

3-3E: Final Research Essay

Title: The Impact of Obesity on Health of American Children and Adolescents

Cardiovascular diseases have always been a symptom of obesity in American children and adolescents. Child obesity is a major public health problem that affects almost all children in North America (Troiano et al. 1085-1091). Childhood obesity has an important health impact on children, and obesity continues into adolescence. Obesity is the most important risk factor for hypertension (Gortmaker et al 535-540). Also, obesity is related to dyslipidemia in childhood and adolescence, other early stages of chronic, and the increase in morbidity and mortality (Jacaues et al 1350-1355). The consequences of childhood obesity go beyond its health effects. Among American adolescents aged between 12 and 17, obesity levels were relatively stable in the 1960s and 1970s, but have been rising since then (Popkin et al 701-706). The result reported in "Overweight prevalence and trends for children and adolescents" shows that between 1976-1980 and 1988-1991, the proportion of more than 95% of adolescents more than doubled (Troiano et al 1085-1091).

Obesity in adults is characterized by many cardiovascular consequences, the consequences of which begin in childhood (Serdula et al. 167-177). The frequency of

adolescents increases (Dietz 518-525). Therefore, it is essential to lose weight quickly and continuously. Although there have been several periods of increased risk in childhood, it is unclear whether obesity that develops in early childhood will bring greater adult morbidity and mortality risks (Sallade 89-96). Obesity is now the most common nutritional disease in children and adolescents in the United States. Although obesity-related morbidity is more common in adults, the serious consequences of obesity and the incidence of adult diseases in obese children and adolescents are high (Kaplan 367-370).

Not only that, nearly half of adolescents said they were excessively overweight, but the body mass index did not indicate obesity. For obese adolescents, the percentage of obesity for both parents and adolescents is 19.6%, only 6.4% for adolescents, 29.9% for parents only, and 44.2% for both minors and parents (Goodman 52-58). For those with persistent obesity, the reports of adolescents and/or parents failed to identify more than one-third of obesity; the reports of adolescents and parents respectively determined 23.4%, and only 5.4% of the reports of adolescents, only 37.2% were confirmed among the parents (Goodman 52-58).

In addition, the prevalence and severity of obesity in children and adolescents continue to increase, accompanied by an increase in complications, threatening the health of children and adolescents. These complications can be divided into long-term

and short-term (Daniels 60-65). There are some complications that were previously considered long-term problems, such as heart disease and high blood pressure, which only appeared in adulthood, but now they have occurred in children and adolescents. These findings have raised concerns about the overall health of obese children and adolescents (Dietz 518-525). Obesity causes social problems for children and adolescents. Discrimination against overweighted children began in childhood and was gradually institutionalized. Because obese children tend to be taller than their non-overweight peers, they tend to be seen as more mature. The improper expectations generated may adversely affect their social interaction (Dietz 518-525). At the same time, obesity is one of the most common factors of chronic diseases in childhood, and its prevalence continues to increase rapidly. Awareness of the long-term health complications of obesity in children and adolescents is increasing day by day. However, the most common consequences of childhood obesity may be social and psychological (Schwimmer 1813-1819). Obese children and adolescents are at risk for psychological and social adaptation problems, including low perception ability compared to normative samples in social, sports and appearance areas and overall self-worth (Jeffrey et al 180-184).

To sum up, obesity has always been one of the public health issues affecting all children and adolescents in the United States of America. Obesity not only affects the physical health of American adolescents and children, but also has a negative impact on their social life. The aforementioned impacts of obesity will continuously have influences on their adult life. To help American adolescents and children be less obese, measures from families, communities to governments should be taken.

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