

Obesity

Is obesity a child protection problem?



TEA-BREAK GUIDE



The obesity “epidemic”

Rates of obesity have increased steadily over recent decades. Now, 1 in 3 children are overweight or obese by the time they start secondary school, and around 4% are classed as severely obese. Obese children are very likely to remain obese into adulthood and for many their lives will be shortened by medical complications of obesity. The most obese children will start to experience the negative effects of obesity on their physical, mental and social wellbeing in childhood.

Causes of obesity:

Medical causes such as genetic and hormonal abnormalities are rare, although genes and lifestyle interact – obesity often runs in families. The basic cause of obesity for most people is that we consume more calories than we burn, but social and environmental changes have driven the increase in obesity. Children are less active than in the past for many reasons e.g. lack of facilities and safe spaces to play, walk, cycle and play sport; and the increase in “screen time”. High calorie foods are widely available and advertised. Many of the most obese children have additional needs and difficulties and often come from vulnerable families. Children may have learning or developmental difficulties and can have significant associated emotional and behavioural support needs. Families are often under pressure because of finances, lack of support networks, mental health problems and other issues.

Weight loss is difficult! Even severe obesity and failure to lose weight are not child protection concerns in themselves. Aim to support children and families to make sustained lifestyle changes that improve their physical, emotional and social wellbeing.

Make a referral to MASH for children with severe obesity with comorbidities, where appropriate assessment and support has been offered, if parents are persistently unable to recognise concerns or engage and make changes. In most cases there will be wider concerns about neglect or abuse.

When does obesity become a child protection concern?

Most parents of obese children would like their children to be healthy and happy and need advice and support to help manage the problem. To be considered as child protection concern a number of features are likely to be present:

- Severe and rapidly increasing obesity.
- Child developing comorbidities such as high blood pressure, sleep apnoea, type 2 diabetes, continence difficulties, and reduced mobility.
- Professional concerns for the child’s social and emotional wellbeing.
- Parents persistently fail to engage with support services and make lifestyle changes
- Evidence of wider neglect concerns including poor hygiene, school attendance difficulties.
- Significant family difficulties which may be child protection concerns in themselves, including domestic abuse, parental mental health, drug and alcohol problems.

Supporting families where a child has severe obesity with additional needs:

- Engaging, supporting and empowering parents to make lifestyle changes is key.
- Offer a holistic assessment of the needs of the child and family and an individualised support plan – this could be through an Early Help Assessment. A health professional such as a school nurse will need to be involved, but other agencies, particularly schools, should contribute to assessment and support.
- Ensure height and weight are recorded and trends are monitored over time.
- Ensure that the child has a paediatric assessment to rule out medial causes of obesity and to identify and manage any comorbidity.
- Seek advice and resources from the Healthy Lifestyle Team and/or Dietician. Consider whole school, group, community and social activities and resources.