

# [Global childhood obesity - what are the problems and solutions?](https://assignbuster.com/global-childhood-obesity-what-are-the-problems-and-solutions/)

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

Childhood obesity is a global epidemic. According to the WHO, there are 41 million overweight or obese children, with ten million coming from the last twenty-five years alone (Pickles, 2016). Obesity is a hot topic in the media, but its depictions are often skewed. In the Global Health Wiki, I found that most media has focused on industry changes such as a sugar tax and regulations on advertising. These surface-level interventions represent a failure to address the systemic causes of obesity. On the other hand, students’ critical commentaries have addressed the deeper roots of obesity: inequities in food access and distribution, compounded by media diversions that obscure the reality of obesity.

Two of the six obesity posts on the wiki discussed a proposed tax on sugar in the UK and the US. According to economists at the National Bureau of Economic Research, a 20% sugar tax would supposedly cut Americans’ total caloric intake by 18% (Short, 2016). The rationale is that a sugar tax would be difficult for Americans to avoid, so people would be more likely to purchase less sugary foods or avoid them altogether (Short, 2016). Similarly, an article in the Daily Mail discusses a plan by the UK government to tax sugary beverages such as soda (Pickles, 2016). These approaches frame the obesity problem in developed countries as mere overconsumption of calories. They lump all Americans and Brits into one category and assume that a blanket approach will work for individuals of all socioeconomic statuses and backgrounds.

Students were quick to find faults with the sugar tax approach. Even though the tax may reduce consumption of unhealthy foods for some people, it fails to account for low income communities that lack access to nutritious foods. These “ food deserts” are full of fast food restaurants with cheap foods high in sugar and fat. Many families depend on these energy-dense foods to get by. However, without healthy fruits and vegetables readily available, a sugar tax would only serve to increase the financial burden, compounding the disproportionate effects of obesity in low-income communities. As mariocart puts it, “ implementing a sugar tax could worsen the health of millions of impoverished people” (There’s an easy way to fight obesity, but conservatives will HATE it). In addition, the tax will do nothing to educate people on the right kinds of foods to eat. JamesFan1 argues that promotion of healthy foods is also critical in reducing obesity and improving health (How to Address Obesity). The tax is a simple solution that would involve minimal restructuring. It makes sense that the government would want to implement such a plan because no major changes would need to be made. However, obesity is a complex problem with deep roots, and a surface-level resolution would do little to ameliorate the issue.

Another potential solution was brought up in the UK, this time focusing on a crackdown of junk food advertising (Pickles, 2016). According to the WHO Commission on Ending Childhood Obesity, governments should tightly regulate marketing “ to reduce the exposure of children and adolescents to, and the power of, the marketing of unhealthy foods” (Pickles, 2016). This policy could work to limit the unhealthy eating habits of some children – indeed, television commercials and other advertisements can be persuasive, and limiting exposure of these ads could move kids away from unhealthy choices. However, like the sugar tax, this kind of solution assumes that all children have the ability to choose from a variety of options. As discussed earlier, many low-income families do not have this privilege, and because they are the group most affected by obesity, advertising regulations may not be the best way to tackle obesity. These arguments are not trying to disprove the legitimacy of the sugar tax and advertising regulations: they are both good ways to begin the dialogue on reducing obesity. However, they avoid more complicated issues of food access and distribution. In fact, ndghazali notes that these resolutions seem to blame individuals for making poor personal choices, while the food industry and media are responsible for “ creating the environment for obesity” in the first place (How to Address Obesity). Personal choices can play a part in obesity, but a far greater issue is the influence of industries in regulating food prices and availability. Despite their large role, these industries often try to avoid responsibility. By calling for tighter media regulations, the food industry shifts the blame to the marketing industry, and by asking for a sugar tax, the media industry does the same to the food industry. However, neither industry – nor the government – seem to be discussing the social determinants involved in obesity, which are the main driving forces behind the epidemic. Why are the difficult questions avoided?

Other articles on the wiki discuss two potential reasons behind this avoidance. First, there is no “ silver bullet solution” to solving obesity. It is inherently tied up in inadequate distribution and unequal food systems, and attempts to unravel the mess would be a “ difficult, long-term, unglamorous project…[lacking] mass emotional appeal” (Kathleenclark33, International Childhood Obesity Unawareness). It makes sense that governments are unwilling to tackle such a complex problem. Food companies would also shy away from the real problems because they have little to gain from resolving food access issues. This would lower their profits, so they instead focus on minimally impactful interventions, such as a sugar tax, that maintain the status quo. In addition, socioeconomic status is often ignored in obesity discussions. In its place, race is portrayed as a determining factor of obesity. A recent NPR article notes that when poverty is accounted for, the relationship between race and childhood obesity disappears (Rancano, 2016). Jhoffen points out that the focus on race rather than income might have been deliberate – it is easier to blame race – a fixed surface trait – than to blame poverty, which implicates flaws within the system and lack of government intervention (The effect of poverty on childhood obesity). Blaming race for obesity shifts the responsibility for this disease onto the individuals themselves rather than the systems that have caused it.

Finally, the topic of obesity in developing countries has been largely absent in the media. We generally think of obesity as a problem in wealthy countries, but in fact, half of the world’s obese children live in Africa, and another quarter in Asia (Best, 2016). Less than a quarter of the world’s obese children live in wealthy, developed nations. If obesity is such a big problem in developing countries, why is it rarely discussed? The reasons are similar to those in developed countries. Again, these problems are deeply-engrained in the food access and nutrition systems of developing countries. For example, we saw a video in lecture that portrayed children starving in a village in India while a nearby warehouse idly stored massive amounts of grain. Clearly, food distribution is a huge problem. Obesity would require system-wide overhauls; foreign aid targeted towards specific diseases can only go so far. In addition, there is no simple solution, such as bed nets and vaccines, that biotech and pharmaceutical companies can invent (Kathleenclark33, International Childhood Obesity Unawareness). Without a market or a source of revenue, many companies find no interest in tackling obesity at its roots.

The fight against obesity will require a multi-faceted approach. As students on the wiki have pointed out, poverty is a major factor in obesity, both domestically and abroad. Also important, but not emphasized greatly on the wiki posts, are exercise and lifestyle choices. We cannot discount the significance of community-oriented exercise and nutrition programs, such as Michelle Obama’s Let’s Move! Low-income communities may struggle to find nutritious food, but they can still improve their health by exercising with local community members. Teaching kids to take their health into their own hands is the first step towards awareness of obesity and undernutrition in their local communities. With an educated young generation, we will be able to push for government interventions to reduce the influence of the food industry and media. A systemic issue such as obesity may take a long time to overcome, but it can be done.