Nowadays there has been increasing rates of obesity which is getting higher distressingly in several parts of the world and it is commonly seen in children. Childhood obesity is one of the main significant problems among the children. In this literature review, it shows the historical background which are mainly focused on the prevalence and the incidence of childhood obesity. Secondly this review depicts about the key authors, who initially put forwarded the ideas, problems and consequences of childhood obesity. The current main stream point will be mentioned and these points are also been compared with the other strategic points. The statistics will be shown the percentage of children who are suffering from obesity in Australia. The possible approaches towards the childhood obesity is also mentioned the recent research and expected outcomes. The existing theories had shown how to overcome the problems related to obesity. In this review it identifies the issues which is involved in childhood obesity and also bring up the unresolved issues. Moreover that in this literature review will describe about the consequence of nursing practice, which makes the impact in family or society. At last the summary of childhood obesity will be reveal in the conclusion.

“in developed countries The Childhood obesity has reached in epidemic levels. Around the Twenty five percent of children who lives in the United state are overweight and 11% are obese. Overweight and obesity in childhood really affect and made an important impact on both the physical and psychological health of the children. Among the children the real method of obesity growth is not completely unstatefull and it is thought to be a disorder with the reasons of multiple causes. There is several factors from environment, which give more preference to life style and culture had played a vital role in the increasing prevalence of obesity worldwide. The main reason of increasing the calorie and fat intake is due to the result of overweight and obesity.(15...)

 There are also many reasons for the increasing rate of obesity and overweight worldwide, they are due to the excessive intake of sugar by the soft drink, increased consumption of food and the lack of doing physical exercise or activity. As a result, both the Heavy-consumption of calories and as well as the lack of physical activity are involved in childhood obesity. Nearly all the researchers have the same opinion that prevention could be the main key strategy for scheming the current Epidemic of obesity.(15)….

 Related to this strategy Prevention may embrace primary prevention of the overweight or obesity. On the other hand secondary prevention or prevention of weight recover following weight loss, and dodging of more weight raise in obese persons which unable to lose weight. Nowadays the most of the approaches is mainly focused on the each individual behavior, diet and physical activity. Nevertheless, these Strategies had made slight impact on the mounting augment of the obesity epidemic.(15...)

In many countries around 50 percentages of adults were identified with excesses overweight and obese and it is to not easy to reduce extreme weight once it becomes recognized. Therefore Children are considered as the priority population for Intervention strategies. Prevention may be achieved through a variety of interventions targeting built environment, physical activity, and diet. Some of these potential strategies for intervention in children can be implemented by targeting preschool institutions, schools or after-school care services as natural setting for influencing the diet and physical activity. All in all, there is an urgent need to initiate prevention and treatment of obesity in children.”

Definition

Obesity is generally defined as “the abnormal or excessive accumulation of fat in adipose tissue to the extent that health may be impaired”. (Kiess, Marcus & Wabitsch, 2004)

“The prevalence and trend shows national data regarding the National measured time trend data on the prevalence of obesity in Australian children are not voluntarily available. The most recent national data come from Australian Health and Fitness Survey (AHFS) in the year 1985 and the National Nutrition Survey (NNS) was on 1995.( Aihw, 2004)”.

In the recent years obesity has turn into one of the important national and global public challenge. According to the national health survey, in England (2009) 31 per cent of girls and 28 per cent of boys aged two to 15 years were classified as either overweight or obese. (Ref 1.......)

childhood and adolescent overweight and obesity are a significant and growing public health problem in Australia, with the estimated prevalence increasing from 10.9% in 19851 to 23% in 2007.(ref 4…..)..

The number of overweight children has shoot up in the last 20 years. Unexpectedly this is the most avertable nutritional disease in this period (Nauta, Byrne & Wesley, 2009).

“The Data on the prevalence of obesity among Aboriginal and Torres Strait Islander children are negligible. The only measured national data come from the 1994 National Aboriginal and Torres Strait Islander Survey (NATSIS), although these estimates are not directly comparable with the data presented above as overweight prevalence was determined using weight-for-age and -sex percentile curves. This survey found that around 13% of Aboriginal and Torres Strait Islander boys and 19% of girls aged 7–15 years were overweight (ABS 1998).” (AIHW,2004)

Parents are the main basis for the obesity issue and they are answerable for these issues because these parents are busy with the cooking and sometimes they provide lot of Jung foods to their children and children become inactive and fed up with obesity. To deal with the problems related with the obesity, there are some factors which are needed to address such things as food and physical activity. (Udell & Mehta, 2008).

Babies have the chance of increasing developed obesity due to the reason of breast feeding or the reduced breastfed. (Coles & Gilbert, 2005).

Some of the current research revealed that the obese children are in the state of high risk to develop the mood disorder in adulthood, particularly, the period in which girl become an overweight woman. The prevention of overweight is very imperative for the drop of mood disorder in adulthood. (Sanderson, Patton, McKercher, Dwyer & Venn, 20011).

on the equivalent time another research was put forwarded and argues that both of the media and advertisement have a immense impact on in case of obesity in children. the government has taken several actions to manage advertisements (Udell & Mehta, 2008).

The juvenile obesity is also one of the world widespread problem. To put off the future hurdle governments are establishing many new policies. These policies and plans will be efficient in various ways in different part of the countries. In United States of America, the National School Lunch Program supply lunch for around 59% of c. At the same time in children who are studying in school. In Australia around 89% of the schools and the school food services are aiming on the campus canteen and provide the students to buy the food and beverages without leaving the school premises. (Finch, Begley, Sutherland, Harrison & Collins, 2007).

A recent Australian audit revealed that, around 30% of children consulting to general practitioners are because of the reason of obesity and among these the only 2 percentages of problems were solved. in developed nations the burden of disease Many of the disease burden in developed nations is attributed to some of the health issues with behavioural pattern and life style determinants. (Gerner, Sanci, Cahill, Ukoumunne, Gold, Rogers… & Wake, 2010)

There are many causes for the obesity among children. They are due to many reasons such as

* Increasing energy intake
* Increasingly sedentary lifestyles
* Decreased walking, cycling, and transport-related physical activity
* Changes in family structure and dynamics.( AIHW,2004).

The main and the common cause of the childhood obesity is considered as the attractive advertisements in the media encourage the children to sit and have food for long time, therefore to reduce the obesity in children is only through to stop the such advertisements in televisions. So government had to put forward such policies to prevent obesity. (Udell & Mehta, 2008).

The World Health Organization (WHO) states the worldwide increase in obesity a global

Outbreak and Australia has not escaped the trend. The Rates in Australia have risen dramatically over the past few decades. Around one in five Australian children were estimated to be obese in 1999–2000, and around two in five overweight but not obese (AIHW 2004).

Obesity is also connected with a considerable drop in life expectancy. (AIHW 2004).

In children obesity is due to the excessive adiposity. There are different methods to identify obesity in children. The methods are

1. Anthropometric measures -; This thr first method used to findout or explaining the overweight and obesity in the children. To measure the obesity with this method there has no regularity way which to be get applied.
2. Relative weight for height and age-; this method is mainly using in several countries and these countries were cultivated the large number of children growth reference chart from their birth to childhood. This chart measures the weight and height in gender at different ages. The childhood obesity is mainly explained as the compared weight of age, height and sex group. In this chart the standard weight is calculated by the median of population. In this chart they also use a simple assessment process to explain the weight and age.
3. Body mass index of age-; “ this is the most commonly using method by measuring the ratio of the body weight in kilograms and it is divide by the square of the height in meters. Through this method it shows the adipose tissue in the body, which increases the risk chance of mortality rate and morbidity rate in children”. “there is a specific correlation between the body mass index and fat mass determined by the database and expert systems applications (DEXA) was found to vary from 0.5 to 0.85. (Kiess, Marcus & Wabitsch, 2004).

The nursing theorists had put forwarded many health policies and the nurses active participation and the nursing theorists had implemented “Pender’s health promotion model” and this reported that in case of the complete participation, the nurses have the role of educational mediators to improve patient’s healthy behavior. The nurses have the main role to promote and encourage the political, societal and basic structural unit to institute healthy behavior. (Pinzon- Perez & Mountcastle, 2010). The nurses have to provide some essential health services. they are:-

* By monitoring, investigating and diagnosing the health issues
* Educating about the health problems
* Build up plans and implement policies related with the individual and community
* Safety promotion
* Evaluating the problems by doing research

Possible approaches

“In 1997 there workshop organized by the international obesity task force (IOTF), which concluded that some of these limitations could be overcome by developing a set of body mass index percentile curves which was based on an international reference population and by explaining the cutoff points in relation to the percentiles that equals to the body mass index of 25kg/m and a body mass index of 30kg/m in children. (Kiess, Marcus & Wabitsch, 2004)

 Recent national approaches

“the centre for disease control and prevention (CDC) has recently developed new growth charts, which include age and sex-specific body mass index reference for children aged from two to twenty years of age”. These charts also consist of specific sex in gender and weight for height among children aged two to six years. For maintain the curves the national health surveys had put forwarded different strategically data with five supplementary sources. This supplementary source is carried out in the year between 1963 to 1993.

Involved issues

“Obesity is one of the greatest hazard to the health and studies states that there is much more chances for the cardiovascular morbidity. “ to resolve these issues physical activity is needed for every children to protect from the development of obesity and some people recommended a role in resting metabolic rate (RMR) which consist of 60 to 75 percentages of daily energy expenditure”. (Kiess, Marcus & Wabitsch, 2004)

 Bullying

It is one of the major problems nowadays obese children were facing. “Bulling is both a contributing factor to obesity and a hindrance to gaining control over ones weight. Bullying is a universal problem worldwide affecting some twenty percentages of children. It seems that bullying is most powerful between the ages of seven to twelve. May bullies choose obese children as their target for teasing and harassment because their appearance is striking and they are seen as differ from others. Obese children are vulnerable because they are sensitive to comments about their looks. Bullying has many negative consequences which affects the children very badly. The consequences are the feeling of sadness in children, sleeping disturbances and low self esteem”. (Kiess, Marcus & Wabitsch, 2004).