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Obesity and Overweight White Paper on a Strategy for Europe on Nutrition, Overweight and Obesity Related Health Issues Future Research Needs for Childhood Obesity Prevention Programs EU Law and Obesity Prevention Obesity Discourse and Fat Politics Human Obesity Three Essays on the Economics of Obesity Working Paper Childhood Obesity and the U.S.-México Border Working Paper Childhood Obesity Obesity, Nutrition and Physical Activity The Pain of Obesity The Use of Herbs for Obesity: an ITM Position Paper Obesity, Nutrition and Physical Activity Letter on Corpulence Food policies and obesity in low and middle income countries EU Law and Obesity Prevention Letter on Corpulence, Addressed to the Public Physical Activity in the Era of the Childhood Obesity Epidemic Promoting Healthy Weights Nutrition policies and interventions for overweight and obesity: A review of conceptual frameworks and classifications An Ounce of Prevention Or a Ton of Trouble Guess what's for dinner tonight? The role of packaged food and soft drinks in global obesity Fast food. Does it contribute to childhood obesity? Obesity and Culture. United States Culture towards Weight Gain Issues The Government's Public Health White Paper (Cm 6374) Ending Childhood Obesity Background paper on two options available to government to reduce obesity in New Zealand Implications of Childhood Overweight and Obesity on Learning Behaviour and

Classroom Performance Letter on Corpulence Psychological Predictors and Outcomes of Childhood Overweight and Obesity Obesity The End of the Obesity Epidemic Risks of Obesity Anatomical Chart The Oxford Handbook of the Social Science of Obesity Obesity Management Men and the War on Obesity Imitative Obesity and Relative Utility Obesity Discourse and Fat Politics

Obesity has emerged as the most prevalent serious public health problem of our time. It is a condition of excessive fat accumulation in adipose tissue, to the extent that health may be impaired. Certain detrimental effects to health are attributed to obesity. Obesity may develop at any age in either sex. Several factors may contribute to the development of obesity. Obesity develops over time and, once it develops, is difficult to treat. Obesity should not be regarded simply as a cosmetic problem affecting certain individuals, but a crisis that threatens global well-being. In the next two decades, the control and management of obesity is the biggest challenge facing Mankind. Serious coordinated efforts are required from anthropologists, bio-medical scientists, bureaucrats, doctors, health professionals and all others interested in the study of obesity, to launch a successful campaign to counter this scourge. Moreover, global as well as local policies must be formulated and implemented to address the problem of obesity. The volume has sixteen papers that are on human obesity which is a major health problem. The percentage of population suffering from overweight or obesity is increasing worldwide, both in developed and developing countries, and for all subpopulations of age and

gender (although data on the incidence of those problems seem to differ somewhat across sources; see Díaz-Bonilla and Paz, 2019). High body mass is a risk factor for many non-communicable diseases such as diabetes, high blood pressure, coronary heart disease and stroke. High Body Mass also tends to increase the risks of various types of cancer, gallbladder disease, musculoskeletal disorders and respiratory symptoms among others. In consequence, it constitutes one of the leading risk factors causing early death and disability, as measured in disability-adjusted life years (DALYs).¹ It is estimated that in recent years overweight and obesity contributed to about an estimated 4 million deaths (7.1% of all deaths) and 120 million DALYs worldwide (4.9% of all DALYs among adults); overweight and obesity also carry economic costs, estimated globally in US\$500 billion per year (Development Initiatives, and Institute for Health Metrics and Evaluation (IHME), 2018). Consequently, there is an increasing interest to develop policies and interventions that may reduce the incidence of overweight and obesity. Letter on Corpulence, Addressed to the Public by William Banting, first published in 1864, is a rare manuscript, the original residing in one of the great libraries of the world. This book is a reproduction of that original, which has been scanned and cleaned by state-of-the-art publishing tools for better readability and enhanced appreciation. Restoration Editors' mission is to bring long out of print manuscripts back to life. Some smudges, annotations or unclear text may still exist, due to permanent damage to the original work. We believe the literary significance of the text justifies offering this reproduction, allowing a new generation to

*appreciate it. This booklet is written for those who are committed to fostering progress in the areas of prevention and health promotion. The intent is to provide the latest thinking and planning on the subject of healthy body weights. Despite apocalyptic predictions from a vocal alliance of health professionals, politicians and social commentators that rising obesity levels would lead to a global health crisis, the crisis has not materialised. Offering a road map through the maze of claims and counter-claims, while still holding to a sceptical standpoint, *The End of the Obesity Epidemic* provides an unparalleled anatomy of obesity as a scientific, political and cultural issue. It is essential reading for anybody with an interest in the science or sociology of health and lifestyle. There is considerable rhetoric and concern about weight and obesity across an increasing range of national contexts. Alarmist claims about an 'obesity time-bomb' are continually recycled in policy reports, reviews and white papers, each of which begin with the assumption that fatness is fundamentally unhealthy and damaging to national economies. With contributions from the UK, Canada, the USA and Australia, this book offers alternative critical perspectives on this alleged public health crisis which were, in part, developed through an Economic and Social Research Council seminar series on *Fat Studies and Health at Every Size (HAES)*. Written by scholars from a range of disciplines and the health professions, themes include: an interrogation of statistical procedures used to construct the obesity epidemic, overweight and obesity as cultural signifiers for Type 2 diabetes, understandings of healthy eating and healthy weight in a 'problem' population, gendered*

expectations on men and women to lose weight, the visual representation of obesity, tensions when researching (anti-)fatness, critical dietitians' engagement with HAES, alternative ways of promoting physical activity, and representations of obesity in the media. This book was originally published as a special issue of Critical Public Health. Research Paper (postgraduate) from the year 2010 in the subject Pedagogy - Pedagogic Sociology, grade: none, University of Dar es Salaam, language: English, abstract: This article is based on a study carried out from October, 2007 to May, 2008 that investigated the extent to which overweight and obesity were challenges among primary school children in Kinondoni and Njombe Districts in Tanzania. Systematic random sampling was used to select schools while stratified sampling and simple random sampling were used in selecting pupils and teachers who participated in the study. Measurement of weights and heights was done to determine Body Mass Index (BMI), while measurement of skin folds was done to determine body fat percentage. Close-ended questionnaires, semi-structured interviews and focus group discussions were used to collect data on the implications of overweight and obesity on health and learning behaviours. Findings of the study revealed that an average of 13.5% of children were overweight or obese. Hypertension, excessive sweating, teasing and peer rejection were common to obese children. In addition, overweight and obese children were reported to perform less than their peers in academic and physical activities. This study rerecommends among other things the establishment of education programs through mass media to raise people's awareness of how

overweight and obesity affects children's health, social and classroom learning behaviours as well as performance. [...] Since the 1980s, there has been an alarming increase in the prevalence of obesity in virtually every country in the world. As obesity is known to lead to both chronic and severe medical problems, it imposes a cost not only on affected individuals and their families, but also on society as a whole. In Europe, the Obesity Prevention White Paper of May 2007 – followed by the adoption of an EU School Fruit Scheme, the acknowledgement that food advertising to children should be limited, and proposed legislation to make nutrition labeling compulsory – has firmly placed obesity on the EU agenda by laying down a multi-sectoral strategy and a basis for future action. In accordance with this growing sense of urgency, this is the first book to offer an in-depth legal analysis of obesity prevention, with particular reference to Europe. It describes what the EU has done and could do to support Member States in fighting the obesity epidemic, and clearly shows the way to locating advocacy strategies within the framework of EU law. The thorough analysis includes a discussion of the following issues: the need to address nutrition and physical activity as important health determinants; the emphasis traditionally placed at EU level on food safety rather than food quality; the need for the development of databases on nutrition and physical activity, comparable common indicators and risk assessment mechanisms; mainstreaming public health into all EU policies; the scope of EU powers in the case law of the Court of Justice; the role of information in the EU's obesity prevention strategy; the Commission's proposed Mandatory Nutrition Declaration;

the Food Claims Regulation; the regulation of food marketing to children, and in particular the role of the Audiovisual Media Services Directive, the Unfair Commercial Practices Directive and industry self-regulation; food reformulation; the use of economic instruments in the EU's obesity prevention strategy, with an emphasis on the Common Agricultural Policy and the EU's taxation policy; and EU action in the fields of sport, occupational health and safety, and transport policy. The author convincingly shows that conflicts of interest inherent in market forces demand a strong EU intervention, preferably through legislation than self-regulation. She also demonstrates the urgent need to reach an agreement, on the basis of reliable data, about what is effective in practice to improve lifestyles. The study acknowledges that the law is not a panacea, but nonetheless has an influential role to play in making the healthy choice an easier choice, and must move decisively towards ensuring that the societal costs associated with obesity are sustainable, and that the ultimate goal of a healthy population is achievable. The book is essential reading for everyone involved or interested in the development of the EU's obesity prevention policy. Obesity has clear and serious consequences for physical health, many of which emerge in adulthood. For obese children, poor psychological health may be the most obvious and immediate implication of their excess adiposity but the evidence to support this is mixed, particularly for community-based (i.e. non-clinical) groups. Given that associations between psychological health and body mass index (BMI) are likely to be bidirectional, longitudinal methodologies seem best suited to clarify the nature of these relationships.

Furthermore, research conducted with community-based samples may be generalizable to the wider population of overweight and obese children. However, most research to date has been cross-sectional and conducted with clinical populations of obese children. In light of these evidence gaps, the first objective of this thesis was to determine the longitudinal relationship between psychological well-being and subsequent excess adiposity gain and obesity onset across childhood and adolescence. This was addressed in a systematic review (Paper 1) and a research paper (Paper 2). The systematic review, which selected population-based studies for maximum generalizability, suggested that poorer psychological well-being may increase the incidence of obesity and contribute to obesity persistence across adolescence. However, major limitations and inconsistencies were identified in the literature. Paper 2 of this thesis addressed a gap identified in the systematic literature review- the need for further good-quality research examining individual psychological predictors of adiposity change in the overweight or obese subgroup. It employed a longitudinal cohort of 5-9 year old children who were all initially overweight or mildly obese when they presented to primary care 4 years earlier. Parallel parent proxy- and child self- reported psychosocial measures were assessed as predictors of changes in body mass index (BMI; kg/m²) standard deviation scores (i.e. BMI z-scores). Results revealed little evidence that initial psychosocial functioning impacted on subsequent BMI z-score change. However, changes in several domains of psychosocial well-being, especially in relation to body-image and appearance, were associated with concomitant BMI z-score change. A strong

degree of corroboration between parents and children strengthened the validity of the findings. The second objective of the thesis was to investigate whether and how BMI was associated with psychological outcomes among non-clinical overweight or obese children. Consistent with Paper 2, Paper 3 achieved this within a cohort of 5-9 year olds recruited from primary care for their overweight or mild obesity. Results confirmed that overall, psychological well-being at 4-year follow-up was weakly predicted by concurrent BMI and when impairments were found, they were most likely for peer and eating-behaviour domains. This study extended on existing knowledge by demonstrating that changes in BMI categories also contributed little variance to the psychological outcomes of initially overweight children. The implications of this research focus on informing effective prevention strategies to reverse the current trends in youth obesity. Recommendations include targeting poor psychological well-being prior to adolescence to yield the most benefit for preventing the onset of obesity. Intervention strategies for the quarter of children in the community who are overweight or obese could incorporate modules that target peer relationship and eating problems, the most relevant psychological comorbidities of excess adiposity. Enhancing well-being in these domains would be beneficial for immediate quality of life, future mental health and potentially initiate flow-on effects that improve physical health. Since the 1980s, there has been an alarming increase in the prevalence of obesity in virtually every country in the world. As obesity is known to lead to both chronic and severe medical problems, it imposes a cost not only on affected individuals and their

families, but also on society as a whole. In Europe, the Obesity Prevention White Paper of May 2007 - followed by the adoption of an EU School Fruit Scheme, the acknowledgement that food advertising to children should be limited, and proposed legislation to make nutrition labeling compulsory - has firmly placed obesity on the EU agenda by laying down a multi-sectoral strategy and a basis for future action. In accordance with this growing sense of urgency, this is the first book to offer an in-depth legal analysis of obesity prevention, with particular reference to Europe. It describes what the EU has done and could do to support Member States in fighting the obesity epidemic, and clearly shows the way to locating advocacy strategies within the framework of EU law. The thorough analysis includes a discussion of the following issues: the need to address nutrition and physical activity as important health determinants; the emphasis traditionally placed at EU level on food safety rather than food quality; the need for the development of databases on nutrition and physical activity, comparable common indicators and risk assessment mechanisms; mainstreaming public health into all EU policies; the scope of EU powers in the case law of the Court of Justice; the role of information in the EU's obesity prevention strategy; the Commission's proposed Mandatory Nutrition Declaration; the Food Claims Regulation; the regulation of food marketing to children, and in particular the role of the Audiovisual Media Services Directive, the Unfair Commercial Practices Directive and industry self-regulation; food reformulation; the use of economic instruments in the EU's obesity prevention strategy, with an emphasis on the Common Agricultural Policy and the

EU's taxation policy; and EU action in the fields of sport, occupational health and safety, and transport policy. The author convincingly shows that conflicts of interest inherent in market forces demand a strong EU intervention, preferably through legislation than self-regulation. She also demonstrates the urgent need to reach an agreement, on the basis of reliable data, about what is effective in practice to improve lifestyles. The study acknowledges that the law is not a panacea, but nonetheless has an influential role to play in making the healthy choice an easier choice, and must move decisively towards ensuring that the societal costs associated with obesity are sustainable, and that the ultimate goal of a healthy population is achievable. The book is essential reading for everyone involved or interested in the development of the EU's obesity prevention policy. Is obesity really a public health problem and what does the construction of obesity as a health problem mean for men? According to official statistics, the majority of men in nations such as England and the USA are overweight or obese. Public health officials, researchers, governments and various agencies are alarmed and have issued dire warnings about a global 'obesity epidemic'. This perceived threat to public health seemingly legitimates declarations of war against what one US Surgeon General called 'the terror within'. Yet, little is known about weight-related issues among everyday men in this context of symbolic or communicated violence. Men and the War on Obesity is an original, timely and controversial study. Using observations from a mixed-sex slimming club, interviews with men whom medicine might label overweight or obese and other sources, this study urges a

rethink of weight or fat as a public health issue and sometimes private trouble. Recognizing the sociological wisdom that things are not as they seem, it challenges obesity warmongering and the many battles it mandates or incites. This important book could therefore help to change current thinking and practices not only in relation to men but also women and children who are defined as overweight, obese or too fat. It will be of interest to students and researchers of gender and the body within sociology, gender studies and cultural studies as well as public health researchers, policymakers and practitioners. If human beings care about their relative weight, a form of imitative obesity can emerge (in which people subconsciously keep up with the weight of the Joneses). Using Eurobarometer data on 29 countries, this paper provides cross-sectional evidence that overweight perceptions and dieting are influenced by a person's relative BMI, and longitudinal evidence from the German Socioeconomic Panel that well-being is influenced by relative BMI. Highly educated people see themselves as fatter -- at any given actual weight -- than those with low education. These results should be treated cautiously, and fixed-effects estimates are not always well-determined, but there are grounds to take seriously the possibility of socially contagious obesity. Abstract: Detailed, scientific information on treatment of obesity is presented in a series of articles on methods, success rates, cost effectiveness, etiology, and physiological and psychological aspects of weight reduction. Recent advances in obesity research are documented. Studies of different treatment methods are reviewed, including fasting, protein-sparing diets, pharmacological treatments, behavior modification, physical

training, self-hypnosis, and surgery. Types of obesity, causative mechanisms, and effective treatment are identified. Summaries, references, and supportive data are provided for each paper.

(cj). The percentage of population suffering from overweight or obesity is increasing worldwide, both in developed and developing countries, and for all subpopulations of age and gender (although data on the incidence of those problems seem to differ somewhat across sources of estimates. This paper attempts to shed some light on a specific debate: the role of consumption of different types of packaged foods and soft drinks on obesity trends. The paper is organized as follows. First, there is a discussion of other studies on drivers of obesity that can help to better frame the analysis in this paper. Second, we present the data utilized and the econometric approach utilized. Third, we present the results. A final section concludes.

Letter on Corpulence, Addressed to the Public is a brochure that encourages reducing carbohydrate consumption as a means to weight loss. The booklet contains the essential blueprint for the diet he followed. Physical activity is important for obesity prevention. Given that the prevalence of obesity among Canadian children has substantially increased over recent decades, and that obesity has substantial consequences for health and wellness, physical activity promotion continues to be a priority for public health. This thesis research aims to further our understanding of children's behavioural patterns where they relate to physical activity and obesity. It also aims to identify factors and effective strategies that increase physical activity among children. These aims were assessed through six interconnected research papers. In the first paper we

demonstrated that consideration should be given to activities not captured by pedometers as adjusting crude pedometer-measured steps for these activities substantially improved the ability to accurately assess children's physical activity levels, and to identify children who were obese. In the second paper we revealed that policy makers should consider targeting physical activity in girls, and outside of school as these variables and time periods were characterized by low activity. In the third and fourth papers we showed that parental beliefs and support for physical activity were positively related to children's physical activity achieved on weekend days, and negatively associated with childhood overweight. In the fifth paper we demonstrated that school programs that support physical activity through positive environments, curriculum, policy, and partnerships lead to improvements in children's physical activity both during and beyond school. In the last paper, we revealed that programs implemented in schools located in disadvantaged neighbourhoods reduced inequalities in physical activity. Furthermore, we found that although the programs were implemented school-wide and did not specifically target student subgroups, they were effective in increasing physical activity relatively evenly among low-active, active, and high-active students. Likewise they relatively evenly reached normal weight and overweight students, and those of distinct socioeconomic backgrounds. The results of this thesis provide researchers and policy makers with new evidence on important determinants of physical activity in children from an Albertan context. They also underline the importance of supporting strategies for physical activity promotion and specifically school health programs as

these improve physical activity, reduce obesity prevalence rates and diminish health inequalities. Academic Paper from the year 2020 in the subject Health - Health Sciences - Health education, grade: A, Walden University (Management and Technology), course: Health Promotions and Writing with Confidence, language: English, abstract: The thesis discussed in this paper is the following: In the United States, Obesity impacts more than 100 million adults and children. The disease is recognized as a public health issue, therefore there should be persuasion and mitigation to reduce its prevalence. Obesity is dangerous because it relates to a poor-quality mental health consequences and decreased quality of life. Obesity is associated with the primary causes of death in the United States and worldwide, involving diabetes, heart disease, stroke, and some types of cancer. World Health Organization in 2019 estimated that 38.2 million children under the age of 5 years were overweight. In high-income countries the problems of overweight and obesity are now on the rise. Not to mention the low and middle-income countries. In African countries, the number of obese children under 5 has soared by approximately 24% percent. In addition, almost half of the children under 5 who were fat in 2019 resided in Asia. Five out of 6 studies performed considered the elevated death risk of heavier people in their estimated lifetime costs. Obesity can be termed a global illness affecting children and adults, respectively. In addition, the disease also has dire consequences on families and the health systems. There is considerable rhetoric and concern about weight and obesity across an increasing range of national contexts. Alarmist claims about an 'obesity time-bomb' are continually recycled in policy

reports, reviews and white papers, each of which begin with the assumption that fatness is fundamentally unhealthy and damaging to national economies. With contributions from the UK, Canada, the USA and Australia, this book offers alternative critical perspectives on this alleged public health crisis which were, in part, developed through an Economic and Social Research Council seminar series on Fat Studies and Health at Every Size (HAES). Written by scholars from a range of disciplines and the health professions, themes include: an interrogation of statistical procedures used to construct the obesity epidemic, overweight and obesity as cultural signifiers for Type 2 diabetes, understandings of healthy eating and healthy weight in a 'problem' population, gendered expectations on men and women to lose weight, the visual representation of obesity, tensions when researching (anti-)fatness, critical dietitians' engagement with HAES, alternative ways of promoting physical activity, and representations of obesity in the media. This book was originally published as a special issue of Critical Public Health. A dramatic and informative chart, Risks of Obesity explains obesity and provides detail on how body fat is measured through the Body Mass Index (BMI). Lists causes of this serious condition Lists the organs that may be affected by obesity within the body and explains the health risks Details treatments for adult obesity Explains and diagrams body mass index Includes a special section which explains the prevalence and seriousness of childhood obesity Made in USA Available in the following versions: 20" x 26" heavy weight paper laminated with grommets at top corners ISBN 9781587793806 20" x 26" heavy

weight paper ISBN 9781587793790 Academic Paper from the year 2019 in the subject Health - Children and adolescents, University of Phoenix, language: English, abstract: This paper analyses whether fast food contributes to childhood obesity. Obesity is a multi-factorial disorder comprising genetic, dietary, conduct, and ecological components. The expanded eating of energy-dense poor nutrient diets with high saturated fats and sugar levels joined with diminished physical activity, have prompted high corpulence rates among kids. Current statistics depict that 15% of U.S kids and averagely 33% of adults are obsessed. The results in this new study support evidence that fast-foods adds to a high intake of calories and obesity risk in kids. Childhood obesity is highly prevalent in the U.S. and has become a global epidemic. The 2007-2008 National Health and Nutrition Examination Survey data showed that 17% of U.S. children and adolescents (ages 2–19) years were obese, and over 30% were overweight or obese. Childhood obesity leads to obesity in adulthood and many other serious health conditions, such as cardiovascular, metabolic, and psychosocial illnesses. To assess the effectiveness of existing childhood obesity prevention efforts, the Johns Hopkins University Evidence-based Practice Center completed a systematic review on childhood obesity prevention studies conducted in high-income countries. This report systematically reviewed seven key questions: What is the comparative effectiveness of school-based interventions for the prevention of obesity or overweight in children? What is the comparative effectiveness of home-based interventions for the prevention of obesity or overweight in children? What is the comparative effectiveness of primary

care-based interventions for the prevention of obesity or overweight in children? What is the comparative effectiveness of childcare setting-based interventions for the prevention of obesity or overweight in children? What is the comparative effectiveness of community-based or environment-level interventions for the prevention of obesity or overweight in children? What is the comparative effectiveness of consumer health informatics applications for the prevention of obesity or overweight in children? What is the comparative effectiveness of multi-setting interventions for the prevention of obesity or overweight in children? Though the strength of evidence is moderate to high for school-based interventions, the limited number of studies and insufficient or low strength of evidence to support interventions in other settings made it difficult to conclude that interventions in other settings could effectively prevent childhood obesity. Based on the evidence gaps in these settings, we identified the following as Future Research Needs: Future research is needed on interventions delivered in settings other than schools or home. While there have been other reviews on the effectiveness of interventions on food and nutrition policies at school on changes in children's diet and school food environments, there are still gaps in the literature on some aspects, such as the impact of regulations on food availability and its impact on obesity prevention. Only a few studies that we reviewed used social marketing to deliver messages on nutrition, physical activity and health. This approach might be integrated with other intervention components to create an atmosphere favorable to healthy and active lifestyles and related behavioral changes. Further testing

of the value of consumer health informatics products for obesity prevention is needed. In addition, there is a lack of evidence on the impact of regional or national policies on childhood obesity prevention. Further research might be conducted with stratified analyses on subgroups, such as by gender, age, race/ethnicity, or socioeconomic status. There were methodological limitations of the reviewed studies which suggest that future research might improve upon the methods. Few of the studies we reviewed reported process evaluation, which would provide useful insight regarding why some studies might detect desirable effect of the intervention. Future studies need to design innovative approaches that have a high likelihood of sustainability. This may be designed to take advantage of other existing public health, government or other organization supported programs or try to gain more support and engagement from related key stakeholders. The objective of this report is to prioritize the needs for research addressing gaps in the existing literature on the effectiveness of childhood obesity prevention programs by engaging expert stakeholders using a modified Delphi method. Understanding the public health implication of fiscal policies is crucial to combat recently increasing overweight and obesity rates in many low-and-middle income countries (LMICs). This study examines the implication of food policies, mainly tariff rates on “unhealthy” foods, including sugar and confectionery products as well as fats and oils, and governments’ subsidies on individuals’ body weight outcomes. We compile several macro- and micro-level datasets that provide for several LMICs macro-level information on food policies and micro-level anthropometric data. We exploit temporal dynamics in tariff

rates on “unhealthy” foods and governments’ spending on subsidies to estimate fixed effects models characterizing the evolution of body weight outcomes. We find that temporal dynamics in tariff rates on unhealthy and energy-dense foods are significantly and negatively associated with body weight. Conditional on several observable and time-invariant unobservable factors, a decrease in tariff rates on sugar and confectionary foods or fats and oils is associated with an increase in overweight and obesity rates. On the other hand, an increase in subsidy rates, as a share of government expenditure, is significantly associated with higher overweight and obesity rates. Interestingly, we find that the implications of these food policies are more pronounced among poorer individuals. This is intuitive because relatively poorer households are more likely to spend a larger share of their income on food consumption or unhealthy foods, and these types of households are beneficiaries of government subsidies in many LMICs. These findings have important implications for informing public health policies in LMICs, which are experiencing an unprecedented rise in overweight and obesity rates. There is an urgent need to better understand the causes and consequences of obesity, and to learn what works to prevent or reduce obesity. This volume accurately and conveniently summarizes the findings and insights of obesity-related research from the full range of social sciences including anthropology, economics, government, psychology, and sociology. It is an excellent resource for researchers in these areas, both bringing them up to date on the relevant research in their own discipline and allowing them to quickly and easily understand the cutting-edge research being

produced in other disciplines. The Oxford Handbook of the Social Science of Obesity is a critical reference for obesity researchers and is also valuable for public health officials, policymakers, nutritionists, and medical practitioners. The first section of the book explains how each social science discipline models human behavior (in particular, diet and physical activity), and summarizes the major research literatures on obesity in that discipline. The second section provides important practical information for researchers, including a guide to publicly available social science data on obesity and an overview of the challenges to causal inference in obesity research. The third part of the book synthesizes social science research on specific causes and correlates of obesity, such as food advertising, food prices, and peers. The fourth section summarizes social science research on the consequences of obesity, such as lower wages, job absenteeism, and discrimination. The fifth and final section reviews the social science literature on obesity treatment and prevention, such as food taxes, school-based interventions, and medical treatments such as anti-obesity drugs and bariatric surgery. White Paper Cm. 6374 (ISBN 010163742X) was published 16th November 2004. Childhood obesity is one of the most pressing global public health challenges of the 21st century. In response, States need to employ a multisectoral approach including labelling rules, food marketing restrictions and fiscal policies. However, these legal measures interact in a complex fashion with international economic and human rights law raising a range of legal questions. This timely book edited by Garde, Curtis and De Schutter explores these questions offering insightful

perspectives. Of fundamental interest to legal professionals and academics, Ending Childhood Obesity also makes the legal complexities accessible to a broad range of public health and other policy actors addressing obesity and related non-communicable diseases.

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