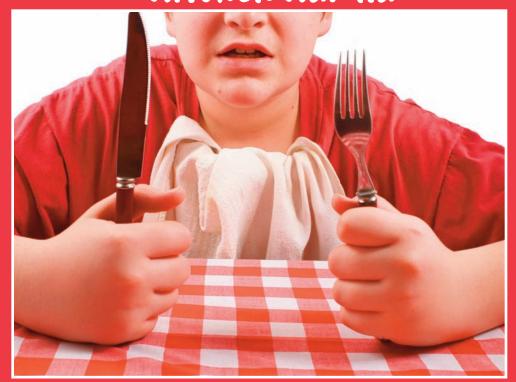
## "Kitchen Karma"



childhood Obesity
is Not
Just a
Kid Problem

e are a product of our environment. Like Karma, what you put into something is what you get out of it. It follows that the habits we teach our children are the habits they will most likely adopt as they grow and develop into adults. Over the past three decades, the childhood obesity rate has more than doubled for preschool-aged children (2-5 years old) and adolescents (ages 12-19) and more than tripled for children between the ages of 6 and 11 years old. Out of the 150 million people in our country, approximately 9 million of these are obese children.

The term childhood obesity refers to children and youth between the ages of 2 and 18 years who have body mass indexes (BMIs) equal or greater than the 95th percentile of ageand gender-specific BMI charts developed by the Centers for Disease Control and Prevention. The obesity trend seems to be affecting both boys and girls and occurs across age, race, and ethnic group throughout the United States.

Researchers once thought that the cause of obesity was at least 50% genetically-based. However, current research indicates that as little as 10% of the cause is now attributed to genetics. Therefore, 90% of obesity is related to lifestyle and behavioral factors. The rise in childhood obesity rates consists of complex interactions across social, environmental, and public policy, which has influenced eating and physical activity. An adverse environment has been created for maintaining healthy weight for both adults and children; however, obesity is starting at younger and younger ages, making the potential of future health problems progressively more catastrophic. Ironically, childhood obesity rates started to rise when physical activity was minimized at school, when video recorders and video game systems became popular, and when fast food restaurants started

to "biggie" size their portions. Urban and suburban developments discourage walking and other physical activities through the design of neighborhoods and time restraints on the modern family create more opportunities for prepackaged foods rather than home cooked "sit-down" type meals. Also, reduced accessibility and affordability of fresh produce in some communities eliminates the ability to prepare nutritious meals.

#### **Health Risks of Childhood Obesity**

#### **Emotional Health**

The most immediate risk of obesity to a child's health lies within the psychosocial burden related to being obese in a society that is preoccupied with weight and body image, which in turn creates shame, low self-esteem, poor social relationships and overall impaired social function. This usually leads to impaired academic achievement, which is then carried into adulthood. Childhood obesity also results in negative stereotyping, teasing and bullying, and general social marginalization. The unfortunate result of this is often early onset childhood depression, which generally only exacerbates the problem by leading to common emotional eating patterns.

It is also not uncommon for parents who are obese to have children with restrictive eating disorders such as anorexia and/or bulimia. These children—particularly girls—often struggle with the stigma of their parents being overweight and peer pressure to be thin. Self-hatred and overall embarrassment and fear of becoming fat can lead to anorexic behaviors as well as dangerous binge-purge cycles.

Overweight and obesity in children is also related to emotional, physical, or sexual abuse and a child seeking refuge in

### How does this epidemic really get addressed?

food as possibly the only safe-haven or comfort they can find. In these cases, the long-term health risks include not only the physical health itself, but also deep seated emotional eating patterns which prove difficult to treat if left untreated for long periods of time.

#### **Physical Health**

When it comes to the physical impact of obesity, approximately 60% of obese children aged 5-10 years have at least one cardiovascular disease risk factor (i.e., high cholesterol, triglycerides, insulin, or blood pressure) and 25% have two or three of these risk factors. Several physical health concerns are linked with childhood obesity including Type 2 Diabetes, Sleep Apnea, Menstrual abnormalities, Hypertension, and various Orthopedic problems.

# Physical, Social, and Emotional Health Consequences of Obesity in Children and Youth

#### **Physical Health**

- Glucose intolerance and insulin resistance
- Type 2 Diabetes
- Hypertension
- Dyslipidemia
- Hepatic steatosis
- Cholelithiasis

- Sleep apnea
- Menstrual abnormalities
- Impaired balance
- Orthopedic problems

#### **Emotional Health**

- Low self-esteem
- Negative body image
- Depression

#### **Social Health**

- Stigma
- Negative stereotyping
- Discrimination
- Teasing and bullying
- Social marginalization

(Drawn from *Preventing Childhood Obesity: Health in Balance*. 2005, Institute of Medicine)

## Long-Term Risks of Childhood Obesity

The most striking impact of the child-hood obesity epidemic is evident in the CDC's prediction that the life expectancy of the child population is likely the first to be less than current expectancy for adults. This is a result of the increased lifetime risk for the development of type 2 diabetes and other serious chronic diseases. A few years ago, the CDC stated that adult obesity surpassed smoking as

the #1 preventable health risk; however, childhood obesity surpasses even this level of health risk for upcoming generations. It's now estimated that the lifetime risk for type 2 diabetes in children will reach approximately 30% for boys and 40% for girls. The risk is the highest among African-Americans, Hispanic and American Indian adolescents.

#### The Solution?

The common rule to addressing weight and obesity falls on eating less and moving more. The increase in the number of obese children is likely the result of a combination of intake of a higher amount of calories than they seem to be using in everyday physical activity. However, in an era when time is limited and convenience is highly valued, how does this epidemic really get addressed?

The answer lies in the family as a whole, not the child as a single entity. It is not unusual for a child who is overweight or obese to have parents who are also in that condition. To tell a child to eat less and move more when they are brought up in a family who doesn't follow that same rule will meet with not only failure to lose the weight, but further shame and embarrassment—and even confusion of modeling from authority figures. Also, because parents generally pass on their habits to their children, a child who watches their parent eat chips or sweets in front of the tv is also likely to adopt this behavior as a typical way to pass time. Parents who are inactive and neglect to teach their children the value of physical activity and play are likely to have children who value less active and sedentary activities themselves. Further, when sit-down meals don't exist within a household, the norm becomes the pre-packaged meals or fast food runs in between activities.

So what can families do to create a healthy weight conscious environment for their children? Following are a few tips:

1) If possible, before even having children, learn what you, as parents need to know to lead a healthy lifestyle. This includes healthy eating patterns, minimization of meals prepared outside the



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home, knowledge about "whole foods" vs. prepackaged foods, healthy cooking techniques, appropriate portion sizes and combinations of foods, as well as quick and healthy techniques to fall back on when life gets busy. Learn the value of buying fresh, local produce as well as the difference organic foods can make.

- **2)** Again, before the children arrive, adopt a regular moderate physical activity routine. An already-established habit will maintain much more readily than one you attempt to create after the children come along.
- **3)** Address any emotional eating habits prior to having your own children. These will only be exacerbated if left un-addressed during pregnancy and stressful child rearing situations.
- 4) Once the kids have arrived, consider weekly or even daily family cooking activities in which all family members take part in not only shopping, preparation, and clean up, but also meal planning. Given that school systems are unable to teach full nutrition skills, this will prove invaluable once the child is on their own. This also creates a team approach for the family as well as lends itself to daily bonding activities which promote a healthy relationship with food in general.
- 5) Take daily family walks, play outside or create regular outdoor activities with your children. These important family bonding times seem to have been replaced with other activities, but research indicates that children who watch their parents maintain regular physical activity regimens also adopt similar regimens for themselves.
- **6)** Consider volunteer activities in which the entire family can become involved as an active unit. Habitat for Humanity and other charity-based organizations value family approaches to community service, while supplying built-in physical activity.

- 7) Take family cooking classes or activity classes to learn new skills as a unit. Whether it be a certain form of cooking class, or a class such as martial arts or other active event, children will be able to practice the new skills in their home right along with you!
- **8)** Clean the house together! Assign each family member a certain list of "active" activities and even turn on music to increase the movement. Not only will your house get clean faster, but you will be moving to the groove together.
- **9)** Walk to local events together. This will not only increase your physical activity, but will also do your part for the environment by saving gas and reducing emissions.
- **10)** Be creative! In this day and age, convenience takes away from our former creative minds. Make a point to find ways to create healthy behaviors, habits, and traditions.
- **11)** Make new traditions! Instead of taking a long nap after Thanksgiving dinner, instead take a family walk or play a game of football or tag. These traditions will inevitably be better remembered than the naps.

12) Finally, if a child has a weight problem, it is a family problem. Enroll in a family-based weight management program. Make it a team project and use each other as support. The entire family needs to be on board though-one bad egg will spoil it for the rest of the family. If a program doesn't exist, find a team of professionals who can help you gain appropriate skills and knowledge about healthy weight as a family. Many insurance plans are starting to create incentives for healthy weight and you can even write such programs off on your taxes! Find a way to make it fun and work as a team!

Whether is be that you want to prevent weight problems or need to address existing problems, doing so as a family will increase the overall chances of long-term success.

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