

# Environmental Influences On Childhood Obesity: Ethnic And Cultural Influences In Context

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Civilization is connected with the different beliefs relating to food items, behaviors, preferences and cultural influences that may take part to the greater value than the average risk of obesity in the minority population of the United States, including children and youth. Moreover, cultural attitudes and beliefs are not only the optimal source causing the variation in ethnicity in obesity of children, and that cannot be estimated in isolation. Socio-structural, demographical and environmental factors should be accounted for. The findings of the study show the difference in ethnicity along the different geographical regions, and they may have a chance to increase the obesity risk during gestation, childhood, and adolescence (Kumanyika, 2008).

A study conducted on adolescent weight according to the atmospheric temperature at birthplaces is suspicious of the variables that have the ability to work during the gestation to predispose to high weight in African American ladies. Moreover, the study was also motivated by the proof of the possible existence of a relationship between the increase in obesity and birthplace by the data estimated from children of about 1100 schools ranging their age from 15 to 20 years in Philadelphia. The relationship of overweight with the higher ( $N$  versus  $\leq 13.2^{\circ}\text{C}$  [ $56^{\circ}\text{F}$ ]) temperature of the environment at birth was statistically significant for the African American ladies and not for the white women. Around 2.51 percent relative risk with a confidence interval of 995 percent and a relative risk of 1.94 in the females African American along with the with ladies correspondingly. The outcomes of the study also confirm the prevalence of customs to feeding cereals to the child bottle when he was just of the age of 1 port two weeks and also feeding him with other semi-solid food in the first month of his life. The decisions are mostly dominated by the grandmothers about the feed of the child (Kumanyika, 2008).

The outcome of the study is that [obesity in children](#) is highly prevailing in the ethnic minority population of the United States. It is a reflection of the difference in combination of many variables, including 1) Those populations have high obesity in their women; 2) following effects of web social norms and gestational atmosphere relating to the expression of predisposition to gain more weight; 3) the feeding practices of infant resulted in the high consumption of calories; 4). The food intakes have cultural and environmental influences that will result in high weight gain from the start of the birth. Examining the effect of the environmental variables that were not in the control of individuals is a secret to understanding the nature of solutions that are required to affect the relevant roadmap of high risk.

# A Common Genetic Variant Is Associated With Adult And Childhood Obesity

Obesity is a heritable disease, and it is the risk variable for many other diseases, including heart disease, type 2 diabetes, and hypertension. The study undertaken has employed the Genome type analysis by using the family survey. In this study, by using the testing plan for the quantitative traits in the family tree. To employ the multiple comparison analysis, the researcher has used the two-stage method for testing the traits by using the software package PBAT. In the screening phase, single nucleotide polymorphisms (SNPs) are selected by the parental genotypes and genetics models that give the best possible prediction of the offspring's phenotypes. Typically, the screening test determines the strength to check the connection in the preliminary phase. In the second phase, FBAT, a family-based association test, is used to test the selected SNPs for their connections with the BMI using the estimated genotypes of the offspring.

The FBAT is a general transmission test and estimates either the overestimation or underestimation of an allele is linked to the phenotypes of the offspring. As the allele transmitted by the parent to its offspring is selected stochastically, that is the reason that the test step is independent of the screening step statistically. Hence, the power of outcome from the screening the researchers had a genotype of about 116,199 SNPs in almost 65 participants from the FHS offspring cohort (Herbert et al., 2006). After eliminations, about 86,509 SNPs were examined for their correlation with BMI. The researcher has used the FBAT-PC, which incorporated the data from BMI across multiple examinations and enhanced our ability to estimate the genetic effect. The top ten SNPs are tested among these under a recessive model in which the researcher has determined during the screening phase those having the greater power. The outcomes of the study showed that rs7566605 reached the overall statistical significance (unadjusted FBAT-PC P value, 0.0026). The other genetic models that were not able to get the designed biology of the SNP were less healthy. In these cases, rs7566605 was not able to get a position in the top ten in terms of power. The rs7566605 has the frequency C allele is 0.38, and the SNP is in Hardy-Weinberg equilibrium.

The second analysis was based on the large sample size, i.e., 925 FHS participants, capturing those who were previously tested as well. It showed that the SNP is an important predictor of BMI. For all estimates, rs7566605 CC homozygotes were about 1 BMI unit heavier than the CG and GG genotypes (PG 0.0001), independent of gender. CC homozygotes were also more likely to be obese than non-obesity. For example, in exam 5, odds ratio (OR) 0 1.33, 95% confidence interval (CI) (1.20 to 1.48)<sup>^</sup>. Taken together, the outcomes in four of the five samples from different populations using two different study designs confirm a consistent association between the rs7566605 polymorphism and obesity (Herbert et al., 2006).

# Early Life Risk Factors For Obesity In Childhood: Cohort Study

The purpose of the study is to identify the risk factors in the early life of a child up to the age of 3 years that are causing obesity in children in the United States. The study undertaken is designed on the patterns of Avon's longitudinal study. The target group of the study will be the children of the United States. Around 8234 respondents' children are taken in the cohort study with the age of 7 years along the sub-sample of about 909 children with the data taken on the additional growth variables that are connected with the risk of obesity. The key results of the study measure that at the age of 7 years, obesity is the mass of the body higher than the 95th centile relative along the reference data of the United Kingdom in the year 1990. The study identifies that 8 out of the 25 risk factors are linked to the risk of obesity in the final model when employed.

The obesity of parents (both parents: adjusted odds ratio, 10.44, 95% confidence interval 5.11 to 21.32), initially (by 40 months) body mass index or adiposity rebound (14.99, 5.21 to 42.29), higher than nine hours of watching TV. In a week at three years (1.49, 1.20 to 2.11), catch-up growth (3.01, 2.21 to 7.60), standard deviation score for weight at age nine months (2.99, 1.39 to 6.96) and 19 months (2.75, 1.24 to 5.60); weight gain in the first year (1.06, 1.02 to 1.10 per 100 g increase); birth weight, per 100 g (1.04, 1.09 to 1.06); and short ( < 10.8hours) sleep duration at age three years (1.45, 1.20 to 1.78) (Reilly et al., 2005).

Concluding the complete results, there are eight primary factors in early life that are linked to obesity at a young age. The research was not able to analyze many other variables- including the physical activity and expenditures on food and energy, control of parents of feeding in the early years of childhood and the diabetes of the mother during the pregnancy. The study also offers substantial evidence of the role of the environment in the young age of the child on its obesity risk. The prevention measures relating to the obesity of children have been unsuccessful and typically focus on the change in life patterns. Future studies will concentrate more on the change in the environmental targets at the periods in early life that are reconnected with the risk of obesity undependably (Reilly et al., 2005).

## References

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