



## Media centre

# Obesity and overweight

Fact sheet N°311

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### Key facts

- Worldwide obesity has more than doubled since 1980.
- In 2008, 1.5 billion adults, 20 and older, were overweight. Of these over 200 million men and nearly 300 million women were obese.
- 65% of the world's population live in countries where overweight and obesity kills more people than underweight.
- Nearly 43 million children under the age of five were overweight in 2010.
- Obesity is preventable.

### What are overweight and obesity?

Overweight and obesity are defined as abnormal or excessive fat accumulation that may impair health.

Body mass index (BMI) is a simple index of weight-for-height that is commonly used to classify overweight and obesity in adults. It is defined as a person's weight in kilograms divided by the square of his height in meters ( $\text{kg}/\text{m}^2$ ).

The WHO definition is:

- a BMI greater than or equal to 25 is overweight
- a BMI greater than or equal to 30 is obesity.

BMI provides the most useful population-level measure of overweight and obesity as it is the same for both sexes and for all ages of adults. However, it should be considered a rough guide because it may not correspond to the same degree of fatness in different individuals.

### Facts about overweight and obesity

Overweight and obesity are the fifth leading risk for global deaths. At least 2.8 million adults die each year as a result of being overweight or obese. In addition, 44% of the diabetes burden, 23% of the ischaemic heart disease burden and between 7% and 41% of certain cancer burdens are attributable to overweight and obesity.

Some WHO global estimates from 2008 follow.

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### Related links

[WHO Global Infobase: data on overweight and obesity, mean BMI, healthy diets and physical inactivity](#)

[WHO Global Database on Body Mass Index \(BMI\)](#)

[WHO Global Strategy on Diet, Physical Activity and Health](#)

[WHO Child Growth Standards](#)

[WHO Department of Chronic Disease and Health Promotion](#)

[WHO Department of Nutrition for Health and Development](#)

- 1.5 billion adults, 20 and older, were overweight.
- Of these 1.5 billion overweight adults, over 200 million men and nearly 300 million women were obese.
- Overall, more than one in ten of the world's adult population was obese.

In 2010, around 43 million children under five were overweight. Once considered a high-income country problem, overweight and obesity are now on the rise in low- and middle-income countries, particularly in urban settings. Close to 35 million overweight children are living in developing countries and 8 million in developed countries.

Overweight and obesity are linked to more deaths worldwide than underweight. For example, 65% of the world's population live in countries where overweight and obesity kill more people than underweight (this includes all high-income and most middle-income countries).

### **What causes obesity and overweight?**

The fundamental cause of obesity and overweight is an energy imbalance between calories consumed and calories expended. Globally, there has been:

- an increased intake of energy-dense foods that are high in fat, salt and sugars but low in vitamins, minerals and other micronutrients; and
- a decrease in physical activity due to the increasingly sedentary nature of many forms of work, changing modes of transportation, and increasing urbanization.

Changes in dietary and physical activity patterns are often the result of environmental and societal changes associated with development and lack of supportive policies in sectors such as health, agriculture, transport, urban planning, environment, food processing, distribution, marketing and education.

### **What are common health consequences of overweight and obesity?**

Raised BMI is a major risk factor for noncommunicable diseases such as:

- cardiovascular diseases (mainly heart disease and stroke), which were the leading cause of death in 2008;
- diabetes;
- musculoskeletal disorders (especially osteoarthritis - a highly disabling degenerative disease of the joints);
- some cancers (endometrial, breast, and colon).

The risk for these noncommunicable diseases increases, with the increase in BMI.

Childhood obesity is associated with a higher chance of obesity, premature death and disability in adulthood. But in addition to increased future risks, obese children experience breathing difficulties, increased risk of fractures, hypertension, early markers of cardiovascular disease, insulin resistance and psychological effects.

## Facing a double burden of disease

Many low- and middle-income countries are now facing a "double burden" of disease.

- While they continue to deal with the problems of infectious disease and under-nutrition, they are experiencing a rapid upsurge in noncommunicable disease risk factors such as obesity and overweight, particularly in urban settings.
- It is not uncommon to find under-nutrition and obesity existing side-by-side within the same country, the same community and the same household.

Children in low- and middle-income countries are more vulnerable to inadequate pre-natal, infant and young child nutrition. At the same time, they are exposed to high-fat, high-sugar, high-salt, energy-dense, micronutrient-poor foods, which tend to be lower in cost. These dietary patterns in conjunction with low levels of physical activity, result in sharp increases in childhood obesity while undernutrition issues remain unsolved.

## How can overweight and obesity be reduced?

Overweight and obesity, as well as their related noncommunicable diseases, are largely preventable. Supportive environments and communities are fundamental in shaping people's choices, making the healthier choice of foods and regular physical activity the easiest choice, and therefore preventing obesity.

At the individual level, people can:

- limit energy intake from total fats;
- increase consumption of fruit and vegetables, as well as legumes, whole grains and nuts;
- limit the intake of sugars;
- engage in regular physical activity;
- achieve energy balance and a healthy weight.

Individual responsibility can only have its full effect where people have access to a healthy lifestyle. Therefore, at the societal level it is important to:

- support individuals in following the recommendations above, through sustained political commitment and the collaboration of many public and private stakeholders;
- make regular physical activity and healthier dietary patterns affordable and easily accessible to all - especially the poorest individuals.

The food industry can play a significant role in promoting healthy diets by:

- reducing the fat, sugar and salt content of processed foods;
- ensuring that healthy and nutritious choices are available and affordable to all consumers;
- practicing responsible marketing;
- ensuring the availability of healthy food choices and supporting regular physical activity practice in the workplace.

## WHO response

Adopted by the World Health Assembly in 2004, the WHO Global Strategy on Diet, Physical Activity and Health describes the actions needed to support healthy diets and regular physical activity. The Strategy calls upon all stakeholders to take action at global, regional and local levels to improve diets and physical activity patterns at the population level.

WHO has developed the 2008-2013 *Action plan for the global strategy for the prevention and control of noncommunicable diseases* to help the millions who are already affected cope with these lifelong illnesses and prevent secondary complications. This action plan aims to build on, the WHO Framework Convention on Tobacco Control and the WHO Global Strategy on Diet, Physical Activity and Health. The action plan provides a roadmap to establish and strengthen initiatives for the surveillance, prevention and management of NCDs.