



TOOL E8 FAQs on childhood obesity

TOOL
E8

For:	Healthcare professionals, particularly in primary care
About:	This tool provides suggested responses to frequently asked questions regarding childhood obesity. It includes only a selected number of questions. For more information go to www.nhs.uk
Purpose:	To provide healthcare professionals with a concise and handy tool that they can use to answer queries about childhood obesity.
Use:	To be used as a quick method of answering queries from parents/patients worried about their child being overweight or obese.
Resource:	NHS Choices website www.nhs.uk

Recognising obesity

Why have I been told my child is overweight/obese? My child does not look overweight or obese.

Today, many more of us – adults and children – are above the weight that we should be to remain healthy and happy. There are many reasons for this. However, one result of the fact that we as a society are getting larger is that we have lost sight of what a healthy weight actually *looks* like, because we are now used to seeing larger people and we compare ourselves and our children to others around us.

Another result of us getting larger is that there has been a great deal of media attention relating to obesity which has tended to focus on some of the most extreme cases of obesity in the world, rather than the 'everyday' weight problems that we and our children are facing, and this has distorted our thinking.

Because of the above, it is sometimes difficult for us to recognise weight concerns, particularly in our own children. However, weight can become a huge problem for children in terms of their physical and emotional health. If your child is overweight or obese, the best thing to do for them is to be open to the fact that they will need your support in changing behaviour to achieve a healthy weight now and for their future.

Causes of childhood obesity

Are genes the main cause of obesity?

No. Some people may have a genetic predisposition towards obesity, but the reality is that many, many more of us are overweight or obese than used to be the case – and our genes haven't changed. Even those who do have a genetic predisposition to obesity will not definitely become and remain overweight or obese. We should never give up trying to adopt and maintain the lifestyles that will help us and our children achieve a healthy weight.

Why are some children obese or overweight?

At its simplest level, children (and adults) can become overweight or obese because, over a period of time, they move about too little and eat too much. Eating 'too much' can mean having portions that are too big, snacking too much, or having too much of the food (and drink) that is

high in calories. As a society, many of us are eating more than we should. High-energy food is readily available. Most of us are also far less active than we used to be – we tend to drive everywhere rather than walk, and stay inside more. Because of this, lots and lots of us – adults and children – are now overweight or obese. Maintaining a healthy weight is a lot harder than it used to be.

Weight problems can begin at a very early age and it is important that we don't ignore this, as this is just storing up health problems for the future. Children with weight problems can develop very low self-esteem and become depressed. One research study showed that the quality of life of young children who were obese was similar to that of children living with cancer. We need to be doing everything we can to stop children developing weight problems in the first place, and helping them adopt healthier lifestyles to reduce their weight if they do become overweight.

Tackling childhood obesity

What can I do to help my child be more physically active?

To be healthy, children need to do at least one hour of physical activity every day. Children who are overweight need to do more than this. An hour's activity every day may sound difficult to achieve. One of the best ways to ensure regular activity is to build this into the school day, by encouraging your child to cycle or walk at least part of the way to school each day or most days of the week. Joining in with them is a great way of sharing quality time with them and keeping fit yourself. Other ways are devoting some regular time to family activities at evenings and weekends and limiting the amount of time that children are allowed to spend in front of the TV or computer – children who spend the most time in front of the TV tend to be those who are most overweight.

My child isn't the sporty type and won't take part in anything sporty.

Not all children enjoy taking part in traditional sports and this can particularly be the case for those who are conscious of their weight. The most important thing is to find activities that your child finds fun. This doesn't have to be football or netball. Any activity that gets a child slightly out of breath counts – for example, walking at a good pace, playing with pets or dancing.

It's also important to realise that the one hour of physical activity a day that is recommended for children (and the 30 minutes most days for adults) does not need to be continuous. It can be made up of short bursts of activity that add up to 60 minutes, for example, two 15-minute walks to and from school a day, and 30 minutes of activity in the park in the evening for a child, or for an adult, 15 minutes playing with your child and 15 minutes doing housework.

My child constantly snacks on crisps, chocolates and fizzy drinks. How do I stop him/her?

There is room within a healthy balanced diet for your child to enjoy the occasional unhealthy snack. When these foods are forming part of the everyday diet it is time to try some changes. Most of us would benefit from reducing the amount of salt, sugar and saturated fat in our diets, so try to gradually replace foods high in these with healthier options – for example, water instead of fizzy drinks on most days, or fruit instead of chocolate and crisps for snacking. The best thing to do is introduce your child gradually to a range of different, healthier meals and snacks and persist – it can take children a long time to get used to tastes that are unfamiliar.

Does junk food during pregnancy give children a sweet tooth?

There is a possible relationship between food consumed by the mother during pregnancy and the subsequent tastes of her children, although this has not yet been proven conclusively. However, it is very important for pregnant women to take good care of themselves by eating a balanced diet.

Are working mothers to blame for childhood obesity?

One large study in the UK found that children were more likely to be overweight at birth if their mother worked, particularly if they worked long hours. This does not mean mothers are to blame for obesity. Few of us in today's society are in a position where a parent is able or willing to remain in the home. However, clearly society has changed and with long working hours, it is now much harder for families to find time to cook and be active.

Are children who don't get enough sleep more likely to be obese when they grow up?

Some studies have found a relationship between sleep problems in childhood and weight in adulthood. However, there is no clear evidence to show that the two are directly related.

Obesity and pregnancy

I am struggling to get pregnant. I have also been told I am obese. Are the two related?

If your Body Mass Index (BMI – the measure used to calculate weight status) is over 29, this may make it less likely that you will become pregnant, and the greater your BMI, the lower the likelihood of pregnancy. There are other reasons for having problems conceiving (including BMI of the man). If you are having problems, ask your doctor for advice. Your doctor may refer you to an appropriate specialist.

I am pregnant and have been told I am obese and need to do something about it. Why does this matter? I want to give my baby the best start in life and am eating for two.

There are many reasons for maintaining a healthy weight at all stages of life, including during pregnancy. Women who are obese while pregnant have a higher risk of having an infant with spina bifida, heart defects, smaller arms and legs than average, hernia in the diaphragm and other birth defects. These links are not yet fully understood, and may be due to undiagnosed diabetes.