



The epidemic of childhood obesity

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With a quarter of all Canadian children overweight or obese, calling this an epidemic is not much of a stretch. The increasing proportion of children “joining” this group should shock us all.

In the period between 1979 and 2004, the increasing numbers of children identified as overweight and obese has increased from 15 percent of the population to 26 percent! A shocking increase. The biggest increase has come among 12- to 17-year-olds who went from 14 up to 29 percent.

Aside from the individual, personal challenges of being overweight, there are both immediate and long-term consequences arising from this situation. In September 2010, Health Ministers at all levels of government agreed to focus efforts on curbing childhood obesity and promoting healthy weights as a critical first step in helping Canadians live longer, healthier lives. Their framework for action, called Curbing Childhood Obesity, identifies central issues and includes a framework for action.

Childhood obesity matters. Is it because life is tough for a “fat kid”? Perhaps, but the issue is more fundamental. Increasingly, obese children are being diagnosed with “adult” health problems: high cholesterol, high blood pressure, Type 2 diabetes, sleep apnea and joint problems. And being overweight as a child significantly increases the odds of being overweight an adult... with all the accompanying health problems.

For society, health care costs and loss of productivity from weight-related illnesses will both increase along with the aging, more obese labour force.

Identifying the causes of this epidemic is not easy. We can't just point at THE cause because there are multiple factors contributing and combining to the problem. The complex mix includes biological and behavioural factors, social and psychological ones, and economic and cultural. An example includes the increase in “screen time” for kids, uneven access to physical activity, marketing of foods high in fat and salt/sugar to children and larger portion sizes. Quite a mix.

Combating the epidemic requires action at all levels of society, from governments to community groups to individuals. Three strategies were identified in the Curbing Childhood Obesity report. First, making childhood obesity a collective priority. Second, focusing on three key priorities: creating supportive environments; early identification of obesity in children followed with early action; and ensuring availability and accessibility of nutritious food.

The third strategy is to track results: Measure and report on progress and learning from successful initiatives, and modifying approaches as appropriate.

Childhood obesity is threatening our collective well-being, and that of individuals. This is a trend that must be reversed — this is a good start. A commitment to the goal of reducing childhood overweight and obesity is crucial, as is action in support. We can also ask ourselves “what can I do?” Think about it.

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