

The Big “O”

The “O Generation” can be described as *Overweight* and *Obese* – and it’s *Our* problem. “The epidemic of childhood obesity in the United States is *the* critical health issue of this decade. Second only to tobacco abuse, obesity is the most preventable and avoidable cause of illness and death in the United States.”² It is expensive, as well.



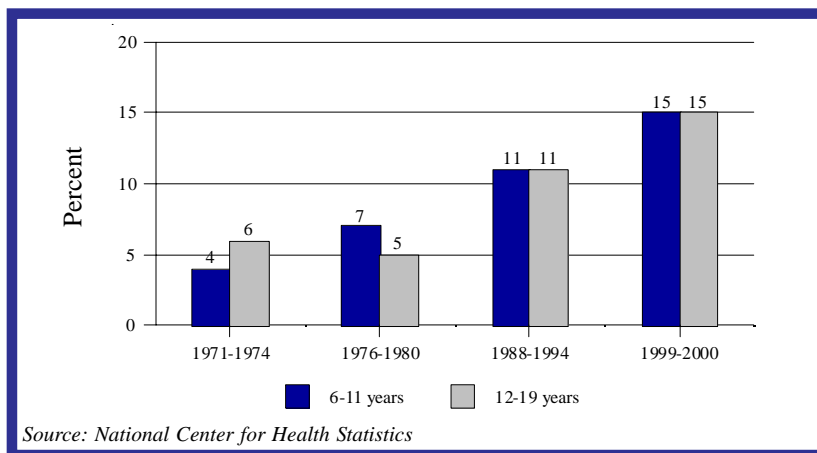
It’s about kids.

The estimated annual cost of obesity and being overweight in the United States is \$117 billion.³ The Big “O” (Overweight and Obese):

- Knows no socio-economic or geographic boundaries.
- Contributes to increased health care and insurance costs for everyone.
- Limits participation as a child and work productivity as an adult.
- Alters lifestyle, limits activity, and impacts quality of life.
- Creates low self-esteem and psychological damage.

According to the National Center for Health Statistics, an estimated 15% of youth in the United States ages 6 to 19 are overweight (definitions can be found at <http://www.cdc.gov/nchs/data/wh/nchsdefs/bmi.htm>). This proportion has tripled since the early 1970s (see Figure 1).⁴ Preventing childhood obesity at an early age is critical because after age three the likelihood that the problem will persist into adulthood increases.² Children observe and follow the eating and exercise habits of those around them, and are confounded by “Do as I say, not as I do” messages. Their behaviors mirror a society that pushes second helpings, insists on clean plates, indulges in rich desserts, frequents “all you can eat” buffets, “super-sizes” orders, and chooses “fast food” over family meal times.

Figure 1. Percentage of Youth in the U.S. Ages 6-19 Years Who Are Overweight, For Selected Years 1971-1974 Through 1999-2000 ⁴



Healthy lifestyles include:

Physical activity

- Set a good example.
- Stimulate a child’s learning at an early age through play and activity.
- Help children have fun and develop skills through competitive and non-competitive activities appropriate for their age and abilities.
- Engage young people (elementary age to adolescents) in at least one hour of physical activity per day (10 to 15 minute periods).
- Encourage children to walk, run, jump rope, climb, hike, ride bike, roller-skate, play ball, bowl, ski, stretch, do sit-ups, do pushups, or help with gardening and yard work.
- Limit television, video games and computer time to two or fewer hours per day.

Healthy eating

- Set a good example.
- Begin healthy habits and attitudes toward food now and they can last a lifetime.
- Be conscientious of serving sizes.
- Allow children to be responsible for their choices, but provide healthy options. Discourage empty calorie snacks by not making them available in your home.
- Introduce new foods along with some favorites.
- Do not use food as a tool for punishment or reward.
- Help children be aware of why they are eating (e.g., stress, comfort, or hunger).

“Parents are responsible for what is presented to eat and the manner in which it is presented. Children are responsible for how much and even whether they eat.” - Ellyn Satter, “How to Get Your Kid to Eat...But Not Too Much”

Causes of The Big “O”

- The primary cause of obesity is an energy imbalance brought about by overeating and inadequate exercise.³
- Numerous lifestyle changes, like advances in technology and trends in eating out, are also suggested causes.¹
- With changes in farming and other rural occupations, the “rural lifestyle” is no longer enough to keep rural residents healthy. Obesity and being overweight are now more common in rural areas than urban areas.⁵
- Obesity is a complex and chronic disorder. Genetics, metabolism, behaviors, psychology, social and cultural environment, disease, drugs, and individual will-power are all factors in its treatment.³
- Three in five young people in the United States eat too much fat, while only one in five eat enough servings of fruits and vegetables each day.³
- More than one-third of youth in grades 9-12 do not engage in sufficient vigorous activity (see Figure 2).⁶

Sources

- 1 Federal Interagency Forum on Child and Family Statistics. “Overweight.” *America’s Children: Key National Indicators of Well-Being 2003*, p. 28.
- 2 Huettig, C., et al. (2004). “The O Generation.” *Young Children*, 59 (2): 50-55, www.naeyc.org/resources/journal.
- 3 National Center for Chronic Disease Prevention and Health Promotion, www.cdc.gov/nccdphp.
- 4 National Center for Health Statistics, “Prevalence of Overweight Among Children and Adolescents: United States, 1999-2000,” www.cdc.gov/nchs/products/pubs/pubd/hestats/overwght99.htm.
- 5 Rowley, T. (2004). “Obesity: Combating a Rural Epidemic.” *The Rural Monitor*, 10 (4): 1-5, www.raconline.org.
- 6 Youth Risk Behavior Surveillance System (YRBSS), 2003, apps.nccd.cdc.gov/yrbss.

Costs of Obesity and Being Overweight

Investing in a child’s healthy lifestyle is critical. In addition to the medical costs, there are both physical and psychological costs to childhood obesity that have consequences in adulthood. Addressing the progression of problems associated with child obesity early in life will both improve the quality of life and provide a tremendous economic savings to our society.

- **Medical** - Current medical costs point to a need for change in adult behavior. Those costs may be direct (preventive, diagnostic, and treatment services) as well as indirect (income lost due to decreased productivity, restricted activity, absenteeism, or loss of future income due to premature death). The national medical costs of adult obesity and being overweight in the U.S. in 1998 may have been as high as \$78.5 billion (or 9% of total medical expenditures) and “approximately half of these costs were covered by Medicaid and Medicare.” From 1998 to 2000, North Dakota’s annual estimate of direct medical expenditures attributable to obesity was \$209 million.³
- **Physical** - For children, choosing to spend free-time watching television and playing computer games rather than playing sports or riding bike leads to a pattern of inactivity. A diet of chips, sweetened cereals, and sodas instead of fruits and vegetables develops poor eating habits and increases health risks. By avoiding behaviors such as physical inactivity and unhealthy eating, many chronic diseases are preventable.³ Obese children mirror the health risks commonly seen in obese adults including: high blood pressure, elevated cholesterol levels, increased heart rate, joint and skeletal abnormalities, sleep apnea, and esophageal reflux. However, “One of the most frightening trends is the rapid increase in young children of cases of type two diabetes,” previously considered adult-onset diabetes.²
- **Psychological** - Researchers have found that children who are overweight or obese may have issues that need to be addressed including depression, poor self-esteem, negative self-image, and withdrawal from peers.² Being teased by others may cause psychological scars to a child who is several pounds overweight. The mental health of a child is priceless!

“The first wealth is health.”
- Ralph Waldo Emerson

Figure 2. Percentage of Youth Grades 9-12 Who Participated in Sufficient Vigorous Physical Activity in the Last Week, 2003 ⁶

