

SOCIO-ECONOMIC DISPARITIES IN PRE-ADOLESCENT OBESITY TREATMENT:

A SYSTEMATIC REVIEW

Overweight and obesity affect more than 25% of children in Europe, and over 40% in some individual countries. Obesity can lead to serious **negative physical and mental health impacts**, including endocrine complications, early development of cardiovascular disease and type-2 diabetes, lower self-esteem and increased stigmatisation.

Children from population groups exposed to **socio-economic vulnerabilities** tend to be disproportionately affected by obesity.

While many countries aim to reduce inequities in health, there are surprisingly few systematic analyses of how **social disparities influence the success of child obesity treatments**.

Data gap confirmed

The current review **confirms the lack of high-quality data** on this question.

Such lack of knowledge **hampers the development of good practices and coherent national guidance on treating childhood obesity**.

This is especially a problem for 3 to 10-year-old children, given that treatment in this age category mainly relies on behavioural interventions, rather than surgical or pharmaceutical ones.

But some findings do emerge

Although larger reviews face difficulties in reaching general conclusions, **observations from individual studies attest to the likely relevance of social, ethnic and economic background for treatment outcomes**.

Potentially relevant factors include:

- the degree of commitment, resources, organisational capacity, cohesion and motivation from the family and the child;
- the level of maternal education;
- the importance of cultural appropriateness of interventions;
- the levels of stress experienced by families, associated with socio-economic disadvantage.

This implies the likelihood that interventions need to be **culturally and socially sensitive, avoiding stigma, encouraging motivation, recognising barriers and reinforcing opportunities**.

The bottom line

The bottom line is that while social disparities seem to matter, **there is insufficient good quality evidence on how to address inequities in child obesity treatment**.

It is therefore crucial **to obtain such information as part of future research**, so that results can better inform interventions and policies.





Science and Technology in
childhood Obesity Policy

Childhood obesity treatment linked to social disparities

**The effectiveness of interventions to treat childhood obesity
may depend on social disparities such as:**



ETHNICITY



INCOME

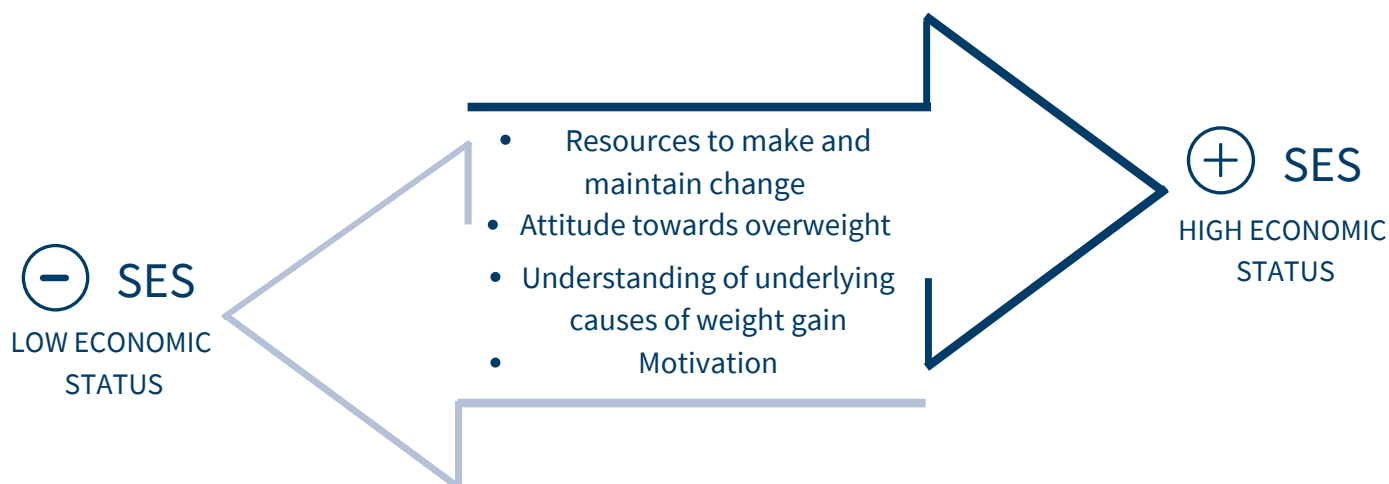


PARENTS'
EDUCATION



HEALTH INSURANCE
STATUS

Socio-economic status (SES): a barrier to treatment



Policy needs to focus on a way to adapt treatment to socio-economic backgrounds



NO STIGMA



ENCOURAGE
MOTIVATION



RECOGNISE
BARRIERS



REINFORCE
OPPORTUNITIES

