

Childhood Obesity Script

Introduction – What is Obesity?

Bore Da. My name is Tiffany Bennett and my student number is 1400113.

Today I will be discussing childhood obesity, a significant public health issue affecting children globally. Obesity is defined as an abnormal or excessive accumulation of fat that presents a risk to health. A Body Mass Index, known as (BMI) above 25 is classified as overweight, whilst a BMI above 30 is classified as obese (World Health Organization, 2024). In children, obesity is assessed using BMI adjusted for age and sex, as children are continually growing and developing (NHS, 2024).

Today, almost one-third of children between the ages of 2 and 15 are classified as overweight or obese. Furthermore, younger generations are experiencing obesity at earlier ages and are remaining obese for extended periods (Health and Social Care Information Centre, 2015).

In Wales, childhood obesity remains a significant concern, with children living in the most deprived areas being more likely to be overweight or obese than those living in less deprived areas (Public Health Wales, 2024).

Childhood obesity is a complex condition that does not have a single cause. Research suggests that obesity develops through a combination of genetic, environmental, behavioural and social factors (Llewellyn and Simmonds, 2015). Factors such as unhealthy diets, reduced physical activity, increased screen time, family lifestyle habits and socioeconomic deprivation can all contribute to excess weight gain in children.

Children living in more deprived communities are often at greater risk due to limited access to healthy foods and opportunities for physical activity (Public Health Wales, 2024). This demonstrates how health inequalities can influence childhood obesity, with children from disadvantaged backgrounds often experiencing poorer health outcomes than their peers (Marmot, 2020).

This presentation will explore why childhood obesity is significant, focusing on its impact on children's physical health, mental health and wellbeing. It will explore various resources that improve understanding and analyse government guidelines, research and relevant frameworks.

Why is Childhood Obesity Significant?

According to the World Health Organization (2024), childhood obesity is significant because it can lead to severe short-term and long-term impacts on a child's physical health, mental wellbeing and overall quality of life. Children who are obese face a higher risk of developing health issues, including type 2 diabetes, high blood pressure, asthma and sleep apnoea. Obesity can also affect children's sleep patterns, leading to poor-quality sleep, daytime tiredness and difficulties with concentration and learning. Simmonds et al. (2016) support this, stating that health issues associated with childhood obesity can continue into adulthood, increasing the likelihood of cardiovascular disease and certain cancers.

Childhood obesity not only has physical health implications but also adversely affects mental wellbeing. Overweight or obese children may suffer from low self-esteem, a negative body image, social isolation, bullying, anxiety and depression.

These issues can influence their emotional development and overall quality of life (NHS, 2024; Rankin et al., 2016). Childhood obesity should therefore be recognised not only as a physical health issue but also as a social and emotional concern that requires early intervention and support from practitioners and multi-agency professionals.

Who Tells Us This Information?

To address childhood obesity, there are various evidence-based resources, policies and legislation. (The Children Act 1989) states that the welfare of the child is paramount, meaning that all decisions and actions taken should prioritise the child's best interests. Likewise, the United Nations Convention on the Rights of the Child (UNCRC) states that children have the right to the highest attainable standard of health under Article 24 (UNICEF, 1989). Practitioners therefore have a responsibility to promote healthy lifestyles, support children's wellbeing and reduce health inequalities that may contribute to childhood obesity.

Within the UK, there are various organisations, such as the NHS and the Office for Health Improvement and Disparities (OHID) who monitor obesity prevalence and provide guidance to healthcare professionals and families (OHID, 2024). Within Wales, Public Health Wales plays a key role in supporting obesity prevention through initiatives, data collection and campaigns (Public Health Wales, 2023). Public Health

Wales (2023) highlights the importance of early intervention, healthy eating and physical activity in reducing childhood obesity rates. The Welsh Government also provides guidance through policy frameworks. One example is the Healthy Weight: Healthy Wales Strategy, which aims to prevent obesity and create environments that encourage healthier choices (Welsh Government, 2019).

Academic research also plays a crucial role in shaping professional practice. Rankin et al. (2016) found that childhood obesity can lead to significant psychological consequences, including low self-esteem, anxiety and social isolation. Likewise, Llewellyn and Simmonds (2015) argue that obesity arises from a complex interaction of genetic, environmental and behavioural factors, emphasising the importance of a multi-agency approach. By drawing upon legislation, public health guidance, policy frameworks and research evidence, practitioners can provide effective support to children and families.

What Can Practitioners Do About It?

Practitioners play a key role in the prevention and reduction of childhood obesity through early intervention, health promotion, observation and collaborative working. Their responsibilities include promoting healthy eating habits, encouraging regular physical activity, modelling healthy behaviours and educating families about making positive lifestyle choices.

Within early years settings, practitioners follow the National Minimum Standards for Regulated Childcare in Wales, which require providers to promote children's health and wellbeing through nutritious meals, access to drinking water, opportunities for active play and environments that support healthy development (Welsh Government, 2016).

Practitioners can also contribute to obesity prevention through initiatives such as the Healthy and Sustainable Pre-School Scheme (HSPSS), which promotes healthy eating, physical activity and emotional wellbeing within early years settings (Public Health Wales, 2025). Similarly, programmes such as Designed to Smile promote good oral health and healthy lifestyle choices, including reducing sugary food and drink consumption, which are significant contributors to both obesity and poor dental health (Public Health Wales, 2024).

By integrating these initiatives into daily practice, practitioners can help children

develop healthy habits from an early age.

Partnership working with parents and carers is essential, as families play a significant role in shaping children's eating habits and physical activity levels.

Practitioners should build positive relationships with parents, share information about healthy lifestyles and work collaboratively to identify barriers that may affect a child's health and wellbeing.

Health visitors also play a vital role by monitoring children's growth and development, providing advice on nutrition and healthy weight management and offering support to families at an early stage. When concerns arise, practitioners should collaborate with health visitors and other professionals to ensure families receive appropriate guidance and interventions.

In severe cases, childhood obesity may become a safeguarding concern if a child's health is being significantly impacted and parents are unable or unwilling to engage with support services. Practitioners should follow safeguarding procedures and seek advice from relevant professionals whilst maintaining a supportive and non-judgemental approach (HM Government, 2024).

Multi-agency collaboration is key to effectively addressing childhood obesity.

Practitioners may work alongside health visitors, dietitians, GPs, teachers, Public Health Wales and community organisations to provide coordinated support for children and families.

Where additional support is required, practitioners can signpost or refer families to services such as Swansea's Early Help Hubs, which offer a range of family support, wellbeing services and parenting programmes (Swansea Council, 2023).

Collaborative working enables professionals to share information, identify needs early and provide holistic support that addresses the social, emotional and physical factors contributing to obesity.

The Children Act 1989 states that the welfare of the child is paramount, ensuring practitioners always act in the child's best interests when promoting health and wellbeing.

Research by Brown et al. (2019) identified family-based interventions as some of the most effective approaches to reducing childhood obesity, highlighting the importance of involving parents and carers in intervention strategies.

Whilst initiatives such as the Healthy and Sustainable Pre-School Scheme and Designed to Smile are valuable, their success often depends upon parental

engagement and wider socioeconomic factors. Therefore, tackling childhood obesity requires both individual behaviour change and wider public health action.

Through health promotion, partnership working, multi-agency collaboration, early intervention and engagement with national initiatives, practitioners can significantly contribute to reducing childhood obesity and improving long-term outcomes for children and their families.

Conclusion

In conclusion, childhood obesity is a significant public health issue that can have serious physical, psychological and social consequences for children. It is influenced by a range of genetic, environmental, behavioural and socioeconomic factors, making it a complex issue that requires a holistic approach. Legislation, policies and research evidence provide practitioners with guidance on how to support children and families effectively. Through health promotion, partnership working, early intervention and multi-agency collaboration, practitioners can play a vital role in reducing childhood obesity and improving children's long-term health and wellbeing. However, successfully tackling childhood obesity requires not only individual behaviour change but also wider public health action to address health inequalities and create environments that support healthy lifestyles.

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