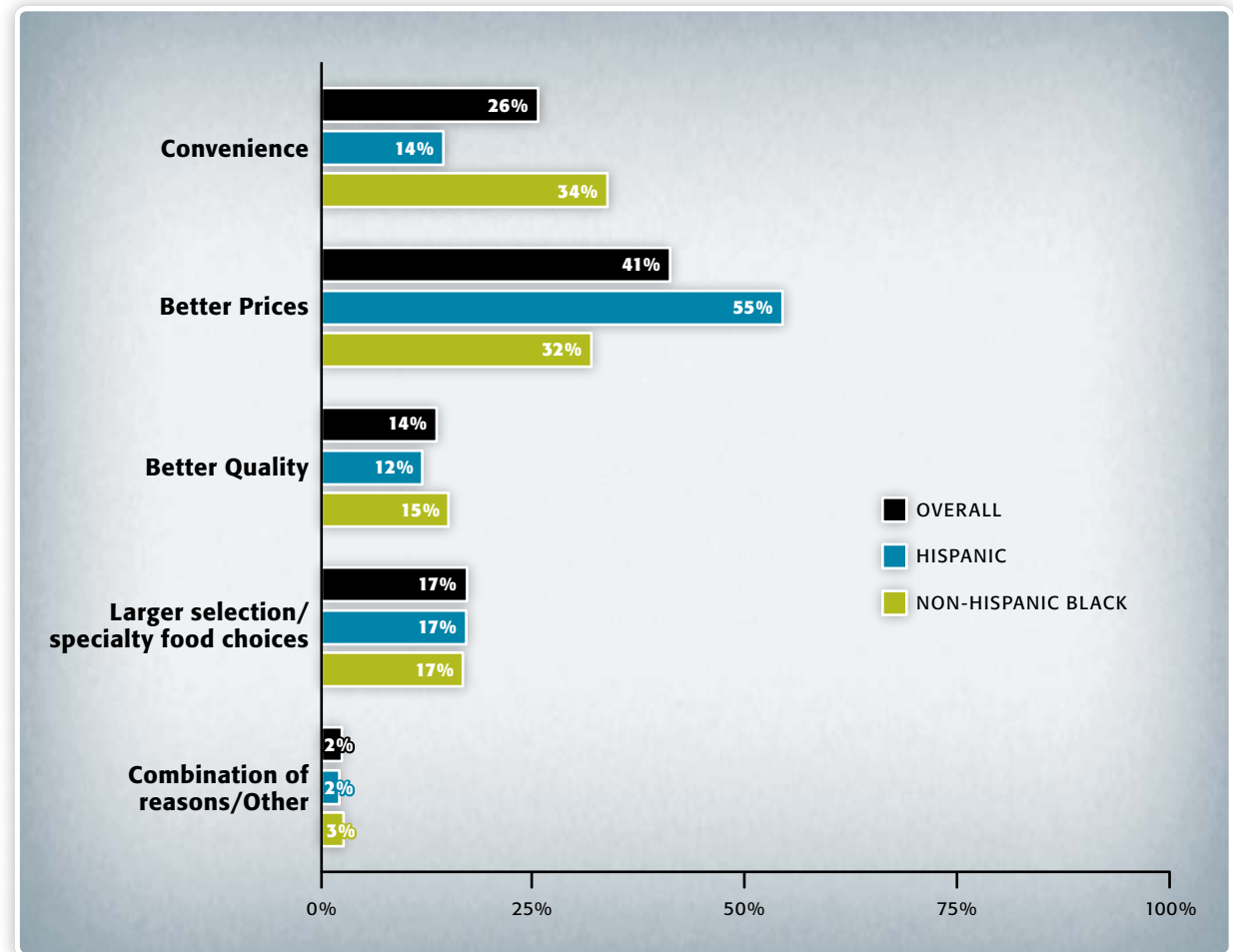
Parents do most of their food shopping at supermarkets and superstores

- Overall, 81% of Camden parents of children ages 3–18 do most of their food shopping at supermarkets (like Shop-Rite, Stop & Shop, Pathmark), and 14% of them food-shop at superstores (like Walmart or Sam’s Club).
- Parents of Hispanic children are more likely to shop at supermarkets (85%) than parents of non-Hispanic black children (75%).
- Parents of non-Hispanic black children are more likely to shop at superstores (21%) than parents of Hispanic children (9%).
- A very small percentage of parents shop at corner stores or bodegas for most of their food shopping.



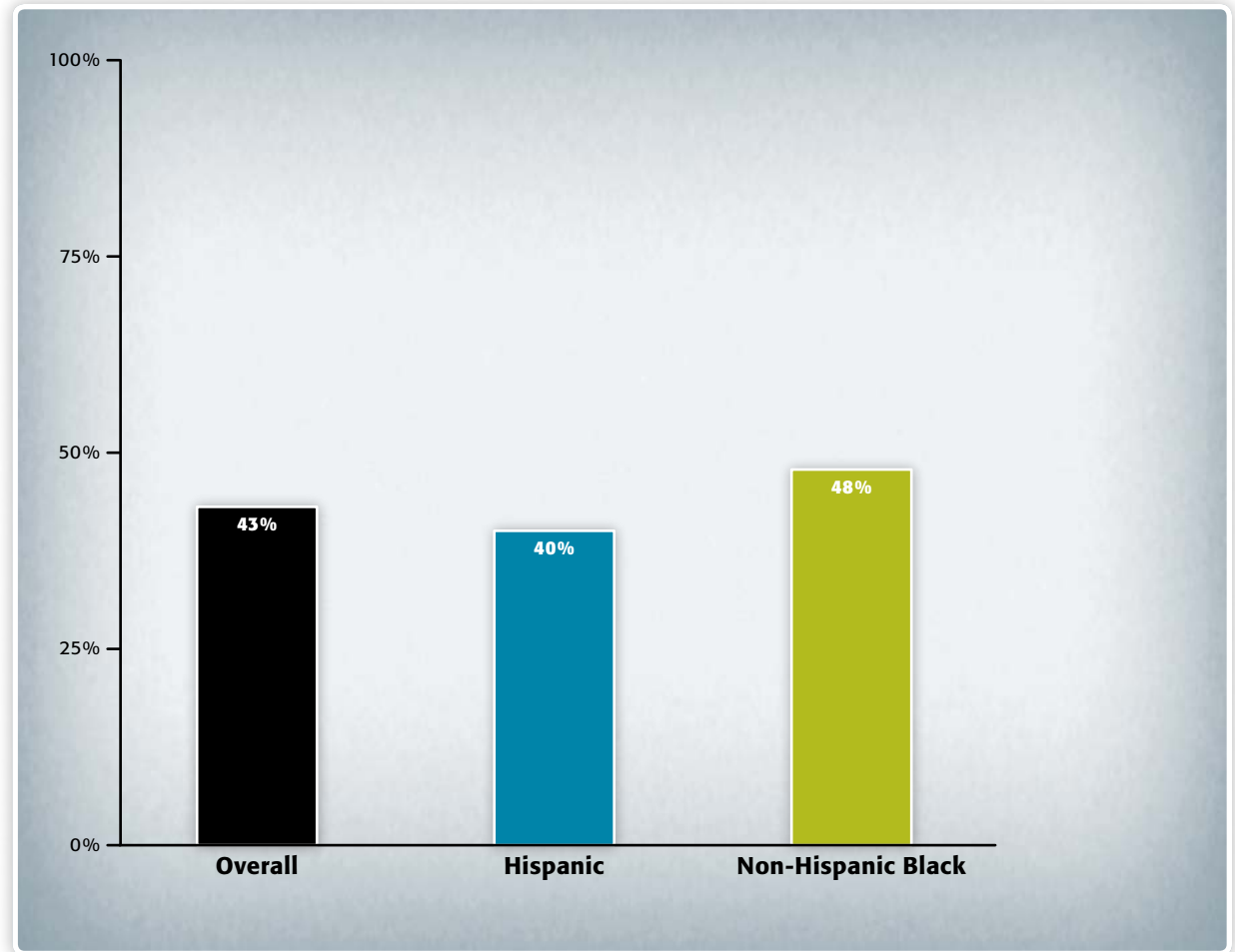
Important considerations in choosing main food stores reported by parents

- In Camden, parents of Hispanic children ages 3–18 are most likely to say they choose their food store because of better prices (55%).
- Non-Hispanic black parents of children ages 3–18 are equally likely to cite convenience (34%) and better price (32%) as the main reason they choose a food store.



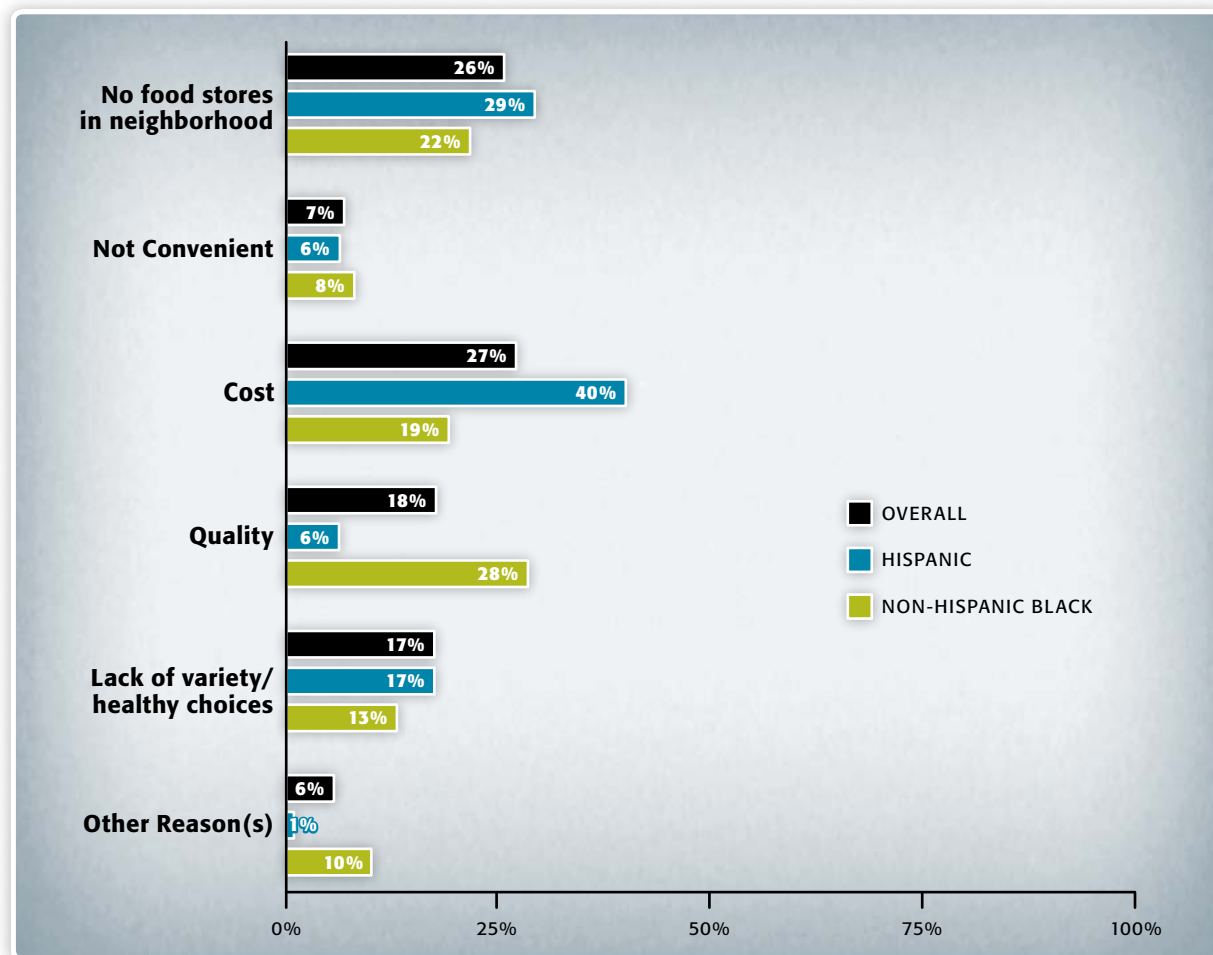
Percentage who do most food-shopping outside their neighborhood

- Overall, 43% of Camden parents of children ages 3–18 do most of their food-shopping outside their neighborhood.



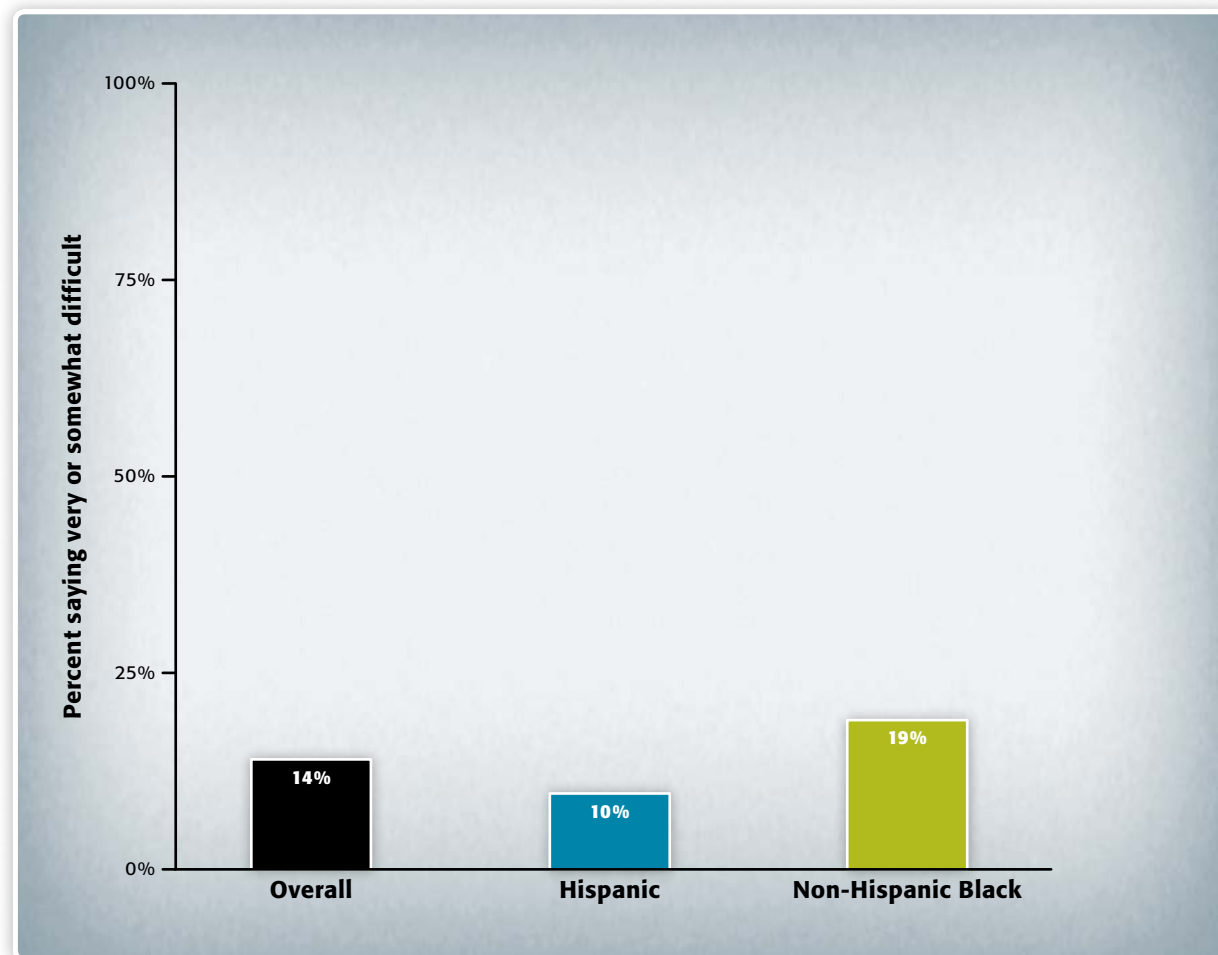
Main reasons for shopping for food outside of neighborhood

- Overall, parents of children ages 3–18 in Camden food-shop outside of their neighborhood primarily due to cost (27%) or because there are no food stores in their neighborhood (26%).
- Parents of Hispanic children most frequently cite cost as the reason they food-shop outside of their neighborhood (40%), compared to only half as many of the parents of non-Hispanic black children (19%).
- Parents of non-Hispanic black children most frequently cite quality as the reason they food-shop outside of their neighborhood (28%), compared to 6% of the parents of Hispanic children.



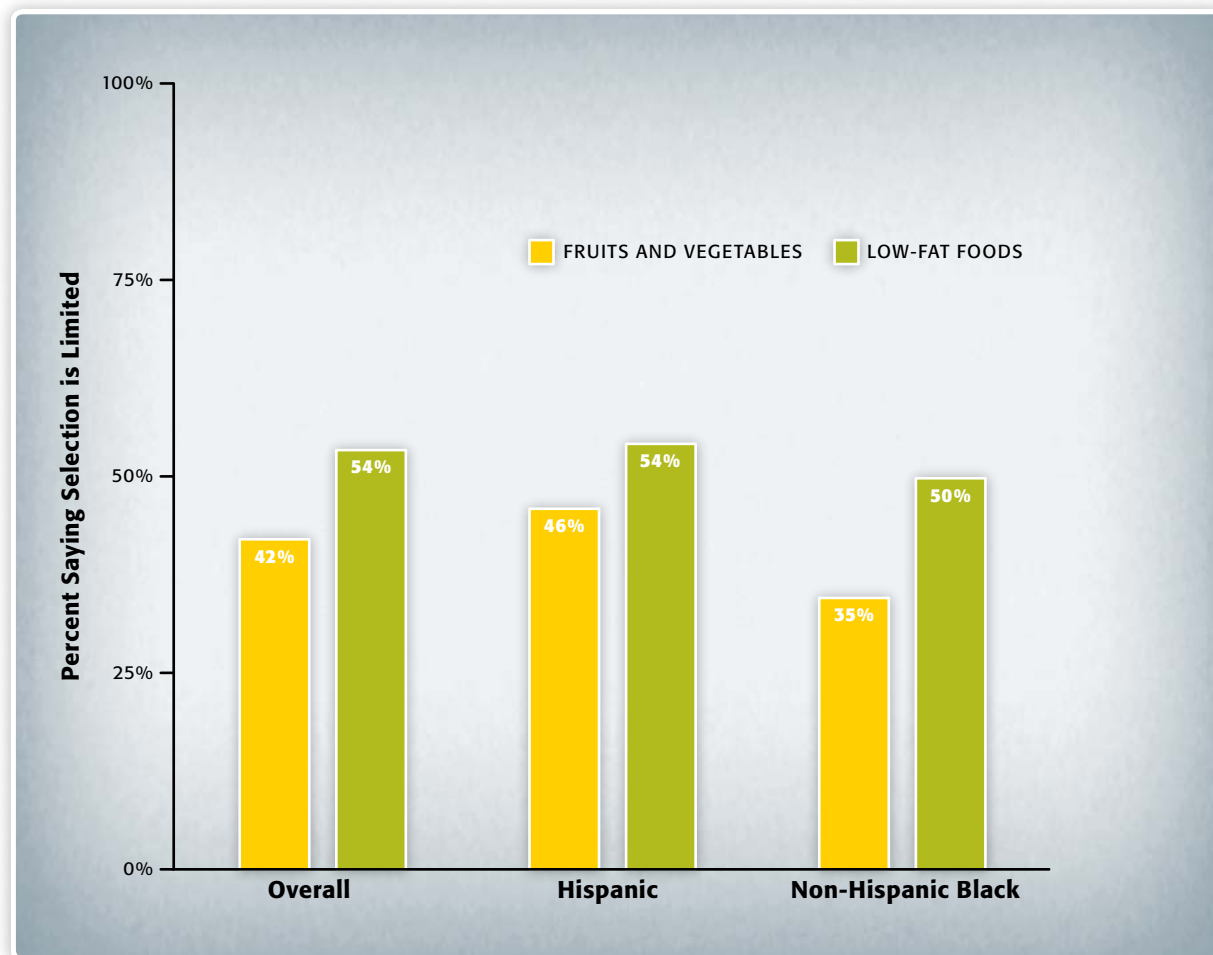
Percentage who say it is difficult to get to store where most of food shopping is done

- Overall, 14% of parents in Camden with children ages 3–18 say it is difficult to get to the store where they do most of their food shopping.



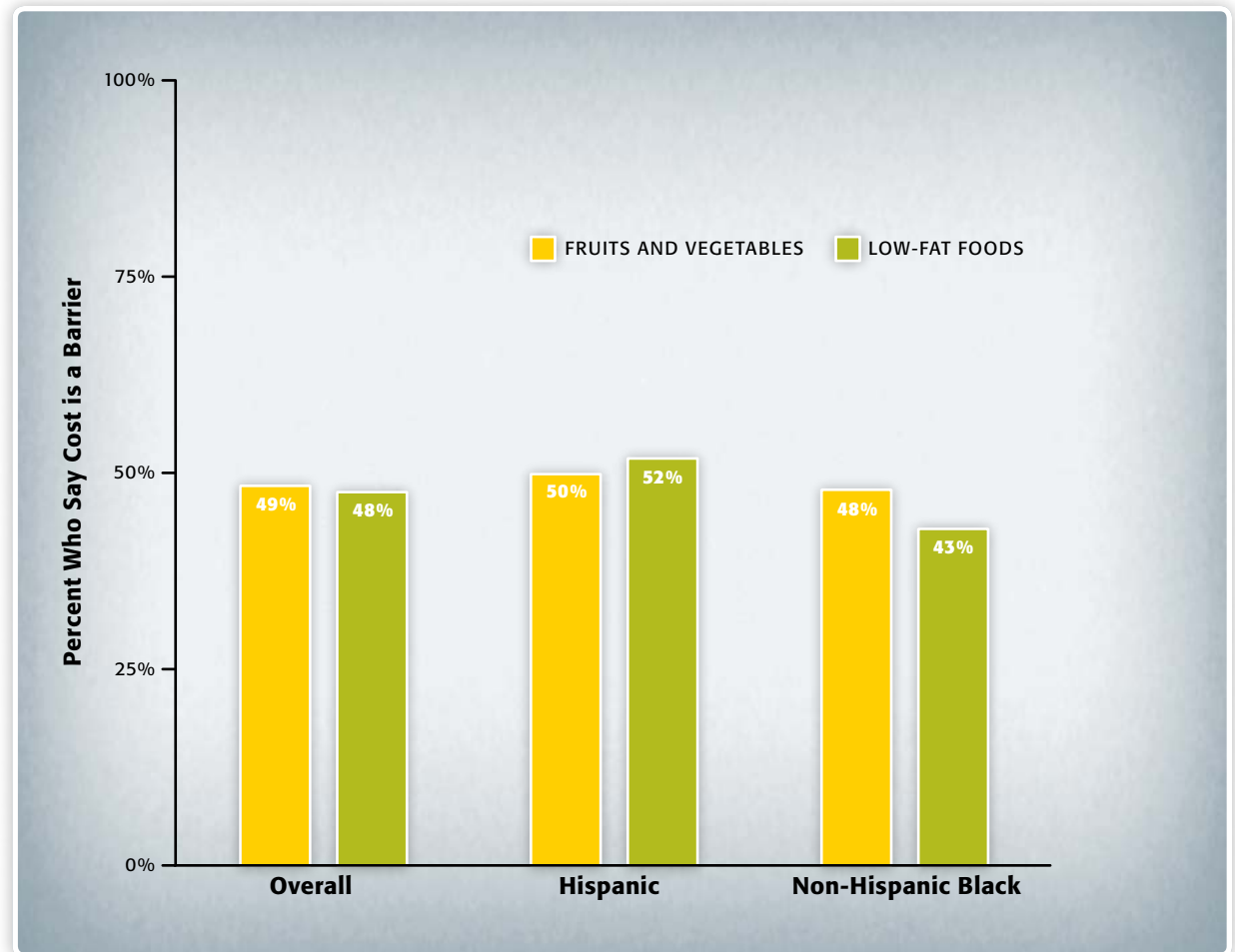
Percentage who do not have a very large selection of good quality fresh fruits and vegetables or low-fat foods at main food store

- Overall, 42% of parents in Camden with children ages 3–18 say their main food store does not carry a very large selection of good quality fresh fruits and vegetables, and 54% state that it does not carry a very large selection of low-fat foods.
- 46% of parents of Hispanic children say their main food store does not have a very large selection of good quality fresh fruits and vegetables, compared to 35% of parents of non-Hispanic black children.
- More than half of the parents say that the selection of low-fat foods is limited, and this pattern varies little by race/ethnicity.



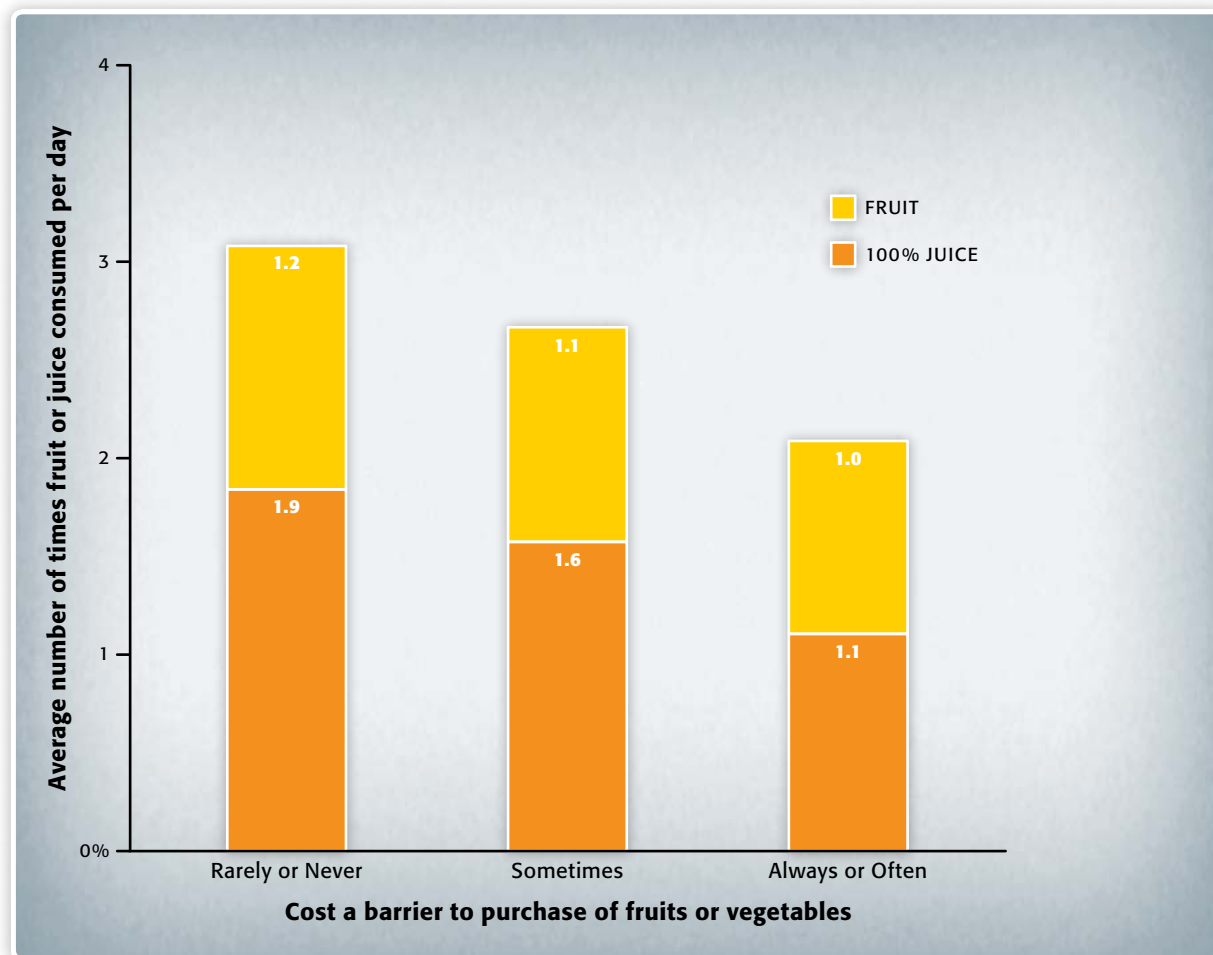
Percentage who say cost is a barrier to purchasing fresh fruits and vegetables and low-fat foods at main food store

- Overall, 49% of parents in Camden with children ages 3–18 say that cost is a barrier to the purchase of fresh fruits and vegetables at their main food store, and 48% say cost is a barrier to the purchase of low-fat foods.
- Cost as a barrier to the purchase of fruits and vegetables varies little by race/ethnicity.



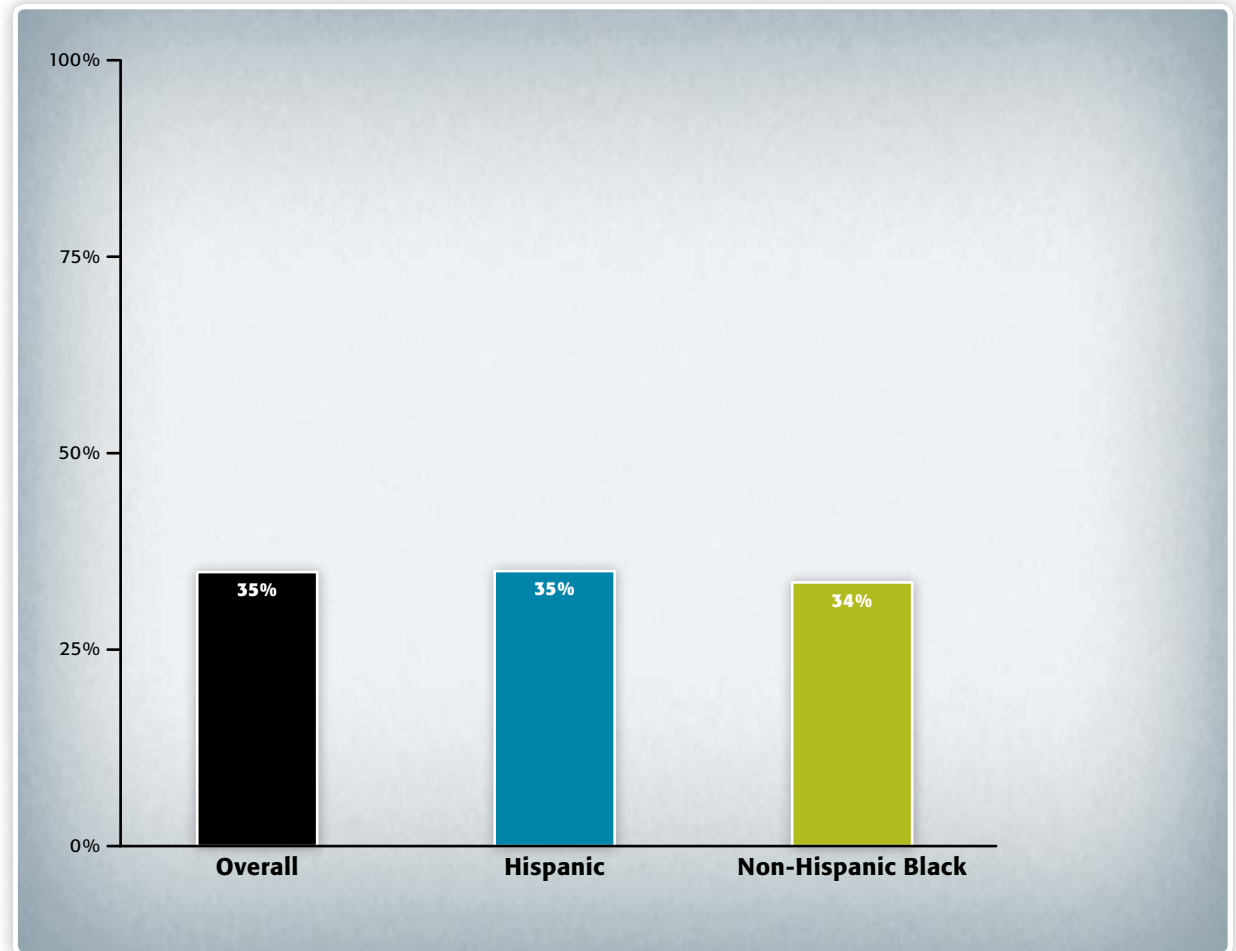
Average fruit/juice consumption decreases among those who report cost is more often a barrier to the purchase of fruits/vegetables

- If cost is not a barrier, fruit + 100% juice is consumed three times per day; but if cost is always or often a barrier, fruit + 100% juice is consumed two times per day.



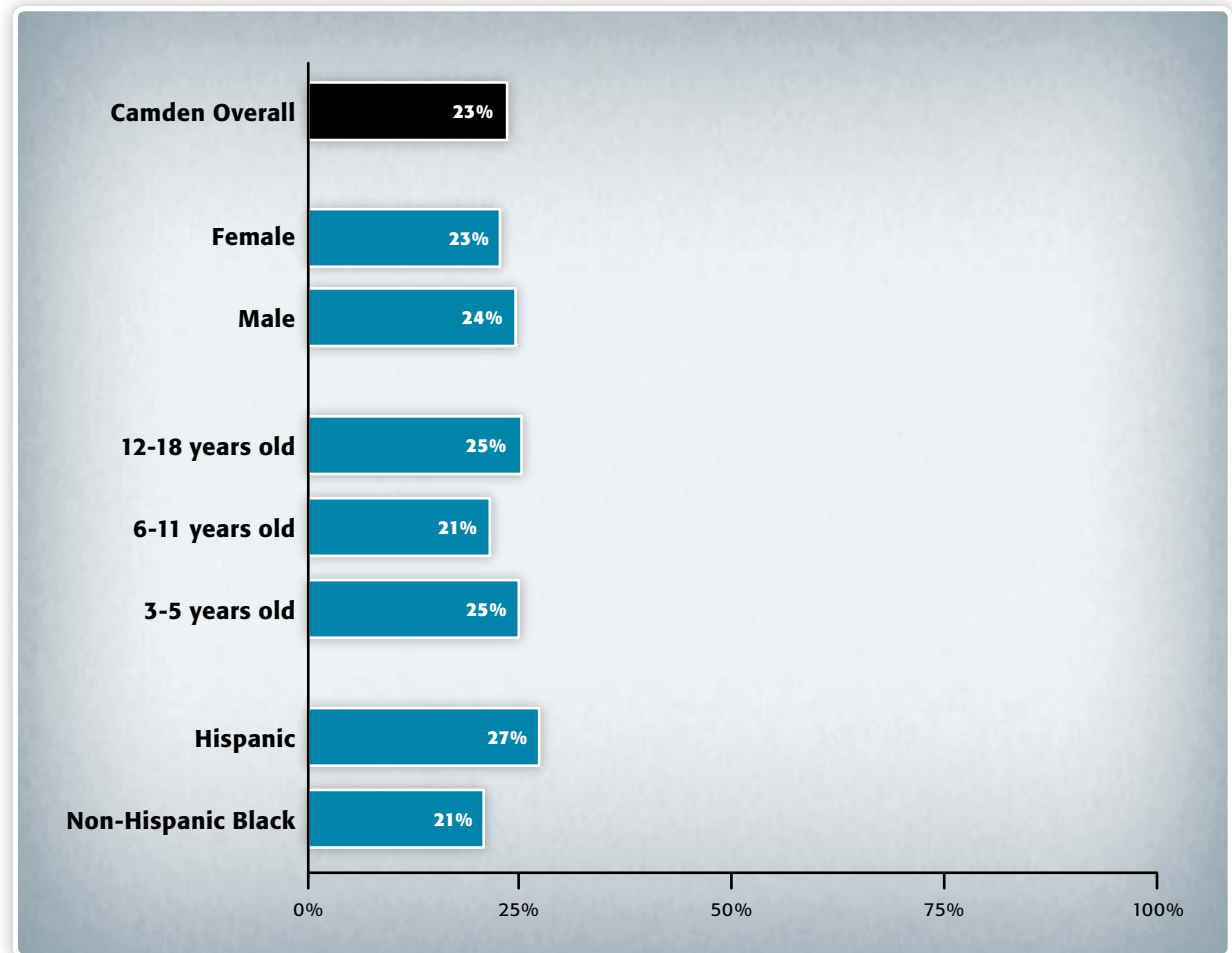
Percentage who have a special store for buying fruits and vegetables

- Overall, about one-third (35%) of parents in Camden with children ages 3–18 say that they buy most of their fresh fruits and vegetables somewhere other than at their main food store.
- This pattern varies little by race/ethnicity.



*Food Insecurity:
One-fourth of Camden
families report that they
sometimes or often do not
have enough food to eat*

- Overall, 23% of Camden parents with children ages 3–18 report that they sometimes or often do not have enough food at home to eat. According to US Department of Agriculture estimates, 15% households in the country are food insecure.



Key findings from food environment section

- Most Camden parents of children ages 3–18 go to supermarkets and superstores to do most of their food shopping. Price and convenience are often the reasons parents choose a particular food store.
- Almost half of the parents do not shop for most of their food in their neighborhood. Cost, quality, and lack of food stores in the neighborhood are the primary reasons cited for not shopping in the neighborhood.
- Almost a third of the parents of Hispanic children and a fifth of non-Hispanic black children report not having a food store in their neighborhood (defined as the area within a 20 minute walk, a 5 minute drive, or about 1 mile in all directions around the respondent's home).
- Parents of Hispanic children most frequently cite cost as the reason for their choice of store as well as the reason for shopping outside of their neighborhood. Non-Hispanic black parents most frequently report quality as the reason they shop outside of their neighborhood.
- A third to a half of the parents surveyed report having limited selection of fruits and vegetables and low-fat foods at the store where they shop. Cost is a barrier for purchasing these items for half of the parents.
- Almost a quarter of the Camden households with children 3–18 years are food insecure. Hispanic households are slightly more likely to be food insecure (27%) compared to non-Hispanic blacks (21%).

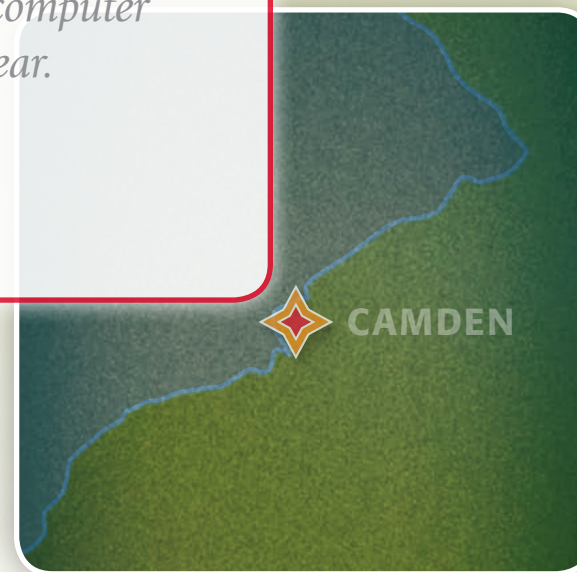
Physical Activity Behaviors

Parents were asked to report on the physical activity and sedentary behaviors of the randomly selected index child.

Respondents were asked to think about the past 7 days and report frequency of their child being active for 30 minutes and 60 minutes per day.

Sedentary behavior was assessed by asking the parent to report on the usual number of hours spent watching television, and playing computer or video games on weekdays and weekends during the school year.

Physical activity and sedentary activity data are compared to established recommendations, where available.



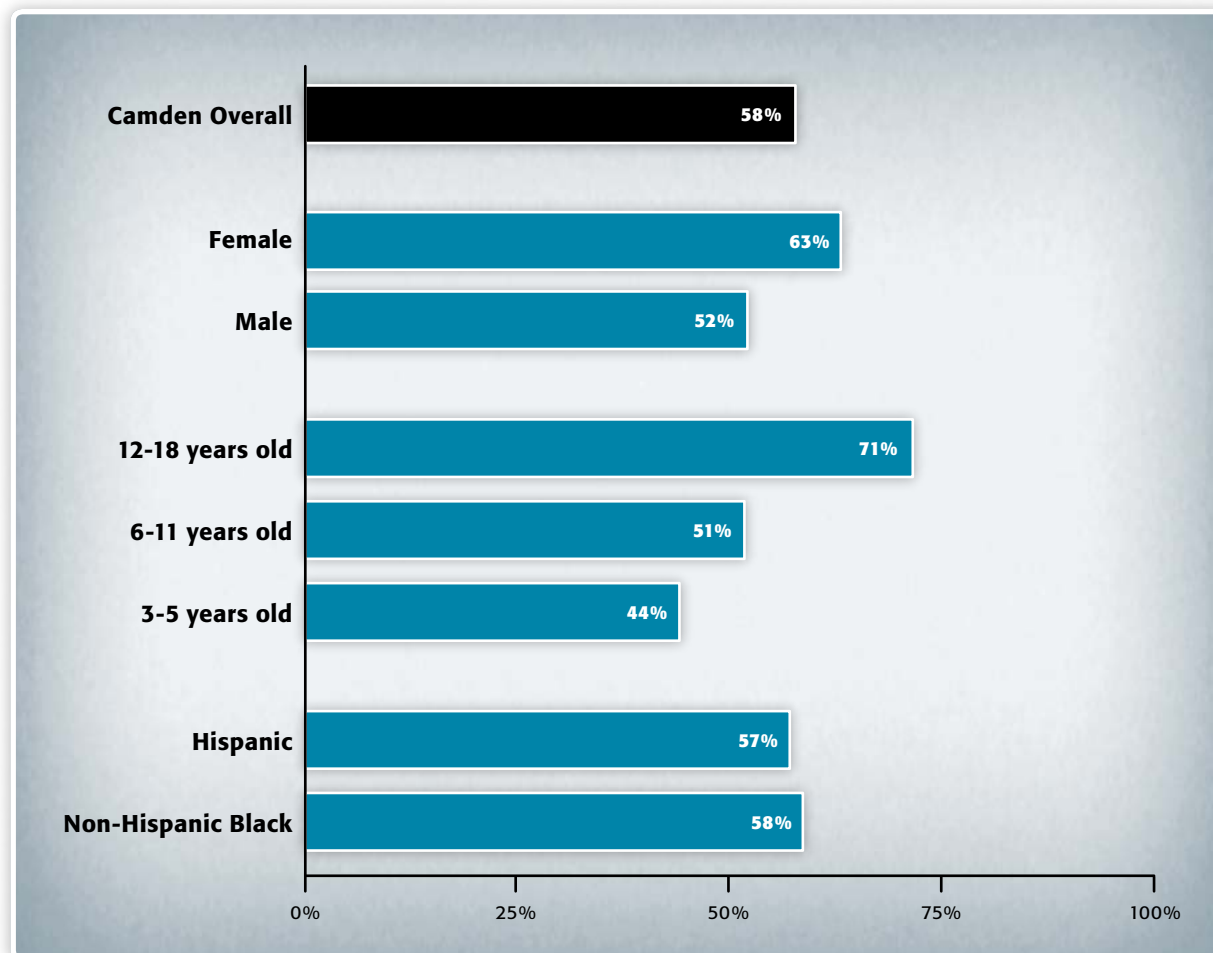
Percentage not active at least **60 minutes a day*** 6–7 days a week

The U.S. Department of Health and Human Services' 2008 Physical Activity Guidelines for Americans recommend that children should be physically active for at least 60 minutes every day.

In Camden

- 58% of 3–18 year olds do not meet this recommendation.
- Camden girls are more likely to be inactive (63%), compared to boys (52%).
- Frequency of inactivity increases with age: 71% of Camden adolescents are not active at least 60 minutes a day 6–7 days a week, compared to 51% of children ages 6–11 and 44% of children ages 3–5.
- There is little variation by race/ethnicity.

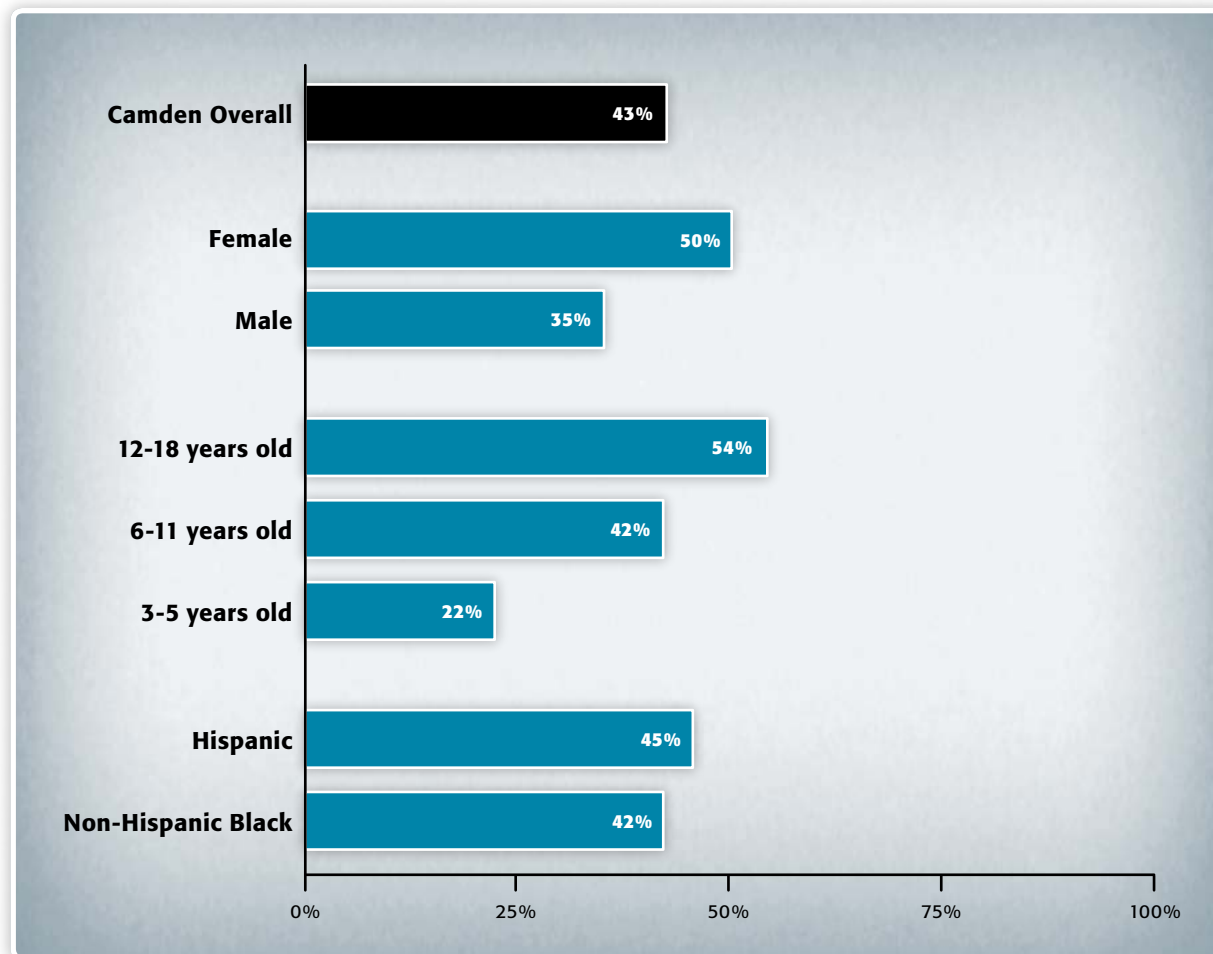
* Includes adding up all of the times child spent in any kind of physical activity that increased heart rate and made child breathe hard.



*Percentage not active at least **30 minutes a day*** 6–7 days a week*

- Overall, 43% of 3–18 year old children in Camden are not active at least 30 minutes a day 6–7 days a week.
- 50% of Camden girls are not active at least 30 minutes a day 6–7 days a week, compared to 35% of boys.
- Frequency of inactivity increases with age: 54% of Camden adolescents are not active at least 30 minutes a day 6–7 days a week, compared to 42% of children ages 6–11 and 22% of children ages 3–5.
- There is little variation by race/ethnicity.

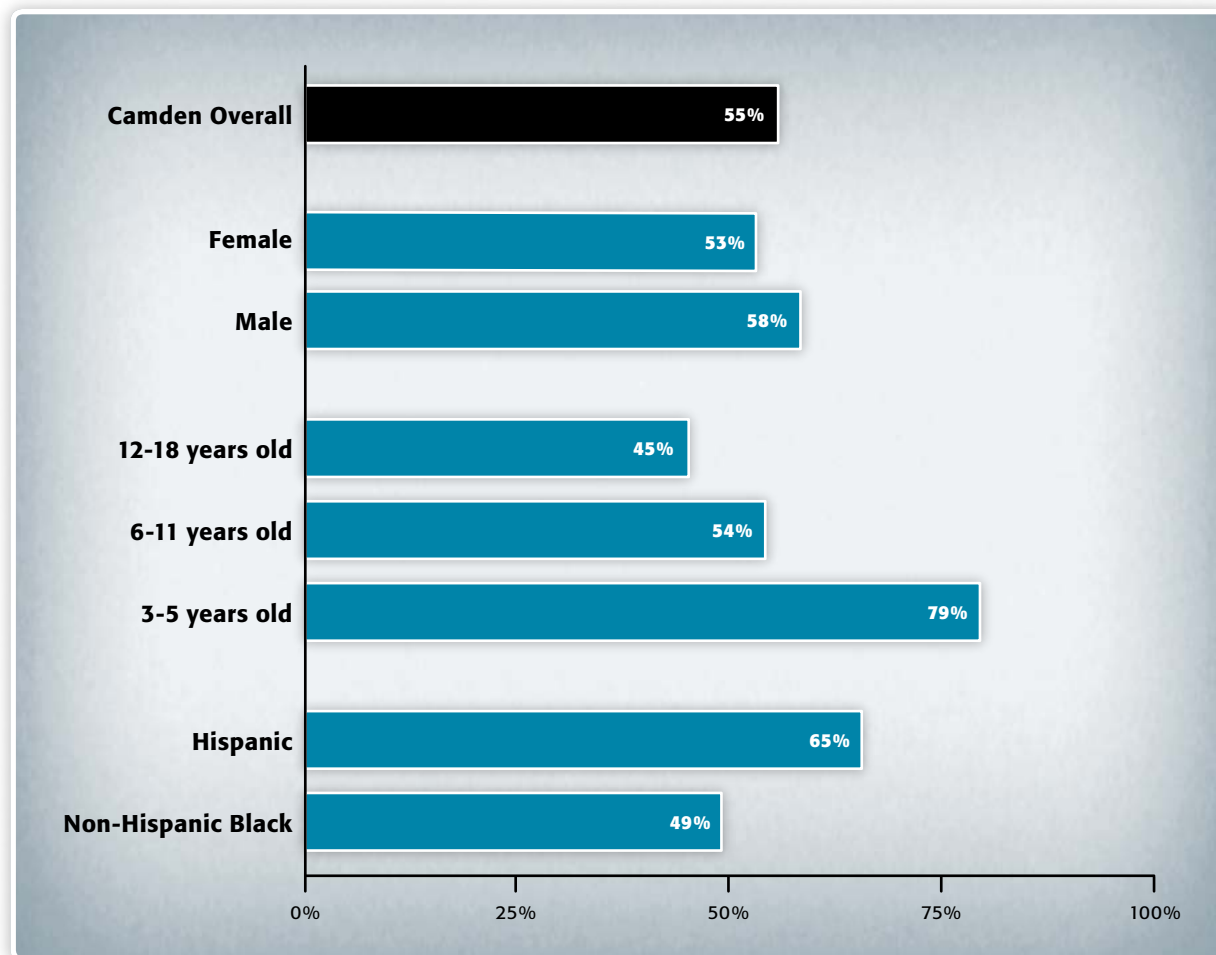
* Includes adding up all of the times child spent in any kind of physical activity that increased heart rate and made child breathe hard.



Percentage who never walk, bike, or skateboard to school*

- Overall, 55% of 3–18 year old children in Camden never walk, bike, or skateboard to school.
- 79% of Camden children ages 3–5 never walk, bike, or skateboard to school, compared to 54% of children ages 6–11 and 45% of those ages 12–18.
- 65% of Hispanic children in Camden never walk, bike, or skateboard to school, compared to 49% of non-Hispanic black children.
- This behavior varies little by gender.

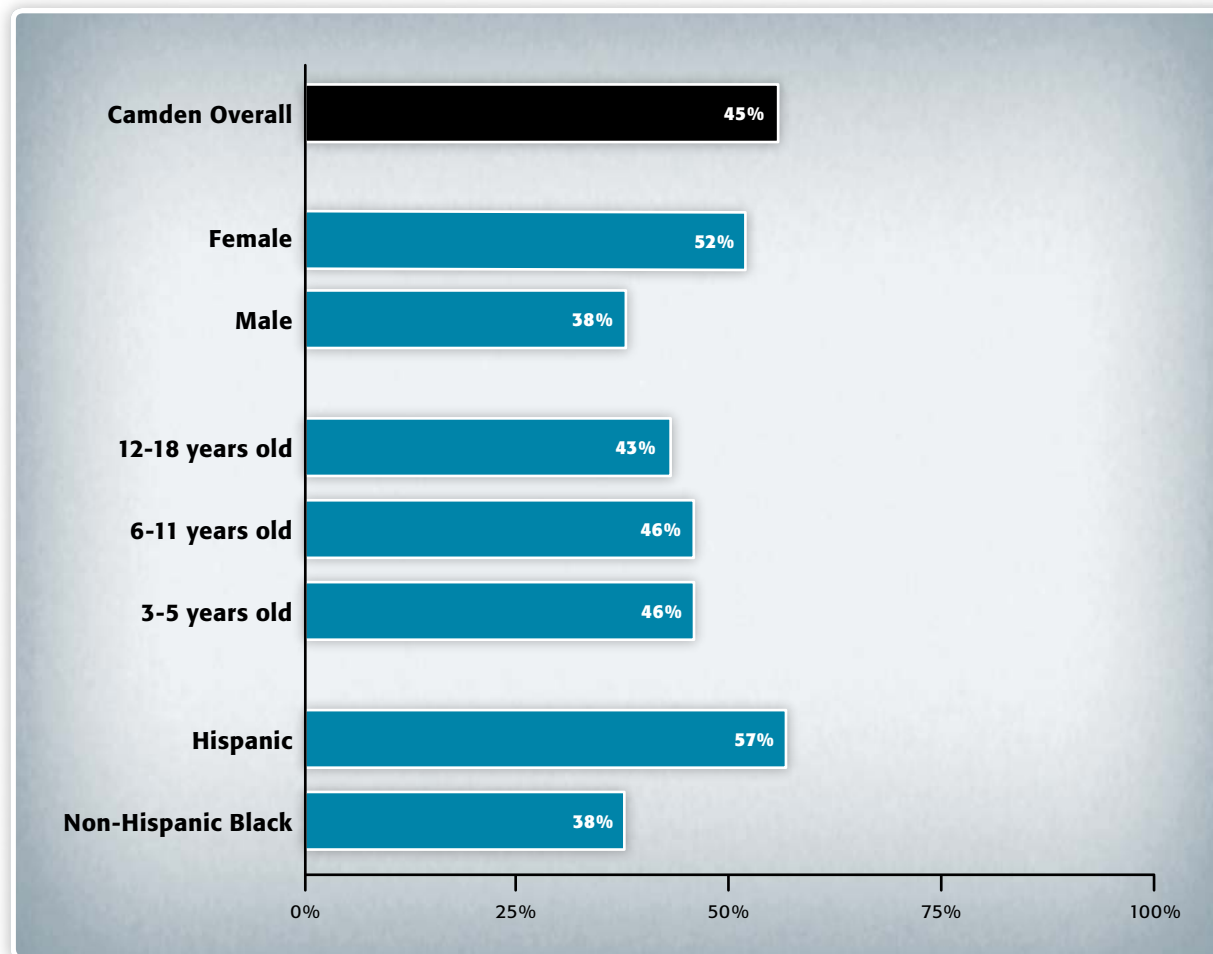
* Does not include motor scooters. School refers to school, kindergarten, pre-school, or day-care.



Percentage who get physical activity at school* 2 or fewer days per week

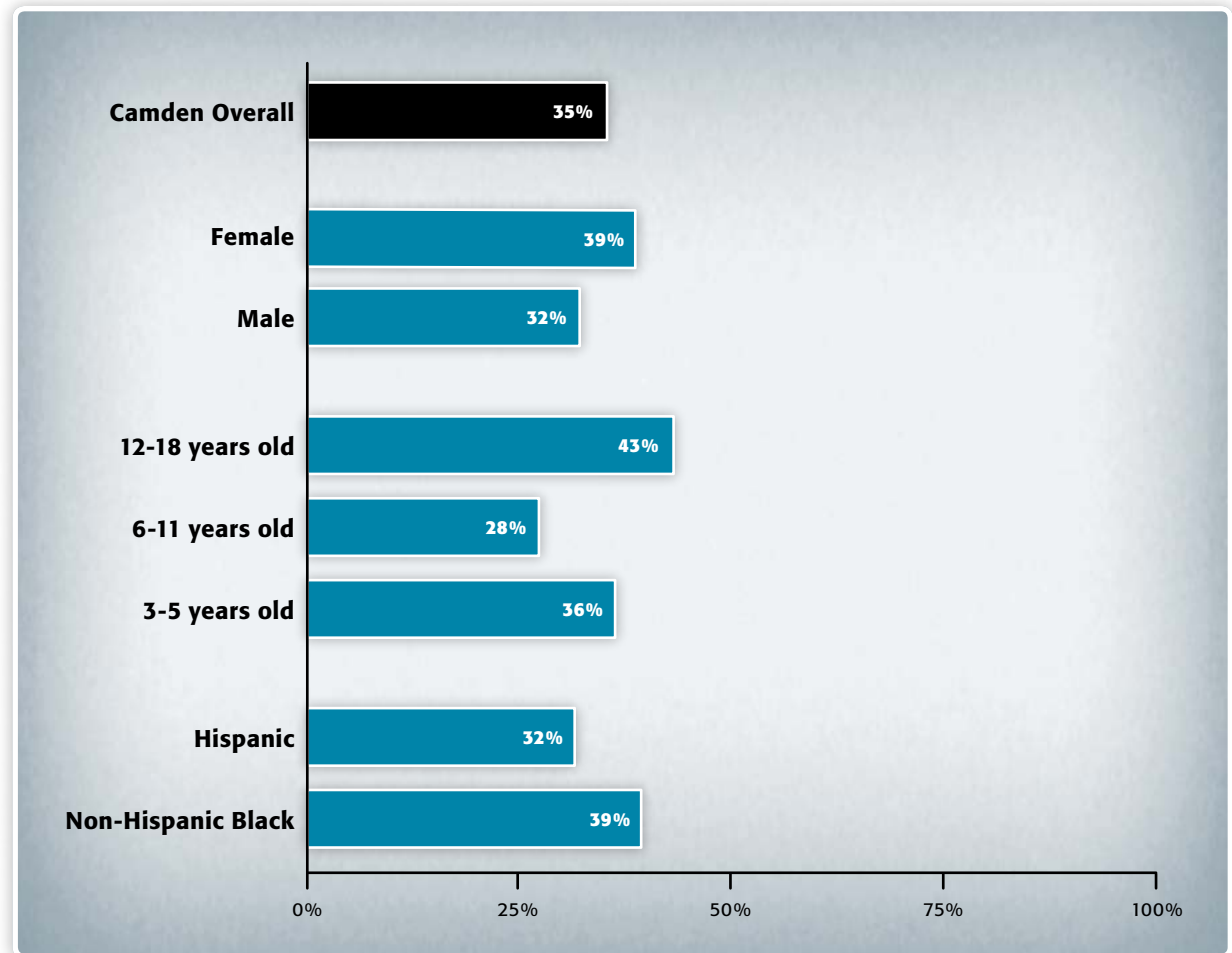
- Overall, 45% of 3–18 year old children in Camden have only 2 or fewer days of some type of physical activity per week at school.
- Girls get less physical activity at school than boys (52% vs. 38%).
- Hispanic children get less physical activity at school than non-Hispanic black children (57% vs. 38%).
- Physical activity at school varies little across age groups.

* Includes any type of physical activity or exercise at school (e.g., PE class, recess). School refers to school, kindergarten, pre-school, or day-care.



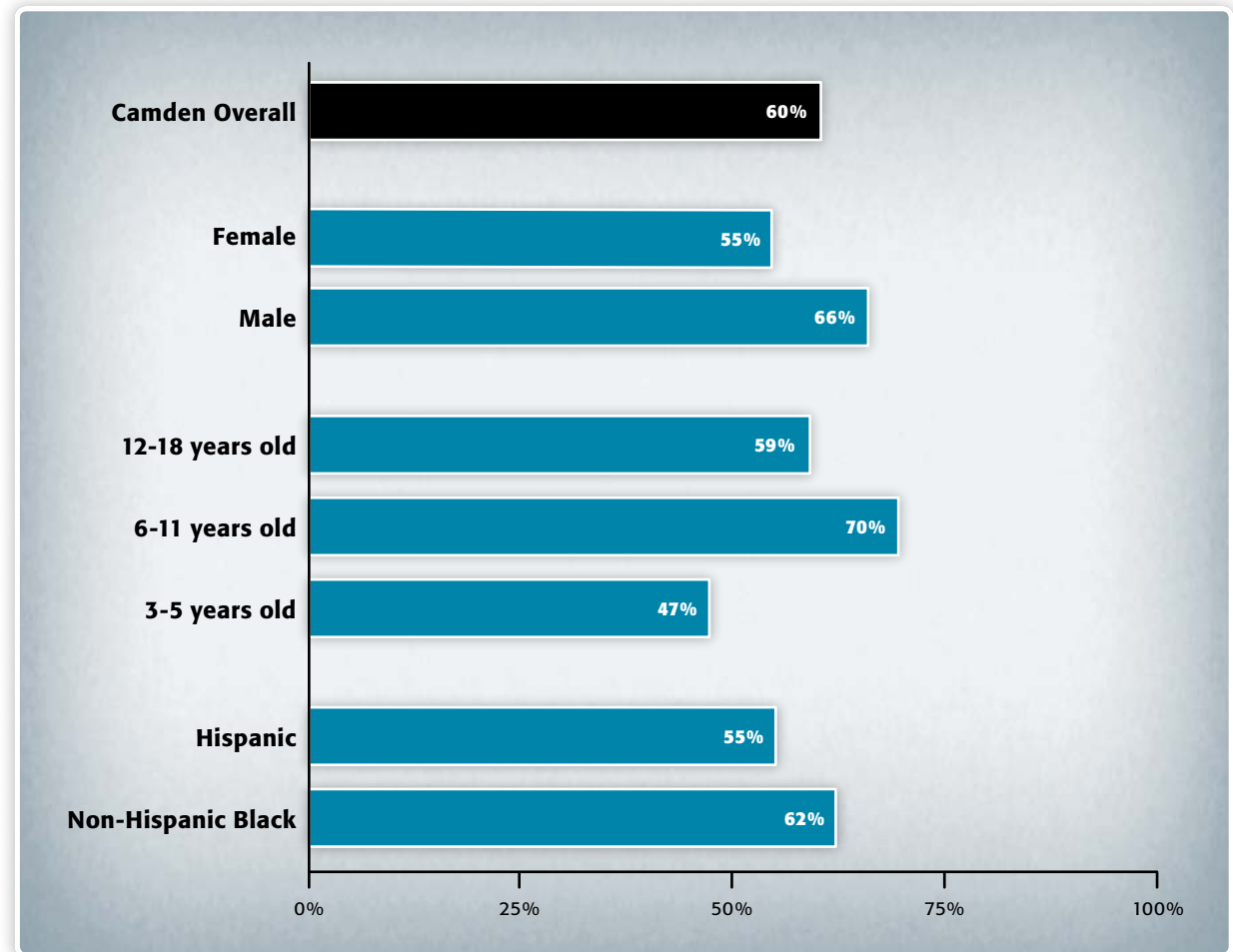
*Percentage who spend more than 2 hours a day on **weekdays** on TV, computer, or video games*

- Overall, 35% of 3–18 year old children in Camden spend more than 2 hours a day on weekdays outside of school watching TV, being on the computer (not including doing schoolwork), or playing video games.
- 43% of Camden adolescents and 36% of children ages 3–5 spend more than 2 hours a day on weekdays watching TV, being on the computer, or playing video games, compared to 28% of children ages 6–11.



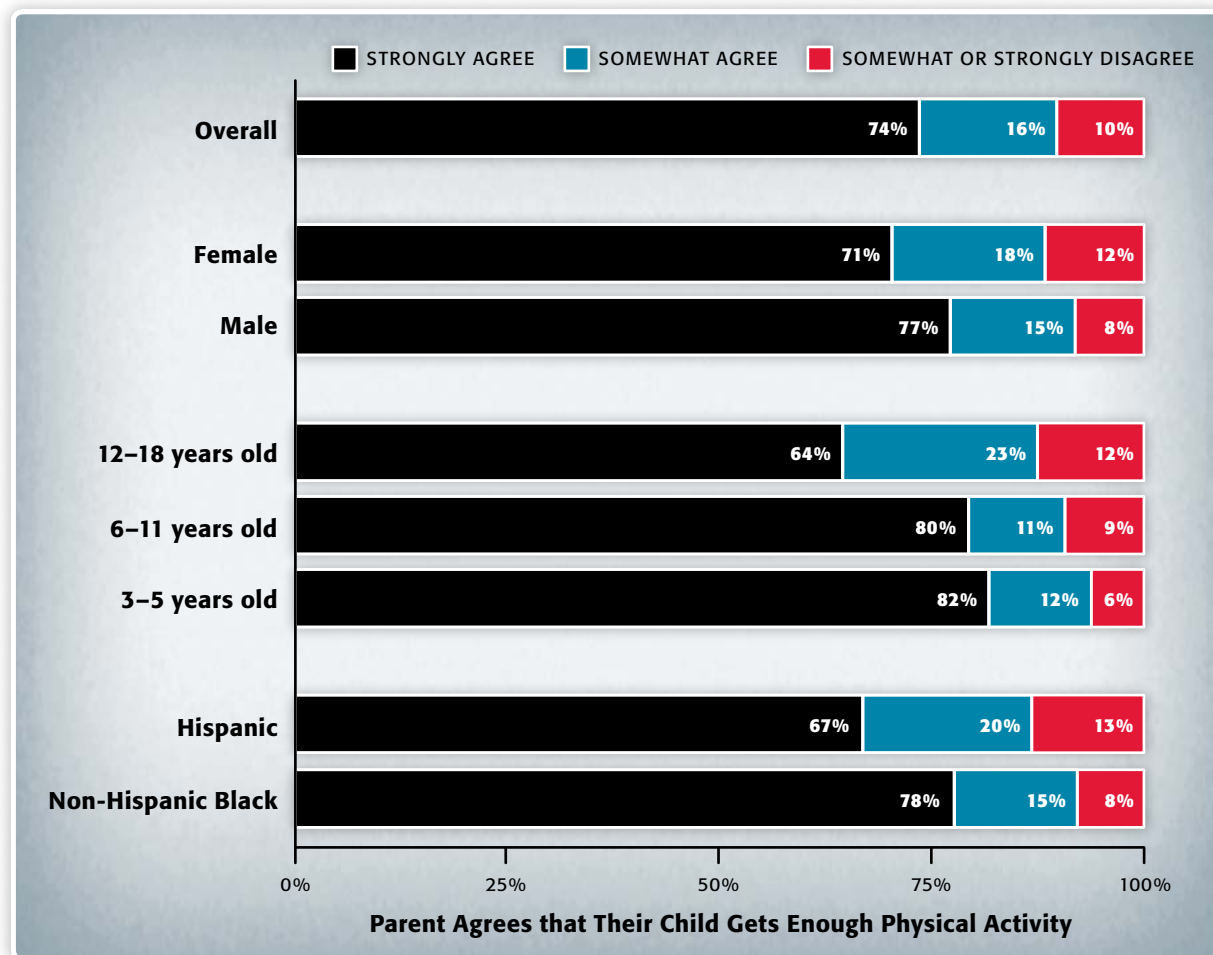
*Percentage who spend more than 2 hours a day on **weekend days** on TV, computer, or video games*

- Overall, 60% of 3–18 year old children in Camden spend more than 2 hours a day on weekend days watching TV, being on the computer (not including doing schoolwork), or playing video games.
- 66% of Camden boys spend more than 2 hours a day on weekend days on the TV, computer, or video games, compared to 55% of girls.
- 70% of Camden children ages 6–11 spend more than 2 hours a day on weekend days on the TV, computer, or video games, compared to 59% of those ages 12–18 and 47% of those ages 3–5.



Even though only 42% of Camden children meet the recommended level of physical activity, 90% of parents think their children get enough physical activity

- Overall, 90% of parents strongly agree or somewhat agree that, on the whole, their child gets enough physical activity.
- 64% of the parents of adolescents strongly agree that their children get enough physical activity, compared to 80% of the parents of children ages 6–11 and 82% of the children ages 3–5.
- 67% of parents of Hispanic children strongly agree that their children get enough physical activity, compared to 78% of the parents of non-Hispanic black children.
- There is little variation by gender.



NOTE: Bar totals may not equal 100% due to rounding.

Key findings from physical activity behavior section

- Only 42% of Camden children ages 3–18 meet the 2008 Physical Activity Guidelines for Americans. Girls and adolescents are even less likely to meet these recommendations. However, 90% of parents think that their children get enough physical activity.
- Hispanic children are less likely to walk or bike to school and are also less likely to get physical activity at school than are non-Hispanic black children. Parents report that girls in Camden are less likely to get physical activity at school compared to boys.
- The American Academy of Pediatrics recommends that children spend no more than two hours per day on entertainment media like television, computers, and video games. A third of the children ages 3–18 years in Camden spend more than two hours per day watching TV, playing video or computer games during weekdays and 60% do so on weekend days. While children aged 6-11 are the least likely to spend this time on entertainment media during weekdays, they are the most likely to do so over the weekends.

Physical Activity Environment

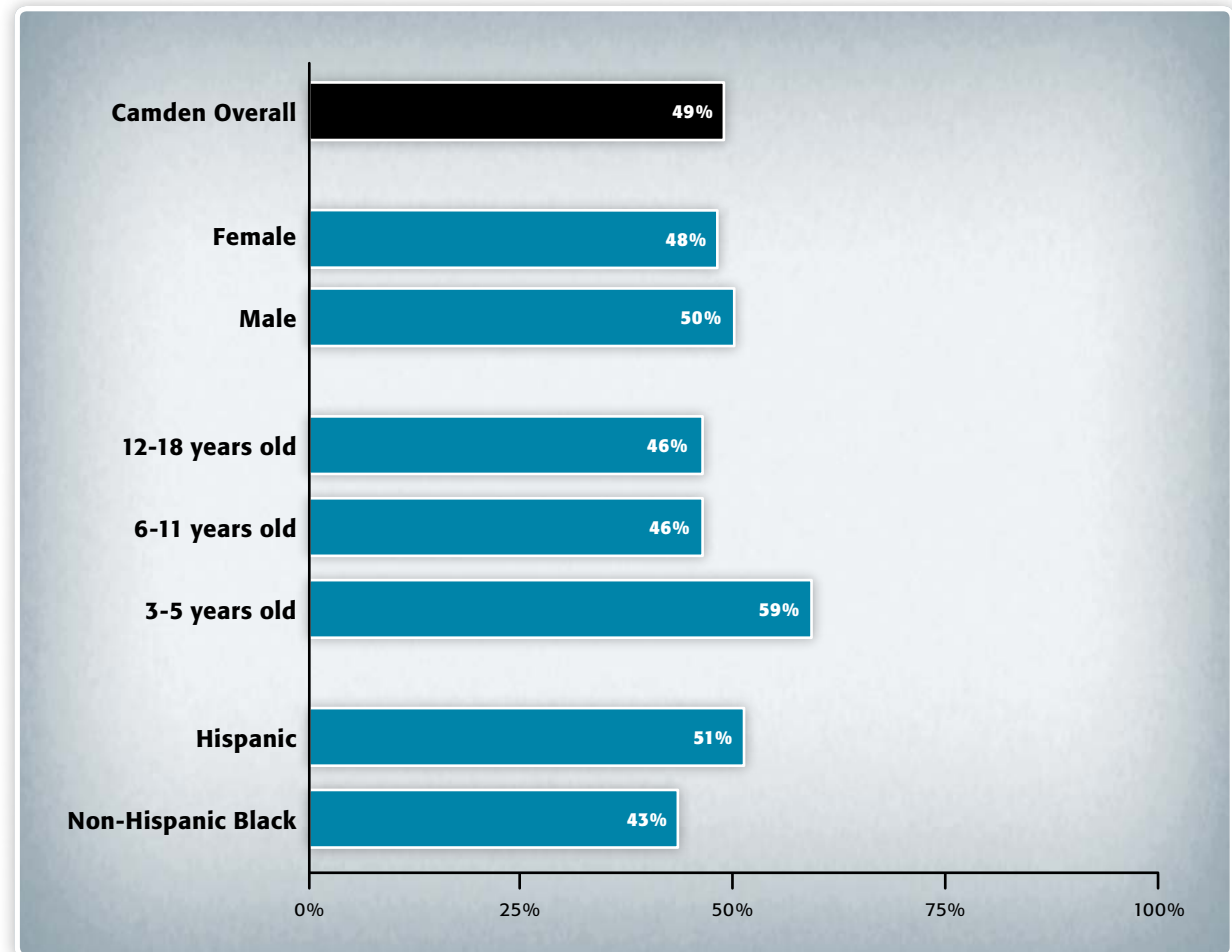
Charts in this section describe parents' perceptions of the physical activity environment as well as aspects that may serve as barriers to accessing opportunities for physical activity in their neighborhood.

Neighborhood is defined as the area within a 20 minute walk, a 5 minute drive, or about 1 mile in all directions around the respondent's home.



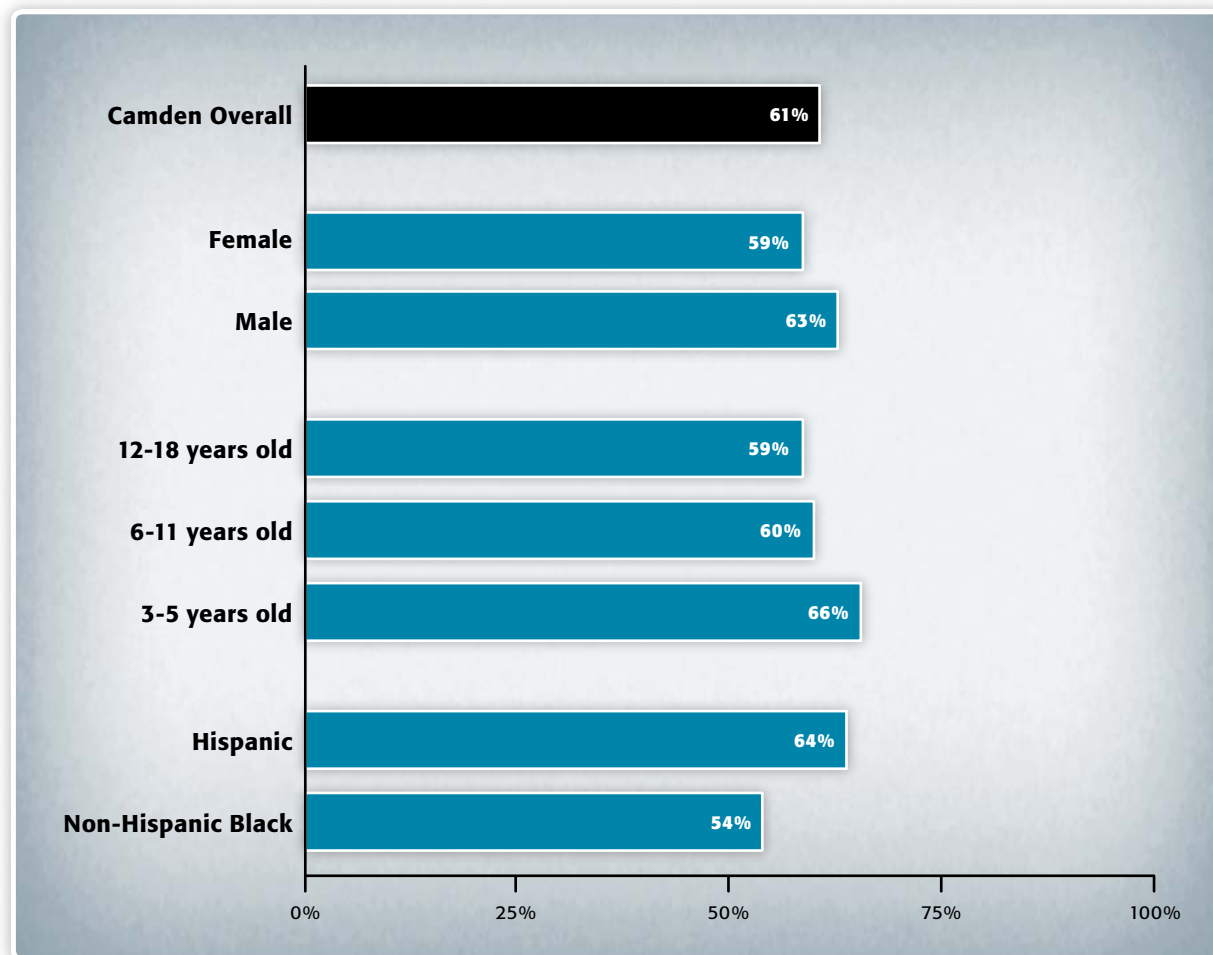
Percentage who say neighborhood is unsafe due to **traffic**

- Overall, 49% of Camden parents of children ages 3–18 think their neighborhoods are somewhat or very unsafe due to traffic.
- Parents of children ages 3–5 are more likely to think their neighborhoods are unsafe due to traffic (59%), compared to parents of older children (46%).
- This varies little by gender.



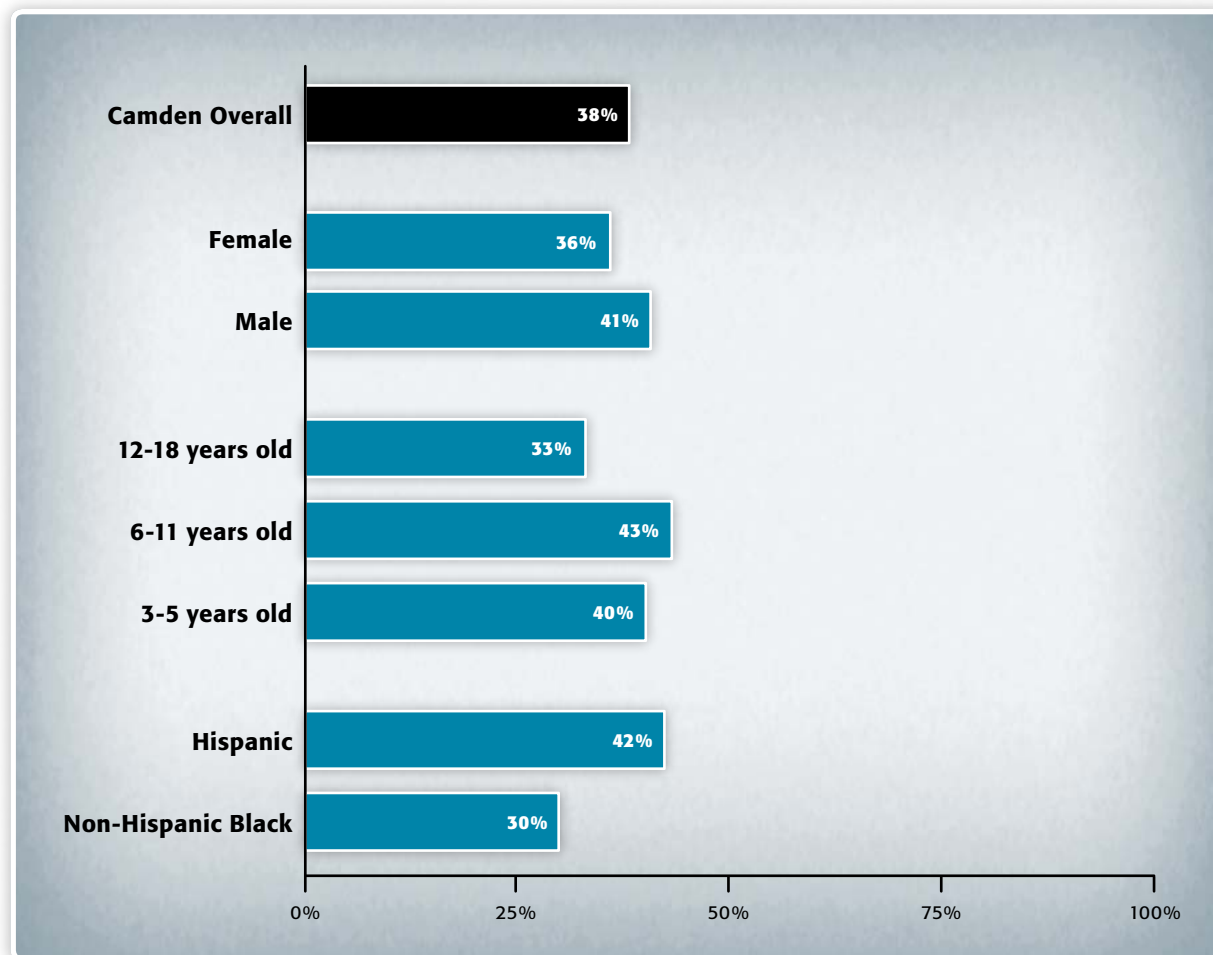
Percentage who say neighborhood is unsafe due to **criminal activity**

- Overall, 61% of Camden parents of children ages 3–18 think their neighborhoods are somewhat or very unsafe due to criminal activity.
- Parents of Hispanic children are more likely to think their neighborhoods are unsafe due to criminal activity than parents of non-Hispanic black children (64% vs. 54%).
- This varies little by gender.



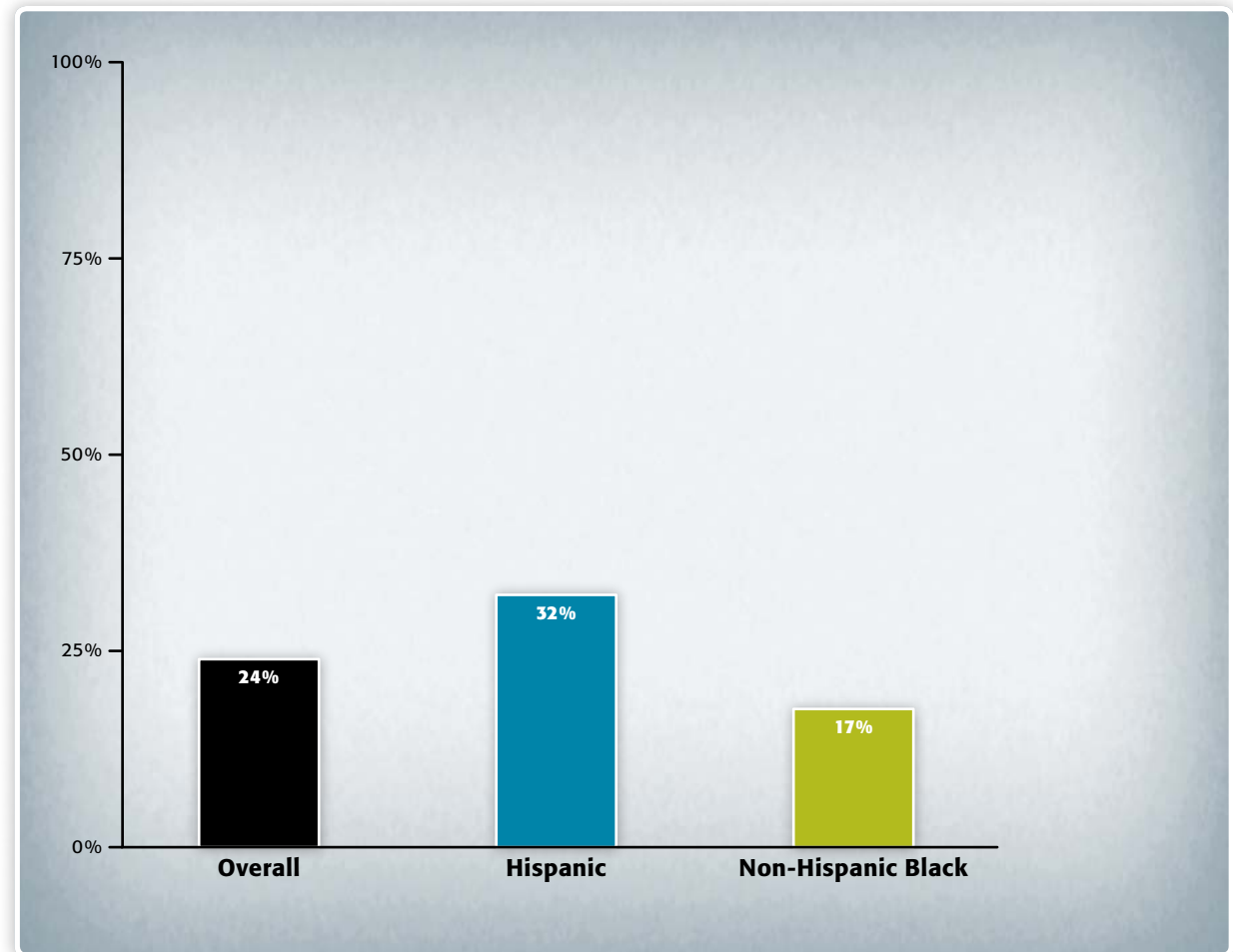
Percentage who say neighborhood is unpleasant for walking, running, biking, or playing

- Overall, 38% of Camden parents of children ages 3–18 think their neighborhoods are somewhat or very unpleasant for walking, playing, etc.
- Camden parents of children ages 6–11 (43%) and ages 3–5 (40%) are more likely to think their neighborhoods are unpleasant, compared to parents of adolescents (33%).
- Parents of Hispanic children are more likely to think their neighborhood is unpleasant compared to parents of non-Hispanic black children (42% vs. 30%).
- This varies little by gender.



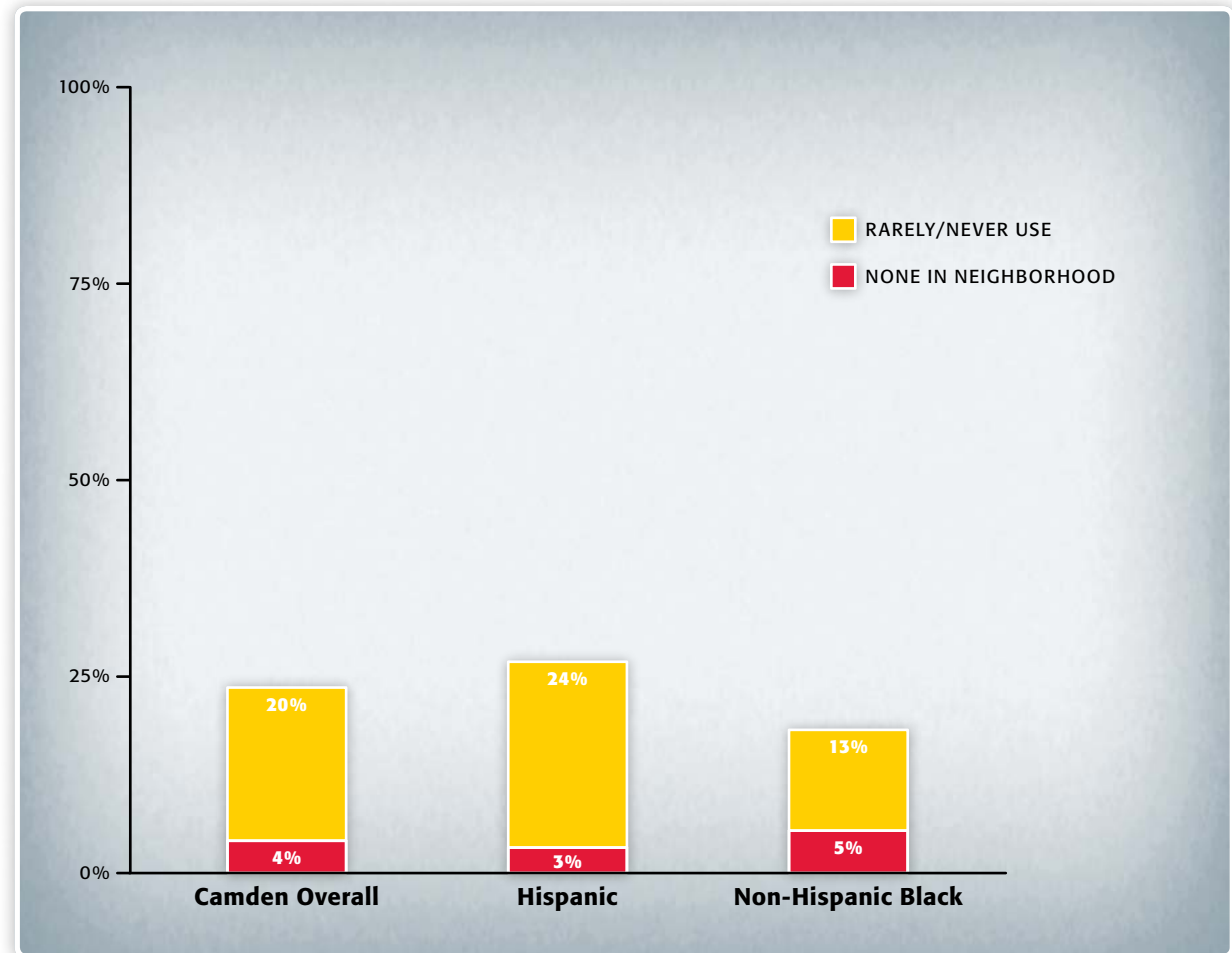
Percentage who have no working street lights in most of neighborhood

- Overall, 24% of Camden parents of children ages 3–18 report that they do not have working street lights in most of their neighborhood.
- Parents of Hispanic children are almost twice as likely as parents of non-Hispanic black children to report no working street lights in most of their neighborhood (32% vs. 17%).



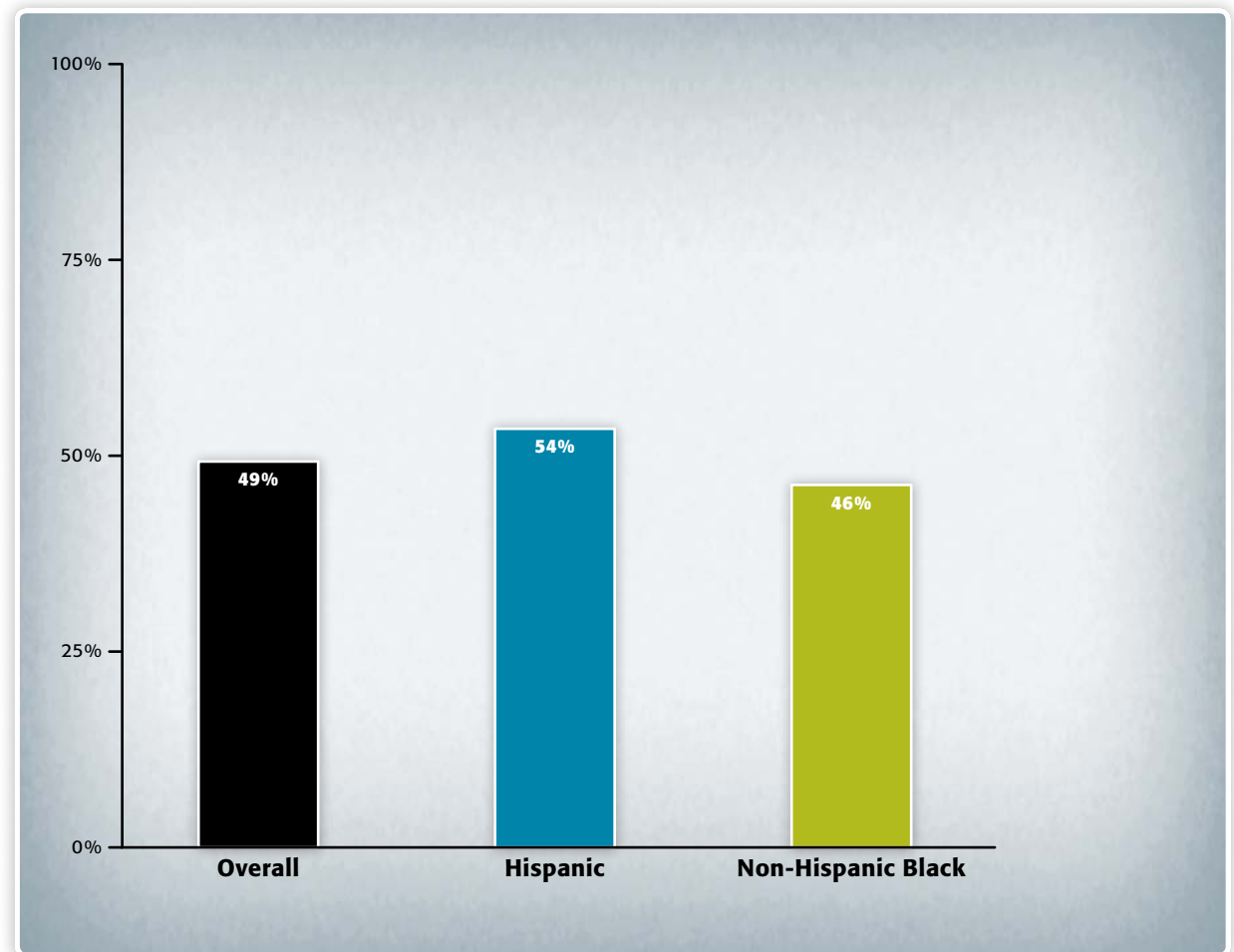
*Percentage of children with no **sidewalks** in neighborhood or who rarely/never use sidewalks in neighborhood to walk, run, bike, or play*

- Overall, 4% of 3–18 year old children in Camden live in neighborhoods without sidewalks and another 20% rarely or never use sidewalks in their neighborhood to run, bike, or play.
- 24% of Hispanic children in Camden rarely or never use sidewalks in their neighborhood to run, bike, or play compared to 13% of non-Hispanic black children.



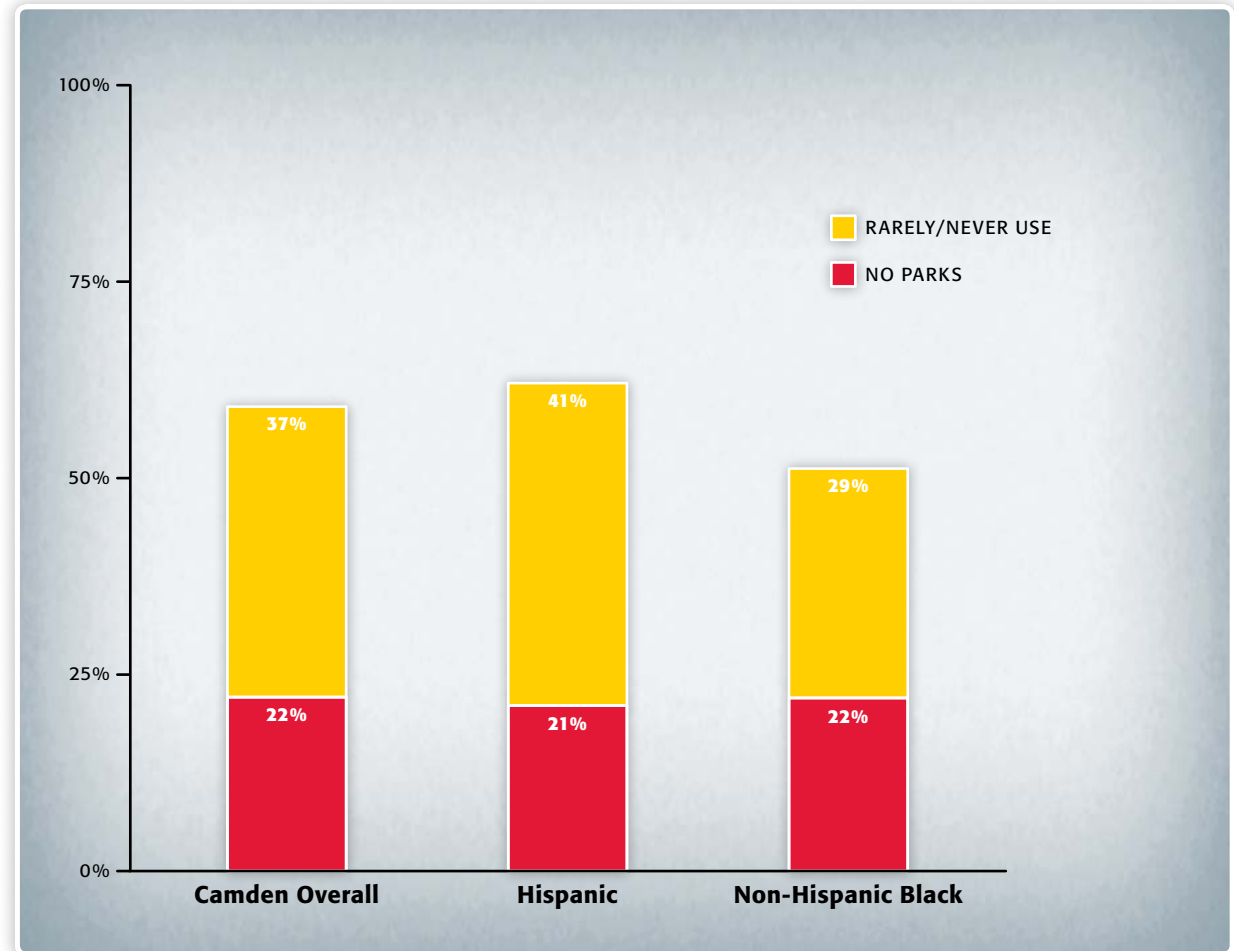
Percentage whose sidewalks in neighborhood are in fair or poor condition

- Overall, 49% of Camden parents of children ages 3–18 report that the sidewalks in their neighborhood are not in good condition.



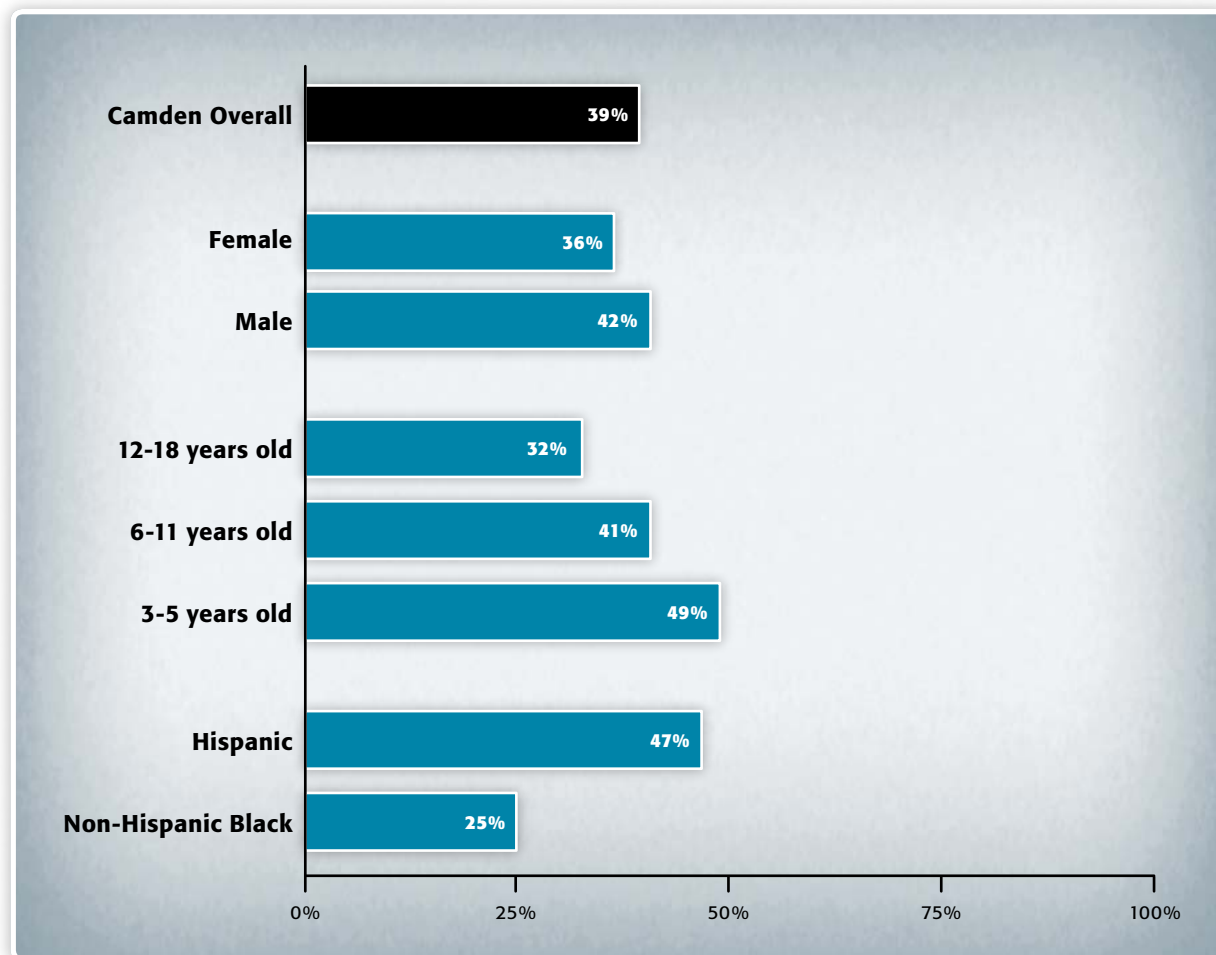
*Percentage of children with no **parks** in neighborhood or who rarely/never use parks to walk, run, bike, or play*

- Overall, 22% of 3–18 year old children in Camden live in neighborhoods without parks and an additional 37% rarely or never use parks to run, bike, or play.
- 41% of Hispanic children in Camden rarely or never use parks in their neighborhood to run, bike, or play, compared to 29% of non-Hispanic black children.



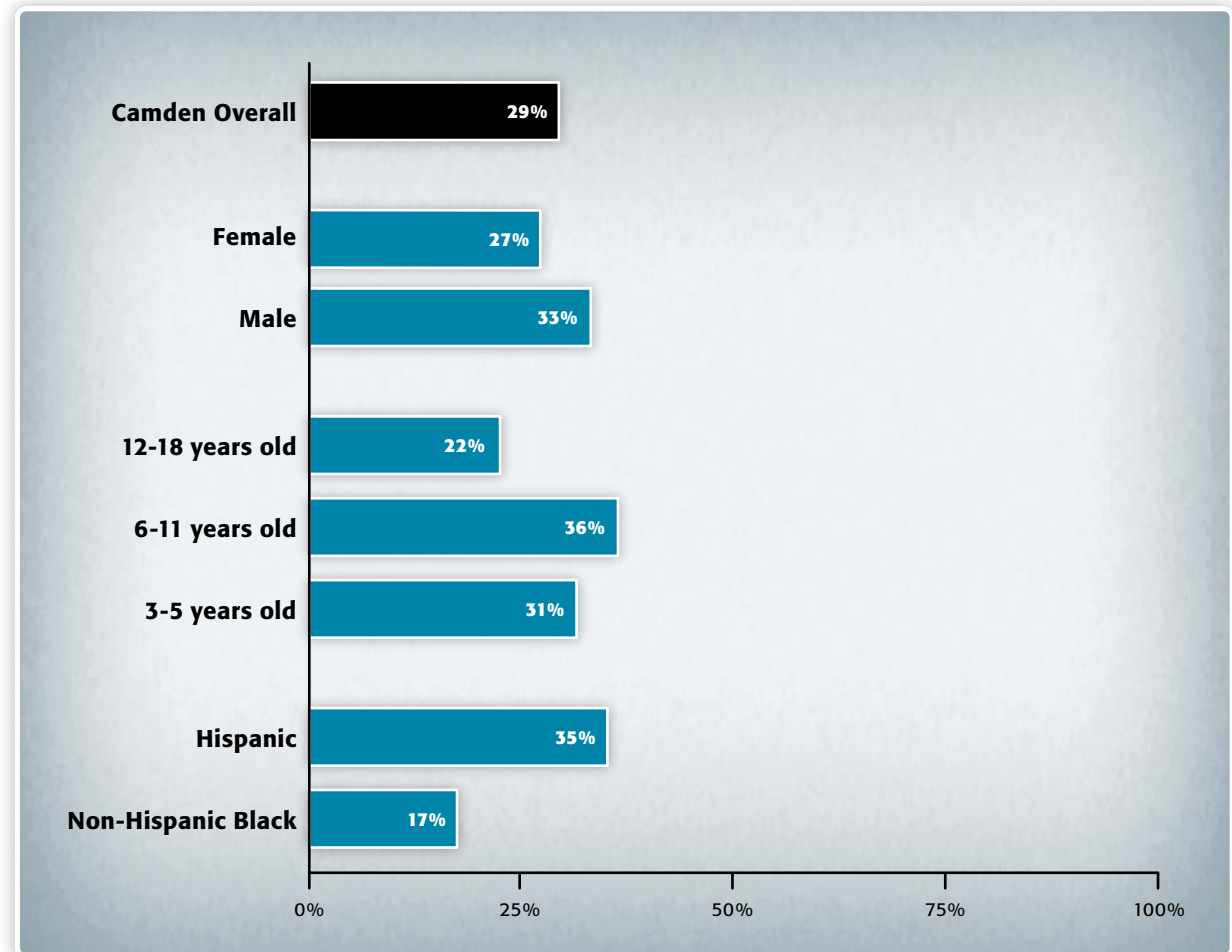
Percentage who report neighborhood parks are unsafe due to criminal activity

- Overall, 39% of Camden parents of children ages 3–18 report that the parks in their neighborhood are unsafe due to criminal activity.
- Parents of children ages 3–5 are more likely to report unsafe parks in their neighborhood (49%), compared to parents of children ages 6–11 (41%) and 12–18 (32%).
- Parents of Hispanic children are almost twice as likely as parents of non-Hispanic black children to report unsafe parks in their neighborhood (47% vs. 25%).
- There is little variation by gender.



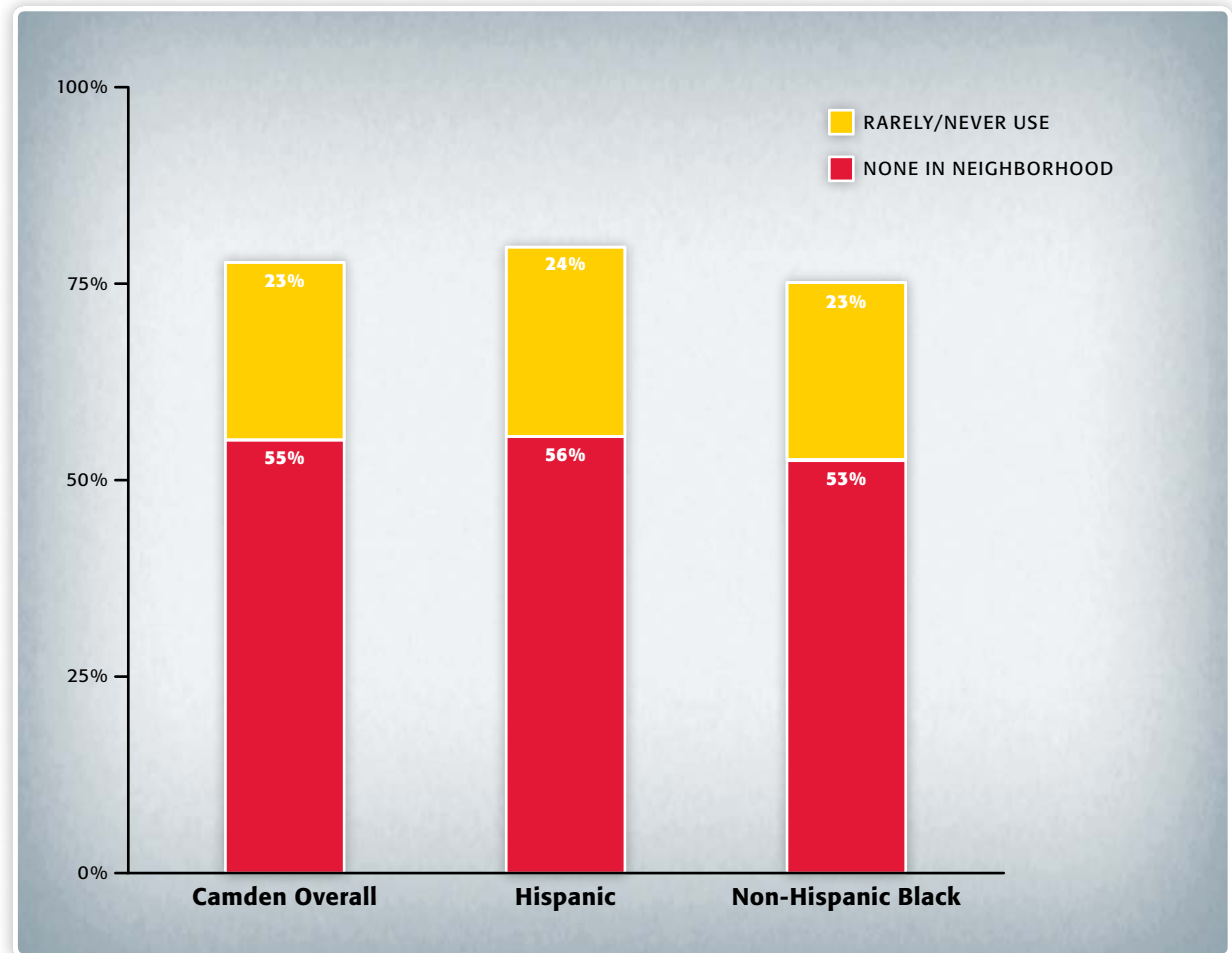
Percentage who say neighborhood parks are unpleasant

- Overall, 29% of Camden parents of children ages 3–18 report that the parks in their neighborhood are unpleasant.
- Parents of children ages 6–11 are more likely to report unpleasant parks in their neighborhood (36%), compared to parents of children ages 3–5 (31%) and 12–18 (22%).
- Parents of Hispanic children are more than twice as likely as parents of non-Hispanic black children to report unpleasant parks in their neighborhood (35% vs. 17%).
- There is little variation by gender.



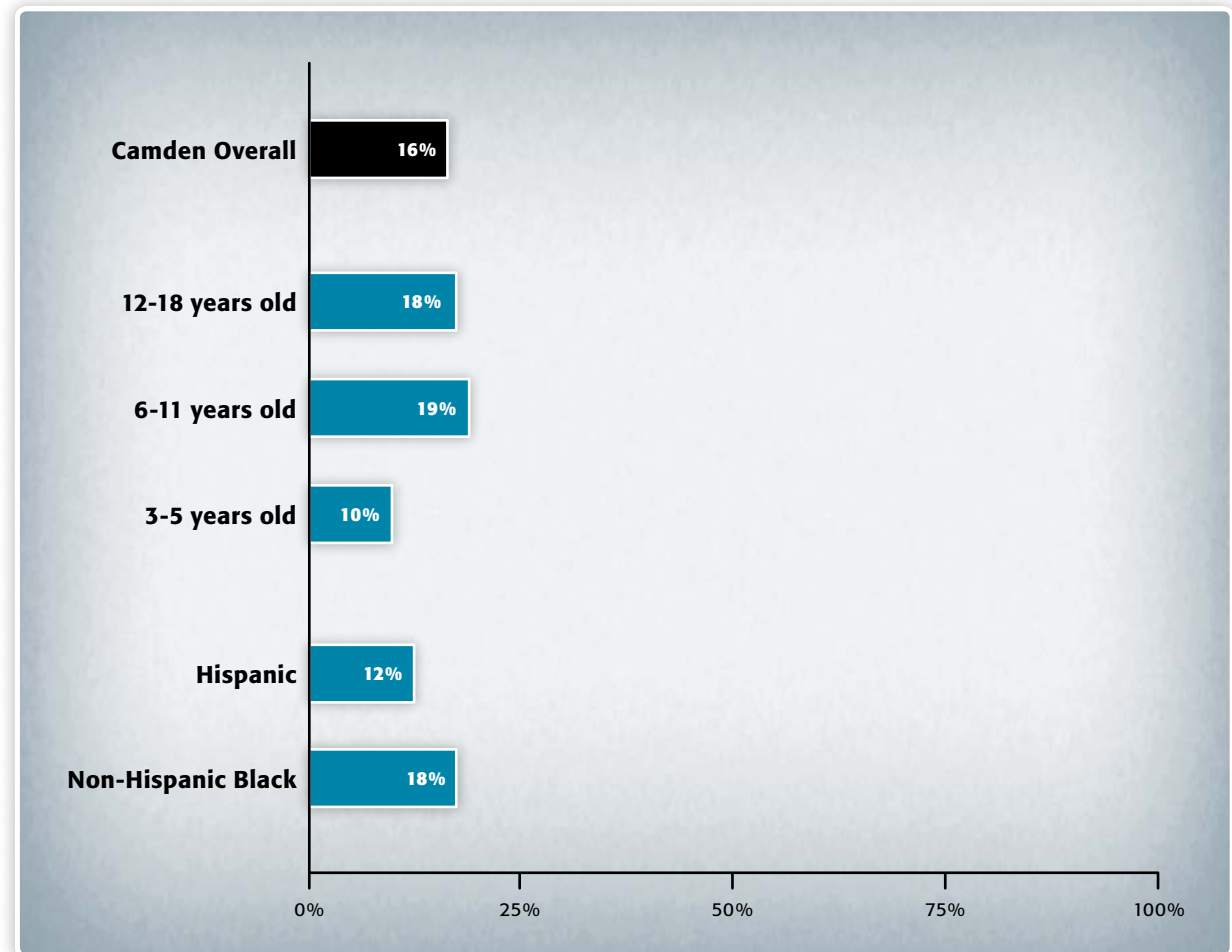
*Percentage of children with no **exercise facilities** in neighborhood or who rarely/never use exercise facilities*

- Overall, 55% of 3–18 year old children in Camden live in neighborhoods without indoor or outdoor exercise facilities and an additional 23% rarely or never use exercise facilities in their neighborhood.
- Use of exercise facilities in neighborhoods varies little by race/ethnicity in those neighborhoods that do have facilities.



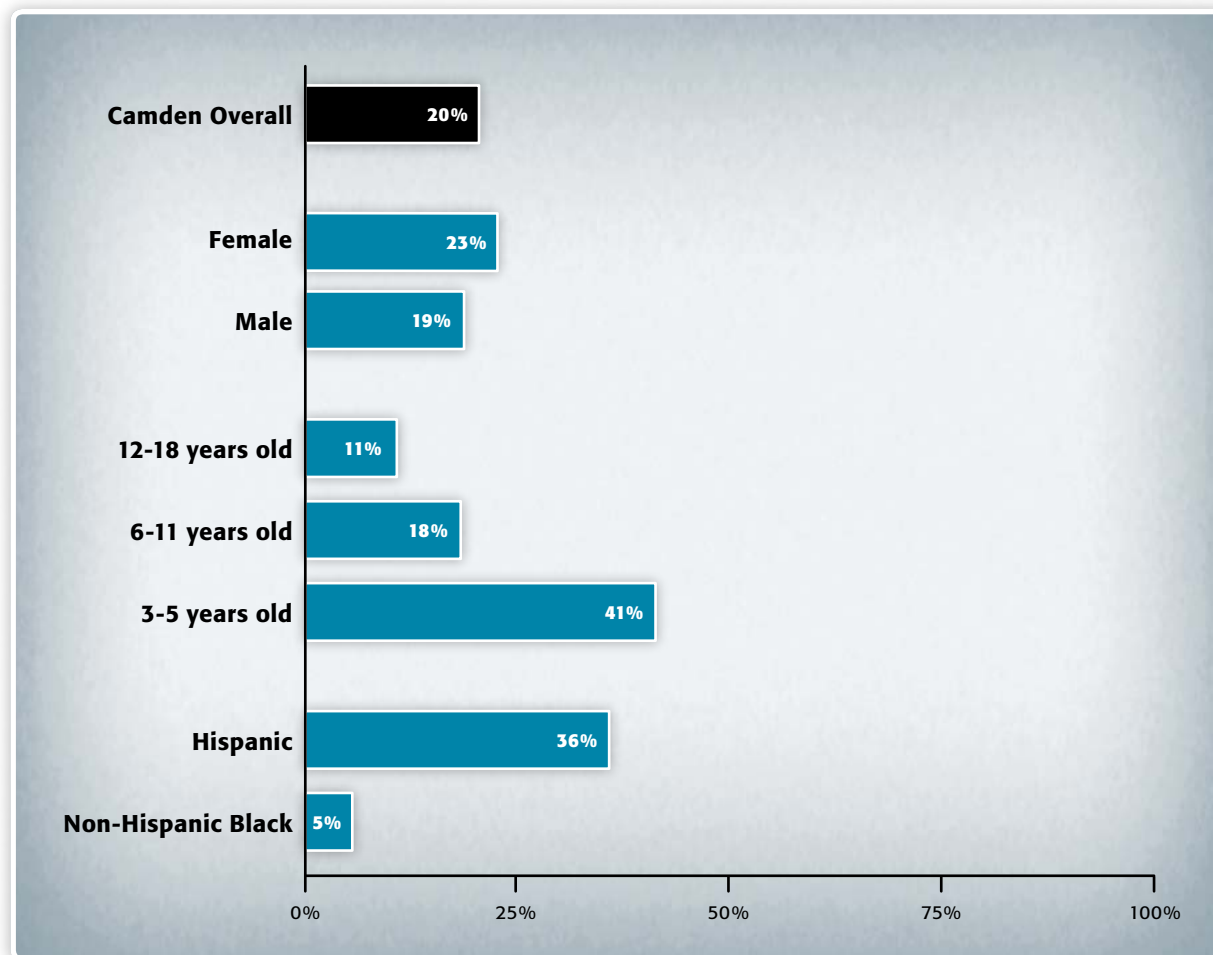
Percentage who say exercise facilities in neighborhood have inconvenient hours

- Overall, 16% of Camden parents of children ages 3–18 report that the indoor or outdoor exercise facilities in their neighborhood do not have convenient hours of operation.
- This varies little by race/ethnicity.



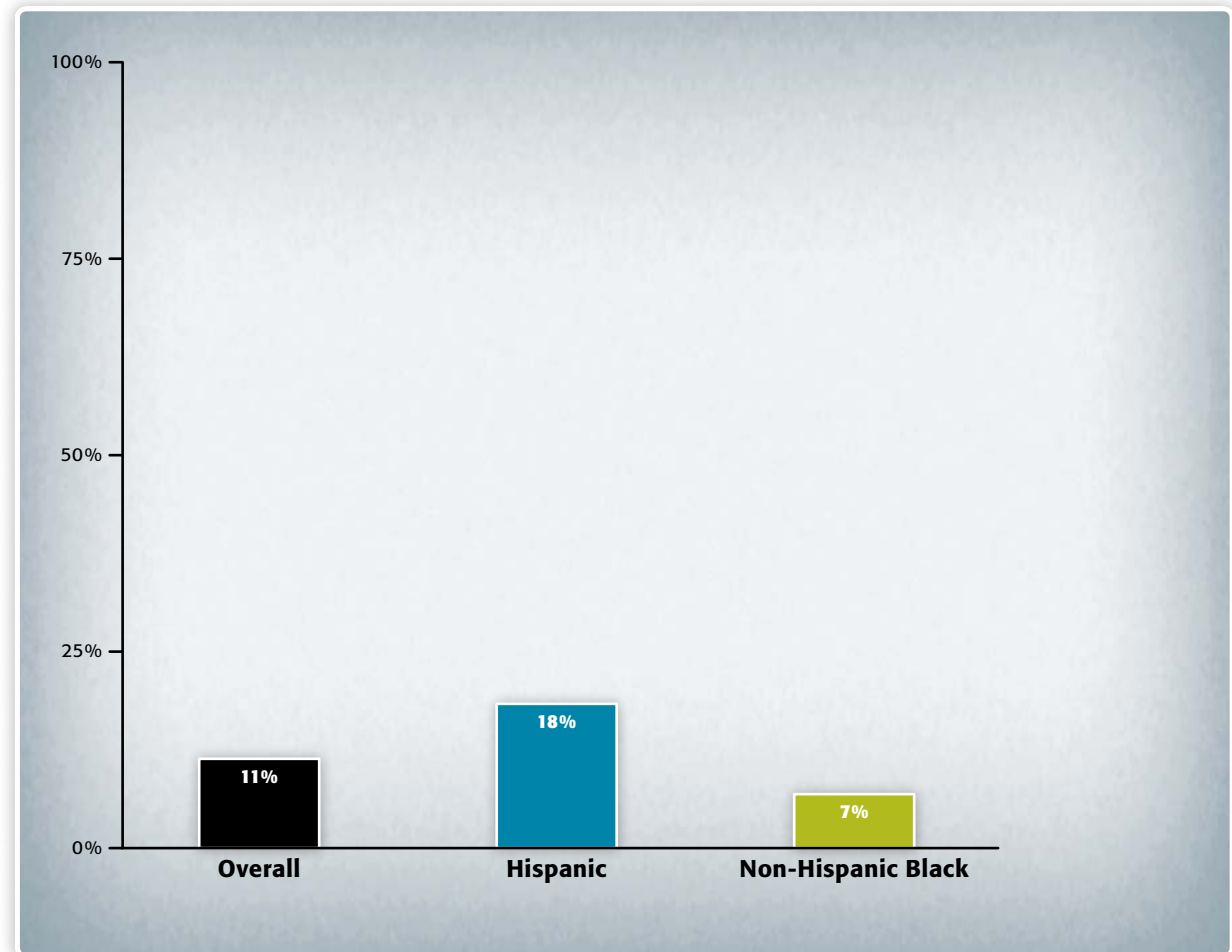
Percentage who report neighborhood exercise facilities are unsafe due to criminal activity

- Overall, 20% of Camden parents of children ages 3–18 report that the indoor or outdoor exercise facilities in their neighborhood are unsafe due to criminal activity.
- Parents of children ages 3–5 are much more likely to report unsafe indoor or outdoor exercise facilities in their neighborhood (41%) compared to parents of older children (11% and 18%).
- Parents of Hispanic children are over seven times more likely than parents of non-Hispanic black children to report unsafe indoor or outdoor exercise facilities in their neighborhood (36% vs. 5%).
- There is little variation by gender.



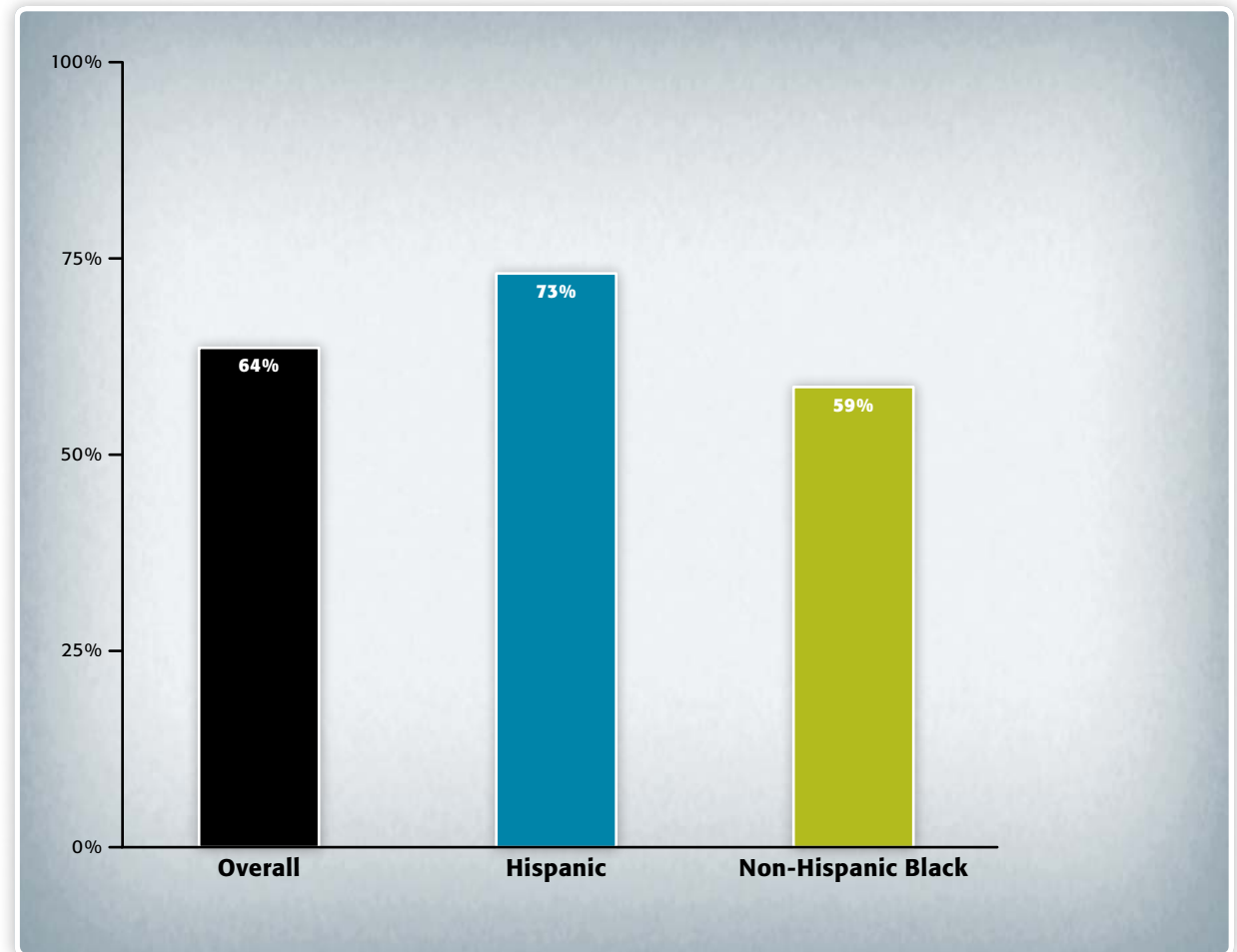
Percentage who say exercise facilities in neighborhood are in poor condition

- Overall, 11% of Camden parents of children ages 3–18 report that the indoor or outdoor exercise facilities in their neighborhood are in poor condition.
- Parents of Hispanic children are more likely than parents of non-Hispanic black children to report that the exercise facilities in their neighborhood are in poor condition (18% vs. 7%).



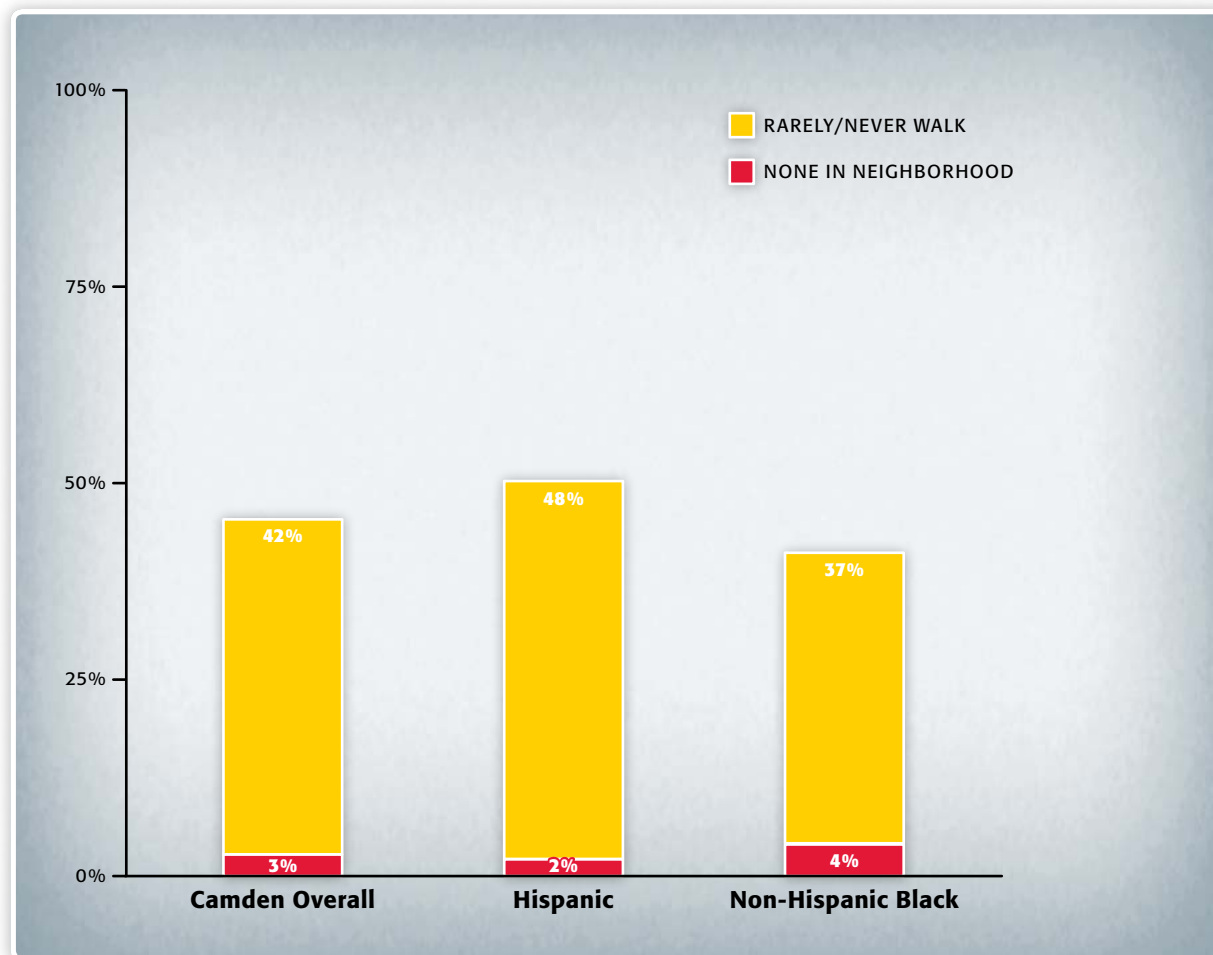
Percentage who say exercise facilities are free

- Overall, 64% of Camden parents of children ages 3–18 report that the indoor or outdoor exercise facilities in their neighborhood are free.
- Parents of Hispanic children are more likely to report that the exercise facilities in their neighborhood are free (73%), compared to parents of non-Hispanic black children (59%).



Percentage reporting presence and use of walking destinations in neighborhood

- Though most Camden children ages 3–18 live in neighborhoods that have places such as libraries, stores, or recreational facilities within walking distance, 42% of them rarely or never walk to these places.
- 48% of Hispanic children rarely or never walk to stores, etc., in their neighborhood compared to 37% of non-Hispanic black children.



NOTE: Includes walking alone or with someone else.

Key findings from physical activity environment section

- Parents perceive high rates of criminal activity, traffic, and unpleasant surroundings in their neighborhood, factors that may serve as major barriers for physical activity for their children.
- While most families live in neighborhoods with sidewalks, about half feel that the sidewalks are in poor condition and one fifth report that their children do not use sidewalks to walk, run, bike, or play.
- About 20% of the parents report living in neighborhoods with no parks. In neighborhoods that have parks, a large number of parents feel that the parks are unsafe and not pleasant. Nearly forty percent report that their children do not use parks for any type of physical activity.
- Over half of Camden children ages 3–18 live in neighborhoods with no exercise facilities.
- Parents of Hispanic children are more likely to report barriers such as crime, unpleasant neighborhoods and parks, poor condition of facilities, and non-working street lights compared to parents of non-Hispanic black children.
- In spite of living in neighborhoods that have walking destinations, over 40% of children in Camden do not walk to such places. Hispanic children are even less likely to walk than other subgroups.

Conclusions

Unhealthy diet and inadequate physical activity are widespread among Camden children, calling for interventions that create environments and policies which help children improve their diets and level of physical activity. Most Camden children do not meet the recommendations for vegetable consumption and physical activity. They are likely to eat more unhealthy foods (e.g., energy-dense snacks and beverages), especially among non-Hispanic black children, and less likely to eat healthy foods (e.g., fruits and vegetables as snacks), especially among Hispanic children. They spend more time in sedentary activities (particularly non-Hispanic black children), and are less likely to walk or bike to school, or be physically active at school (particularly Hispanic children).

Parental perceptions of food and physical activity environments suggest that interventions are needed to create additional opportunities for healthy food and physical activity in the neighborhoods and also to address barriers related to existing options. While a majority of parents shop at supermarkets or superstores, most parents report limited availability of fresh produce and low-fat items, and cost remains a major barrier for purchasing these items. Lack of food stores in neighborhoods, cost, and quality were the main reasons why almost half of the parents surveyed do not shop in their neighborhood. Although many neighborhoods have sidewalks and some have parks and exercise facilities, a large number of parents report that their children do not use these facilities to be active. Crime level, unpleasantness of neighborhoods and parks, and poor condition of sidewalks are reported by substantial numbers of parents as barriers to physical activity. Parents of Hispanic children report more barriers in the neighborhood environment compared to parents of non-Hispanic black children.

Effective interventions will require changes in the neighborhood environment by creating new opportunities, improving existing features, and addressing barriers associated with practicing healthy behaviors. Efforts are also needed to raise awareness about the issue of childhood obesity and associated behaviors among parents and caregivers.

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