Today’s youth have an overwhelming number of options that challenge their ability to make wise nutrition and physical activity decisions. Consequently, the percentage of youth who are overweight, obese or at risk for becoming obese has increased. Concerned health professionals, school personnel and parents often believe that weighing and measuring students in schools will address this health risk.

Measurements used by physicians and other health professionals are valuable and beneficial tools in clinical settings. In school settings, however, the process of screening for these measures and the use of this information requires careful consideration.

The North Dakota Healthy Weight Council (HWC) believes that weight is only one aspect of health and well-being. Wellness includes health in body, mind and spirit, and all three are important to a student’s success in school. When students make healthy food choices, increase physical activity and maintain or improve emotional well-being, they make progress toward individual goals.

The HWC – comprised of dietitians, nutritionists, physical activity educators, physicians, nurses and other health professionals – developed this position paper, “Weighing and Measuring Students in School Settings,” to be used as a guideline for schools. The paper addresses appropriate circumstances for measuring height and weight, and describes the appropriate method of weighing and measuring.

Tracking individual improvements in healthy food choices, physical activity and emotional well-being are preferred over measuring changes in body mass index (BMI) for the following reasons:

• BMI increases with age. Even the BMI of a normal-weight child will increase throughout the year.
• The BMI for children is significantly different from the BMI for adults. There are multiple standards for children, while there is only one standard for adults.
• BMIs for students are gender and age specific. The standards differ for girls and boys.
• An increase in body fat often precedes a normal growth spurt.
• Standard BMI is a screening tool; it is not an accurate or complete assessment tool. BMI does not define or diagnose obesity.
• When evaluating the BMI of children, measurements are plotted on U.S. Centers for Disease Control and Prevention (CDC) growth charts, which can be a complex process for untrained personnel.
• Only trained individuals can determine percentage of body fat.

The overall goal of health initiatives is to improve nutrition and physical activity behaviors and attitudes related to healthy lifestyles. Therefore, it is reasonable to measure and track individual changes in behavior and attitude instead of changes in BMI.

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