**Childhood obesity is becoming a serious problem in many countries. Explain the main causes and effects of this problem and suggest possible solutions.**

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 often leads to serious health conditions such as diabetes, high blood pressure and psychological problems such as low self-esteem and depression. Various factors have been known to cause childhood obesity. Some, such as a genetic predisposition and hormonal imbalances cannot be easily remedied while others such as unhealthy eating habits can be remedied through change of eating habits and proper diet intake. Obesity in general results when there are more calories taken than energy expended.

Childhood obesity is more common than initially thought. 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. Moreover, in the year 2022, the World Health Organization (WHO) estimated that 160 million children worldwide were living with obesity.

There are several causes of childhood obesity. One of them is genetics. Children with obese parents and siblings are more likely to develop childhood obesity. This is attributed to some genes that contribute to weight gain. Familial history is, however, not a prerequisite for obesity.

Another cause of childhood obesity is familial and home environment factors. One of the factors is the quality of the diet provided in a home. Frequent ingestion of large portions of highly processed foods and high fat and sugar diets has contributed to childhood obesity. Another factor is the lack of physical activity mainly attributed to increased screentime. A family’s socioeconomic status also 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 work long hours to earn their keep hence there is limited time to prepare healthy food options for the kids and to supervise feeding on the healthy foods. Moreover, even less time gets allocated to excursions so that children can exercise.

Media influence has been shown to contribute to childhood obesity. Adverts for fast food restaurants, highly processed foods and unhealthy food options on TV and online stimulate a desire for the said foods and have been linked with increased food intake.

Several health conditions such as hormonal imbalances have been linked to childhood obesity. They include hypothyroidism which is characterized by low amounts of thyroid hormone in blood, growth hormone deficiencies and conditions such as Cushing syndrome where one has high amounts of cortisol in blood. Insulin, a hormone, plays a role in the metabolism of proteins and fats. Another hormone, leptin, is linked to satiety. Insulin and leptin resistance has been linked to childhood obesity. (NIH, 2022). Some medications such as antipsychotics and corticosteroids cause weight gain which may culminate in childhood obesity.

Finally, some external factors outside of human control have been attributed to childhood obesity. One such example is the COVID-19 pandemic which led to widespread quarantine and house confinement. Children were unable to go out and engage in physical exercises. Furthermore, their emotional and mental wellbeing was impacted due to abrupt school closures and the fact that many could not meet with their peers. This led to the development of coping mechanisms such as increased screentime to beat boredom and development of unhealthy eating habits such as binge eating, all of which were likely to culminate in obesity.

There are tell-tale symptoms of obesity in children. The most obvious one is higher body weight than normal. It may also be accompanied by abdominal obesity, shortness of breath, puberty abnormalities, joint pain, fatigue and sleep apnea.

The effects of obesity on a child are fatal as it not only causes health problems but also affects the child socially.

First, the health of a child is severely impacted. Childhood obesity increases the risk of a child developing heart problems, otherwise known as increased cardiovascular risk. Many of these problems manifest in early adulthood hence negatively influencing the quality of life of the individual. 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. Furthermore, obese girls have been known to experience menstrual irregularities. They often start their monthly periods earlier, typically before 10 years of age. Obese adolescents on the other hand end up experiencing oligomenorrhea or amenorrhea due to a condition known as polycystic ovarian syndrome (PCOS) which is mainly fueled by insulin resistance. Other complications of childhood obesity include asthma, nonalcohol related liver disease and renal disease.

Secondly, it has been found that 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, disruptive and aggressive behavior and have been known to engage in physical and verbal abuse as they sometimes end up being the bullies themselves. All these problems end up altering how a child interacts with their peers and systems of authority in society. In their later years, some may resort to violence or crime, which they are likely to be implicated for. Some of the implications include serving prison sentences and even worse, death.

Despite the havoc that childhood obesity causes to a child and family, there are possible solutions to it. A lot of effort is required to treat it once it has been established but on the bright side, it is curable. It however requires the participation of not only the family but the society at large since the measures put in place affect not only the child, but their family and the society at large.

One of the first and main things to do is a change in dietary habits through reduced 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. This includes the school and home environment for maximum effectiveness. A change in dietary habits starts with the introduction of healthier food options to every meal as the unhealthier options are phased out till an instance when every meal consists of healthy foods. A healthier diet consists of fruits, vegetables, legumes, whole grains, nuts and a reduction of carbohydrate and fat intake. In addition to this, there should be a reduction in sedentary activities such as a reduction in screentime. There should be promotion of physical exercises through encouraging play, walks and regular visits to parks and recreational facilities. At school, teachers should be encouraged to promote the participation of all children in physical activities. For obese children, they should receive encouragement and positive feedback on their journey to a healthier weight. This will boost their morale and self-esteem. Therapy is recommended for those who have developed psychosocial issues such as anxiety and depression.

Pregnant women are encouraged to monitor their weight gain during pregnancy. They are also asked to practice exclusive breastfeeding in the first 6 months after birth and continue with breastfeeding till the child is 2 years of age. (WHO,2024). Those diagnosed with gestational diabetes are encouraged to ensure that the condition is addressed and maintained appropriately through medication and a change of diet to address the high blood sugar. A change in diet involves limiting the consumption of sugary foods, high fat foods and processed foods. It also involves eating plenty of fruits and vegetables, lean proteins and healthy fats.

Some underlying health conditions cause childhood obesity. Addressing these conditions helps treat childhood obesity. Increasing the thyroid hormone levels in blood through medication treats the hypothyroidism which eventually treats the obesity. Injections of growth hormone will treat its deficiency while for Cushing syndrome, there are interventions to lower cortisol levels. Obese children with insulin resistance that have developed type 2 diabetes are to be started on medication to lower blood sugar levels. They should also be encouraged to change their diet and engage in more physical activities which eventually bring about weight loss.

In conclusion, childhood obesity is on the rise, especially since the COVID-19 pandemic. It is not only an individual or familial responsibility but the responsibility of society to ensure that it is prevented. 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 to a child and improve the health and wellbeing of a society as a whole.

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