**Socio-Ecological Assessment**

Obesity among children and adolescents has become a critical social problem. The increasing prevalence of obesity in children and adolescents has become a major public health concern in the United States. The alarming prevalence rates of obesity among children and adolescents in the United States demonstrates the need for urgent interventions (Ohri-Vachaspati et al., 2015). About one in every five school-age children and adolescents is living with obesity in the United States. The Center for Disease Control and Prevention has identified childhood and adolescent obesity as critical health problems that require effective interventions. Obesity has become a major risk for the development of other lifestyle diseases that are chronic in nature (Amarasinghe & D’Souza, 2012). It is evident that understanding the individual behaviors, ecological factors, as well as socioeconomic factors that increase the risk of childhood and adolescent obesity will help in developing effective intervention strategies. The socioecological assessment helps in identifying individual behavioral and societal factors that interact and increase the risk of developing a certain disease. In this case, the socio-ecological assessment will be used to identify individual and societal factors that increase the risk of developing obesity among children and adolescents.

Individual behaviors among children and adolescents may serve to increase the risk of developing obesity. Nutrition and eating behaviors serve as critical determinants in the development of obesity. The failure to meet the dietary guidelines for Americans leads to the development of obesity, which is a nutritional disorder affecting both children and adolescents (Sahoo et al., 2015). Physical activity behaviors are also determinants of the development of obesity. Children and adolescents must participate in a minimum of 60 minutes of physical activity that is either moderate or vigorous on a daily basis. The failure to participate in physical activity is a contributor to the development of childhood and adolescent obesity (Amarasinghe & D’Souza, 2012). Sedentary behaviors also have a direct impact on the development of obesity. The preference for a sedentary lifestyle leads to an increase in weight and eventually contributes to the development of obesity. Surpassing the recommended two hours of sedentary behaviors when viewing television and playing video games adversely increases the risk of developing obesity among children and adolescents (Ohri-Vachaspati et al., 2015).

Societal factors also serve as contributors to the development of childhood and adolescent obesity. The family health behaviors, health attitudes among parents, as well as the general home environment directly influences the development of childhood obesity (Sahoo et al., 2015). Families that lack adequate health knowledge are prone to developing obesity. As a result, children in such families have a greater risk for the development of obesity. The school environment also affects the health of children and adolescents (Ohri-Vachaspati et al., 2015). Physical activities within the school schedule and a healthy food environment in school may reduce the risk of developing childhood and adolescent obesity. Victimization of obese children within the school environment serves to increase the risk of other health-related complications.

Socioeconomic factors also play a role in increasing the prevalence of obesity among children and adolescents. Socioeconomic factors such as education, occupational status of parents, poverty levels in the family, and the cases of unemployment also interact with individual health behaviors to increase the risk of developing childhood and adolescent obesity (Amarasinghe & D’Souza, 2012). Children from minority groups are at a greater risk of developing obesity because the parents are poor and they lack the health literacy that would empower them to prevent obesity by introducing healthy diets into their families.

**References**

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