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[Health & Medicine](https://assignbuster.com/essay-subjects/health-n-medicine/), [Obesity](https://assignbuster.com/essay-subjects/health-n-medicine/obesity/)

## Obesity

We have all heard about the growing epidemic of obesity from our parents, teachers, and even our government. According to a recent study, about a quarter of two to five year olds and one-third of children are overweight or obese in the U. S. (Ogden et al., 2014). There is a wide array of factors which play a role in children becoming overweight or obese. Genetics, along with behavioral, social, cultural, environmental influences, can create an environment conducive for obesity. Environmental factors include great amount of exposure to advertising that encourages food consumption and promotes unhealthy foods, technological advances or increase in media use, limited access to safe recreational facilities, limited time for recess or physical activity in schools, and limited time for activity during the workday (FRAC, 2010). The socioeconomic status of families also plays a part in the obesity epidemic. According to one study, about thirty percent of low-income preschoolers are overweight or obese (Centers for Disease Control and Prevention, 2011). In accordance with the influences previously mentioned, the current high rates of children being obese or overweight are largely caused by behaviors made by the individual, along with environmental factors, that lead to a surplus of caloric intake and a poor amount of physical activity.
An increase in caloric intake can include over snacking, over indulging in sugary beverages, larger portions given by parents or restaurants, eating meals out instead of in the home, and the lower cost given to fast food chains making it more convenient for lower income families to purchase. Portion size has had a tremendous impact on obesity due to it drastically increasing within the past twenty years. For instance, years ago a 3-inch bagel was the average bagel size at 140 calories, and today a regular bagel is 6-inches and 350 calories (We Can! 2013). Recently, Michelle Obama attempted to create healthier plates, but her plan backfired and led to more than 1 million children declining to eat it, according to a recent report (Harrington, E. 2014). This new plan made things complicated; they included calorie ranges for each age group, sodium limits, zero trans-fats, and specific ounce amounts for meats and grains. The pros to this plan led to a withdrawal of unhealthy foods, such as pudding cups and potato chips. But with these new food options, combined with a lack of appeal, it led to kids taking the food but not eating it. However, what this report said was that, “ Although school lunch participation has declined, it is likely that participation will improve over time as students adjust to the lunch changes” (Harrington, E. 2014). This report proved to be more of a trial and error than one of success. Even though it seemed like Michelle’s plan didn’t work out, there is something being done about the lunches in schools and advocators who will continue to try. Hopefully parents and children will come to understand that in order to be healthy, good nutrition must be woven into all expanses of one’s life, including school.

## Negative Outcomes of Obesity

Being overweight or obese can be very dangerous and can have serious physiological, psychological and social concerns. Some of the most common physiological consequences of obesity are diabetes, high blood pressure, asthma, and iron deficiency; they all lead to a shorter life span for the affected person (FRAC, 2011). Of these physiological consequences diabetes is one of the most common and there are short and long-term complications associated with it. The short term consequences are hypoglycemia, ketoacidosis, and hyperosmolar hyperglycemic state (HHS) (Diabetes. co. uk, 2014). The long term consequences are being at risk for coronary heart disease, strokes, kidney disease, and diabetes also affects the eyes, digestion, skin, and the nerves of the body (Diabetes. co. uk, 2014). Having high blood pressure can quietly damage your body for years before symptoms develop. Left uncontrolled, you may wind up with a disability, a poor quality of life, or even a fatal heart attack (Staff, M. 2014). Complications with high blood pressure include; damage to your arteries, heart, brain, kidneys, and eyes, sexual dysfunction, bone loss, and trouble sleeping (Staff, M. 2014). With asthma, most people can have a normal life but will have to live and deal with the consequences paired with it. Asthmatics will have to carry around their inhaler, take a controller medicine each day, develop anxiety, stomach trouble, and may develop lung scarring (Bottrell, J. 2013). Iron deficiency can delay normal infant motor function or mental function, during pregnancy it can increase the risk of prematurity, and also iron deviancy can cause fatigue in adults and mental or memory function in teens (Stoppler, M. 2014).
With psychological concerns, some of the most common are depression, anxiety, low self-esteem, body dissatisfaction, and even substance abuse (FRAC, 2011). Depression can lead to a lot of different frightening side effects; suicide, addiction, self-injury, reckless behavior, relationship problems, health concerns, and even poor school performance (U Lifeline, 2014). Concurrently, anxiety causes all kinds of problems such as, panic attacks, heart disease, and gastrointestinal disorders (Health Harvard, 2008). When someone has low self-esteem, negative outcomes come easily create anxiety, stress, loneliness, relationship problems, job problems, and even increases the vulnerability to abuse or use drugs or alcohol (Self Esteem, 2013). Body dissatisfaction encompassesindividual factors including negative moods, dieting, and social withdrawal, body mass and pubertal status (Presnell, K. 2007). Lastly, substance abuse, which is considered a form of disease, has physical effects which consist of organ damage, hormone imbalance, cancer, pre-natal and fertility issues, gastrointestinal disease, and HIV/AIDS. These consequences can lead to long term neurological impairment and emotional effects (Summit Helps, 2014).
All of these physiological and psychological consequences are extremely serious and should not have to be dealt with at any age, but especially as a child. This is why it is so important to start teaching children to eat a balanced diet and give them the nutrients they need to live a long and healthy life. By giving them the tools they need to do so, these kids will have the knowledge for a lifetime and be able to grow and teach their kids and so forth. Being healthy does not have to be as difficult as some are making it out to be, and there are plenty of opportunities to achieve this.

## Nutrition- What is it?

Hippocrates once said, “ Let food be your medicine and medicine be your food” in regards to the significance of nutrition has on one’s overall health (Ladau, 2010). Nutrition is defined as “ the study of food at work in our bodies, our source for energy, and the medium for which our nutrients can function” (Ladau, 2010). Nutrition has a huge influence on one’s life, making a lack of proper nutrition detrimental for people of all ages. Through receiving and applying accurate nutritional knowledge, one can achieve a positive health state. Ladau theorizes that health education and promotion may “ be a key to avoiding obesity, illness and many of today’s most prevalent chronic diseases” (Ladau, 2010). From the beginning to the end of life, a proper balance of nutrients is crucial. Today, many parents struggle with what is nutritious for their children; as such, this lack of parental education regarding nutrition is leading to earlier illnesses in adolescents and teens.

## Nutrition: What To Aim For

The essential macronutrients for life include carbohydrates, proteins, and lipids. Fiber, vitamins, minerals, and other micronutrients are also vital for development. Most importantly, adequate amounts of water must be present in the body, as it is the solvent for all soluble ingredients in the blood and cells (Ladau, 2010). Children lack both the access and the means of providing their own food, making it the parent’s responsibility to provide their child with a balanced diet. Below is a table that indicates the balance that needs to be used daily for childrenage’s two to three retrieved from the Nutrition Guide from Toddlers.
No matter what age, child or adolescent, there are five strategies parents can follow that will more than likely result in a nutritious diet. These five strategies for parents include “ having regular family meals, serving a variety of healthy food and snacks, being a role model by eating healthy themselves, avoiding battles over food, and involving kids in the process” (Healthy Eating, 2014). Caretakers also need to understand the needs of the child, as the child’s needs are likely to be very different than their own. According to the Nutrition Guide above, toddlers, who are categorized as 9-12 months old to 4 years old, only need about 1, 000-1, 400 calories per day (Healthy Eating, 2014). Adults on the other hand typically need around 2, 000 calories; maybe more depending on how active they are.

## Diabetes Due to High Sugar Intake

We touched slightly on diabetes when we talked about the negative outcomes of obesity, but a problem of this severity must be further addressed. The WHO Global Strategy for the Prevention and Control of No communicable Diseases recognizes diabetes as one of its priority conditions. In a direct effort to understand diabetes in children, an examination of the link between nutrition in kids and diabetes is essential. Although the consumption of sugar is typically associated with diabetes, this is not necessarily the case. In fact, Type I diabetes is primarily genetic and caused by a few other factors that are not yet known (Sugars & Desserts, 2014). Type 2 diabetes is associated with being overweight; however, the American Diabetes Association supports research findings that have revealed an extremely strong correlation between excess sugar intake and diabetes (Sugars & Desserts, 2014).

## Balance

Children with diabetes, or at risk for diabetes, must not only monitor their nutrition, but also face the challenging task of developing and sticking with healthy eating habits (Dowshen, 2013). Assessing the two main forms of carbohydrates (sugars and starches) play an essentialrole in understanding the nutrition in children with diabetes (Dowshen, 2013). According to KidsHealth, “ the body breaks down or converts most carbs into glucose, which is absorbed by the bloodstream.” As a result, the glucose level increases in the blood, causing the pancreas to release a hormone called insulin; insulin is responsible for transferring glucose from the blood to the cells so it can be utilized as an energy source (Dowshen, 2013). Children with diabetes must follow a nutritional regimen that balances carbohydrates and other nutrients, while maintaining a high level of physical activity to aid in controlling blood sugar levels (Dowshen, 2013).
Overall, creating and maintaining a balanced healthy diet and lifestyle is not as difficult as some make it out to be. If the education is delivered and creativity is added, the only other piece left to add is consistency. There has been intense studies shown that too much sodium, sugar, or just eating the wrong foods and too much of them, can cause negative outcomes. Maladaptive nutrition triggers immense harm to our wallets and bodies. Obesity, heart disease, diabetes, and premature death among infants are only few of the many possible consequences. People must adapt to practicing healthier lifestyles, as it will allow them to live long, happy and healthy lives.

## Health Care Costs

According to the World Health Organization, the United States spent 17. 9% of their gross domestic product (GDP) on health care during the year of 2012. This worked out to be around 2. 7 trillion dollars or 8, 680 dollars for every person in the population (“ Health Expenditures”, 2014). The majority of this money is going toward necessary, unpreventable health outcomes such as nursing homes, retirement homes, and hospital costs. However, there is a large chunk of the United States’ health care expenditure going towards conditions that are easily preventable by proper nutrition and exercise. Every person can justify the use of health care dollars on legitimate illnesses, but is it fair to have to step up and pay for people’s conditions that have developed because a lack of good care and/or education? The health care dollars going in to treat these diseases could better be used to promote and education of healthy behaviors.
Some may wonder how a child’s health behaviors play a role in this, for they have not developed these diseases yet. Many parents write off healthy eating for their children because they are facing many barriers such as resistance from the children, availability of healthy food, a busy lifestyle, and the influence of food advertising(Slater et. al, 2009). Children developtheir eating habits early on, making childhood a window of opportunity to instill healthy lifestyle values at a young age. Contrastingly, if negative eating habits are enforced during the childhood years, they typically continue on into adulthood. When this occurs on a large scale, you end up with a consistently large population of obese adults, which costs the health care system billions of dollars, not to mention all of the overweight adults being at high risk for early mortality and other serious diseases. These serious diseases also cost the health care system billions due to medication, hospital, and physician or clinical service costs. Components making up these costs involve things such as morbidity treatments, loss of productivity, and premature mortality (Colditz, 1999).

## Potential Avenues for Intervention

Sugar-Sweetened Beverages
One of the largest culprits in childhood obesity is the overconsumption of sugar-sweetened beverages (SSB). A systematic review went so far as to conclude that SSB’s may in fact be the primary contributor to the childhood obesity epidemic (Malik, Schulze, & Fu, 2006). Over the last twenty years, Americans have substantially increased their carbohydrate consumption. The extra carbohydrates being consumed are largely in the form of added sugars (Malik et al., 2006). Fruit juices, carbonated beverages, sweet tea, specialty coffees, and vitamin water drinks are all considered to be sugar sweetened beverages, as they all contain unnatural amounts of added sugar. SSBs typically do not contain any nutrients that are beneficial for the body. In March 2010, the CDC released a report highlighting that 80% of America’s youth consumes SSBs on a daily basis and it is collectively accounting for 11% of their total daily caloric intake (CDC, 2010). This creates an array of problems, as SSBs have been linked to causing diabetes, dental problems, cardiovascular disease, and a numerous amount of other health issues. Most significantly, endless studies have proved that SSBs have a strong causal link to obesity, especially among children between the ages of 12 and 19 (CDC, 2010). As obesity rates increase among this sector of the population, interventions must be implemented to attack and decrease the consumption of SSBs.

## Our Target: Parents

Children’s nutrition is heavily affected by their parents own nutrition habits, knowledge, decisions, and overall lifestyle (Oliveria et. al., 1992). A child’s nutrition is an important and multifaceted factor in improving his or her health. When analyzing the nutrition of a child, it is important to also look at the diet of the parents, as this has an effect on children. This is because they are the decision makers and the purchasers: what they say goes. Slater concurrently stated that, “ parents are likely to be the most important influence in determining children’s nutrition and activity environment and habits” (Slater et. al., 2009). If the parents of the household lack the necessary awareness of what makes for a healthy lifestyle, then their children’s lifestyle will also reflect unhealthy behaviors, eventually leading to serious health problems.
In a study by Oliveria and colleagues, an associated link between nutrition of the parents and children is described with the following, “ In this study, when both parents consumed a diet high in saturated fatty acids or dietary cholesterol their children were much more likely to consume such a diet” (Oliveria et al., 2013). Parents and their choice of a healthy or unhealthy lifestyle affects children through the repeated exposure to foods the parents promote. “ Parents who promote foods with high nutritional value such as fruits and vegetables, are more likely for their children to accept these healthy foods influencing the children’s nutrition” (Lindsay, Sussner, Kim, &Gortmaker 2006 p. 173).
The two most important reasons why parents need to be targeted is because parents have the greatest influence on their children, and evidence regarding parents’ knowledge of nutrition has shown noticeable deficits. Throughout the remainder of the paper, the two greatest reasons why parents need to be targeted will be discussed, along with strategies to attain these health behavior changes among children. In the end, it will be evident the reason we have ranked parents as high as we have and how big of a role they play in their child’s lives.

## Reasons to Target Parents

Influence on Children
Parents play an incredibly influential role in a child’s life, which means kids choices regarding nutrition come widely from their parents’ choices and how they pass their knowledge on to them. Not only will teaching children good eating habits help them in the short term, but also help in the long run to help prevent diseases and other health problems discussed above. In order to help children get the greatest benefit out of eating a balanced diet, parents must first understand what their role is and how to go about achieving desirable results.
According to Nicklas, “ the primary predictor of fruit, juice, and vegetable consumption in children, are influenced by availability, variety and repeated exposure” (Nicklas, 2001). She also stated, “ Caregivers (parents and child-care providers) can influence children's eating practices by controlling availability and accessibility of foods, meal structure, food modeling, food socialization practices, and food-related parenting style” (Nicklas, 2001). Again, showing howthe parent is in control of what their child ingests. Parents are the ones responsible for making healthier food choices available to their kids by giving them appropriate amount of nutrients needed daily. By preparing a nutritious breakfast, lunch, occasional snack, and dinner, parents will only maximize their children’s overall health and allow them to become more aware of what they should eat. Parents need to understand that children at any age are constantly growing human beings and use quite the amount of energy on a daily basis, so it is crucial they have the nutrients to fuel and sustain their bodies and minds for the days to come.

## Low Knowledge

The largest and most apparent reason children’s nutrition is lacking is due to their low knowledge of nutrition, and this comes from their parent’s lack of nutrition knowledge. Therefore, in order to increase children’s good nutritional habits, we must take a look at how well parents are informed and how much they know about nutrition. There have been a small number of studies conducted to figure out how much parents know and why they do not know very much about nutrition. The two biggest reasons parents are lacking in this division is their socio-economic status (SES) and their education levels.
As teachers does not only work as an educators, but some of them also have children that makes it important for them to the values of high nutrition knowledge in order to pass down to their own children and the ones who sit in their classrooms each day.
In one study, performed by DorotaZarnowiecki and others, children were given a healthy food knowledge activity and parents completed questionnaires (Zarnowiecki, 2011). In their study of 192 children ages 5-6 years old and their parents, they found was that “ Nutrition education for parents, targeted at low-SES areas at higher risk for obesity, may contribute to the development of healthy food knowledge in young children” (Zarnowiecki, 2011). These findings suggest that raising the awareness and understanding of nutrition values in low-SES populations and areas where parents are lacking high education will lead to a rise in nutrition knowledge. Therefore, by putting together effective behavioral advertising and having advocates check back to make sure progress is continuing and to push encouragement, their knowledge will continue to spread all over and obesity and other health issues won’t become such an issue in the years to come.
Stated perfectly from the article written by Zarnowiecki, along with others, is “ Of the many factors that can influence eating behaviors, a lack of nutrition knowledge is one of the most amenable to change, and improving nutrition knowledge through nutrition education is a common component of obesity interventions” (Zarnowiecki, 2011). This quote can sum up the importance of why parents should be informed frequently and in depth about their knowledge about nutrition, along with increasing their children’s knowledge in order for their children and their selves to live a long, happy, and healthy life.

## How to Target

As stated earlier that it is important for the parents to provide their children with proper nutrition, therefore it is important for them to target them. The parents can be targeted in different ways by using different means of media, i. e., television ads, magazine ads and health awareness through social media marketing, social organizations and other educational programs by schools. The use of these different means of advertisements will help to inform parents and educators regarding the nutrition diet and other health alarming factors that can affect the children.

## Previous Researches

Several researches have shown the growing importance of nutritional education for the parents especially for the females who take better care of their children. According to Ira Wolinsky and Judy A. Driskell (2000), the parents must be informed through Nutrition and Education training programs, head start, and Special Supplemental Food Program for Women, Infants and Children, and National Institute of Health as these programs have proved to give more better education to the parents about the nutritional food for children that has also showed positive outcomes (Wolinsky and Driskell, 2000). According to a research by Bobbie Berkowitz and Marleyse Borchard (2009), has emphasized on the prevention strategies for obesity that include utilization of social learning theory that partners with the parents to inform them in engaging their small children to play different physical activities, assess the acceptance of the parents to achieve the change in life styles and parenting style that is important for obesity prevention, and use different counseling techniques which connects parents in a discussion regarding the behaviors which helps to prevent obesity, inform them regarding the strategies and opportunities for prevention, advise them different measures, develop an action plan, listen to the response of the parent and reflect the related challenges and outcomes (Berkowitz and Borchard, 2009). Similarly, a research by W. Douglas Evans, Katherine K. Christoffel, Jonathan W. Necheles and Adam B. Becker (2012) have emphasized on the use of online marketing mediums to inform target, i. e., parents regarding the reasons and poor dietary factors behind obesity in children. According to them, Social marketing is mainly used in the framework of obesity prevention measures that are community-based that helps to encourage behaviors like more child-parent communication which also contributes to improved family health. In addition, the research has also stated that the different social marketing efforts have also showed positive outcomes such as physical activity and nutrition messages marketed by the one percent milk campaign in the California, activities by the Centers for Disease Control and Prevention (CDC), “ 5-4-3-2-1 Go! Campaign” and “ It's What You Do campaign” etc have targeted parents (Evans, Christoffel, Necheles and Becker, 2012). Thus, different means are used to increase awareness regarding nutrition food to prevent obesity.

## Methods that have worked in the past

The discussion of different researches and current nutrition education information provided through media has much worked in the past to inform parents regarding obesity and importance of nutritional food. However, the research has showed that increased use of social marketing tools particularly face-book and different online health magazines has so far contributed the most in increasing awareness (Poskitt and Edmunds, 2008). This is because the social media and online health magazines can be accessed from anywhere and therefore it helps to create awareness in large number of people. Moreover, increasing health concern has also given rise to use of these two mediums by the parents to find out nutrition information by the parents. In addition to this, the social marketing campaigns have also worked and showed positive outcomes but it only helps to create awareness in the regions where the campaigns are conducted. However, the schools in collaboration with the different health concern agencies have also showed successful creation of awareness that has positively affected the parents and children’s health (Heaton-Harris, 2009). The following table shows the summary of the different methods that targets parents and is used by the child health concern organizations to create awareness regarding obesity and have provided nutrition education.

## Recommendations

The increasing rates of obesity among children are mainly because of the inappropriate dietary practices that highlight the importance of the nutrition education to ensure health of children via different nutrition support programs. Although the use of different means to target parents for creating awareness of the children health issues has been proved so far successful, but these practices are not much efficient as the rate of obesity has not decreased in relation to the increase in health and nutrition awareness programs. Therefore, the following are some recommendations proposed to the children health concern organizations, government and parents to overcome the problem:
- The implementation of nutrition education must be set at a wider level through the use of different nutrition assistance programs that will help to promote healthy lifestyles among children. The use of these efforts will positively affect the food habits and choices.
- Increase continued collaboration between schools and health concern agencies that will engage parents in various healths and dietary information programs and will coordination nutrition education that will help to reduce obesity in children. In addition, these collaborations will also assist in leveraging resources, increasing cost efficiency, enhancing effectiveness, and expanding nutritional educational efforts at a greater level.
- The social organizations who are aimed at increasing health among children and fight for obesity, must conduct targeted and well-funded social marketing campaigns that will help to prevent and manage obesity. The campaigns must be accompanied by huge dietary information that must be provided in a persuasive way to increase the effectiveness of the campaigns.
- The government is also responsible to assist social health concern organizations in fighting and preventing obesity in children as it helps to save them from different factors that negatively affects the brought up and living style of children in future.

## Conclusion

Children’s nutrition is a complex, vital topic, but it must be addressed in order for the improvement in the health or children to come about. The nutrition of parents has many causative factors related to healthy or unhealthy children’s nutrition. Valuable decision-making and healthy lifestyle promotion by the parents directly influences the health habits of the child. This may include things such as having balanced meals, educating your children on proper nutrition, and even substituting water for a SSB. In review, parents with a low knowledge of nutrition have the potential to cause additional health related damage to children. Children’s lives and health will be positively changed by targeting the various types of families with low knowledge about nutrition and by also helping to improve the barriers and attitudes of healthy eating. However, it is also important that the nutrition information must be rightly targeted with most effective mediums that will help to combat the obesity issues. The use of different means of targeting parents such as social media tools, social marketing campaigns, health magazines and news papers, school’s efforts in collaboration with health social organizations can play their important role in overcoming obesity in children. Thus, it can be concluded that the efforts to increase awareness regarding adverse effects obesity and educating nutrition programs must be increased.

## References

Action Plan for the Global Strategy for the Prevention and Control of Noncommunicable
Diseases. (2013). World Health Organization. Retrieved from http://www. who. int/nmh/publications/ncd\_action\_plan\_en. pdf
Berkowitz, B., and Borchard, M., (2009). " Advocating for the Prevention of Childhood Obesity: A Call to Action for Nursing", OJIN: The Online Journal of Issues in Nursing, Vol. 14, No. 1. Manuscript 2.
Bottrell, J. (2013, December 13). Five Consequences of Asthma. Retrieved November 12, 2014,
fromhttp://www. healthcentral. com/asthma/c/52325/164984/consequences-asthma/
Branen, L. (1999). Comparison of College Students’ Current Eating Habits and Recollections
Of Their Childhood Food Practices. Journal of Nutrition Education, 304-310. Retrieved
September 27, 2014, from
http://www. sciencedirect. com/science/article/pii/S0022318299704838? np= y
CDC report finds sodium consumption high among U. S. children. (2014, September 9).
Retrieved September 27, 2014, from http://www. cdc. gov/media/releases/2014/p0909- children-sodium. html
Colditz, G. (1999). Economic Costs Of Obesity And Inactivity. Medicine & Science in Sports &
Exercise, S663-S663. Retrieved September 27, 2014, from http://europepmc. org/abstract/MED/10593542
Collier, S. (n. d.). Add some green to la bandera! Eat plenty of vegetables and some fruit every
day. Retrieved October 30, 2014, from http://chalkcenter. org/habit-8-en. html? language= en
Consequences of Addiction | Effects of Substance Abuse. (2014, January 1). Retrieved
November 13, 2014, from http://www. summithelps. com/faqs/consequences-of-addiction/
Consequences of Childhood Overweight and Obesity « Food Research & Action Center.(n. d.).
Retrieved September 24, 2014, from http://frac. org/initiatives/hunger-and-obesity/what-are-the-consequences-of-childhood-overweight-and-obesity/
Consumption of Added Sugar Among U. S. Children and Adolescents. (2012). Centers For
Disease Control and Prevention. Retrieved from
http://www. cdc. gov/nchs/data/databriefs/db87. htm
Dowshen, S. (2013). Meal plans and diabetes: Meal planning goals. KidsHealth from Nemours.
Retrieved from
http://m. kidshealth. org/parent/diabetes\_center/diet\_nutrition/meal\_plans\_diabetes. html
Evans, W. D., Christoffel, K. K., Necheles, J. W., and Becker, A. B. (2012). Social Marketing as a Childhood Obesity Prevention Strategy. Retrieved from http://onlinelibrary. wiley. com/doi/10. 1038/oby. 2009. 428/full
Harrington, E. (2014, March 6). 1M kids stop school lunch due to Michelle Obama's standards.
Retrieved September 24, 2014, from
http://www. washingtontimes. com/news/2014/mar/6/1m-kids-stop- school-lunch-due-
michelle-obamas-stan/? page= all
Healthy Eating. (1995, January 1). Retrieved January 1, 2014.
Health Expenditures. (2014, May 14). Retrieved September 27, 2014, from
http://www. cdc. gov/nchs/fastats/health-expenditures. htm
Heaton-Harris, N. (2009). Combating Child Obesity. Straightforward co Ltd
Henney, J. (2010). Strategies to reduce sodium intake in the United States. Washington, D. C.:
NationalAcademies Press.
How Does Diabetes Affect The Body? (2014). Retrieved November 13, 2014, from
http://www. diabetes. co. uk/how-does-diabetes-affect-the-body. html
Ladau, K. (2010) " What Is Nutrition?" What Is Nutrition Tips. Tips For Healthy Living. Web. 12
Nov. 2014.
Lindsay, A. C., Sussner, K. M., Kim, J., &Gortmaker, S. L. (2006). The Role of Parents in
Preventing Childhood Obesity. The Future of Children, 16(1), 170-174.
doi: 10. 1353/foc. 2006. 0006
Malik, V., Schulze, M., & Fu, F. (2006). Intake of sugar-sweetened beverages and weight gain:
A systematic review. The American Journal of Clinical Nutrition, 84, 274-278.
New Releases. (2008, July 1). Retrieved November 13, 2014, from
http://www. health. harvard. edu/newsletters/Harvard\_Womens\_Health\_Watch/2008/July/Anxiety\_and\_physical\_illness
Nicklas, T. A., Baranowski, T., Baranowski, J. C., Cullen, K., Rittenberry, L., &Olvera, N.
(2001). Family and child‐care provider influences on preschool children's fruit, juice, and vegetable consumption. Nutrition reviews, 59(7), 224-235.
" Nutrition Guide for Toddlers." KidsHealth - the Web's Most Visited Site about Children's
Health. Ed. Mary L. Gavin. The Nemours Foundation, 01 Oct. 2011. Web. 13 Nov. 2014.
Oliveria, S. A., Ellison, R. C., Moore, L. L., Gil, M. W., Garrahie, E. J., & Singer, M. R. (1992 Sept). “ Parent-child relationships in nutrient intake: the Framingham Children's Study.” The American Journal of Clinical Nutrition, 53(3): 593-598.
Parent Tips- Portion Size Matter.(n. d.). Retrieved September 24, 2014, from
https://www. nhlbi. nih. gov/health/educational/wecan/downloads/tip-portion-size. pdf
Presnell, K. (2007, September 1). Body Dissatisfactionin Adolescent Females and Males: Risk
andResiliance. Retrieved November 13, 2014, from http://www. tpronline. org/download-free-article. cfm? id= 487
Poskitt, E., and Edmunds, L. (2008). Management of Childhood Obesity. Cambridge University Press
Salt. (2014, September 9). Retrieved September 27, 2014, from http://www. cdc. gov/salt/
Self-Esteem. (2013, January 1). Retrieved November 13, 2014, from
http://cmhc. utexas. edu/selfesteem. html
Staff, M. (2014, February 18). High blood pressure (hypertension). Retrieved November 12,
2014, fromhttp://www. mayoclinic. org/diseases-conditions/high-blood-pressure/in-depth/high-blood-pressure/art-20045868
Stoppler, M. (2014, March 1). Iron Deficiency: Learn About Causes and Symptoms. Retrieved
November 12, 2014, from http://www. medicinenet. com/iron\_and\_iron\_deficiency/article. htm#what\_is\_iron\_deficiency\_and\_why\_is\_it\_a\_concern
Sugars and desserts.(2014). American Diabetes Association. Retrieved from
http://www. diabetes. org/food-and-fitness/food/what-can-i-eat/understanding-
carbohydrates/sugar-and-desserts. html
The Dangers of Depression - ULifeline. (2014, January 1). Retrieved November 13, 2014, from
http://www. ulifeline. org/articles/396-the-dangers-of-depression
Winnslow. Ron. (2012). No easy cure for diabetic children. The Wall Street Journal
http://online. wsj. com/news/articles/SB10001424052702304868004577373982387951876
Wolinsky, I., and Driskell, J. A. (2000). Nutritional Applications in Exercise and Sport. CRC Press
Zarnowiecki, D., Sinn, N., Petkov, J., &Dollman, J. (2011). Parental nutrition knowledge and attitudes as predictors of 5–6-year-old children's healthy food knowledge. Public Health Nutrition, 1284-1290.