**Childhood Obesity: Main causes, Effects and Potential Solutions to a Growing Global Crisis**

Name

Professor

Institution

Date

**Abstract:**

Childhood obesity is a growing crisis threatening the health of many children in many countries in the world. This paper argues the main causes of childhood obesity including unhealthy dietary habits, sedentary lifestyles, genetics, the size of a family’s income, and underlying health conditions. It also explores its serious effects such as long-term health conditions and psychological problems such as low self-esteem and depression. Finally, the paper suggests several solutions including changes in dietary habits, engaging in physical activities and treatment of underlying conditions. The study emphasizes the need for measures to be put in place to combat what has become a global crisis.

**Key Words:**

Childhood obesity, causes, effects, health conditions, solutions, sedentary lifestyles

**Introduction:**

Childhood obesity is defined as a serious health condition that involves having excess body fat at a young age. (Mayo Clinic, 2025). It also involves having a Body Mass Index (BMI) at or above the 95th percentile for age and gender in children aged 2 years and older. (Cleveland Clinic, 2024). It has become one of the most alarming challenges in the world today, both in developed and developing countries as more and more children are being diagnosed with it and with its complications. This paper seeks to explore the main causes and effects of childhood obesity and provide viable solutions to help mitigate its impact.

**Literature review:**

Many studies have been done on childhood obesity. They highlight its prevalence, main causes and solutions to it. Childhood obesity is more common than initially thought. In the year 2022, the World Health Organization (WHO) estimated that 160 million children worldwide were living with obesity. Furthermore, studies done by the United States Center for Disease Control (CDC) in the years 2017 to 2020 showed that obesity affected about 19.7% of children and adolescents aged between 2 and 19 years of age. The most affected age group was found to be between 12 and 19 years of age and the highest prevalence of childhood obesity was found in Hispanic children. In England, 26.8% of children aged between 2 and 15 were either overweight or obese in the years 2022 and 2023. It was also found that boys were more likely to be obese than girls. (The House of Commons Library, 2025).

The COVID-19 pandemic saw an increase in childhood obesity rates due to widespread quarantine. It led to the development of coping mechanisms such as increased screentime to beat boredom and development of unhealthy eating habits such as binge eating.

**Methodology:**

This study reviews existing literature from health organizations, academic journals and government reports to identify the causes, effects and solutions to childhood obesity and to analyze trends in childhood obesity rates.

**Results:**

**Causes of Childhood Obesity:**

***Unhealthy eating habits***

Unhealthy eating habits are the main cause of childhood obesity. Frequent ingestion of large portions of highly processed foods and high fat and sugar diets has contributed to childhood obesity. There is excessive calorie intake without essential nutrients. In Italy, specifically in Campania, 37% of 8-year-olds are overweight while 17% are obese since the children increasingly prefer calorie rich foods such as pizzas. (THE TIMES, 2025).

***Lack of physical activity***

This is mainly attributed to increased screentime. Smartphones, video games and TVs have replaced physical activities such as play, walks and visits to recreational facilities. This leads to weight gain and eventually to obesity. A study done in the United Kingdom involving 2,000 parents revealed that kids get less than 4 hours of exercise a week but spend more than 14 hours looking at screens. (THE Sun, 2025)

***Socioeconomic status***

A family’s socioeconomic status contributes greatly to childhood obesity as it will influence the cost and accessibility to healthier foods and access to parks or recreational facilities where children can exercise. Parents from families with a lower socioeconomic status will often prefer cheaper, easily accessible junk food rather than the more expensive healthier alternatives.

***Genetics***

Genetics play a role in childhood obesity. Children with obese parents and siblings are more likely to develop childhood obesity due to some genes that contribute to weight gain. It has been found that these genes are more common in some ethnic groups such as Hispanics than others. Faulty variants of the DENNDIB gene that influences the leptin-melanocortin pathway can lead to persistent hunger which contributes to obesity. (THE TIMES,2025). Familial genetic history is, however, not a prerequisite for obesity.

***Underlying health conditions***

Several health conditions predispose a child to obesity. One of them is hypothyroidism which is characterized by low amounts of thyroid hormone in blood. A deficiency in the growth hormone also contributes to childhood obesity since the hormone also plays a role in metabolism. Insulinnplays a role in the metabolism of proteins and fats. Another hormone, leptin, is linked to satiety. Insulin and leptin resistance in the body has been linked to childhood obesity. (NIH, 2022).

**Effects of Childhood Obesity:**

***Long term physical health effects***

Childhood obesity increases the risk of a child developing heart problems, many of which manifest in early adulthood. They include high blood pressure and dyslipidemia, all of which if left unchecked, could be life threatening. Insulin resistance, one of the causes of childhood obesity, eventually leads to poor glucose tolerance and type 2 diabetes mellitus in obese children and adolescents. The United States Center for Disease Control and Prevention (CDC) estimates that about 20,000 new cases of type 2 diabetes mellitus are diagnosed yearly in United States children and adolescents with 90 to 95% of these children being obese or overweight

***Psychological problems***

Childhood obesity affects a child’s emotional wellbeing and their self-esteem. Obese children have been known to have low self-esteem and to develop depression, anxiety and paranoia. This is mainly because they are prone to bullying and teasing by their peers. They have also been known to have unsatisfactory academic performance and have conduct problems such as disobedience and disruptive and aggressive behavior as they sometimes end up being bullies.

**Solutions to Childhood Obesity:**

***Changes in dietary habits***

This involves a reduction in the intake of soft drinks, fast foods, sugary foods and ultra-processed foods. This should be implemented in all areas that a child spends time in. A change in dietary habits starts with the introduction of healthier food options to every meal and practicing portion control. A healthier, balanced diet consists of fruits, vegetables, legumes, whole grains, nuts and a reduction of carbohydrate and fat intake. Japan has successfully introduced healthy school meals known as “kyushoku”. This has partially contributed to the low obesity rates in children in the country.

***Engaging in physical activities***

Promotion of physical exercise involves encouraging play, walks and regular visits to parks and recreational facilities. The American Diabetes Association recommends that children engage in at least 60 minutes of moderate to vigorous physical activity daily to reduce the risk of obesity and type 2 diabetes.

***Treatment of underlying health conditions***

Addressing underlying health conditions helps treat childhood obesity. Increasing thyroid hormone levels in blood through medication treats hypothyroidism. Injections of growth hormone will treat its deficiency. Obese children with insulin resistance that have developed type 2 diabetes are to be started on medication and a change of diet to lower blood sugar levels.

**Discussion:**

Although unhealthy eating habits are its main cause, childhood obesity is multifaceted. Most children with unhealthy eating habits also rarely exercise. Therefore, no single intervention will solve childhood obesity. Healthy eating goes hand in hand with being physically active. This holistic approach ensures that significant strides are made in the eradication of childhood obesity.

**Conclusion:**

Childhood obesity is on the rise, especially since the COVID-19 pandemic. The effects of obesity on a child are fatal and may even shorten their life expectancy. On the bright side, it has several solutions which, when implemented, lead to a healthy, long and meaningful life for a child and improve the health and wellbeing of a society as a whole.

**References**

*Brit kids get less than 4 hours of exercise a week – but more than 14 hours looking at screens.* THE Sun. (2025). Retrieved from thesun.co.uk

*Childhood obesity – Symptoms and causes.* Mayo Clinic. (2025). Retrieved from <https://www.mayoclinic.org>

*Childhood Obesity: Causes and Problems.* Cleveland Clinic. (2024). Retrieved from <https://my.clevelandclinic.org>

*Childhood Obesity: Prevalence and Prevention in Modern Society – PMC.* National Institutes of Health (NIH).(2024).Retrieved from <https://pmc.ncbi.nlm.nih.gov>

*Obesity statistics – The House of Commons Library.* (2025). Retrieved from <https://commonslibrary.parliament.uk>

*The ‘hungry genes’ that make labradors – and humans – fat.* THE TIMES. (2025). Retrieved from thetimes.co.uk

*Why birthplace of the Mediterranean Diet has a child obesity crisis.* THE TIMES. (2025). Retrieved from thetimes.co.uk