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Abstract #135662

Obesity prevalence among housed and homeless inner city New York children and youth

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Background: Pediatric obesity (BMI \geq 95th percentile) has reached epidemic proportions in the US, having doubled to 16% from 1980-2000 among children 6-11 and tripled for youth 12-19 (also to 16%). Minority children and youth are disproportionately affected and at elevated risk for health consequences including type 2 diabetes, and cardiovascular disease. **Method:** This study compares the prevalence of obesity among inner city minority children and youth age 6-19 years who were housed (in the Hunts Point-Mott Haven community, South Bronx; N=195) to those who were homeless (in family shelters; N=200) through retrospective chart review of patients of the New York Program of The Children's Health Fund. **Demographics:** 45% African-American, 53% Hispanic (predominantly Puerto Rican or Mexican); 49% male; mean age for 6-11 year olds was 8.5 years, mean age for 12-19 year olds was 15.5 years. **Results:** Obesity prevalence for homeless children and youth compared to housed was higher but not significantly so (30% homeless vs. 25% housed). For ages 6-11, homeless obesity rate was 32% vs. 27% housed; for ages 12-19, 28% homeless vs. 22% housed. The mean BMI for obese patients was similar for homeless and housed patients (27.7 vs. 27.5; not significant). There were no significant differences in obesity prevalence based on gender or race-ethnicity. **Conclusions:** We conclude that the health burden of obesity and the risk of associated morbidities is evenly distributed in inner city minority populations in New York City. **Implications:** Primary care for high-risk minority patients should include BMI monitoring and indicated nutrition interventions.

Learning Objectives: At the end of this presentation, participants will

- * better understand the prevalence of obesity among inner city children and youth;
- * better understand the risk of chronic disease associated with childhood and adolescent obesity; and
- * better understand the need for appropriate nutrition interventions in primary care for high risk pediatric patients

Keywords: Obesity, Public Health Policy