

OBESITY: COMPLEX BUT CONQUERABLE



THE UNITED STATES FACES AN ALARMING OBESITY PROBLEM. WE ARE QUICK TO BLAME INDIVIDUALS FOR EATING TOO MUCH OR EXERCISING TOO LITTLE, BUT IN TRUTH, THE CAUSES ARE MORE COMPLEX AND INVOLVE MANY FACTORS.

THE WEIGHT OF THE NATION

1 OUT OF 3 CHILDREN ARE OVERWEIGHT OR OBESE.



2 OUT OF 3 ADULTS ARE OVERWEIGHT OR OBESE.

\$190.2 BILLION

ESTIMATED ANNUAL COST OF OBESITY-RELATED ILLNESS.

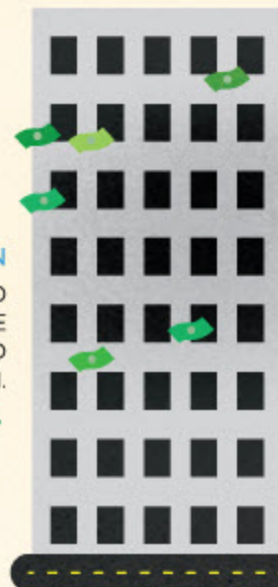


21%

OF ANNUAL MEDICAL SPENDING IS ON OBESITY-RELATED ILLNESS.

\$4.3 BILLION

IN ANNUAL LOSSES TO BUSINESSES BECAUSE OF OBESITY-RELATED JOB ABSENTEEISM.



37%

OF ADULTS ARE PREDIABETIC.

3%

OF ADULTS THAT HAVE TYPE 2 DIABETES ARE UNDIAGNOSED.

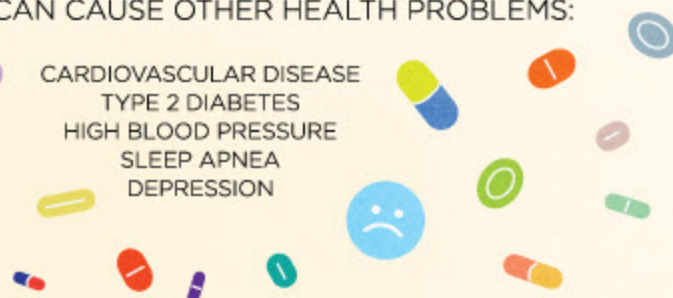
8%

OF ADULTS HAVE TYPE 2 DIABETES.



OBESITY CAN CAUSE OTHER HEALTH PROBLEMS:

CARDIOVASCULAR DISEASE
TYPE 2 DIABETES
HIGH BLOOD PRESSURE
SLEEP APNEA
DEPRESSION



5 ESSENTIAL AREAS THAT NEED IMPROVEMENT

PHYSICAL ACTIVITY

AMERICANS HAVE BECOME MORE RELIANT ON CARS, AND WALKING AND BIKING HAVE DECREASED.

PERCENT OF INDIVIDUALS WALKING TO WORK

4.1%

1977

2.8%

2008



19%

OF AMERICANS GET THE RECOMMENDED AMOUNT OF PHYSICAL ACTIVITY.

PERCENT OF SCHOOL-AGED CHILDREN WALKING TO SCHOOL

20.2%

1977

2001

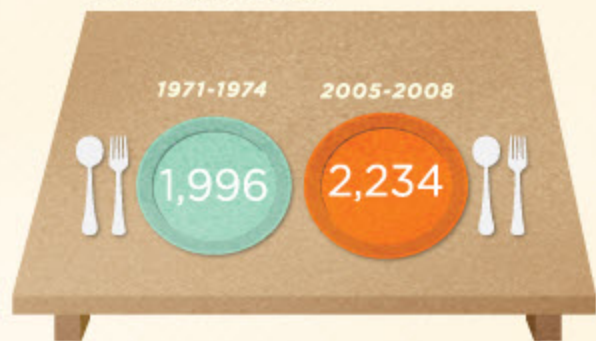
12.5%



FOOD AND BEVERAGES

OVER THE PAST 40 YEARS, CALORIE INTAKE HAS INCREASED, AND HIGH-CALORIE FOODS ARE OFTEN AVAILABLE IN LARGE PORTION SIZES AT RELATIVELY LOW PRICES.

CALORIES CONSUMED PER DAY BY ADULTS



ON A GIVEN DAY, **30-40 PERCENT** OF CHILDREN AND ADOLESCENTS EAT FAST FOOD.



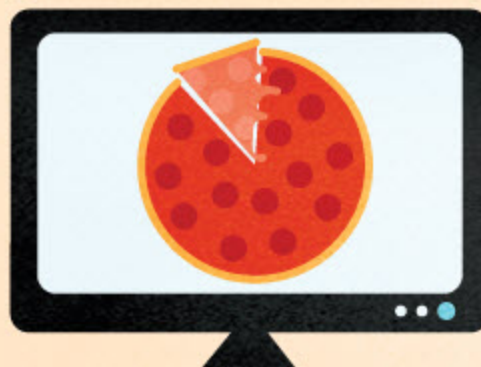
OF WEIGHT INCREASE IN THE U.S. BETWEEN 1977 AND 2007 IS ATTRIBUTED TO SUGAR-SWEETENED BEVERAGES.

MARKETING

THE MOST FREQUENTLY MARKETED FOODS AND BEVERAGES ARE HIGHER IN ADDED FATS AND SUGARS, AND AMERICANS ALREADY EAT AND DRINK TOO MUCH OF THESE FOODS AND BEVERAGES.



OLDER CHILDREN AND ADOLESCENTS CONSUME MORE THAN **7.5** HOURS OF MEDIA EACH DAY.



87% OF FOOD AND BEVERAGE ADS SEEN BY CHILDREN AGES 6-11 ON TV ARE FOR PRODUCTS HIGH IN SATURATED FAT, SUGAR, OR SODIUM.

HEALTH CARE & WORKPLACE

HEALTH CARE PROVIDERS AND EMPLOYERS ARE NOT TAKING FULL ADVANTAGE OF THEIR OPPORTUNITY TO PREVENT OBESITY.



MANY HEALTH CARE PROVIDERS DO NOT FEEL PREPARED OR COMFORTABLE DISCUSSING WEIGHT WITH PATIENTS.



SCHOOLS

FOODS AND DRINKS AVAILABLE AT SCHOOLS ARE RADICALLY DIFFERENT THAN THEY WERE A FEW DECADES AGO, WITH MANY SCHOOLS NOW OFFERING AND PROMOTING HIGH-CALORIE, LOW-NUTRITION FOODS THROUGHOUT THE SCHOOL DAY.

UP TO **1/2** OF CHILDREN'S WAKING HOURS ARE SPENT IN SCHOOL.



1991
41.6%

PERCENT OF HIGH SCHOOL STUDENTS ATTENDING DAILY PHYSICAL EDUCATION CLASSES

2009
33.3%



5 SOLUTIONS FOR CHANGING OUR COMMUNITIES

5 SOLUTIONS FOR CHANGING OUR COMMUNITIES

INTEGRATE PHYSICAL ACTIVITY EVERY DAY IN EVERY WAY.

STRENGTHEN SCHOOLS AS THE HEART OF HEALTH.

MARKET WHAT MATTERS FOR A HEALTHY LIFE.

EAT WELL!

ON THEIR OWN, ANY ONE OF THESE FIVE SOLUTIONS MIGHT HELP SPEED UP PROGRESS IN PREVENTING OBESITY, BUT TOGETHER, THEIR EFFECT WOULD BE REINFORCED, AMPLIFIED, AND MAXIMIZED.

ACTIVATE EMPLOYERS AND HEALTH CARE PROFESSIONALS.

MAKE HEALTHY FOODS AVAILABLE EVERYWHERE.

ANYONE AND EVERYONE CAN BE A LEADER AND PLAY A PART IN IMPLEMENTING THESE FIVE SOLUTIONS. WHAT CAN YOU DO TO HELP SOLVE OUR OBESITY PROBLEM?

FOR SPECIFIC ACTION STEPS NECESSARY TO IMPLEMENT THESE SOLUTIONS, SEE THE IOM REPORT
ACCELERATING PROGRESS IN OBESITY PREVENTION: SOLVING THE WEIGHT OF THE NATION
IOM.EDU/ACCELERATINGOBESITYPREVENTION

SOURCES: FULL CITATIONS FOR REFERENCES CAN BE FOUND IN *ACCELERATING PROGRESS IN OBESITY PREVENTION: SOLVING THE WEIGHT OF THE NATION*



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