CONTEMPORARY ISSUES IN NURSING: EPIDEMIC OF CHILD OBESITY

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Abstract

As an opportunity is given to develop and give a literature review individually that would inspect a current and existing issue in nursing and health care this paper will provide an opportunity to gain current knowledge and capability in relation to a present-day problem, that is existing in society requiring fact-based nursing involvement.

Introduction: As in recent years, child obesity has doubled and this acts as a major contributor to chronic and disabling disease that arises especially in Australia. This is due to the reason that it has such a heavy impact on economic and health related issues to the country. We also notice that the statistics data that is obtained recently indicates that the overweight and obese rate of boys has risen to about at age 6, of 31.6 percent occurrence, and about that of girls at age 4 is of 30.1 percent (Freedman DS, Zuguo M, Srinivasan SR, Berenson GS, Dietz WH(2007)).

The current gaps in the literature: As the research on literature for childhood obesity especially that occurring in Australia has risen it can be noticed that it is not specific to Australians alone according to The National Hospital Morbidity Database (NHMD), moreover we find that the surveys that are carried out at national level for health have the utilization of resources in order to fill this gap.

Body of analytical literature review: This analytical review of the literature would identify the vital importance of this problem of obesity in children, as to how it can be acknowledged, the various probable reasons, interference or involvement of various factors like school, family and other such factors and to add to this, the role of professionals that are mainly concerned with health care. Here the main issue concerning the obesity of children is considered and highlighting factors regarding causes and prevention of it will be studied to carry out the research on it and analyse the missing factors to enhance the life span of children who are obese for some reasons. This would give rise to many biological findings and research so that one can exactly examine the rise of such an issue.

Conclusion: Once the findings are complete, the preventive measures carried out to control the negative impacts of it on the children, especially occurring in Australia, are elaborated on. This would not only affect the economic factor of the country but also the health related issues that would or might rise in future.

Key words: Childhood Obesity, Epidemic, Parents, Schools, Nurses
Introduction
Obesity in children has become epidemic and is spreading among developed and developing countries very rapidly. According to Olds, Tomkinson, Ferrar & Maher (2010), the prevalence of epidemic childhood obesity around the world has increased more in the last decade which results in it becoming a major issue among media. In addition, the prevention of obesity in children has become a most controversial topic in the literature related to global society, health education among schools and role of parents. Much academic literature mentions global obesity as an “Epidemic” (O’Dea, 2008). Recent research from the Australian government (2012), explores the fact that obesity among Australian children is increasing and reaching risk rate in which approximately 1.5 million people are overweight. Over the last two decades, obesity among children has increased from 6.5% to 17%; and the prevalence in children of 12-19 years of age increased from 5% to 17.6%. (15 of national health (Sciarani, 2010).

Obesity is indicated by the body mass index (BMI) which when the percentage is higher than ninety fifth of sex and age. Also, it is clear from most research on childhood overweight it is found that obesity in children mainly stays as obesity in adults, or when they grow up but the obesity persists (Trasande, 2010). Hence, researchers use BMI for calculation of the actual and ideal person’s BMI category which depends on height, weight and gender and based on the percentage variations of obesity, overweight and morbidity. Moreover, although overweight in children categorizes when the body mass index reaches more than 95th percentile and BMI is used as a basis for helping the diagnosis of obesity. However, BMI is not quite accurate related to bone structure and muscle mass (Sciarani, 2010). A survey of national health (2008) has pointed out that about 24.9 percent of children in Australia are obese and who are from the age group from 5 to 17 years which means that approximately one-quarter of them are overweight (Castetbon & Andreyeva, 2012).

In recent years, child obesity has doubled which acts as a major contributor to chronic and disability disease that arises especially in Australia. This is due to it having a heavy impact on economic and health related issues of the country. It also notices that the statistical data that has been obtained recently indicates that the overweight and obese rate of boys has risen to about at age 6 it is of 31.6 percent occurrence, and about that of girls at age 4 it is of 30.1 percent (Freedman, Zugo, Srinivasan, Berenson & Dietz, 2007).

Analytical literature review:
This paper aims to analyse the review of current literature which identifies the vital problem of obesity in children, as to how it can be acknowledged, the various probable reasons for it, interference or involvement of various factors like school, family and community. Furthermore, it identifies the role of health professionals and nurses who are mainly concerned with health care. The main issue concerning the obesity in children is considered and highlighting factors regarding causes and prevention. It will be studied to carry out the research on it as to how to enhance the life span of obese children. This would give rise to many biological findings and research so that one can exactly examine the rise of such an issue. Once the findings are done, it elaborates on the preventive measures in order to control the negative impacts of it on the children especially occurring in Australia. This would not only affect the economic factor of the country but also the health related issues that would or might rise in future.

Causes, factors and aetiology of childhood obesity:
A recent study has shown that most people in Australia have been affected by obesity specifically in children, due to many reasons, being either hereditary, choices of food, impact of parents, or it might be genetic such as parent’s obesity and also due to the lack of exercise that the body requires. Hence, the childhood obesity statistics have shown that the current obesity rate has doubled and this would impact on the society as well as on the various factors of the country including the population rate (Ogden, Carroll, Kit & Flegal, 2010).

Implications and complications associated with childhood obesity
Childhood obesity is an epidemic disease and has a relationship with child health issues which increases the risk of diabetes type one and particularly type two; atherosclerotic disease, might increase the rate of hypertension and the risk of premature death. Moreover, it is associated with a variety of physical, social and psychological problems which lead to serious consequences such as early death (Olds et al, 2010). Therefore, the implications due mainly to rising obesity frequency occurring in children and it has led to a better prominence on the extensive selection of some grievous conditions and also the complications that can be a result of obesity. These complications would rise both in the short as well as in the long run. However, some of these complications, which were previously thought to be in the long run concern, and would occur only in adult, have now turned towards children too. Hence the issues have risen to an overall experience with the health related to obesity’s early occurrence. This has given rise to various questions such as the negative impact of obesity on children (Freedman et al, 2007).

Obesity intervention and primary prevention:
The main intervention that can be carried out can be the careful study of children who are affected by obesity. One can monitor and diagnose the activities of obese children and related disorders. This would result in examining and also identifying the overweight children, taking into consideration the
Family level prevention, nursery and school prevention, community level prevention:

In fact, a key factor in acknowledging the childhood overweight and obesity is the high participation of the whole or entire family and other surroundings in which the child would give or spend their considerable or large amount of time, such as brought about in schools and nurseries (Dietz, 2004). The main aim or objective of interventions or involvements of the various key elements should be only to produce surroundings that incorporate on health and bring about healthy diet and where exercise would become the best part of the normal routine life of the family. Studies have shown that a child or any young child will probably be able to easily change their way of living and also try to alter their food choices only if their family members have an approach that seems positive and enables the changes to occur in the child. If the parents act with a negative approach then the alteration would seem doubtful in that environment. Hence this can be done on the family level in order to seek the prevention of obesity among the young generation (Han et al, 2010). Moreover, studies have observed and come out with the finding that the involvement of the family is the most important factor during the early ages especially while the child is at primary school as the various activities are carried out at home and also the alteration if any can be undertaken at that age only by the family members such as parents.

The literature by Wehling and McCarthy which has suggested that at school level if there are various programmes on education related to diet and standard of living that brings about a healthy living it can also improve and decrease the rate of obesity by imparting knowledge. Also, Kaur who believes that school-based interference is essential as it would have the capability of reaching out to a large number of children to bring about the change and also severity of obesity among the children (Daniels, Arnett & Eckel, 2008).

However, they also understand and recognize that these seem to be posh and involve records in order to bring out the effectiveness. Therefore, school-based interventions, as like any other interference, must obviously take into account issues that are eventually influential to both behaviour that is health related and also to give data if it is to succeed.

Roles of nurses in childhood obesity prevention in school, kindergarten

It is really significant that school nurses should carry out all sorts health education about activities that relate not only to academics but also relate to the body that is physically make the body active (Office of the Surgeon General, 2010). Hence, school would include the activities that are encouraged by the school headmaster with respect to the advice given by the nurse and reduce sitting behaviour; in order to promote the active involvement of the body, soul and also the mind. In general, there are various ranges of activities that would suit the children and also among those who would enjoy the aggressive sports, but would also be allowed to have activities such as walking or cycling in those who do not wish to partake in such aggressive sports. Also, the choices of food at school will add to the other factors like the cost of healthy choices of food with that of the unhealthy ones. Thus, in relation to education, other factors like the school culture and philosophy with respect to the policy play a vital role in preventing and also in treating the childhood obesity with the children who were engaged in various activities like the school-based programme that was designed not only to influence the physical activity and diet but also that of knowledge (Schantz, 2007). The knowledge comprises programmes like the teacher training, alteration and also some modification of school meals with comfort and observing the health related factors of the children, and most of all the implementation of a plan of action of the school in order to enhance and bring out the healthy eating and physical activity. Therefore, it shows that the approach that has been employed would embrace each and every aspect of the life in school to be successful.

Current Gaps in Literature:

As Australia is regarded currently as one of the over weight and the fattest nation that’s the main reason that gave rise to the current gap in literature. The research is mainly carried out on literature for childhood obesity for the people of Australia having obesity as their major disadvantage topic and hence that has risen and according to The National Hospital Morbidity Database (NHMD), (2010) noticed that it does not specify to the Australians alone which found that the surveys that are carried out at national level for health have the utilization of resources in order to fill this gap (National Institutes of Health, 2010).

Conclusion

To conclude, the study that has been undertaken regarding the obesity among children which is a growing problem in Australia (and other nations) that one can preferably or likely to undergo having a long term...
unfavourable control on the health of any individual child and also on the populations and unless any act or deed is taken in order to render null and void the development (Li, Ford, Zhao & Mokdad, 2009). So, during the study, the number of factors that have been suggested be carried out as not only on the contributing element to the growth but also to the encouraging factor of childhood obesity. These elements include obviously hereditary factors, physical activity that was carried out at a decreasing level, time spent in sedentary or sitting behaviour was at an increasing level and also the alteration brought about in diet. Plus, other factors like change in the standard of living, including influences from the family, the alterations or modifications brought about in society and due to the advertisements of the media, have all been to a greater extent linked with the growing occurrence of child obesity and childhood overweight. In order to deal with the problem, the professionals who provide health care should in turn include suitable screening of their child’s practice or habits. Complete evaluation of children who may turn out to be at risk of obesity is very much essential and important. Studies also suggest that one must have a numerous range of interventions to be included, and though such agreement is not into play for the occurrence on the best way in order to avoid and also administer childhood obesity. In addition, a mixture of ever-increasing get-up-and-go outflow in the course of exercise, modification in the diet, and lessening of activities that are like sitting or sedentary behaviour, would certainly appear to be the most effective approach. In most and a wide range breast-feeding is also a great way of acting as a protective shield and influence and thus should be encouraged. Consequently, when given the versatile nature of controlling the overweight and childhood obesity, health care professionals have to be well prepared so as to tackle various difficult issues relating to living standards and choices as well as exercise and nutrition specific. Finally, a fraction of overturning the fashion that would have certainly led to the occurrence of the deadly disease of childhood obesity internationally is to bring about the support and role of health practitioners would be in encouraging various skills and assurance in this area.

References