

Childhood Obesity

A summary of the scientific literature on childhood obesity.



How This Impacts Children's Development

Children who are obese are also more likely to be obese as adults and suffer throughout their lives with related diseases such as diabetes, high blood pressure, and asthma.

Talking Points from the SRCD Brief

- The percentage of overweight children has more than tripled since 1980:
 - More than nine million school children are obese.
- Childhood obesity is best explained by both changes in cultural factors and genetics:
 - 80% of ads geared for kids are for fast food restaurants, cereals, candy, toys.
 - 25% of trips from home are less than one mile away, but 75% of those trips are car-based.
 - Children taking physical education classes (P.E.) drastically decreased, from 42% in 1991 to 28% in 2003.
 - Childcare and after-school programs have less healthy food options.
- Preventing illnesses (e.g. high blood pressure) boosts productivity, reduces health care costs, and decreases rates of workplace absenteeism.

Policy Considerations in the Brief

- Families:
 - Reducing TV watching has been found to help kids lose weight and avoid obesity.
- Federal Government Actions:
 - Healthy media campaigns could promote good nutrition and exercise.
 - Research should address how food marketing affects childhood obesity.
 - Federal Trade Commission (FTC) could regulate ads for junk foods that are geared to children.
 - Provide preventive services in federal health care programs.
 - The USDA's regulatory authority could be expanded to include vending machines and after-school programs, to set nutrition guidelines for all food and drink sold or provided in schools.
- State and Local Government Actions
 - Infrastructure changes can promote activity (e.g. pedestrian-friendly roads).
 - Use existing resources (e.g. recreation centers) to promote physical activity.
 - Taxes on soft drinks and snacks could generate revenue to subsidize fruits and veggies.