

# Understanding the Childhood Obesity Epidemic

*by Joseph A. Skelton, MD, MS, FAAP, FTOS*

**While there has been a lot of focus on childhood obesity over the past few decades, it is unfortunately still common and rising. Approximately one out of five children have obesity. Taking into account overweight and obesity, it's about one out of three children. There is a childhood obesity epidemic occurring and we owe it to the health of future generations to figure out what's causing it and how we can fix it.**

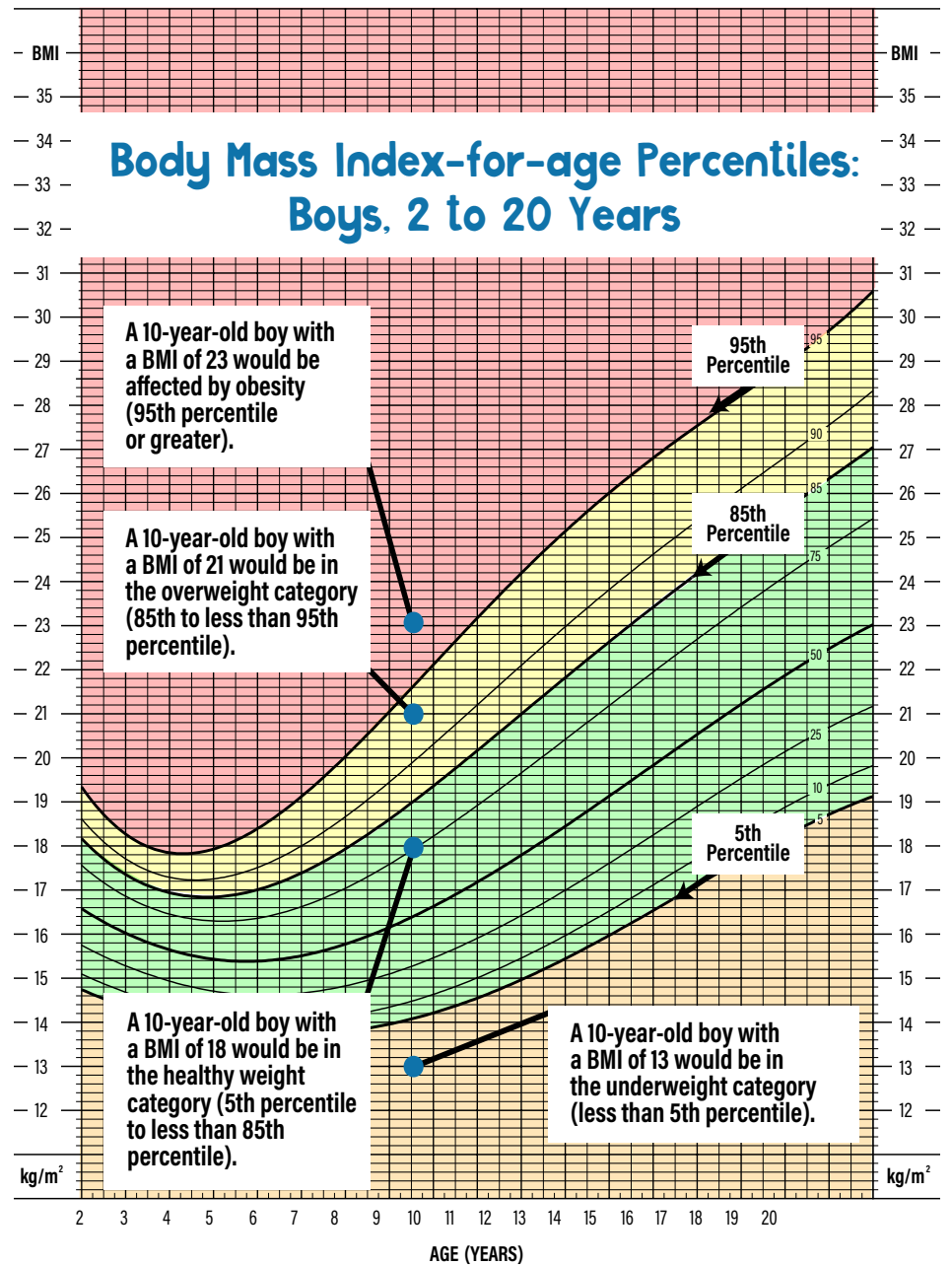
## Classifying Obesity in Children

The oldest saying in Pediatrics is, "Kids aren't little adults!" That applies even more so to how we classify weight in children. In children, there are many ways to measure excess weight and most are difficult (*skin fold measurements*), expensive (*body fat analyzers*), or invasive (*body scans*).

If you've ever been to the pediatrician, you know it's all about the growth charts – height, weight and Body Mass Index (BMI). BMI is calculated by dividing a person's height by their weight squared:

$$\text{BMI} = \frac{\text{weight in kilograms}}{\text{height in meters squared}}$$

Unlike adults, BMI criteria are not absolute for children. Instead, we plot BMI on a growth chart and compare it to other children of the same sex and age. On a growth chart, children in the 85<sup>th</sup> – 95<sup>th</sup> percentile, compared to other children of the same sex and age, are considered overweight. This typically is a "warning" sign, meaning they have an increased likelihood of developing obesity in a few years. The 95<sup>th</sup> percentile of BMI marks the borderline of obesity for children, which increases the risk of health problems related to weight and also increases the risk of having obesity as an adult.



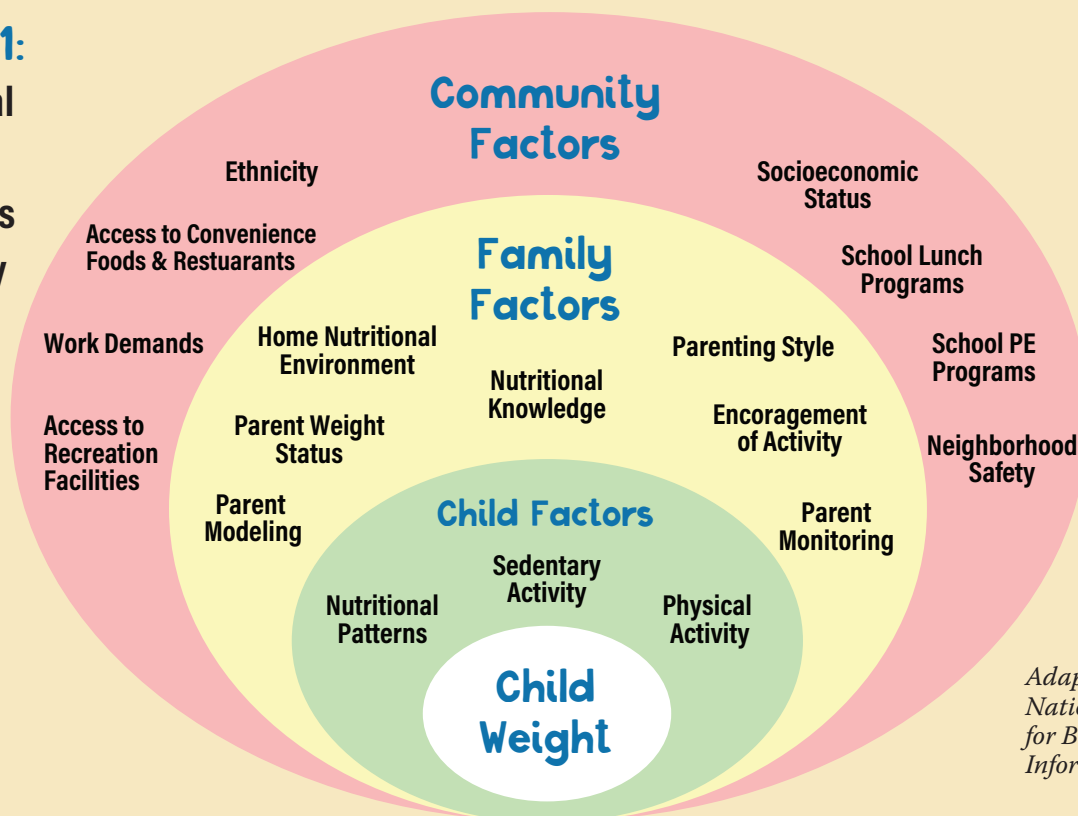
Adapted from the Centers for Disease Control (CDC)



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**Figure 1:**  
Ecological  
model of  
predictors  
of obesity



## Causes and Contributors

There are so many contributing factors to obesity and we tend to simplify the issue to wrap our heads around it. I call it “complex simplicity.” Excess weight gain, in the simplest terms, is too much in and too little out. But the forces that influence that are incredibly complex and include:

- Food preferences
- Geography/location
- Metabolism
- Health policies
- Money
- Work
- School schedules

Some medications can influence weight gain in children, including:

- Hormones (*birth control*)
- Medications used to treat depression and anxiety
- Steroids

To see what factors can be attributed to increased weight gain in children, please see the figure above.



“ There are so many contributing factors to obesity and we tend to simplify the issue to wrap our heads around it. ”

# The Changing World

The world has changed throughout the past 30 years and it has affected our sleep, stress levels, eating habits and activity levels. These and a million other factors have contributed to weight gain across the world in both adults and children.

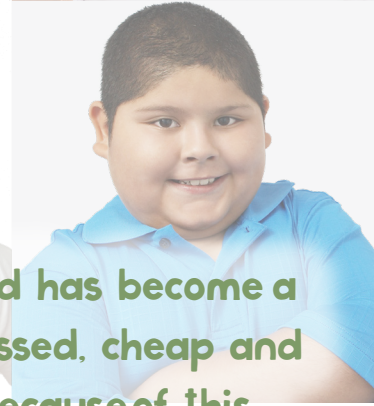
Throughout time, food has become a lot more processed, cheap and accessible. Because of this, it can be challenging for the average person to stick to a healthy diet. That, along with the boom in technology that makes it challenging to get off the couch, has made it more difficult than ever to get our children to play outside and eat their vegetables.

Yet even with a constantly changing world, it's important that we still try to remain as healthy as possible.

## Prevention and Treatment

A key aspect of both preventing and treating obesity in children is the family. A child's family is the single biggest influence on their well-being, and for a child to make changes in their habits, it will require change within the family. If you put all of your focus on the child and their individual behaviors, they are unlikely to have success without the support of the family.

Here are some ways to create healthy habits for the whole family that can help your child if they are struggling with weight.



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## Keep a focus on health and healthy behaviors, not weight

Of course, when people are hoping to see changes on the scale, this can be difficult. A common scenario that I see in my program is where a family has great success with cutting back on drinking full-sugar sodas, going from each person drinking two to three cans of soda per day down to one per week.

However, that may not translate into a change in weight. Remember, weight is extremely complex and obesity is a disease. Sometimes, just cutting back on soda won't create a change in weight. However, this is an overall healthier decision for you and your family. Focus on creating better habits instead of focusing on weight-loss.

## Set small, achievable goals

Lofty goals, such as "I'm increasing my fruit and veggie intake from one to nine each day," are hard! Start small by adding one additional serving of fruits/vegetables each day for a few weeks, setting a timeframe for checking in on that goal and then adding another serving. Don't forget to consider age. A child's age determines how likely they are to listen and make changes. Setting achievable goals will make it so that any positive change is a good change.

## Do not pressure or restrict children

One of the most difficult challenges for parents and healthcare providers is encouraging weight-loss in children without pressuring or restricting them.

This is a natural thing we try to do with children. We encourage them to eat more fruits and vegetables, eat fewer sweets and processed foods, and be mindful of their portion sizes. Children have a natural response, particularly with food; if they feel pressured to eat more of one thing and less of another, it can backfire.

Decades of research show that if we try to make our children go on "diets" or explicitly restrict their food, it can make them hungrier and increase their desire for the "forbidden food" even more. It's a tricky concept and seems to go against trying to help children lose weight, but it is an important concept to learn.

## Focus on the structure of eating

Instead of only focusing on giving children smaller portions of food, focus on the structure of eating. Try setting structured meal and snack times for children to give their hunger a natural rhythm so they can associate eating with certain times of the day versus thinking the kitchen is open 24/7.



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## Aim for Balance

Kids need to grow. There should be a balance between reducing food intake and giving them what they need to grow without feeling deprived, hungry, flawed or “wrong.” Here are some ways you can nurture that balance:

- **Offer balanced meals** – This can help your child feel like something is getting added to a meal instead of being taken away. Add a fruit to breakfast or a veggie to dinner so that your child is exposed to more nutritious and healthy food.
- **Don’t eliminate anything** – Allow your kids to indulge on special occasions. It’s okay for them to go to a birthday party and have a piece of cake with the rest of the children. You don’t want them to feel like they can’t have certain foods. You just want them to know that it’s not healthy to have those foods all of the time.

## Make physical activity fun

Like food, physical activity also shouldn’t be a battle. The quickest way to turn someone away from exercise or an activity is to force them to do it! Remember – kids aren’t little adults and likely won’t enjoy that time on a treadmill. Make sure the activity is age-appropriate and fun. For many kids, they are more likely to participate and have fun when their parent gets involved and participates, too.



## Conclusion

If you or a parent is concerned about a child’s weight, start with a visit to the child’s primary care provider. Ask about potential causes and inquire if testing is needed. Discuss what behaviors might need changing and how you can focus on those changes as a family to form healthier habits. You can also explore community-based programs that focus on overall health and good habits, not on weight-loss. Take the necessary steps to ensure your child lives a healthy lifestyle.

### **About the Author:**

*Joseph A. Skelton, MD, MS, FAAP, FTOS, is a board-certified pediatrician and obesity medicine specialist. He has a particular interest in working with entire families to change behavior, as well as working with community organizations who have the same goals. He is the founder and director of Brenner FIT® (Families In Training), a family-based pediatric obesity program that is active in clinical care, research, education and community outreach.*



# ABOUT THE OBESITY ACTION COALITION (OAC)

The Obesity Action Coalition (OAC) is a National non-profit organization dedicated to giving a voice to individuals affected by obesity and helping them along their journey toward better health. Our core focuses are to elevate the conversation of weight and its impact on health, improve access to obesity care, provide science-based education on obesity and its treatments, and fight to eliminate weight bias and discrimination.



**VIBRANT COMMUNITY**



**NATIONAL AWARENESS CAMPAIGNS**



**ANNUAL CONVENTION**



**ADVOCACY**



**PUBLIC EDUCATION**

## LEARN, CONNECT, ENGAGE

The OAC knows that the journey with weight can be challenging but we also know that great things happen when we learn, connect and engage. That is why the OAC Community exists. Our Community is designed to provide quality education, ongoing support programs, an opportunity to connect, and a place to take action on important issues.

**Through the OAC Community,  
you can get access to:**

- Weight & Health Education • Community Blogs
  - Community Discussion Forum
  - Ongoing Support • Meaningful Connections
- AND MUCH MORE**



**JOIN TODAY: GO TO [OBESITYACTION.ORG/JOIN](https://obesityaction.org/join)**

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