Childhood Obesity

Disease Information Packets – Slide Sets

Public Health Services,
Community Health Statistics

11/2012
What is Obesity?

Obesity is a condition of overweight in which an individual has a body weight greater than what is considered healthy for his or her height.

- Body weight is influenced by many factors, including: genes, metabolism, behaviors, environment, culture, and socioeconomic status.

- Excess body weight represents an imbalance between calorie intake and expenditure.

What is Obesity?

- Body mass index (BMI) is used to measure overweight and obesity.

- In children, it is calculated using a child’s weight and height.
  - A child is overweight if their weight is at or above the 85th percentile but below the 95th percentile for children of their age and gender.
  - A child is considered obese if their weight is at or above the 95th percentile for children of their age and gender.

Demographic Risk Factors

• **Age**
  - Adolescents are more likely to be obese than preschool-aged children. (Ogden)

• **Gender**
  - The prevalence of obesity is higher among boys than girls. (Ogden)

• **Race/Ethnicity**
  - Hispanic boys and non-Hispanic black girls are more likely to be obese than non-Hispanic white children. (CDC)

• **Genetics/Family History**
  - Children with a family history of obesity may be predisposed to gain weight. (CDC Genomics)

Social and Behavioral Risk Factors

• **Poor Nutrition**
  – Media may contribute to poor nutritional choices and increased snacking among children. (CDC)

• **Lack of Physical Activity**
  – In 2011, 69% of high school students did not attend PE classes daily when they were in school. (CDC)
  – Studies have shown that television and computer time are associated with an increased likelihood of obesity in children. (Zimmerman)

Social and Behavioral Risk Factors

• **Poverty/Low Income**
  - 1 in 3 low income children aged 2-4 years is likely to be obese by their 5th birthday. (CDC)
  - Lower-income neighborhoods that have less access to healthy, affordable foods can act as barriers to a healthy diet. (Larson)
  - Access to supermarkets is associated with a reduced risk for obesity. (Larson)

Intermediate Conditions

**Cardiovascular Disease (CVD)**
- Obese children are more likely to have high blood pressure and high cholesterol, which are risk factors for CVD. (CDC)

**Diabetes (Type II)**
- Childhood obesity can lead to increased risk of impaired glucose tolerance and insulin resistance. (Whitlock)

**Cancer**
- Consequences of childhood obesity are associated with several cancers in adulthood. (Biro)

Intermediate Conditions

• **Breathing Problems**
  – Obese children are more likely to have breathing problems, such as sleep apnea and asthma. (Han, Sutherland)

• **Additional Consequences**
  – The risk of obesity in adulthood is greater among obese children. (Biro)
  – Obese children are more likely to have fatty liver disease and gastro-esophageal reflux (i.e. heartburn). (Han)
  – Overweight or obese children are at least twice as likely to be iron-deficient as children of normal weight. (Han)

National Statistics

Average Prevalence of Obesity, Ages 2-19
United States, 2007-2010

- Between the years 2007-2010, 1 in 6 children (aged 2-19 years) was considered obese.
National Disparities

• In 2009-2010, approximately 17% of children and adolescents in the United States were considered obese. (Ogden)

• In 2009-2010, more boys were obese (18.6%) than girls (15.0%). (Ogden)

• In 2007-2008, Hispanic boys and non-Hispanic girls had higher prevalence of obesity than non-Hispanic whites. (CDC)

• 1 in 7 low income, preschool-aged children is obese. (CDC Factsheet)

• Between 2007-2010, black and Hispanic children were more likely to be obese than white children.

Prepared by County of San Diego (CoSD). Health and Human Services Agency (HHSA), Community Health Statistics, 10/10/12.
Cost

• In 2010, the cost of childhood obesity was over $3 billion.

Local Statistics

• In San Diego County in 2009:
  – 10% of children were considered overweight or obese.
  – 12% of teens were overweight or obese.
  – An additional 10% of teens were at risk of becoming overweight or obese.

Local Statistics and Disparities

Overweight and Obese Weight Status Among San Diego County Children* and Teens**, 2009

<table>
<thead>
<tr>
<th></th>
<th>Not overweight/obese</th>
<th>Overweight/obese</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children</td>
<td>90.2%</td>
<td>9.8%</td>
</tr>
<tr>
<td>Teens</td>
<td>88.4%</td>
<td>11.6%</td>
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</tbody>
</table>

* Children aged 0-11 years
** Adolescents aged 12-17 years

Prepared by County of San Diego (CoSD), Health and Human Services Agency (HHSA), Community Health Statistics, 10/2012.
Prevention

• Parents can:
  – Limit media time for kids.
  – Serve children healthy food and drinks.
  – Make sure children get at least 60 minutes of physical activity each day.

• States and communities can:
  – Expand programs that bring local fruits and vegetables to schools.
  – Create and maintain safe neighborhoods to encourage physical activity.
  – Support quality physical education in classes.

Critical Pathway to Obesity

Contact Us

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