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Synopsis

Towards optimal public health interventions for preventing obesity in children: a synopsis of a novel evidence synthesis

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Plain language summary

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Plain language summary

What was the question?

One in five children in England are living with obesity at age 12. It affects children unequally, with higher levels of obesity seen in children from more deprived areas. Obesity is known to lead to numerous diseases such as diabetes and cancer. The United Kingdom government aims to halve childhood obesity by 2030.

Over the last 30 years, many different strategies have been tried around the world to prevent childhood obesity. We wanted to work out which types of strategies work best and in which groups of children.

What did we do?

We brought together as many studies of different strategies as we could find, in two Cochrane Reviews. At the heart of our project was a statistical analysis of the results of all the studies we found. We identified important features of the strategies that we could compare across all the different studies. The method allows us to learn about what types of strategies work best. We also looked closely at the gender, ethnic backgrounds and socioeconomic backgrounds of the children involved in the studies to see if these aspects affected how well the different strategies worked.

What did we find?

We found 172 studies in the 5- to 11-year age group and 74 studies in the 12- to 18-year age group. The strategies typically had a beneficial impact on preventing the gain of excess body fat, though there was a lot of variation between studies. Unfortunately, we were unable to find features of the strategies that convincingly explained why some worked better than others, although we did see greater effects from strategies aiming to increase physical activity rather than to improve diet. We found that the strategies worked similarly well irrespective of the gender, ethnic backgrounds and socioeconomic backgrounds of the children.

What does this mean?

Strategies to prevent obesity in children aged 5–18 years generally work, but only to a very small extent on average. In future, we suggest that more focus is put on promoting an increase in physical activity alongside an improvement in diet. The evidence suggests that strategies aiming to prevent obesity in children do not increase health inequities.

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