

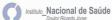


MUN-SI









Socioeconomic variables and the prevalence of childhood obesity in the municipalities of Fundão, Montijo, Oeiras, Seixal and Viana do Castelo

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INTRODUCTION

Statistics concerning childhood overweight and obesity have shown a drastic increase of cases in the last few years in developed countries, Portugal included^{1,2}. Recently, it has been argued that the socioeconomic status (SES) of family household might be linked to the onset and evolution of obesity^{3,4}. The analysis of the relation between SES and childhood obesity is important inasmuch as knowledge of the risk factors associated with obesity is vital to improving preventive strategies⁵ in so far as it enables the identification of social groups that are potentially vulnerable to the risk of childhood obesity⁶. Portugal developed the Project Munsi as a result of a partnership between the Ministry of Health, University Atlântica and the Municipalities of Fundão, Montijo, Oeiras, Seixal and Viana do Castelo. The objective of this project was to develop new strategies and policies for the promotion of public health and the prevention and/or reduction of childhood obesity at the municipal level, particularly in local schools. The aim of this study, undertaken under the auspices of the Munsi Project, is to investigate the association or relation between the SES of families and the prevalence of obesity in children enrolled.

METHODS

The Munsi Project is a longitudinal study that was undertaken in three different stages (2008 till 2011). The present data resulted from the first phase of the project, which took place in the academic vear of 2008/2009.

3173 children (6-9 years), enrolled in 167 Public Schools from 5 Municipalities were evaluated through the application of a Munsi Questionnaire and Childhood nutritional status was assessed by anthropometric parameters (weight and height) considering the Centers for Disease and Control Prevention (CDC, 2000) growthcharts percentiles of Body Mass Index (BMI), classifying as pre-obese when P8≲IMC-P9S and obese when IMC≥P9S. For the evaluation of the nutritional status of the school children, 39 examiners were appointed by the municipal authorities. Each examiner received training from an anthropometry specialist that was dully credited by the *The International Society for the* Advancement of Kineanthropometry, as set out in the MUN-SI's

Family SES was determined using the Munsi Family Questionnaire, answered by the families and was defined in relation to parents' educational achievement, professional occupation, socioprofessional status and household income.

The Odds Ratio was calculated with a 95% Confidence Intervals.

RESULTS

3173 children that were evaluated, 50.4 % were female, 32.1 % were overweight and 14.3 % were obese. It was observed that parents' lower academic level both socio-professional status equivalent to no qualified occupations and a family household income <1500€ monthly appear to be a significant risk factors for the development of childhood obesity (p<0,05).

Level of education of	n total	Prevalence of obesity		р	Non- adjusted OR	Adjusted OR**
iaulei		n	%		(CI 95 %)	(CI 95 %)
1 st Cycle of Basic Education	239	40	16,7	0,01*	2,1 (1,2-3,4)	0,8 (0,3-2,1)
2 nd Cycle of Basic Education	430	79	18,4	0,01*	2,3 (1,5-3,6)	1,0 (0,5-2,2)
3 rd Cycle of Basic Education	576	93	16,1	0,01*	2,0 (1,3-3,0)	0,8 (0,4-1,6)
Secondary Education	517	66	12,8	0,08	1,5 (0,9-2,3)	0,8 (0,4-1,5)
University Education	348	31	8,9		V.R.	V.R.
Post-Graduate Studies	82	8	9,8	0,81	1,1 (0,5-2,5)	1,4 (0,5-3,9)

Level of education of mother	n total	Prevalence of obesity		р	Non- adjusted OR	Adjusted OR**	
mother		n	%		(CI 95 %)	(CI 95 %)	
1 st Cycle of Basic Education	197	41	20,8	0,01*	2,8 (1,8-4,5)	1,4 (0,5-3,6	
2 nd Cycle of Basic Education	356	59	16,6	0,01*	2,1 (1,4-3,3)	1,3 (0,6-2,8	
3 rd Cycle of Basic Education	559	77	13,8	0,01*	1,7 (1,1-2,6)	1,1 (0,5-2,3)	
Secondary Education	610	101	16,6	0,01*	2,1 (1,4-3,1)	1,6 (0,9-3,0	
University Education	457	39	8,5		V.R.	V.R.	
Post-Graduate Studies	99	9	9.1	0.86	1.1 (0.5-2.3)	1.5 (0.6-3.6	

Socio-professional status of father	n total	Prevalence of obesity		р	Non- adjusted OR	Adjusted OR**	
iauler		n	%		(CI 95 %)	(CI 95 %)	
Professional occupations	170	12	7,1		V.R.	V.R.	
Management/technical occupations	477	52	10,9	0,15	1,6 (0,8-3,1)	1,0 (0,4-2,2	
Qualified occupations	288	42	14,6	0,02*	2,2 (1,1-4,4)	1,4 (0,6-3,6	
Semi-qualified occupations	786	136	17,3	0,01*	2,8 (1,5-5,1)	1,7 (0,7-4,3	

Socio-professional status of mother	n total	Prevalence of obesity		р	Non- adjusted OR	Adjusted OR**	
mother		n	%		(CI 95 %)	(CI 95 %)	
Professional occupations	150	8	5,3		V.R.	V.R.	
Management/technical occupations	453	50	11,0	0,04*	2,2 (1,0-4,8)	1,4 (0,6-3,4	
Qualified occupations	393	54	13,7	0,01*	2,8 (1,3-6,1)	1,5 (0,6-3,8	
Semi-qualified occupations	631	103	16,3	0,01*	3,5 (1,6-7,3)	1,7 (0,6-4,7	
Non-qualified occupations	320	55	17,2	0,01*	3,7 (1,7-8,0)	2,4 (0,8-7,0	

Family income	n total	Prevalence of obesity		р	Non-adjusted OR	Adjusted OR** (CI 95 %)
		n	%		(CI 95 %)	(CI 95 %)
0-500 €	336	50	14,9	0,03*	3,1 (1,1-9,0)	2,2 (0,5-9,4)
501-850 €	429	67	15,6	0,02*	3,3 (1,2-9,4)	3,0 (0,8-11,8)
851-1500 €	609	108	17,7	0,01*	3,9 (1,4-10,8)	4,0 (0,9-14,8)
1501-2750 €	412	49	11,9	0,10	2,4 (0,9-6,9)	3,3 (0,9-11,9)
2751-3750 €	131	8	6,1	0,80	1,2 (0,3-4,0)	1,6 (0,4-6,8)

CONCLUSION

These results showed that the SES of families is inversely associated with the prevalence of childhood obesity. New approaches on these dimensions could improve the obesity trends, enhancing families' healthy lifestyle nearby children nutrition status. Community-based programmes working at a local level as the MUN-SI Project demonstrates the importance of formulating future preventive actions to combat childhood obesity in families with lower SES.

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