Can children really make mature decisions on eating habits themselves? The New Zealand medical journal states (1), "The

Student 1: Low Excellence

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school environment is commonly recognized as being an important influence on child and adolescent nutrition." Broadcasting bad food is also a huge health risk as it's blanketing the real health factors that we don't see.

". Children do not have the maturity and cognitive development to make the healthiest food choices particularly in a society where they are heavily targeted by the food industry"(2). Children are very easily influenced by what is around them, so the environment they are brought up in and eating habits introduced are vital to how they approach food in the future. A major issue that contributes to the consumption of unhealthy foods with school fundraising is the fast food firms that seem to be targeting our local schools. NZ Herald (2) states that Domino's pizza has signed up more than 100 schools to its 'lunch programme scheme and is regularly selling its mini pizzas to school canteens across the country. These fast food giants are using the schools in order to advertise and promote their food products. Unfortunately these foods are the not the healthiest- foods like McDonalds, KFC, Domino's and Subway. Subway has between 75-100 schools, mostly primary, regularly buying rolls, cookies, fruit and drinks for their pupils. Domino's pizza also has a sneaky way of making this consumption of eating unhealthily fun for kids, doing things like 'pizza making and eating competitions' and having special lunches where free pizza is brought to the children. (5) The Herald on Sunday spoke to one school which was making 33% profit from the domino's deal. So most schools would be benefitting from this fast food sponsorship. Domino's claims their pizzas to be a nutritional meal; maybe with salad and a piece of fruit but are children really going to make that mature decision to make it a healthy meal? McDonalds is also a huge contributor to this unhealthy fundraising, by involving themselves in school sports teams and sponsoring them, also offering vouchers to eat McDonalds (Free burgers, chips etc.) as prizes at the end of seasons. One prime example was of the start of the soccer season, junior soccer players were given a McDonalds drink bottle and a VIP card for free drinks when burgers were bought at the fast food chain (2). Multinational companies know that children are particularly vulnerable to the persuasion of advertising. Sponsoring is becoming a prominent marketing tool as for people like McDonalds its gradually changing the reputation and view of the food, making people see McDonalds food as a 'healthy fundraiser'. 'It's associating the sponsors' product with healthy positive images, which is particularly important for those products that pose risks to health' (1). In comparison to 5+ a day that spends only the little 2 million a year on advertisements, big food giants like McDonalds spend billions on advertisements per year. (6) According to Ministry of Health statistics (7), over two thirds of children aged 5-14 watched two or more hours of television a day. Now think about how many unhealthy food advertisers will be enforcing their foods to children through television! Studies found that 398 different sponsors on 107 sports group websites. The sites covered rugby, cricket, touchrugby, netball, athletics, tennis, basketball and soccer groups from the national to club level (5). "Some advertisers admit that an important factor in their marketing campaigns is to manipulate children to nag their parents for products" (8) Making their product and its brand a household name means fast food companies ensure young people are 'captured' and become the next generation of consumers. School activities are an ideal way to get children very familiar with the brands. It is a subtle yet very harmful way to sell products, as children are very influenced by what's around them, and school is a huge part of their everyday lives.

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People don't really see the amount of health issues eating unhealthily can bring to someone. Most of all because it's unseen, and when it is, it's often too late. Although it's not just a New Zealand issue; this issue is a world crisis that every country is battling. But New Zealand being a small country the percentage should be lower, and more easily controlled. People tend to think if you're overweight, you're overweight, it's who you are, and it doesn't matter, well unfortunately it does. Even just being overweight causes many problems for your physical health as well as mental well-being. There are certain consequences to eating unhealthy foods, especially for growing and learning children at school. There are many lifelong effects some of which are coronary heart disease, type 2 diabetes, cancers (endometrial, breast and colon), hypertension, dyslipidemia (high cholesterol), sleep apnoea and respiratory problems, osteoarthritis, and health risks if pregnant (3). Risks to children's health include asthma and breathing problems, liver disease, type 2 diabetes, high blood pressure, menstrual problems and problems with bones, joints and muscles. Overweight and obese children are more likely than those of normal weight to experience isolation. stigmatization and bullying, and to have psychological and psychiatric problems (3). This can in turn lead to increased depression. Not feeling socially accepted or stereotypically 'pretty' can have a large impact on your social well-being/social status and quality of life. Links have also been found to dementia – Jessica Smith, a research officer for the Alzheimer's Society says "Anything that reduces blood flow to the brain, such as high blood pressure associated with obesity, could increase the risk of dementia later in life."(11)

As I have previously stated, obesity's leading health problems are diabetes and heart disease, which then leads to many other health issues. One of these issues is peoples increasing inability to sleep – something not so common many years ago. Dr Alister Neill, University of Otago, Wellington is concerned at the lack of treatment for sleep apnoea especially for overweight people – 'sleeplessness and sleep apnoea increase daily, wrecking the lives of many people. We clearly need increased funding for diagnosis and treatment'.(9) But where is that funding going to come from?

People would like to believe that obesity is no one else's business except the person who has the weight problem. That couldn't be further from the truth. The effects of obesity on society must be looked at as a whole. Those who are obese are most likely to have health issues which can roll over easily into work. The people that work with obese people are put in a tough position because overweight people are more likely to have to call off work due to serious health issues that can occur because of being overweight. Health issues that cause you to miss work puts more work on everyone else that you work with. This is one of the worst effects because it puts such a strain on others who are trying to get their own work done. Also healthcare is much more difficult to handle when you are dealing with an obese person. Imagine being part of an ambulance crew that can't even lift you in order to get you emergency care. They may have to call in extra help to get you into the ambulance so you can get the treatment you need. This is a major problem. Ambulance crews have been known to get back injuries trying to help those who are obese get the healthcare they need. Governments have even made hospitals double many of their bed sizes for obese people to fit comfortably. Waikato's new emergency department opens next month and includes a room with a strengthened ceiling to cope with a hoist capable of moving 200kg-plus patients. The hospital has also recently invested in several new larger beds for people who weigh up to 280kg, compared to ordinary beds designed for people weighing up to about 170kg.' (10) What should we do next, double the size of aeroplane seats, car seats or train seats? Imagine the costs to economy; insurance premiums are likely to increase due to chronic health, premature death, disability and other benefit claims.

(References 1 to 11 were listed.)

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