



2008
PUT ACTIVE PLAY IN EVERY KIDS DAY.

LOUISIANA'S REPORT CARD ON PHYSICAL ACTIVITY & HEALTH FOR CHILDREN



PENNINGTON BIOMEDICAL RESEARCH CENTER

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LOUISIANA'S OVERALL GRADE

The primary goal of the Louisiana Report Card on Physical Activity and Health for Children and Youth is to assess the level of physical activity and sedentary behaviors in Louisiana children and youth, the level of facilitators and barriers of physical activity behavior, and their related health outcomes.

LOUISIANA'S OVERALL GRADE 2008: X

The overall grade for this first annual report card suggests a poor outlook for the health of children and youth in Louisiana. However, this first objective look at the status of physical activity and health provides an important benchmark from which to provide recommendations to improve the grade and to track our progress into the future.

MAKING THE GRADE

Grades were assigned for each indicator using the most recent data available and the consideration of recent published scientific literature and reports.

A	Louisiana's children and youth are physically active and achieving optimal health
B	Majority of Louisiana's children and youth are physically active and achieving optimal health; however, children who are obese, underserved, physically or mentally challenged may not have appropriate physical activity opportunities provided
C	Insufficient appropriate physical activity opportunities and programs available to large segments of Louisiana's children and youth
D	Insufficient appropriate physical activity opportunities and programs available to the majority of Louisiana's children and youth
F	Louisiana's children and youth have a sedentary lifestyle with insufficient opportunities for physical activity
INC	Incomplete. At the present time there is not enough data available for scoring

LOOKING AHEAD: RECOMMENDATIONS TO IMPROVE THE GRADE

- 1. Encourage kids to be physically active and increase opportunities for physical activity.**
Children and youth should accumulate **at least 60 minutes, and up to several hours**, of age-appropriate physical activity every day, and should avoid **extended periods (periods of two hours or more) of inactivity**.
- 2. Reduce ethnic disparities in childhood health and physical activity.**
Increased access to opportunities for physical activity within schools and communities can be achieved through the incorporation of parks, green space, and policy support in renovation and community development projects.
- 3. Improve population assessment of physical activity and health in Louisiana.**
There is a pressing need to increase and improve the frequency and types of surveillance data collected about key indicators such as physical activity, overweight and obesity, perceived safety and support, and evaluation and enforcement of policy and legislation. Up-to-date data for Louisiana is sparse, but it is required in order to evaluate the current state of our population's health and to make improvements for the future.

INDICATORS AND GRADES

PHYSICAL ACTIVITY / INACTIVITY	XX	PHYSICAL ACTIVITY LEVELS	The majority of LA data is from 2003. Less than 30% of LA youth get vigorous physical activity everyday. Boys are more active than girls and the level of activity decreases with age. Physical inactivity is related to cardiovascular and metabolic risk.
	XX	SCREEN TIME	The LA data is from 2003. In LA, 53% of youth watch more than 3 hours of TV daily. More African Americans watch 3 hours of TV daily than Caucasians or Hispanics. The odds of overweight increase with higher levels of TV viewing in youth.
	XX	SPORTS PARTICIPATION	The LA data is from 2003. Only 56% of LA youth play after-school sports, with more boys playing than girls. Caucasians play more after-school sports than African Americans or Hispanics.
HEALTH	XX	OVERWEIGHT AND OBESITY	The majority of LA data is from 2003. Over one-third (36%) of LA youth are overweight or obese. More boys are overweight or obese compared to girls and more African Americans are overweight or obese compared to Caucasians and Hispanics. There are national trends of increasing numbers of overweight and obese children and youth.
	XX	OVERALL PHYSICAL WELL-BEING	There is no data available for LA. However, physical activity in teens is associated with reduced risk behavior, higher self-esteem, better grades in school, and better adult health.
POLICY AND INVESTMENTS	XX	PROGRESS ON GOVERNMENT STRATEGIES AND INVESTMENTS	LA has a state mandated Council on Obesity Prevention and Management. Safe Route to School has allocated \$9million for Louisiana projects.
	XX	INDUSTRY AND PHILANTHROPIC INVESTMENTS	Limited data is available in the section. However, it is critical for future versions of the report card.
FAMILY	XX	FAMILY PERCEPTIONS AND ROLES REGARDING PHYSICAL ACTIVITY	LA data is from 2003. Over 80% of LA parents usually or always attend the events of their children. Parental monitoring and family cohesion are associated with more physical activity and less TV.
SCHOOL AND COMMUNITY	XX	PHYSICAL ACTIVITY PROGRAMMING AT SCHOOL	The Majority of the LA data is from 1997. Nearly 61% of LA high school students went to Physical Education at least 1 day per week in 1997. However, there were drastic declines in weekly Physical Education participation from 9th (80%) to 12th (33%) grade.
	XX	TRAINING OF SCHOOL PERSONNEL	There were 6 categories of continuing education offered the LA Physical Education teachers through the Department of Education. The Louisiana Association for Health, Physical Education, Recreation and Dance holds an annual training convention as well.
	XX	COMMUNITY FACILITIES, PROGRAMS AND PARKS	Very little data is available for LA. There are 26 state and national parks in LA.

REPORT CARD DEVELOPMENT AND DATA SOURCES

The grade assignments were based on analyses of the most recently available data from various sources, including the 1997 Youth Risk Behavior Surveillance System, 2003 National Survey of Children's Health, 2006 Louisiana Health and Population Survey, LA Health, etc.

The development of this report card was guided by a Research Advisory Committee, composed of scientists and professionals who collaborated on the selection of indicators and the assignment of grades including (in alphabetical order) Ariane Bedimorung (LSU School of Public Health), Stephanie Broyles (Pennington Biomedical Research Center), Allison Cascio (Center for Planning Excellence), Stewart Gordon (Louisiana Council for Obesity Prevention and Management), David Harsha (Pennington Biomedical Research Center), Kathy Hill (LSU-Kinesiology & LAHPERD), Peter Katzarzyk (Pennington Biomedical Research Center), Nikki Lawhorn (Louisiana Public Health Institute), Lilian Levitan (Pennington Biomedical Research Center), Ryan Pasternak (Department of Pediatrics Children's Hospital), Leanne Redman (Pennington Biomedical Research Center), Pamela Romero (Louisiana Council for Obesity Prevention and Management), Heli Roy (Pennington Biomedical Research Center & LA Cooperative Extension), Susan Sisson (Pennington Biomedical Research Center), Melinda Sothorn (LSU Health Sciences Center), and Mark Tremblay (Children's Hospital of Eastern Ontario, Canada).

Louisiana's Report Card on Physical Activity & Health for Children and Youth is based on a similar initiative developed by Active Healthy Kids Canada (www.activehealthykids.ca).

For more information on the development of Louisiana's Report Card on Physical Activity & Health for Children and Youth please refer to a more detailed version on-line at www.pbrc.edu/XXX

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