

Weighty Issues

With the spotlight now focused on obesity in childhood, it is little wonder that so many parents are concerned about their child's weight. Whereas once it was thought that the bigger the baby the better, many parents are now asking, "Is my baby too fat?" or "Is my child overweight?" In most cases, it's unlikely that there's anything to worry about. It is VERY important to keep in mind that growth and development are still one of the most important indicators of a child's health.

Still, there is no denying that with figures showing around 20–25% of Australian children are either overweight or obese, there is good reason for concern. The most common consequences of obesity in childhood (and adolescence) are poor body image and self-esteem. The health impacts of childhood obesity include high blood pressure and blood cholesterol, raised blood sugar levels, Type II diabetes, joint problems, sleep apnoea, asthma, and fatty liver.

When is a child overweight?

The amount of body fat a baby has generally increases over the first 12 months – little wonder when you consider that breastmilk is over 50% fat. However, this then falls during the toddler and especially the preschool years, before rising again when children reach adolescence. There are special charts for children aged 2–20 years designed to assess a child's risk of being overweight (see BMI below). Classing a child as overweight is a big call and something that even the professionals don't do lightly.

This may be a good point to remind you that young children who are plump don't necessarily become overweight adults, but if they continue this trend into school age then there may be an increased likelihood.

How is overweight tested in children?

Body mass index, more commonly known as BMI, is the standard measure used for assessing body weight in both children and adults (although there are different charts for each). BMI is simply your weight–height ratio. For children (2 to 20 years) there are a set of BMI charts related to age.

The NSW Health Department website (<http://www.health.nsw.gov.au/obesity/youth/bmi.html>) has an excellent Children and Youth BMI calculator. See also the useful links at the end of this page.



Can a baby be overweight?

This is a tough call for even the best in paediatrics. It is not uncommon to find a very plump infant who is off the charts (percentiles); however, if bub is breastfed the chances of baby having a body-fat problem are far less likely. Breastfed babies generally have better control of their feeding regulation, which has been shown to have a positive outcome on body weight. Nonetheless, some research suggests that infants who experience rapid early weight gain (we are talking not the usual where bub's weight veers off the percentile charts) may be at risk and should be seen by a health professional for monitoring. Mounting evidence suggests that weight patterns in very early life may be an important indicator of later health issues, so if you are at all in doubt, always seek the advice of your early childhood nurse or GP.

What are some of the reasons a child becomes overweight?

There are many reasons; some factors are genetic, while others are environmental. Even illnesses and sometimes medications can be the cause. Often it is not a single reason but rather, a combination. Every child is different and no two situations are the same.

Some of the risk factors may include:

Early infant feeding:

- Breastfeeding may be protective against the development of obesity.

Parental obesity, eating patterns, and attitudes:

- Infants of obese parents have more than double the chance of being obese adults.
- The tendency for some parents and caregivers to encourage a child to eat more than is necessary can, in some cases, lead to weight gain.
- Most mums and dads well understand the desire to soothe a child, especially one who is unwell, by offering them a 'happy food' such as chocolate. If

this happens occasionally, it is unlikely to become a problem; however, if it becomes a habit, with 'extra foods' beginning to replace healthy food choices, alarm bells should ring.

Altered cues of hunger:

- Restricting food intake can cause children to ignore their own natural cues of hunger in favour of eating whenever food is offered, thus encouraging a pattern of overeating later in life (or as soon as food is no longer restricted).

Socioeconomic status:

- Children from wealthy countries but poor regions, rural areas and indigenous backgrounds seem most at risk of obesity.

Diet composition:

- A diet that is high in fat and low in carbohydrate or low in protein can alter hunger signals to the brain, potentially causing overeating. Looking carefully at the nutrient breakdown of a meal can be useful. Ensuring adequate protein-rich foods is a newly emerging factor in weight issues.

Importance of early habits

Try to allow your child to self-regulate their own intake of food. Offer them a wide variety of healthy foods for them to choose from (but remember low-fat foods are not suitable options for young children). Of course, this doesn't mean allowing a child to eat all day long but at regular intervals – say 5–6 times a day. You will need to pay attention to hunger and satiety (fullness) signals to avoid underfeeding or overfeeding so that our little ones maintain the healthy eating patterns that they were born with.

Some of the best things that parents and caregivers can do to reduce the development of overweight or obesity is to:

- Encourage regular physical activity (most effectively by leading by example and becoming active yourself).
- Breastfeed.
- Offer a fibre-rich diet including vegetables, fruits, wholegrains, legumes and nuts. Such a diet may also have additional benefits in the prevention of cardiovascular disease and Type II diabetes.

Point of interest: soft drinks

The average soft drink has around 8 teaspoons of sugar, so soft drinks are best avoided. Keep in mind that sugar doesn't really turn to fat in the body; more importantly, it tells the body to store fat. Sugar is also a fast fuel which prevents the body from burning fat for energy, leading to a gain of body fat.

What about junk food? The role of 'extra foods'

'Extra foods' are foods that are not required for health. They are often high in fat, sugar and salt and low in fibre. Offer these foods just occasionally and in small amounts. Where children have become used to regular 'extra foods' in their diet, going 'cold turkey'

may not be the best strategy for success; instead think about how you can reduce them gradually and replace them with healthier food choices.

Extra foods include:

- Sweets and lollies
- Chocolate
- Biscuits, cakes and pastries
- Meat pies and sausage rolls
- Crisps and similar packet snacks
- High-fat pizza, hot chips and deep-fried foods
- Soft drinks

Does that mean an end to a favourite treat?

Children often ask us if they can still have their favourite food, such as chocolate. The answer is simple: if you eat well most of the time, you can have treats like that because they won't cause a problem. Having a healthy diet expands your choices. So eating well doesn't mean being perfect and forgoing the not-so-healthy things in life!

Handy tip: When a treat is a real treat

Remember, when you offer your little one a treat it doesn't have to be an unhealthy option. One of those expensive healthy fruit juices, snack bars, nori rolls, smoothie or healthy muffin can also be a great option when they aren't part of the regular diet.

What should I do if I think my child is overweight?

Never be tempted to place an infant or child on a diet or restrict their dietary intake in any way. If you are at all concerned, talk to your early childhood nurse, GP or other suitably qualified healthcare professional.

Interestingly, it appears that our total calorie intake hasn't changed too much; rather, it is the amount of calories we get from fat. Add this to our increasingly inactive lifestyle and the reasons for the rise in obesity become pretty clear. Being inactive means you store more fat than you burn, your body works at a slower pace, and it isn't as equipped to burn fat.

Why shouldn't I put my child on a diet?

It is natural for a parent to want to help their child; however, placing a child on a diet is best left to the professionals. You may find, as many parents do, that a diet isn't needed after all. Even including your little one in the family's low-fat regime can be harmful.

The use of low-fat diets in childhood should be carried out under strict supervision by a qualified health professional. Restricting the amount of food, total energy intake, limiting dietary fat and over-control of a child's diet can have severe impacts on physical growth and development as well as on the development of healthy eating habits and attitudes.

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There is heaps of research that highlights how important it is for a child to learn early on how to regulate their food/energy intake. Children should be encouraged to listen to their own internal hunger and satiety cues; we as parents need to be confident in our child's own ability to self-regulate, and understand the importance of family eating habits and attitudes. Remember, it is what we as parents and carers offer a child to eat that is important!

Getting active

Most of us are fully aware of the importance of physical activity and its positive effect on our health (heart, bone etc.) and development (physical, emotional and social). Children who are active can develop self-confidence, social skills and have an additional outlet for emotional expression, which in turn can lead to strong self-esteem and a healthy body image. In fact, being physically active is so important that it is included on most healthy eating pyramids and in most dietary guidelines. Interestingly, physical inactivity seems more strongly related to overweight and obesity in children than energy intake.

Does TV have any effect?

There is no denying it: Hours in front of the telly will have an impact on your child. Many studies show that there is a correlation between overweight children and how long they spend watching TV. Firstly, by watching television rather than being active, your child's metabolic rate will be lowered; and secondly, your child will be exposed to junk-food advertising. But television is not the only culprit: any form of inactivity is far from ideal for your child's healthy development.

How can I get my child active?

Getting physical active doesn't mean popping on the lycra and dropping into the local gym with the kids, nor does it mean donning the footy boots or tutu twice a week (although both are fine). Activity for children should keep their interest. It should make all children feel that they can take part and allow them to master new skills and gain confidence. Free play (which children do naturally) is really important; remember the days when your mother used to send you outside if it was a nice day! Lastly, always be a positive role

Some handy sites to look at:

- <http://www.def.wa.edu.au/education/physicalactivity/>
- http://www.cdc.gov/nchs/about/major/nhanes/growthcharts/clinical_charts.htm
- <http://www.who.org> and refer to WHO Child Growth Standards
- <http://www.cdc.gov/growthcharts>
- <http://www.daq.org.au/content/?id=830>

Adapted from the Healthy Eating for Children, the best start; Text book by Leanne Cooper 2007

Created by Leanne Cooper nutritionist mum, author, presenter and advisor to Huggies Baby Club

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model. Exercise should be a positive activity that you all enjoy just for the sake of it.

Some simple activity ideas could include:

- Dancing to up-beat music. Young children love this chance to go a little wild with Mum and Dad.
- Hide-and-seek or follow-the-leader, making sure everyone has a go.
- Simon says or musical statues.
- Chase and catch.
- Ball games – not just throwing and catching, but rolling and balancing on balls. Now you can make some use of that Fit Ball gathering dust!
- Building castles from matting and climbing and jumping.
- In summer, go outdoors more often.
- Meet up with other parents and children for free play.
- Join a playgroup or other community-related groups.

Warning: All activities that have any potential for accidents (with other children or equipment) should be supervised.

Keep in mind that for some children – particularly those who are overweight or obese – physical activity (let alone exercise) can be challenging, both emotionally and physically. Activity of any sort can be very confronting for your child's self-esteem as well as placing unaccustomed stress on their body frame. Encourage gentle movement such as going for a walk with the family, and activity that involves natural play, for example playing with the dog, riding a bike and so on, to reduce obstacles to getting out. Be careful with activity that can place too much stress on joints, ligaments and other organs, for example, jogging (even a light jog) and other exercise which involves repetitive stress, bouncing, jolting or sharp movements to joints, at least in the early days.

The important thing is to just get moving, reduce TV-viewing and replace it with fun stuff. Many parents are surprised to find that their child in fact prefers to play than watch TV or play computerised games, especially when Mum and Dad get involved. Keep it real by setting small, attainable goals and encourage children to enjoy activity for its own sake and not for rewards.