

5. World Obesity Atlas 2026 - Health

According to the World Obesity Atlas 2026 nearly 15 million children aged 5– 9 and over 26 million aged 10–19 in India were overweight or obese in 2025. The World Obesity Federation predicts that by 2040, a total of 507 million children will be living with obesity or be overweight.

World Obesity Day is observed on March 4

1. What is Obesity?

1. Obesity is a medical condition characterized by excessive accumulation of body fat that poses significant risks to health.
2. The World Health Organization (WHO) officially classifies obesity as a chronic disease rather than merely a lifestyle issue.
3. It significantly increases the risk of non-communicable diseases (NCDs) such as-
 1. Type 2 diabetes
 2. Cardiovascular diseases
 3. Hypertension
 4. Certain cancers.
4. Obesity has become a global public health crisis affecting both developed and developing countries.

2. World Obesity Federation (WOF)

The World Obesity Federation (WOF) is a major international organization working to address the global obesity epidemic.

A. Institutional Background

1. The organization was established in 2015 through the merger of-
 1. International Obesity Task Force (IOTF)
 2. International Association for the Study of Obesity (IASO).
2. Headquarters- London, United Kingdom.
3. It functions as a global non-profit network of organizations and professionals working in obesity research and policy.

B. Key Functions

1. Research and Data Analysis
 1. Publishes the World Obesity Atlas, which tracks global obesity trends and projections.
2. Policy Advocacy
 1. Supports governments in developing evidence-based policies to prevent obesity.
3. Capacity Building
 1. Provides training programmes and resources for healthcare professionals and policymakers.

3. World Obesity Atlas 2026

1. The World Obesity Atlas 2026 provides projections of childhood obesity trends between 2025 and 2040.
2. It highlights the growing scale of the global obesity crisis.

4. Key Findings- India-Specific Trends

A. Rapid Rise in High Body Mass Index (BMI)

1. India is projected to have 41 million children with high BMI in the coming decades.
2. Among them, around 14 million children may be living with obesity.

B. Current Childhood Obesity Prevalence (2025)

1. Age group 5–9 years
 1. Approximately 14.9 million children are overweight or obese.
2. Age group 10–19 years
 1. Over 26 million adolescents fall into the overweight or obese category.

C. Future Projections

1. In the coming years–
 1. Around 20 million children in India may live with obesity.
 2. Nearly 56 million children may be either overweight or obese.
2. This indicates a rapid increase in childhood metabolic health risks.

5. Rise in BMI-Related Health Conditions

1. High BMI significantly increases the risk of metabolic disorders among children.

A. Hypertension

1. Expected to rise from 2.99 million cases to 4.21 million cases.

B. Hyperglycaemia

1. Projected to increase from 1.39 million cases to 1.91 million cases.

C. High Triglyceride Levels

1. Expected growth from 4.39 million cases to 6.07 million cases.
2. These conditions significantly raise the risk of future cardiovascular diseases and diabetes.

6. India's Global and Regional Position

1. India ranks second globally in childhood obesity, primarily due to its large population base.
2. Within the WHO South-East Asia Region, India ranks first, with more than 45 million children and adolescents (0–19 years) overweight or obese.
3. This trend indicates that India is becoming a major contributor to the global obesity burden.

7. Key Risk Factors Driving Obesity

A. Low Physical Activity

1. Approximately 74% of adolescents aged 11–17 years do not meet the recommended physical activity levels.
2. Sedentary lifestyles linked to screen time, urbanization, and academic pressure contribute to this trend.

B. Dietary Changes and Sugary Beverage Consumption

1. Children aged 6–10 years consume between 0–50 ml of sugary drinks daily, reflecting increasing exposure to processed and high-sugar foods.
2. Rising consumption of fast food and ultra-processed foods contributes to excessive calorie intake.

C. Limited Coverage of School Meal Programmes

1. Only 35.5% of school children receive school meals through institutional programmes.
2. This indicates gaps in nutritional interventions within the education system.

D. Sub-optimal Breastfeeding Practices

1. Around 32.6% of infants below five months are not optimally breastfed.
2. Poor breastfeeding practices can affect early childhood nutrition and metabolic development.

E. Rising BMI Among Women

1. Approximately 13.4% of women aged 15–49 years are exposed to high BMI.
2. Maternal obesity increases the risk of childhood obesity and metabolic disorders in offspring.

F. Increasing Prevalence of Type 2 Diabetes in Women

1. Around 4.2% of women aged 15–49 years live with Type 2 diabetes.
2. This reflects the growing burden of metabolic diseases in reproductive-age women.

8. Global Trends in Childhood Obesity

1. More than 20.7% of children aged 5–19 years are either overweight or obese.
2. This represents a 14.6% increase since 2010.

Countries with More Than 10 million Children with High BMI

1. China
2. India
3. United States

China's Current Situation

1. Around 62 million children have high BMI.
2. Nearly 33 million children are living with obesity.

9. Policy Suggestions to Prevent Obesity

A. Strengthening Preventive Policies

1. Governments must implement comprehensive food and nutrition policies including–
 1. Healthier school food environments
 2. Restrictions on marketing of unhealthy foods to children
 3. Taxes on sugar-sweetened beverages.

B. Expanding School-Based Nutrition Interventions

1. Strengthening school meal programmes can improve child nutrition and reduce dependence on processed foods.

C. Promoting Physical Activity

1. Governments must promote daily physical activity among children and adolescents.
2. Implementation of WHO global physical activity guidelines is essential.

D. Protecting Breastfeeding Practices

1. Policies supporting exclusive breastfeeding and maternal health are crucial for early-life nutrition.

E. Integrating Obesity Prevention into Primary Healthcare

1. Primary healthcare systems should integrate–
 1. Early detection of obesity
 2. Nutritional counselling
 3. Community awareness programmes.

10. Strategic Opportunity for India

1. India has a significant opportunity to lead regional efforts in obesity prevention by–
 1. Strengthening public health infrastructure
 2. Promoting healthy lifestyles
 3. Integrating nutrition, physical activity, and preventive healthcare policies.
2. Without immediate policy intervention, the rapid rise in childhood obesity could significantly increase the burden of non-communicable diseases in the future.

11. Conclusion

1. The World Obesity Atlas 2026 highlights the alarming rise of obesity among children and adolescents globally and particularly in India.
2. Addressing this challenge requires multi-sectoral action involving health systems, education, food regulation, and lifestyle interventions.
3. Early prevention strategies will be critical to ensuring a healthier future population.

Source- <https://www.thehindu.com/sci-tech/health/india-ranks-second-globally-for-children-living-with-overweight-and-obesity-report/article70700290.ece>

