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What effect does the socioeconomic status and multicultural diversity of households have on children and adolescents becoming obese?

1. INTRODUCTION
2. Obesity in children and adolescence teens is a concern for physicians (Hernandez and Pressler), (Demment et al.).
3. Children obesity is associated with many factors including overeating, family culture, social status, economic condition, etc (Ogden et al.).
4. Effects of socioeconomic status and multicultural diversity on obesity have been proven by established research (Emmett and Jones).
5. Obesity can cause other serious harms to health such as type 2 diabetes (Porter et al.).
6. Improving quality of life, social status of family, economic condition, and dietary control can reduce health risks and obesity (Hernandez and Pressler).
7. BODY
8. Obesity in Childhood and Adolescence
9. Childhood and adolescence obesity is prevalent in most parts of the world (Hasson et al.).
10. Besides over-eating, there are many reasons behind childhood and adolescence obesity (Rogers et al.).
11. The reasons behind childhood and adolescence obesity may be social, economic, cultural, and/or ethnic
12. Evidence supports the effects of socioeconomic and multicultural diversity on childhood or adolescence obesity (Emmett and Jones).
13. Obesity is prone to risks many other diseases (Hernandez and Pressler).
14. Effects of Socioeconomic Status on Childhood and Adolescence Obesity
15. Social and economic factors have an influence on obesity in childhood and adolescence (Porter et al.).
16. Evidence has found that there is a correlation between childhood or adolescence obesity and the socio-economic factors behind its dilemma (Demment et al.).
17. The research indicates that poverty has negative effects on health (Ogden et al.).
18. Children and adolescent teens who have suffered long periods of poverty are more likely to acquire health problems (Pan et al.).
19. Obesity is associated with poverty experienced in childhood and adolescent period repeatedly (Hasson et al.).
20. Minorities and low-income families have a greater tendency that their children and adolescence youngsters continue to gain weight (Hernandez and Pressler).
21. Children and adolescence teens who have accumulated obesity have more chances to acquire diabetes in adulthood (Ogden et al.).
22. Changes in social status and income of the family have adverse effects on children and adolescence teens the most (Demment et al.).
23. Interventions based on community and designed in a way that changes the environment and income status of families have been reported to reduce the negative factors linked with poverty (Hernandez and Pressler)
24. Reduced poverty helps in reducing weight in young adolescents (Bhadoria et al.).
25. A holistic approach that takes into consideration income status and social status will prove more beneficial in treating obesity in children and adolescent teens (Demment et al.)
26. People who have lower resources for their household will have more chances of acquiring obesity rates (Rogers et al.)
27. Effects of Multicultural Diversity on Childhood and Adolescence Obesity
28. Evidence proves that multicultural diversity has effects on childhood and adolescence and people are affected in this particular period with obesity (Ogden et al.).
29. Childhood obesity affects to a great extent the physical health of children as well as their emotional state, social wellbeing, and self-respect (Bhadoria et al.).
30. Childhood obesity is associated with poor living standards experienced by them (Porter et al.).
31. Cultural diversity has diversified effects on children and adolescents (Rogers et al.).
32. Certain maternal factors contribute to weight gain in children, and these factors have a strong impact due to the family culture (Pan et al.).
33. Low-income African-American people’s children tend to accumulate obesity due to the cultural values in their houses, which tend to make them use non-nutritious foods (Xu and Xue).
34. Mothers in low-income families usually do not identify diet qualities due to lack of awareness and education
35. Several other factors like genetic code influence weight gain and slow lifestyle, and genetic inheritance is typical and particular with each family (Bhadoria et al.).
36. Household social position has effects on the health of children and adolescent teens; the white people’s children do not gain weight and are not vulnerable to type 2 diabetes (Xu and Xue).
37. CONCLUSION
38. The multicultural household contexts have varied effects on obesity in children and adolescent teens (Pan et al.).
39. The socioeconomic status has a direct correlation with obesity and other health risks (Emmett and Jones).
40. Unawareness of the nutritional diet can lead to certain cultural values that cause obesity
41. Obesity can be reduced by using a holistic approach of treatment that includes consideration of social, economic, cultural, household, and genetic information of the subject (child or adolescent teen)

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