

OBESITY RATES IN CHILDREN

Could nutrition education in school age children, from a low income background, decrease obesity rates?

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New Zealand currently has an obesity epidemic that is affecting the whole country. The side effects of an obese nation is putting a huge strain on the health care system. To stop the epidemic we need to focus on where the problem begins. 1 in 9 children are obese, with children in deprived areas 5 times more likely to be obese than children from privileged areas (The New Zealand Government, 2015). Because it is the lower income areas suffering we need to target the reasons these health disparities are forming. Could obesity in children be solved through education focused on the importance of nutrition?

Literature Review

- Children are not in control of what they eat; <u>parents must also</u> <u>be included in the nutritional guidance given to children to reinforce</u> the importance of nutritional information and to implement healthy food practices into the child's life.
- <u>Cultural and community factors</u> influence children's attitudes to diet and exercise. Children are easily influenced by their surroundings, which makes them particularly vulnerable to the habits and practices around healthy eating and exercise that their cultures and communities display.
- <u>Lower socio-economic areas need more interventions</u>. Obesity prevention and intervention programmes have been proven to have very positive effects on low socio-economic income areas, with no widening health disparities.
- It is best to target school age children. The most vulnerable ages to gain weight are the transitioning years from childhood to adolescence and from adolescence to adulthood. Alongside this, the most effective time of life for behaviour change is in 6-12 year olds.
- <u>Nurses play a critical role</u> in the prevention of overweight and obesity in children, especially those in minority schools. Nurses are familiar to families and are able to provide holistic guidance and the support relevant to families in their local area.

Recommendations

- More nutrition education for families.
- Better nutrition regulations enforced by the government surrounding school cafeterias, sugary drinks and more affordable healthy food options.
- More interventions involving both physical activity and nutrition education, specifically ones targeted at lower socio-economic areas.
- Regular check ups with children starting from when they enter school, in order to monitor their weight and to recognise early symptoms of health issues that may be developing from being overweight or obese.
- Funding to encourage families to regularly seek guidance, help and support from their public health nurse or paediatric nurses.

References

Giger, J N., Norris, K., Suro, Z., & Wright, K. (2012). Impact of a nurse-directed, coordinated school health program to enhance physical activity behaviours reduce body mass index amoung minority children: A parallel-group, randomized control trial. *International Journal of Nursing Studies*. 50 (6), 727-37.

Kolsgaard, M. L., Joner, G., Brunborg, C., Anderssen, S A., Tonstad, S., & Andersen, L. F. (2011). Reduction in BMI z-score and improvement in cardiometabolic risk factors in obese children and adolescents. *The Oslo Adiposity Intervention study-a hospital/public health nurse combined treatment. BMC paediatrics.* 11 (1), 47.

The New Zealand Government, (2015). Ministry of Health. Obesity data and stats.

Van Cauwenberghe, E., Maes, L., Spittaels, H., van Lenthe, F. J., Brug, J., Oppert, J. M., & De Bourdeaudhuij, I. (2010). Effectiveness of school-based interventions in Europe to promote healthy nutrition in children and adolescents: systematic review of published and 'grey' literature. *British Journal of Nutrition*. 103 (6), 781-797.

Waters, E, de Silva-Sanigorski, A., Burford, B., Brown, T., Campbell, K., Gao, Y., Armstrong, R., Prosser, L., Summerbell, C. (2014). Interventions for preventing obesity in children (Review).

PECOT CATEGORY	RELEVANCE	EXPLANATION
Population	Children between 5-15 in a low income family	This is an age where obesity is becoming more prevalent but nutritional knowledge may be absent
Exposure	Children and the many different aspects that may influence obesity including; nutrition education, their socio-economic background and the effectiveness of a nurse providing the relevant information	I need to find out which areas suffer the worst obesity in order to target these areas with effective interventions
Comparison	Children who do not receive nutrition education and/or come from a high socio economic background	I want to know if nutrition education can change the rates of obesity amongst children
Outcome	Decrease in obesity rates	I want to know if nutrition education will reduce obesity in children

Rationale

I have chosen to do a poster presentation instead of a submission because the topic I have chosen is a national issue and I want the information to be conveyed to a wide audience. I want the main points to be remembered by the public because it is through their support and their own initiatives that change will begin to happen. I also want the information to be seen by health professionals because the information is relevant to their practice and their approach to the obesity epidemic. By doing a poster presentation I am able to transfer easy to read, compacted knowledge to both these audiences in an appealing way.