



## Rising Obesity Burden in India

**For Prelims:** [World Health Organization \(WHO\)](#), [Body Mass Index \(BMI\)](#), [National Family Health Survey \(NFHS\)-5](#), [Non-communicable Diseases \(NCDs\)](#), [Ultra-Processed Foods \(UPF\)](#), [Fit India Movement](#), [CSR](#).

**For Mains:** Rising cases of obesity, causes, associated concerns and way forward.

[Source: TH](#)

### Why in News?

The **Prime Minister** expressed concern over the **rising obesity**, especially among children, and urged people to adopt a **healthier lifestyle**.

[Click Here to Read: Reevaluating Obesity Metrics](#)

### What is Obesity?

- **About:** The [World Health Organization \(WHO\)](#) defines obesity as abnormal or **excessive fat accumulation** that poses health risks, with a [Body Mass Index \(BMI\)](#) of **25 or above** classified as **overweight** and **30 or above** as **obese**.
  - BMI is a basic method to **assess** whether an adult has a **healthy weight**, calculated by dividing weight in kilograms by height in meters squared (kg/m<sup>2</sup>).
- **Obesity Statistics:**
  - **India:**
    - **NFHS-5:** As per the [National Family Health Survey \(NFHS\)-5 \(2019-21\)](#), **24%** of Indian **women** and **22.9%** of Indian **men** are **overweight or obese**.
      - As per NFHS-5 (2019-21), the percentage of **overweight children under five** increased to **3.4% from 2.1%** in NFHS-4 (2015-16) at the all-India level.
      - Overweight and obesity rates vary from **8% to 50% across states, genders, and rural-urban areas**.
    - **The Lancet:** The prevalence of **abdominal obesity** (assessed through waist circumference) in India is **40% in women and 12% in men**.
      - Among adults over 20, **1 in 3 (35 crore)** has abdominal obesity, **1 in 4 (25 crore)** has general obesity, and **1 in 5 (21 crore)** has **high cholesterol**.
  - **Global:** From **1990 to 2022**, obesity in children and adolescents (5-19 years) grew from **2% to 8%**, a fourfold increase.
    - In **adults (18+ years)**, it more than doubled from **7% to 16%**.
- **Associated Health Risks:** Obesity, the **mother of all diseases**, significantly increases the risk of various [non-communicable diseases \(NCDs\)](#).
  - **Cardiovascular Diseases (CVDs):** Indians experience CVDs like heart attacks, and

- hypertension **at least 10 years earlier** than people in other countries.
- **Diabetes:** India has the highest number of diabetes cases (**101 million**), and obesity increases the risk of **Type 2 diabetes** by causing **insulin resistance**.
- **Cancer:** Obesity is linked to cancer, with India's cases expected to rise from **14.6 lakh in 2022 to 15.7 lakh by 2025**.
- **Joint Disorders:** Excess weight **strains joints**, increasing the risk of degenerative diseases like **knee osteoarthritis and back pain**.
- **Psychosocial Impact:** Stigma and bullying cause **low self-esteem, depression, anxiety**, and impact school performance and quality of life in children.
- **Economic Implications:** In 2019, obesity cost India **USD 28.95 billion (Rs 1,800 per capita), or 1.02% of GDP**, due to healthcare expenses and lost productivity.
  - By **2030**, India's obesity-related economic burden may rise to **Rs 4,700 per capita or 1.57% of GDP**.
  - The Economic Survey 2024-25 recognizes obesity as a **health challenge** and suggests **higher taxes on ultra-processed foods (UPF)**.

Click Here to Read: [What are Overweight, Thinness, and Obesity?](#)

## What are the Causes of Obesity?

- **Unhealthy Diets:** Increased consumption of **High Fat, Salt, and Sugar (HFSS) foods**, and **UPF** high in unhealthy fats.
- **Low Physical Activity:** According to The Lancet, sedentary lifestyles from **office jobs and screen time** leave nearly half of Indians insufficiently active.
- **Poor Urban Infrastructure:** Lack of safe **cycling lanes, shrinking green spaces**, and traffic congestion discourage active commuting and outdoor exercise.
- **Air Pollution:** It causes **inflammation**, raises cardio-metabolic risks, promotes **fat accumulation**, and discourages outdoor activities.
- **Socioeconomic Barriers:** Public distribution systems mainly provide **staple grains (rice and wheat)**, leading to **imbalanced diets** while high costs limit nutritious food (fruits, vegetables, and pulses) for low-income groups.
  - India has moved from **'food or calorie deficit'** to becoming **'food or calorie sufficient (with inequitable distribution)**, as 55% (78 crore) can't afford a healthy diet, and 40% lack adequate nutrients.

## What are Government Initiatives for Obesity Prevention?

- [National Programme for Prevention and Control of Non-Communicable Diseases \(NP-NCD\)](#)
- [Ayush Holistic Wellness Centre](#) (Specialized Ayurvedic Care, Ayurswasthya Yojana,)
- [Mission Poshan 2.0](#)
- [Fit India Movement](#)
- [Eat Right Mela](#)

## Way Forward

- **Revamping Nutrition Intervention:** Reimagine India's nutrition efforts as **'Suposhan Abhiyan,'** focusing on **mindful underfeeding** (reducing overconsumption of unhealthy food) and proper **micronutrient supplementation**.
  - The Japanese follow the **80% rule (hara hachi bu)** i.e., they **stop eating** when their stomach is **nearly full**. India can adopt such practices to **address the obesity problem**.
- **Public Awareness:** Obesity should be recognized as a **public health challenge** not just a personal issue.
  - Public campaigns must highlight its health risks and emphasize **prevention, care, and**

management like other **chronic diseases**.

- **Regulating Diets:** Higher **taxes** should be imposed on **HFSS and UPFs**, while **subsidies for healthier food items like milk & eggs** should enhance affordability.
  - **CSR funds** should be allocated to promoting healthy eating habits and active lifestyles.
- **Obesity Screening:** Mandatory **height, weight, and waist measurements** in health check-ups especially at **primary health centers (PHCs)**, with doctors addressing **obesity risks** in every consultation.
- **School-Based Initiatives:** Make **healthy eating, balanced diets, and processed food risks** part of the curriculum. Awareness about **label reading** for informed food choices.
  - School canteens should offer **healthy food and avoid HFSS items**.
  - Adopt global models like **Japan's school dietitian program** and implement '**health-promoting schools**' initiatives.

**Drishti Mains Question:**

Discuss the rising challenge of obesity in India, its causes, and a multi-sectoral strategy to address it.

**UPSC Civil Services Examination, Previous Year Question (PYQ)**

**Prelims**

**Q. With reference to the provisions made under the National Food Security Act, 2013, consider the following statements: (2018)**

1. The families coming under the category of 'below poverty line (BPL)' only are eligible to receive subsidised food grains.
2. The eldest woman in a household, of age 18 years or above, shall be the head of the household for the purpose of issuance of a ration card.
3. Pregnant women and lactating mothers are entitled to a 'take-home ration' of 1600 calories per day during pregnancy and for six months thereafter.

**Which of the statements given above is/are correct?**

- (a) 1 and 2 only
- (b) 2 only
- (c) 1 and 3 only
- (d) 3 only

**Ans: (b)**

**Mains**

**Q. Appropriate local community-level healthcare intervention is a prerequisite to achieve 'Health for All' in India. Explain. (2018)**