Assessment

Lifestyle

Gathering a detailed lifestyle history during visits can help obtain the information needed for a thorough assessment.

Upon completing a child's lifestyle history, providers should identify areas of the greatest concern and use the strategies outlined on this website to address them.

Here are the areas providers should cover for various age groups.

For infants up to age 2:

- Family history/prenatal factors.
- Feeding practices: Duration of breastfeeding, timing of meals, introduction of solids, maternal responsiveness to feeding cues.
- Routine: Sleep duration, naps, screen time, amount of consumed juice.

For toddlers ages 2 to 4:

- Family history/prenatal factors.
- Feeding practices: Diet diversity, use of food as rewards, response to hunger satiety.
- Activity level: How much time per day spent in active play, types of structured activities, amount
 of screen time.
- Sleep: Frequency of naps, duration of sleep, presence of snoring.

For early childhood, ages 5 to 9:

- Family routine and dynamics: Parental interactions, sibling interactions, approach to healthy lifestyle as a family versus for only an individual child.
- Feeding practices: "2Bs 2F's"— Breakfast, sugary Beverages, Fruits/vegetables, and Frequency of eating out.
- Activity: Concept of "SSOB," which stands for Structured activity, Sedentary time, Outdoor access/play, Barriers to activity.
- Sleep: Regularity of sleep/wake cycle, presence of snoring, risk of daytime sleepiness.
- Behavioral health: Changes in behavior, mood, or attention, and peer interactions.

For pre-adolescents, ages 10 to 14:

- Family routine and dynamics: Parental and sibling interactions, approach to healthy lifestyle as a family versus for only an individual child.
- Feeding practices: "2Bs 2Fs" and school meal routine.
- Activity: "SSOB."
- Sleep: Regularity of sleep/wake cycle, presence of snoring, risk of daytime sleepiness.
- Behavioral health: Changes in behavior, mood, or attention, and peer interactions.

For adolescents, age 15 to 18, review the following in addition to routine HEADSS assessments:

- Family routine and dynamics: Parental and sibling interactions, approach to healthy lifestyle as a family versus for only an individual child.
- Autonomy level in food choices within the household.
- Diet: "2Bs 2Fs," frequency of skipped meals, school meal routine.
- Activity: "SSOB" and after school activities.
- Behavioral health: Changes in behavior, mood, or attention, and peer interactions.