Trends, causes and consequences of overweight and obesity

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Trends of overweight and obesity
In three sub-regions, at least one in every ten children under five is overweight

Percentage of overweight children under 5, by United Nations sub-region, 2016

GLOBAL 6.0%

- Central America: 6.0%
- Caribbean: 6.9%
- Northern America: 7.8%
- Southern America: 7.4%
- Western Africa: 3.0%
- Middle Africa: 4.7%
- Southern Africa: 11.8%
- Eastern Africa: 4.7%
- Central Asia: 10.0%
- Eastern Asia: 5.3%
- Southeastern Asia: 7.2%
- Oceania: 9.6%

Source: UNICEF, WHO, World Bank Group joint malnutrition estimates, 2017 edition. Note: *Eastern Asia excluding Japan; **Oceania excluding Australia and New Zealand, ***Northern America regional average based on United States data. These maps are stylized and not to scale and do not reflect a position by UNICEF, WHO or World Bank Group on the legal status of any country or territory or the delimitation of any frontiers. The legend contains a category for >15 per cent (pink) but there is no sub-region with a rate this high.
Prevalence of overweight among children and adolescents (5-19 y) [BMI > +1 SD] (%)
Prevalence of obesity among children and adolescents (5-19 y) [BMI > +2 SD] (%)
Over 10 times more children and adolescents were obese in 2016 (124 million) compared to 1975 (11 million).
Trends in the number of obese people, by region

Lancet 2016; 387: 1377–96
Causes of overweight and obesity
So why is it happening?

Changes in food systems

Economic drivers

- Urbanization
- Market liberalization & foreign debt investment
- Increase in incomes

Social drivers

- Rural to urban migration
- Sedentary lifestyles
- Competing priorities – work/life balance & school curriculum

Impact

Food Supply

- Food production based on intensive farming
- Long product shelf-life
- Supermarkets replacing wet markets
- Year-round availability of food

Changes in nutritional status towards overweight and obesity

Diets

- Convergence of diets
- Affordability drives food choices
- Increased intake of fat, sugar and salt
Potential factors in the rise of child obesity

**Indirect Influences**
- Parents and families
  - Income
  - Parents work habits
- Advertising
- Physical environment
  - Urban expansion
  - Access to sport areas
  - Fast food outlets
  - Safety
- Knowledge
- School environment
- Peer behaviors and preferences

**Energy intake**
- Food consumption
  - (energy dense – nutrient poor)

**Energy output**
- Physical activity
  - Sports
  - Walking to school
- Sedentary activities
  - Screen time

**Child Weight**
Ultra-processed food markets

Global consumption of SSBs in adolescents
% of < 60 min of PA daily among school going adolescents aged 11-17 years, 2010

http://www.who.int/gho/ncd/risk_factors/physical_activity/en
Physical inactivity by region

Increase from 33% to 39% (2001 vs. 2016)

% not meeting recommendations

Latin America and Caribbean
High-income Western countries
High-income Pacific
South Asia
Central Asia, Middle East, North Africa
Central and Eastern Europe
Sub-Saharan Africa
East and South East Asia
Oceania

Females
Males

Guthold, Stevens, Riley, Bull. Lancet Global Health Online September 4, 2018
Consequences of overweight and obesity
Effects of childhood overweight and obesity

- Poorer health in childhood, including hypertension and metabolic disorders
- Lower self-esteem
- Higher likelihood of being bullied
- Poorer school attendance levels and poorer school achievements
- Poorer health in adulthood, including a higher risk of obesity and cardiovascular disease
- Poorer employment prospects as an adult, and a lower-paid job
11.8 million people die between the ages of 30 and 70 in developing countries from noncommunicable diseases.

Increased exposure to common modifiable risk factors

Noncommunicable diseases

Increasing health care costs to treat NCDs and complications

Populations in low- and middle-income countries

Loss of household income

• Globalization
• Urbanization
• Population ageing
• Poverty

Poverty at household level

NCDs worsens poverty, while poverty contributes to rising rates of NCDs

New perspectives
• Globalization
• Urbanization
• Population ageing
• Poverty

Poverty at household level

11.8 million people die between the ages of 30 and 70 in developing countries from noncommunicable diseases.

Goal:
To halt the rise of the rapidly growing obesity epidemic in children and adolescents

5 strategic lines of action:
1. Primary health care and promotion of breastfeeding and healthy eating
2. Improvement of school nutrition and physical activity environments
3. Fiscal policies and regulation of food marketing and labelling
4. Other multisectoral actions
5. Surveillance, research, and evaluation
THANK YOU