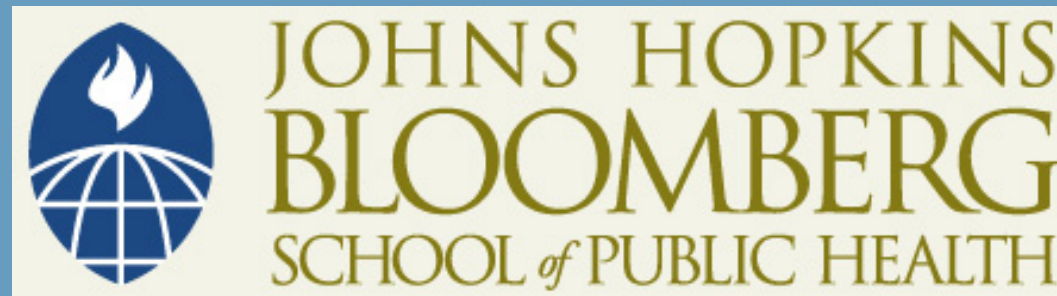


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Section C

Life Course Approaches to Obesity

Globally and Locally

- Globally, 22 million children under 5 years of age are overweight; 10% of adolescents are overweight or obese
- In the United States between the years 2000 and 2010, childhood obesity increased by 0.5% per year; in Canada and England it has increased by 1.0%

US Prevalence of Obesity, by Age (Bray, 2008)

Age	Percent
6-11 years old	18%
12-19 years old	17%
20-39 years old	30%

Obesity: Once Obese, Always Obese?

- Obesity persistence
 - 35% of of obese 5-year-olds become obese adults
 - 75% of obese 11-year-olds are obese adults
 - 90% of obese 17-year-olds are obese adults

The Four Components of a Life Course Perspective

1. **Linked lives:** parents' choices, behaviors, and genetics effect their children
2. **Life events can be viewed as a trajectory:** influences have a differential impact at various stages of the life course
3. **People have agency:** individuals make choices influenced by the social worlds in which they live (e.g., family, peers, neighborhood, etc.)
4. **Historical context matters:** an historical perspective provides a context for understanding current forces and factors

Factors Associated with Obesity across the Lifespan

- What are the factors associated with obesity across the lifespan?
- Consider the various stages
 - Preconception
 - Pregnancy
 - Infancy
 - Childhood
 - Adolescence
 - Adulthood

Preconception

- Pre-pregnancy weight
- Socio-economic status
- Pre-pregnancy nutritional status
- Maternal education
- Historical events

Pregnancy

- Maternal weight gain
- Gestational diabetes mellitus
- Maternal smoking
- Poor prenatal nutrition (e.g., high sugars, low protein)
- Maternal food preferences

Infancy

- Low birth weight with rapid “catch up”
- Breastfeeding
- Infant formula and food supplementation
- Maternal depression and caretaking
- Eating patterns
- Taste acquisition

Childhood

- Genetics
 - Syndromes
 - Body type (adiposity rebound of middle childhood)
 - Basal metabolic rate
- Chronic diseases
 - Medications
- Food preferences and eating patterns
- Food insecurity

Childhood—Parental Influences

- Education
- Feeding practices
- Employment
- Income
- Attitudes toward food and nurturance

Childhood—The Environment

- School
 - Recess
 - Physical education
 - School meals, vending machines, treats
 - Walkways and paths to school
- Parks and recreation
- Neighborhood safety

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Childhood—Behaviors

- TV viewing
 - Advertising exposure
 - Sedentary lifestyle
 - Snacking
- Eating behaviors (e.g., skipping breakfast)
- Sports and activities

Adolescence

- Puberty
- Sleep patterns
- Medications
 - Antidepressants
 - Oral contraception
 - Antipsychotics
- Substance use
 - Marijuana
 - Alcohol consumption
 - Tobacco
- School factors
- Food preferences

Adolescence

- Puberty
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 - Alcohol consumption
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- School factors
- Food preferences

Adolescence

- Depression
- Medical conditions
- Eating disorders and disordered eating
- Employment
- Activity level, sports participation
- Eating as a social behavior
- Peer networks and the contagion effect

Adult

- Activity level
- Consumption
- Type of employment
- Partner selection
- Friendships and social networks
- Menopause
- Chronic diseases: lupus, thyroiditis, tumors
- Alcoholism
- Genetics (e.g., lymphatic rupture)

Obesity from a Life Course Perspective

- Maternal education
- Maternal weight
- SES

