

## Obesity Data in the NLSY79 Child/Young Adult Surveys

The NLSY79 Child/Young Adult surveys provide researchers with the opportunity to study obesity from birth to adulthood. The Child data, and the related information on maternal and family history from the mother's longitudinal record, can be used to investigate the connections between body weight, maternal characteristics, childhood experiences, and a variety of cognitive, educational, socio-emotional, health, or behavioral outcomes from childhood through adolescence into adulthood.

All NLSY data can be accessed free of charge at [www.nlsinfo.org/investigator](http://www.nlsinfo.org/investigator).

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**Birthweight & growth during childhood.** The height and weight of children in the NLSY79 surveys have been recorded in every round of the NLSY79 child survey, from 1986-2012. Mothers also report each child's birthweight, whether the child was breast fed, when the child first began eating solid food, and whether he or she experienced serious feeding problems during the first year of life. The child file includes a series of questions, for younger children, about the degree to which the child is allowed choice in breakfast and lunch foods, how often the child eats with both parents, and whether the child eats what he or she is told. Children aged 10 and older report on television viewing habits, the amount of time spent playing video games, and whether they engage in sports or a physical activity after school.

**When are the children measured?** At the time of each child interview, the child's height and body weight are measured by the interviewer or recorded as reported by the mother.

**How are the children measured?** The method of report, tape measure, scale, mother, or child, is also recorded. Starting in 2006, children also self-report their weight when they reach age 10-14.

**Body weight, nutrition, sleep and self-image in young adulthood.** NLSY79 children who have reached young adult age 15 years and older are asked their height and weight in each survey round. Starting in 2004, young adult respondents have provided information on possible factors in obesity, such as their vegetable and fruit consumption, exercise, computer and video game usage, and amount of sleep. Young adults report any eating disorder when asked if they have received psychological treatment in the past year. Questions about self-perception of weight and what respondents plan to do about their weight (also found in the NLSY97) were introduced into the survey beginning in 2006. Young adult mothers report about weight gain or loss during pregnancy, as well as the birth weight and length of their children. Beginning in 2010, male respondents are also asked about the birth weight of their children. Starting in 2010, all young adult parents are asked the current height and weight of their children with whom they have contact.

**Mothers' weight history.** NLSY79 respondents first reported their weight in 1981 and then in the majority of the subsequent survey rounds, including the latest round, released in 2012. Height was first reported in 1981 and then in several later rounds, in a variety of formats, including the latest round. In recent years, respondents are asked whether they are trying to lose weight, gain weight, or maintain the same weight (also asked of the Young Adult children). Female respondents with children have given information on their weight before pregnancy and their weight at the time of delivery. Recent survey years also include information on NLSY79 respondents' reported activity level and behavior related to nutrition.

## A sampler of recent intercohort research on obesity from the NLSY79 Child/Young Adult:

**Childhood body weight followed into adolescence:** Huang, David Y.C., H. Isabella Lanza and M. Douglas Anglin. "Trajectory of Adolescent Obesity: Exploring the Impact of Prenatal to Childhood Experiences." *Journal of Child and Family Studies* 23,6 (August 2014): 1090-1101.

This study examined longitudinal associations of prenatal exposures, as well as childhood familial experiences, with obesity in a national sample of 5,156 adolescents ages 10 to 18. Higher maternal weight, maternal smoking during pregnancy, lower maternal education, and lack of infant breastfeeding were found to be contributors to elevated adolescent obesity risk in early adolescence. Maternal age, high child birth weight, and family income exhibited long-lasting impact on obesity risk over time throughout adolescence. Childhood familial experiences, such as family rules and parental engagement, were found to lower adolescent obesity risk, but excessive television viewing heightened adolescent obesity risk.

**Maternal weight before pregnancy:** Tanda, Rika, Pamela J. Salsberry, Patricia Benton Reagan and Muriel Z. Fang. "The Impact of Prepregnancy Obesity on Children's Cognitive Test Scores." *Maternal and Child Health Journal* 17,2 (February 2013): 222-229.

Data for 3,412 US children aged 60–83 months from the National Longitudinal Survey of Youth 1979 Mother and Child Survey were used to examine the association between maternal prepregnancy obesity and math and reading scores of children at early primary school age. Controlling for intrauterine, family background, maternal and child factors, the authors found that children of obese women had lower reading and math scores. Cognitive test score was associated with stimulating home environment, household income, maternal education, and maternal cognitive skills. Children who live in disadvantaged postnatal environments may be most affected by the effects of maternal prepregnancy obesity.

**Social Inequality & Policy:** "Weight and Social Mobility: Taking the Long View on Childhood Obesity," 1/2015.

The Brookings Institution used the NLSY79 Child and Young Adult to explore the relationship between socioeconomic status and weight trajectories from childhood into adolescence. Research by Joanna Venator, Richard V. Reeves, and Kimberly Howard found that adolescents from families with lower income and education were more likely to have a higher BMI and an increased risk of obesity. When they followed trends in body weight into adulthood, they reported that economic effects were less clear, but that adult risk of obesity by income status persisted. They also used the NLSY79 to reveal gendered differences in how family income affects adolescent weight.

**Childhood Poverty.** Margerison-Zilko, Claire E. and Catherine Cubbin. "Dynamic Poverty Experiences and Development of Overweight in a Prospective Cohort of US Children Aged 4-14 Years." *Obesity* 21,7 (July 2013): 1438-1445.

Using data from 1986-2008 for a sample of 5,613 NLSY79 children aged 4-14, the authors compared the risk of developing overweight among children from never poor households, transient one-time poor households, recurrent poor households, and persistent poor households that remained poor for at least 4 consecutive years. They examined interactions by race/ethnicity, gender, and age and found that, compared with children from never poor households, children who experienced transient or persistent household poverty were a reduced risks of become overweight.

**For more NLS research, access the annotated, searchable NLS bibliography at: [www.nlsbibliography.org](http://www.nlsbibliography.org)**

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