Patrones sociales de la obesidad en España: Una revisión sistemática de la relación del nivel de educación y obesidad

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PALABRAS CLAVE

Clase social; Epidemiología; Sobrepeso; Obesidad; Nivel educativo; Revisión.

RESUMEN

Introducción: En países de altos ingresos de todo el mundo, parece haber una asociación inversa entre el nivel educativo y la obesidad. Sin embargo, la literatura sobre esta asociación en España está desordenada y desigual.

Material y Métodos: Examinamos sistemáticamente los estudios en inglés o en español de esta asociación en España de 10 bases de datos de todos los períodos de tiempo disponible.

Resultados: La búsqueda identificó veinticuatro estudios. Tanto en estudios representativos a nivel nacional como sub-nacional, las mujeres con menos educación tenían mayores probabilidades de obesidad que sus homólogas más educadas. Los hombres, a pesar de exhibir una mayor variabilidad en la relación del nivel educativo y obesidad, también demostraron un patrón social similar de peso corporal en muchos estudios. Los niveles más bajos de educación mostraban mayor probabilidad de padecer obesidad en comparación con sus contrapartes de mayor nivel de instrucción. Estas asociaciones, tanto en hombres como en mujeres, a pesar de existir algunas variaciones regionales, eran bastante consistentes a través del tiempo y lugar.

Discusión y conclusiones: Animamos a los futuros investigadores para avanzar hacia estimaciones imparciales y más coherentes de la asociación entre nivel educativo y la obesidad mediante el uso de exámenes físicos para la medición de talla y peso, el control de un conjunto más robusto de los posibles factores de confusión, y la exploración de potenciales factores de modificación de la asociación. Además, cuando sea posible, animamos a los investigadores a emplear diseños prospectivos de estudio que faciliten la inferencia causal en relación con esta asociación.
ABSTRACT

Introduction: In high-income countries around the world, there appears to be an inverse association between educational attainment and obesity. However, the literature about this association in Spain remains disorganized and disparate.

Material and Methods: We systematically reviewed peer-reviewed English- or Spanish-language studies of this association in Spain from 10 databases from all periods of time available.

Results: Our search identified twenty-four studies. In both nationally representative and sub-national studies, women with less education had higher odds of obesity than their more-educated counterparts. Men, despite exhibiting greater variability in the education-body weight relationship, also demonstrated a similar social patterning of body weight in many studies, with those at lower levels of educational attainment having higher odds of obesity relative to their more-educated counterparts. These associations in men and women were fairly consistent across time and place, though some regional variations did exist.

Discussion and conclusions: We encourage future researchers to move towards more meaningful, unbiased estimates of the association between educational attainment and obesity by measuring height and weight with physical exams, controlling for a more robust set of possible confounders, and exploring potential modifying factors of the association. Additionally, when possible, we encourage researchers to employ prospective study designs that facilitate causal inference with respect to this association.

INTRODUCTION

The epidemic of obesity is progressing throughout Europe, in line with increases in obesity in diverse contexts throughout the world. Spain is experiencing increases in childhood obesity, adult obesity, and the prevalence of morbid obesity, and the social environment appears to play a role.

Obesity is a European public health concern for several reasons. Primarily, it is a central predictor of cardiovascular disease, Europe’s most common cause of death. Yet obesity also contributes to morbidity and mortality through other diseases, including diabetes mellitus, cancer, stroke, and depression. It has had substantial financial implications, as health systems throughout Europe have witnessed increased spending on diseases attributable to obesity. Indirectly, obesity has also been shown to contribute to other social concerns, including the increasing costs of infrastructure and development, and even climate change.

Given the important health and social implications of obesity, there has been considerable interest in characterizing the epidemic and exploring avenues for intervention. The association between education and obesity represents one such avenue. There are several mechanisms by which education, a robust measure of socioeconomic status, may predict obesity risk. Education is an important predictor of income and wealth, which provide the material resources that improve access to high quality, nutritious foods. Moreover, income and wealth predict housing locations, and research has demonstrated a link between neighborhood and obesity risk. In part, this is because lower income neighborhoods may have a higher density of fast food outlets, which predict poor quality diets, and a lower density of parks and public spaces, which deter leisure-time physical activity. These neighborhoods may also be more disordered and be perceived by residents as less safe, which may limit physical activity as well. Education is an important predictor of access to health information and perceived agency over personal health. The less-educated may not have the literacy skills required to readily access health information, nor the numeracy skills to understand advice from health media. This lack of information is likely to shape decisions about food and physical activity in important ways. For example, a recent study showed that those without educational qualifications consumed less fruits and vegetables and more energy-dense food compared to those who were more educated. Importantly, unlike some health determinants, there are many ways to intervene to increase educational attainment, and government can play a large role.

Evidence from across Europe has demonstrated a robust association between education and obesity. For example, a recent systematic review from the United Kingdom confirmed the association between lower education and higher risk for obesity. Similar findings have come from France, Finland, and Denmark, among other European countries. Twenty-four studies have investigated the association between education and obesity in Spain, as well. However,
despite its growth in recent years, this body of research remains disorganized and disparate. Here, we systematically reviewed the literature regarding the education-obesity relationship in Spain to better characterize the relationship in this context, to appraise the methodological strength of this literature, and to highlight future directions.

**MATERIAL AND METHODS**

For the purposes of this systematic review, we searched for articles that considered the association between educational attainment and body weight that were written in English, French, Portuguese, or Spanish stored in myriad disciplinary databases (PubMed, the Cochrane Library, and LILACS (public health), PsycINFO (psychology), ERIC (education), IBSS (International Bibliography of the Social Sciences), Social Sciences Citation Index, Social Services Abstracts, Sociological Abstracts, and EconLit). (further details available upon request) In addition to the articles that were identified through this systematic search, we also examined the list of references of each of these articles to identify any additional relevant articles. All research designs were eligible for inclusion in the review, and the time period for study inclusion was limited only by the databases searched. Exclusion criteria included a lack of peer review, if studies considered only parental education instead of an individual’s own educational status (which, in practice, limited this study to adult populations), and if papers focused on time trends rather than specific associations (e.g., Gutierrez-Fisac et al., 2000) These papers were collected as part of a larger project (Cohen et al., in press); for the purposes of this paper, we then restricted our scope to papers that focused on Spanish populations (figure 1). A standard data abstraction form was used to collect relevant information from the papers, overseen by the primary author.

**RESULTS**

Twenty-four studies met our inclusion criteria (table 1). All (100%) report associations based on cross-sectional data. Study populations ranged from being representative of the entire Spanish population or subpopulations within Spain, to representative samples of multiple provinces, to populations within a single province or city, to cohorts of university graduates. One ecological study was also conducted. Most studies stratified their results by gender, given that many studies elsewhere have found that the relationship between education and obesity varies by gender (e.g., McLaren, 2007).

![Figure 1. Selection of papers for inclusion in the systematic review.](image-url)
Most of the studies reviewed only adjusted for age and gender as potential confounders of the education-obesity relationship. Out of the studies that adjust for additional confounders, many included metrics related to health behaviors (like smoking or drinking), nutrition and/or physical activity, or demographic factors, such as marital status. By including these variables, these studies may provide less biased estimates of the direct relationship between educational attainment and obesity. At the same time, however, health behaviors and other adult demographic characteristics may mediate the education-obesity relationship, and adjusting for these behaviors may actually attenuate estimates of the true association between education and obesity, so over-adjustment is a concern. Several studies utilized anthropometric measures of height and weight, which may provide more reliable estimates than studies relying solely upon self-reported measures.

The studies used data from multiple decades (1980s-2010s), which may provide more reliable estimates than the studies relying solely upon self-reported measures.

### Summary of studies reviewed

<table>
<thead>
<tr>
<th>First author (year)</th>
<th>Study design</th>
<th>Region in Spain</th>
<th>Number of participants</th>
<th>Year data were collected</th>
<th>Covariates controlled for</th>
<th>Direction of observed association</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcácer et al. (2008)</td>
<td>Cross-sectional</td>
<td>Navarra</td>
<td>5063 women, 3643 men</td>
<td>2003</td>
<td>age, alcohol consumption, marital status, smoking status, total energy intake, leisure time, physical activity, energy-adjusted fiber intake, soft drinks, fast food</td>
<td>- for women, - for men</td>
</tr>
<tr>
<td>Aranceta et al. (2003)</td>
<td>Cross-sectional</td>
<td>Spain</td>
<td>9885 total</td>
<td>2000</td>
<td>age</td>
<td>- for women, - for men</td>
</tr>
<tr>
<td>Cirera et al. (1998)</td>
<td>Cross-sectional</td>
<td>Murcia</td>
<td>1577 women, 1514 men</td>
<td>1992</td>
<td>age, hypertension, current smoker, leisure time physical activity</td>
<td>for women 0 for men</td>
</tr>
<tr>
<td>García-Medizábal et al. (2009)</td>
<td>Cross-sectional</td>
<td>Galicia</td>
<td>1298 total</td>
<td>2004</td>
<td>(none)</td>
<td>- for women</td>
</tr>
<tr>
<td>Gutiérrez-Fisac et al. (1996)</td>
<td>Cross-sectional</td>
<td>Spain</td>
<td>30040 total</td>
<td>1987, 1993</td>
<td>age, marital status, use of nonmedical medications, presence of chronic condition, tobacco consumption, physical activity at work, leisure time physical activity</td>
<td>for women 0 for men</td>
</tr>
<tr>
<td>Gutiérrez-Fisac et al. (1999)</td>
<td>Cross-sectional ecological</td>
<td>Spain</td>
<td>50 provinces</td>
<td>1991-1993</td>
<td>age, energy intake, sedentary lifestyle</td>
<td>- for women 0 for men</td>
</tr>
<tr>
<td>Martín et al. (2008)</td>
<td>Cross-sectional</td>
<td>Andalucía</td>
<td>2319 total</td>
<td>(not provided)</td>
<td>(none)</td>
<td>- for women 0 for men</td>
</tr>
<tr>
<td>Martínez-Ros et al. (2001)</td>
<td>Cross-sectional</td>
<td>Murcia</td>
<td>3091 total</td>
<td>1991-1993</td>
<td>age, employment status, type of residence</td>
<td>- for women 0 for men</td>
</tr>
<tr>
<td>Mataix et al. (2005)</td>
<td>Cross-sectional</td>
<td>Andalucía</td>
<td>1474 women, 1767 men</td>
<td>1998-2000</td>
<td>gender, age, physical exercise, smoking, alcohol consumption</td>
<td>for women 0 for men</td>
</tr>
<tr>
<td>Soriguer et al. (2004)</td>
<td>Cross-sectional</td>
<td>Andalucía</td>
<td>1226 total</td>
<td>(not provided)</td>
<td>age, gender, smoking, alcohol consumption, physical activity</td>
<td>for women 0 for men</td>
</tr>
<tr>
<td>Sotillo et al. (2007)</td>
<td>Cross-sectional</td>
<td>Andalucía</td>
<td>394 total</td>
<td>1998-2000</td>
<td>(none)</td>
<td>- for women 0 for men</td>
</tr>
<tr>
<td>Tur et al. (2005)</td>
<td>Cross-sectional</td>
<td>Balearic Islands</td>
<td>1200 total</td>
<td>1999-2000</td>
<td>For women: age, marital status, socioeconomic status, frequent drinking, work-related physical activity, leisure physical activity. For men: age, marital status, regular practice of sports, physical activity at work, physical activity at leisure time, sleeping time, television viewing time, smoking status</td>
<td>- for women 0 for men</td>
</tr>
<tr>
<td>Vioque et al. (2000)</td>
<td>Cross-sectional</td>
<td>Valencia</td>
<td>1772 total</td>
<td>1994</td>
<td>gender, age, sports participation</td>
<td>- for women 0 for men</td>
</tr>
<tr>
<td>Ortiz-Moncada et al. (2011)</td>
<td>Cross-sectional</td>
<td>Spain</td>
<td>26204 total</td>
<td>2006-2007</td>
<td>gender, age, social class, marital status, monthly income</td>
<td>- for women 0 for men</td>
</tr>
<tr>
<td>Gutiérrez-Fisac et al. (2012)</td>
<td>Cross-sectional</td>
<td>Spain</td>
<td>12883 total</td>
<td>2008-2010</td>
<td>age</td>
<td>- for women 0 for men</td>
</tr>
<tr>
<td>Roskam et al. (2010)</td>
<td>Cross-sectional</td>
<td>Spain</td>
<td>7741 total</td>
<td>2001</td>
<td>age</td>
<td>- for women 0 for men</td>
</tr>
</tbody>
</table>

*Direction of observed association refers to the association between education and obesity. An inverse association is indicated by "-", a positive association is indicated by "+", and no association is indicated by "0".*
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3,44), but the overall trends were consistent: across these studies, with only one exception (a positive association26), an inverse association between educational attainment and obesity was observed among Spanish women21-29,31,32,34,37,40,44. Most studies also found inverse associations among men21-25,28,31,32,37,40,43, although some studies found a null association26,29,34,38,42,44. Among the studies that did not stratify by gender, inverse associations were uniquely observed26,31,35,38,39. Comparative studies across multiple time points and age cohorts28,41 revealed that important age, period, and cohort effects may exist for the relationship between education and obesity in Spain. A consistent, strong relationship between educational attainment and obesity existed across these studies, as illustrated by the magnitude of the published measures of association. In Spain, a substantial proportion of obesity is attributable to having less than a university education, although the point estimates were imprecise: 55.1% (95%CI: 21.3, 78.2) of obesity in women in the mid-1990s, and 19.8% (95%CI: 0.2, 40.2) of obesity among men, was attributable to less education39.

In studies of nationally representative Spanish populations, a dose-response relationship between education and obesity was evident: as compared to those with tertiary education, those without education had 2.77 (95%CI: 2.34, 3.28) times the odds of obesity, those with primary education had 1.89 (95%CI: 1.67, 2.15) times the odds of obesity, and those with secondary education had 1.27 (95%CI: 1.12, 1.43) times the odds of obesity 39. When education was defined as illiteracy versus literacy, those who were illiterate had a 1.05 times higher odds (p=0.04) of obesity than those who were literate39. In a study of residents of four different Spanish provinces, women with low education had 2.36 (95% confidence interval: 2.29, 2.42) times the odds of obesity compared to women with high education, and among men, those with low education had 1.80 (95%CI: 1.78, 1.81) times the odds of obesity compared those with high education39.

We also considered sub-national studies, many of which were conducted in Andalucia. In one Andalucian study, compared to those with a university education, those with a secondary education had 1.77 (95%CI: 1.23-2.55) times the odds of obesity, while those with a primary education had 2.45 (95%CI: 1.78-3.39) times the odds of obesity39. This was consistent with another Andalucian study which found that adults with primary or no schooling had 5.02 (95%CI: 1.05, 24.04) times the odds of obesity as those with a university education40. In Cadiz (a locality within Andalucia), a statistically significant association was observed only among women, where, compared to those with a university education, women with no formal education had 2.12 (95%CI: 1.19, 3.77) times the odds of overweight, and women with primary education had 2.45 (95%CI: 1.50, 4.01) times the odds of overweight41. In Malaga (also within Andalucia), a dose-response relationship was found: as compared to those with a university education, the odds of obesity among those with secondary education was 2.3 times higher, the odds of obesity for those with primary education was 3.0 times higher, and the odds of obesity for those who were illiterate was 3.8 times higher42.

There were four other regional studies. In a Murcia-based study, there was no association between education and obesity for men, but the results for women were similar to other studies, with those with a primary education having 2.26 (95%CI: 1.43, 3.57) times the odds of overweight as those with a university education. The relationship was even stronger for those who were illiterate as compared to the university-educated (OR=3.22, 95%CI: 1.97-5.27)43. In Valencia, a dose-response relationship also existed; as compared to those with less than a primary education, those with a primary education had 0.60 (95%CI: 0.40, 0.89) times the odds of obesity, and those with secondary education and above had 0.49 (95%CI: 0.31, 0.76) times the odds of obesity44. Similarly, in the Balearic Islands, men with low education had 4.15 (95%CI: 1.33, 12.94) times the odds of obesity as men with high education, and women with low education had 2.97 (95%CI: 1.58, 5.55) times the odds of obesity as women with high education45. In Catalonia, educational attainment and obesity were inversely associated among women in both the 1990s and 2000s and for men in the 1990s, although the association was no longer statistically significant for men in the 2000s46.

**DISCUSSION**

Our review of twenty-four studies of the relationship between educational attainment and body weight in Spain found consistent inverse associations among women and a mixture of inverse and null associations among men. In both nationally representative and sub-national studies, women with less education had higher odds of obesity than their more-educated counterparts. Men, despite exhibiting greater variability in the education-obesity relationship, also demonstrated social patterning of overweight and obesity in many studies, with those at lower levels of educational attainment having higher odds of obesity relative to their more-educated counterparts. Importantly, these trends were fairly consistent both across time and types of study designs, providing further support that the relationship between education and obesity is both robust and persistent.

It is important to note that the associations observed between education and obesity in the studies reviewed above were not unique to the Spanish population, nor to European populations more broadly. An inverse association between education and obesity among women has been well-established in the literature, in regions ranging from Europe43, to Africa46 and Latin America47. For men, the associations
have been less consistent, with several studies finding no social patterning of overweight and obesity, and others finding negative, positive, or U-shaped relationships. These relationships likely vary according to the level of economic development in each particular study setting, with predominantly positive associations between education and obesity at lower levels of economic development gradually transitioning to negative associations at higher levels. The extent to which these patterns exist within a single country has not been extensively studied in the literature. Given variations in economic development across Spain, this is one possible direction for future research.

There are several methodological limitations to the literature assessing the relationship between educational attainment and obesity in Spain. First, each of the studies reviewed here was cross-sectional in nature, precluding any assessments of temporality or the capacity to rule out reverse causality, which others have hypothesized. Second, in the United States, racial or ethnic group and immigration status have both been found to modify the relation between educational attainment and obesity, but no studies to date in Spain have considered effect modification in this regard. Third, only one nationally representative study both controlled for a broader array of potential confounders (e.g., social and nutritional factors, beyond age and gender) and used anthropometrically measured height and weight when analyzing the association between educational attainment and obesity. Fourth, while both national and regional findings were relatively consistent, there are several regions in Spain that have not been studied, leaving an incomplete understanding of regional variation in this association.

In line with these limitations, we offer several directions for future research. First, when possible, investigators are encouraged to utilize longitudinal study designs to enable causal inference regarding the relation between education and obesity in this context. Second, investigators interested in the mechanisms underlying the education-obesity association might consider effect modification of this association by factors such as immigration status or ethnicity. Third, nationally representative samples are important to preclude selection bias that may influence the association between education and obesity at lower levels of economic development gradually transitioning to negative associations at higher levels. The extent to which these patterns exist within a single country has not been extensively studied in the literature. Given variations in economic development across Spain, this is one possible direction for future research.

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CONFLICTS OF INTEREST

The authors state that there are no conflicts of interest in preparing the manuscript.

BIBLIOGRAPHY


