
THE ROLE OF PARENTS AND SCHOOLS IN PREVENTING CHILDHOOD OBESITY by Buthaina Al-Naqeeb

Obesity is a significant world problem for people of all ages and both sexes. Approximately 22 million children under 5 years of age are overweight (Ruxton, 2004, p.1). Obesity is beginning to be a serious health issue like infectious disease, heart disease, and other deadly disease. There are many definitions of obesity. One of them is a body-mass index (weight divided by the square of height) of 30 or greater, but this does not take into account the morbidity and mortality associated with more modest degrees of overweight, nor the detrimental effects of intra-abdominal fat (Peter G. Kopelman, 2000). In other words, there are dangers associated with extra body fat accumulating more fat than the body requires. Many studies and experiments have been done to examine the reasons for childhood obesity, which is becoming a significant problem in most counties since obesity is associated with other diseases, for example, diabetics mellitus, respiratory diseases, coronary heart disease, and joint stiffness and problems.

In Qatar, a big number of children do not follow a healthy diet; one out of every three Qatari primary school children skips breakfast, and 70 percent of the children do not eat healthy food (Gangal, 2010). Another study done by the Childhood Cultural Center, Hamad Medical Corporation, Qatar Statistics Authority and the Regional Office of the World Health Organization shows that 23 percent of children in Qatar are obese, and a further 16 percent have a body weight that is above the average (Gangal, 2010). Moreover, this study found that two out of every three children eat fast food once or twice in a week, and 90 percent of those surveyed eat unhealthy snacks between their main meals daily (Gangal,
2010). These statistics about childhood obesity in Qatar draw attention to the significance of this problem in our country.

When it comes to the topic of childhood obesity, most of us will readily agree that the number of children who are overweight is increasing. Where this agreement usually ends, however, is on the question of why this is happening. Whereas some are convinced that schools have a big role in controlling this problem, others maintain that home is the first place to start solving this problem. My own view is both schools and families are significant in controlling childhood obesity. Moreover, in this paper I will go through the causes, the harmful effects of childhood obesity, possible treatments, and I will examine what the role of nurses is in this issue.

There are different causes of obesity, all of which can increase the risk of having excessive body fat in children. The first cause is a genetic factor which has a strong link to obesity (Shepherd, 2009, p.174). In other words, if a near relative is obese, like the mother, the father, or grandparents, the risk for a person to become overweight is very high. The amount of energy expended from the body is important to be in balance with the calorie intake from the daily food, such as having less exercise and high calories meals (p.147). If energy expended is less than calorie intake this will cause obesity. In childhood obesity, weaning the infant from breast milk before she or he is 4 months old can result in gaining unwanted weight or unhealthy weight at the age of 7 years (Philipsen, 2008, p.45). Cultural and social behaviors can also increase the risk of being obese; for example in our culture, lunch is always rice, which contains a high amount of calories. Another cultural example is United States, where they like fast food, especially hamburgers, which contain a lot of calories. Some psychological problems can cause obesity. For example, some stressed people try to reduce their worries by continuous eating until the problem is solved and
stress is gone (Regber, Berg-Kelly, & Marild, 2007, p.21). This gives the body more food than it needs, which causes obesity. Medical conditions can also cause childhood obesity, for example, hypothyroidism and growth hormone deficiency. Sometimes medical conditions can be side effects of drugs, such as chemotherapy or steroids (Ruxton, 2004, p. 49). Clearly, it is better to control our diet and behavior rather than treating obesity and its immediate and future complications.

Childhood obesity can affect children in many ways. It can cause dangerous health problems, for example, it can affect the respiratory system and cause sleep disturbances, chronic obstructive pulmonary disease, and sleep apnea. Also, overweight can be harmful for the heart and cause coronary artery disease, stroke, and high blood pressure (Regber, Berg-Kelly, & Marild, 2007, p.22). Other health problems are also associated with obesity like high cholesterol, joint disease, gallbladder or liver disease, and gastro esophageal reflux disease (p. 23). One very recent study proves a relationship between childhood obesity and flat feet in children. According to this study, 54% of obese children have flat feet (Scherer, 2009). Another affect of obesity is psychological problems. For example, the body of an obese person can cause shame for her or him, because the shape of her or his body is not nice or not the same as healthy children. Also, they cannot wear any dress they want, which keeps them stuck in one mode of dress. All this can cause poor self- esteem and depression (p. 21). In the end, many children with obesity may experience harmful effects which can limit their lives.

The prevention and treatment of childhood obesity is the responsibility of several bodies, such as schools, parents, and school nurses. Good prenatal support, such as healthy food, regular check ups, avoiding excessive maternal weight increase, controlling sugar intake, and offering nutrition education can a play significant role in preventing children
from becoming overweight. Encouraging mothers to continue breast feeding for the first 6 months of the baby’s life, delaying beginning solid foods for babies until after 6 months, trying to provide healthy food and avoiding a high-calorie diet, and following weight increase closely (Philipsen & Philipsen, 2008, p46) are ways to prevent children from becoming obese. Other ways of preventing childhood obesity are to avoid fast food, and unhealthy snacks between meals. Encouraging school age children to do exercise to prevent them from becoming obese in the future is also important. In all times and in all cases, prevention is better than cure.

Some people argue that schools are the most important influence in preventing childhood obesity, and I agree that schools play a big role in preventing children from becoming overweight. Shepherd writes, "the school years are important in shaping attitudes and behaviors, particularly as school age children depend on parent, carers and schools for food and availability of physical activity" (Shepherd, 2009, p.176). This means, through education for children and their parents, schools can change wrong thoughts and diet behaviors and help parents to identify some ways for childhood prevention. Some families and children do not understand the importance of exercise. Schools can encourage children to join their family members for some exercises to keep children away from obesity, for example, walking, swimming, and badminton. Important recommendations for schools to help protect children from becoming overweight, the Shepherd’s article include:

"establishing healthy breakfast clubs, improving the food sold in tuck shops, providing healthier food in vending machines, encouraging healthier lunchtime foods for school meals and packed lunches, and launching cookery clubs" (Shepherd, 2009, p.177). Moreover, schools can also participate in solving and preventing this issue by providing healthy food in the cafeteria and eliminating junk food machines. Most parents also feel schools should
have units on nutrition and weight control, as well as offer physical education classes
(Murphu, & Polivka, 2007, p.44).

Other researchers argue that parents are more important than schools in preventing
their children from becoming obese. As Shepherd's article mentions, there is a relationship
between obese pregnant women and obese babies after delivery. So it is important to
encourage healthy diet and regular exercise for pregnant women during pregnancy.
Moreover, weaning the infant from breastfeeding earlier than 6 months can lead to rapid
weight gain in the future. Parents can protect their children from becoming obese by
observing their behaviors and diet, for example, keeping exercise as a part of family's life
style, avoiding fast food and high calories, and reducing the time spent in front video games,
television, and computer. The parent who shared in their children's in exercise as much as
they can will end with children far from obesity and more healthy in their life.

The article "Parenting Styles and Treatment of Adolescents with Obesity" proposes
four models of parenting styles. The first one is authoritarian parents, who shape and
control their children in accordance with a set of standard rules (Regber, Berg-Kelly., &
Marild, 2007, p.25). Second are authoritative parents, who establish firm and consistent
limits, and if necessary they use commands and sanctions. The third style is permissive
parents, who are considered more responsive than demanding. They are tolerant and
accepting, also they avoid imposing controls or restrictions. Indifferent (rejecting-neglecting)
parents are the last parent style. In this style parents do not show any interest in the needs
of their children, and they minimize time and interaction with the child (p.25). Parent styles
can affect childhood obesity. For example, the children of indifferent parents will receive
less attention from their parents. This can affect the health of the children, in terms of what
they eat, if they do some exercise or not, and if they spend a long time in front the TV,
computer, or video games.

My own view is that both schools and homes are significant places to start controlling childhood obesity. Children spend half of their time in schools, which should be spent in very useful pursuits. The first aim in preventing children from becoming overweight is to stop future weight gain. Children need support from their parents and schools to control their lifestyle, for example, to choose healthy food and do physical activities. School nurses can have a role in helping parents and schools to achieve this goal. For example, the nurse could arrange for health education classes about childhood obesity for the parents and school staff. School nurses can explain to parents the effect of different parenting models and teach some skills and techniques for the prevention of obesity (Regber, Berg-Kelly, & Marild, 2007, p.21).

In schools, school nurses are very important in promoting, supporting, and knowledge of the risks of childhood obesity. Nurses can encourage children to eat healthy food and put away junk, fast food, and high calorie food by putting up posters with fun pictures about wrong food habits to describe the importance of healthy diets. Also, they are able to share with the staff of the school to prepare for some sport computations, for example, swimming, waking, and badminton between parents and their children under title of how parent can prevent their children from of obesity. Regarding policies related to foods in schools, school nurses can participate in directing the staff to create and enforce healthy rules, for example, avoiding high calories like junk food such as chips and chocolates in the school. It is important for school nurses to assess students in the school at the beginning, middle, and end of the study year for height and weight to identify any student at risk of childhood obesity.

In summary, childhood obesity is increasing at epidemic rates among preschool
children and with it comes very dangerous health problems. Obesity can be defined either as 10% higher weight than what is recommended for height and body type or a total body weight more than 25% fat in boys and more than 32% fat in girls (Scherer, 2009). Genetic factors, energy expended (for example, low level of physical activity and sport), early weaning, and cultural and social behaviors are some causes of childhood obesity. Dangerous health problems can occur with obesity, which may lead to death in some cases. Also, self-esteem and depression can be a part of obesity complications in some obese people.

Both schools and parents are important in preventing and treating children for obesity. Nurses in schools have a big role in pointing parents and schools in the right direction to protect children from gaining extra weight. As Maman argues, "it seems clear that the problem of childhood obesity will not be solved without clearer understanding and recognition of all the pertinent information involved on the part of education, parents, and children themselves" (Maman, 2005, p.51). By controlling their diets, regulating school policies regarding healthy diets for children with the help of parents, watching and correcting our children's wrong behaviors, and maintaining healthy lifestyles, children can be kept safe from obesity.

References


Murphy, M., & Polivka, B. (2007). Parental perceptions of the schools’ role in addressing


