

## **Negligence and invisibility: perceptions on obesity in the school context**

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### **Abstract**

*The aim of this study was to investigate how it manifests obesity in the school context. The study included 21 obese and 10 directors. Research instruments used were semi-structured interviews with adolescents and questionnaire with the directors. The results show that there is little dialogue between the families of obese and school; the directors are unaware of the treatments performed for obesity by his students, directors attribute the responsibility of feeding the nutritionist at the Department of Education; bullying was presented as a factor in the school context as well, obesity is not regarded as a disease or as a factor of social exclusion, the educators also disclaim any responsibility or interference in this matter. Finally, it appears that obese adolescents are neglected in the context studied.*

**Keywords:** (Virtual Library in Health (BVS )): obesity, adolescents, school.

### **1. Introduction**

With the significant increase in overweight and obesity rates in Brazil, as well as in economically developed and developing countries, strategies for the control of chronic noncommunicable diseases are currently being defined, one of which is the promotion of healthy eating and the encouragement of practice of physical activities<sup>1</sup>. Behavioral changes from technological progress and access to fast foods have altered the patterns of physical activity and the nutritional status of individuals, leading to overweight<sup>2</sup>. Thus, the school appears as a coadjutant in the treatment and control of this epidemic.

In the 1930s, a national education system was established in Brazil, but only after the constitution of 1934 the Brazilian State was appointed as responsible for the education of the Brazilian population. With the creation of the Ministry of Education and Public Health in 1930, the naturalized conjugation between education and public health was immediately established. In the configuration of the modern educational institution, the task of education, hygienic and alimentary measures aiming at physical and moral health are combined, forming a veritable crusade on children's bodies<sup>3</sup>.

In fact, the level of people's health reflects the way they live, in a dynamic interaction between individual potentialities and living conditions. Thus, school plays a prominent role in the training of citizens for a healthy life, since the degree of schooling has a proven association with the level of health of individuals and population groups<sup>4</sup>. Mohr and Schall<sup>5</sup>, discussing health education in Brazilian elementary schools, emphasize the lack of preparation of teachers in this area of knowledge, the lack of quality of most textbooks available and the scarcity of alternative materials.

Despite this dissociation between theory and practice, it is observed that the government's proposals

for health education presuppose measures, exercises, the elaboration of new snacks and, above all, the diffusion of a lean and healthy life<sup>6</sup>. Especially in the last decade, good form and lean body begin to take an important place in school concerns. Although health has never ceased to be an important focus in school, since the actions of measuring and weighing the bodies were constitutive of the pedagogies hygienists during the nineteenth and twentieth centuries<sup>7</sup>.

We now see a more incisive shift towards the production of lean and healthy bodies. Soares<sup>7</sup> shows that in the current school, the taking of measures is updated through scientific and technological transformations, together with an increasing concern with youth, health and obesity. Thus, new educational programs permeate school and non-school discourse and practices on health. Once the new parameters for thinness and health have been defined, new hygiene is the focus of school programs against childhood obesity<sup>8</sup>.

The body, which was already the support and the product of disciplinary matter, now assumes a new centrality. The production of subjectivity is now almost completely occupied by the rule of eating practices and active life, for eating properly and putting the body into motion have become essential elements. Healthy eating practices, as subjective forms of production, depend on a set of modulatory norms attributed to the subject, both through institutions, as the school, and in the absence of such institutions, that is, through the demands and demands of the market itself<sup>6</sup>.

Ortega<sup>9</sup>, in his analysis of the body, defines this new biopolitical determination about the lean and healthy body in terms of a bioaccess, and the present school could not pass over these new biopolitical processes. In the context of the crisis of disciplinary institutions and recent national reforms, which instituted the pedagogy of control, the school institution tries to sketch a new meaning for itself. On the other hand, there is also the definite entrance of new themes and problems that come to inhabit and to definitively colonize the old curricular programs, such as ethics, consumption, the environment, sexuality, ethnic-racial relations, gender relations, prevention of sexually transmitted diseases, and, more recently, food issues for projects to combat obesity at school. Due to the nutritional transition that occurred in Brazil, new ways of providing food are now being observed within the school. In this sense, the proposal that education be the matrix of the strategy to improve the conditions of food and nutrition is aligned with the commitment of the various segments of society<sup>10</sup>.

The National School Feeding Program (PNAE) is one of the oldest public programs of food supplementation, standing out for continuing significant investments. Assured by the 1988 Constitution, the PNAE has a universal character and, according to the National Fund for the Development of Education - FNDE, in 2004 it served about 36.4 million students from the pre-school and elementary schools of the public and philanthropic network during school days and with investments in the order of R\$ 1.266 billion. The National School Feeding Program, aimed at nourishing a population that presented a risk of death due to hunger, began to worry about the caloric balance of school meals, due to the growing identification of obesity in schools. Schools, together with other institutional bodies responsible for school feeding in Brazil, such as ABESO (Brazilian Association for the Study of Obesity), SBEM (Brazilian Society of Endocrinology and Metabology) and SBP (Brazilian Society of Pediatrics) develop and implement programs for the eradication of obesity<sup>11</sup>.

At school, we now take measurements of the waist, abdomen, thighs, chest, calculate the BMI and the equation is performed on the waist circumference, in the same way as the procedure of gymnasiums, doctors' offices and nutritionists. Experts come out of their offices, their research centers and set out for school in a crusade against obesity at school: the motto is "closing the siege" against fat and lack of physical activity. However, such measures can provoke a series of reactions, because the school is a place of socialization, classifying the students according to some physical differences, such as obesity, ends up excluding them and creating constraints in front of the others. In this logic, students resistant to the "norm" are pharmacologically treated and sedated, thus, the title "abnormal" falls on the obese child and adolescent, and can generate serious disorders to the health and social interaction of this individual<sup>12</sup>.

In this way, the school should give the opportunity to live and learn healthy habits, so that its students acquire independence to distinguish the best way to lead a healthy life. Despite the efforts of the school environment to promote health, it is observed that, in Brazil, as well as in other countries, overweight and obesity have been increasing alarmingly, the increase in the percentage of obese Brazilians increased 370% in the last 15 years (from 2.9% to 16.6%), and from obese Brazilian women, 450% (from 1.8% to 11.8%). Because of this epidemic, the most recent national research estimate indicates that half of the adults will be overweight<sup>13</sup>. Therefore, the school has a long way to go so that the goals in relation to education and health are achieved. The economically developed and developing countries are defining strategies for the control of chronic noncommunicable diseases, such as obesity, in a wide variety of contexts, especially in the school context. Thus, it is up to Brazil to create and encourage public policies in order to alleviate the health problems faced within the school context, since it is in this context that children and adolescents spend much of their day and reinforce their affective ties of friendship. Therefore, the present study aims to identify how obesity is manifested in the school context<sup>14</sup>.

## 2. Methodology

Ten school principals and 21 obese adolescents, aged between 12 and 18 years, of both sexes, were treated in the Obesity Outpatient Clinic of Childhood and Adolescence of a Hospital of High Complexity, of the Central Region of Rio Grande do Sul. All school principals where obese adolescents are regularly enrolled were included in this survey. Table 1 shows the order of the interviews conducted with adolescents and their respective gender

**Table 1 – Interview order and day, gender and code name**

<b>Interview</b>	<b>Day</b>	<b>Gender</b>	<b>Code name</b>
I1	08/05/2014	M	A1
I2	08/05/2014	F	A2
I3	08/05/2014	F	A3
I4	17/11/2014	F	A4
I5	17/11/2014	F	A5
I6	24/12/2014	M	A6
I7	24/11/2017	M	A7

I8	24/11/2014	F	A8
I9	27/11/2014	F	A9
I10	27/11/2014	M	A10
I11	01/12/2014	M	A11
I12	01/12/2014	F	A12
I13	04/12/2014	F	A13
I14	04/12/2014	F	A14
I15	04/12/2014	M	A15
I16	04/12/2014	M	A16
I17	15/12/2014	F	A17
I18	18/12/2014	M	A18
I19	18/12/2014	M	A19
I20	18/12/2014	M	A20
I21	18/12/2014	M	A21

At Table 2 we have the principals' interview.

**Table 2** – Principal interview order, code names, gender, city and the number of enrolled students at school

I1	D1	F	Santa Maria	4
I2	D2	M	Santa Maria	3
I3	D3	F	Santa Maria	3
I4	D4	F	Jaguari	1
I5	D5	F	Tupanciretã	2
I6	D6	M	Ivorá	2
I7	D7	F	Formigueiro	1
I8	D8	F	Santiago	1
I9	D9	F	Silveira Martins	1
I10	D10	F	São Francisco de Assis	3

The evaluation was performed after the signing of the Free and Informed Consent Term by the school administrators, in accordance with the provisions of Resolution 466 of December of the National Health Council. Participants received information regarding their right to participate and guarantees of anonymity. As a tool, a questionnaire was conducted with school principals where obese adolescents who participated in the study were regularly enrolled. The identity was kept confidential, code names being designated for all participants. The study was approved by the Research Ethics Committee, under registration number 37542814.0.0000.5346.

### 3. Discussion and Results

Food is fundamental for the development of the human being throughout individuals cycle of life.

Among the different phases of life, we can highlight, for example, the school age, which is characterized by a period in which the individual presents an accelerated metabolism in relation to other life stages<sup>11</sup>. In this sense, school plays a primordial role in eating habits of its students, since, during a good part of the day, these kids are inserted within that context. In the school space, theoretical and practical knowledge about health and disease was constructed according to the ideological scenario of the time, and health issues were approached based on the theoretical reference of each moment. With the increasing incidence of overweight and obese children and adolescents, the school must seek a readjustment of its food supply, as well as review its attitudes towards its relationship with the other contexts, where these subjects are inserted, to meet their needs<sup>15</sup>.

Table 1 shows the code names of the principals interviewed and years of working at school.

**Table 1 – Directors and years of working at school**

<b>Interviwee</b>	<b>Number of working years</b>
1- D1	12
2- D2	32
3- D3	11
4- D4	06
5- D5	07
6- D6	17
7- D7	22
8- D8	07
9- D9	13
10- D10	20

It can be seen in Table 1 that the principals present an average time of performance in the school of 26 years. In this sense, we sought to explore several facets of this context to understand how obesity manifests itself and how it is understood by these principals and adolescents. In this perspective, when principals were questioned about some changes in the behavior of obese adolescents in relation to students who did not present obesity, we obtained the following answers:

"I realize that many respect their colleagues. They are considered friends, for they share family / love problems with them. However, it is also possible to see a significant number of students who have great difficulties of relationships manifesting this mainly through verbal and physical violence. " (D1)

D6 states that: "... some suffer from bullying and they end up isolating themselves."

The above statements can be evidenced, according to the discourse of the adolescents, for example, the comment of the adolescent A12, that brings a very expressive report of the causes and consequences of the bullying in his life. The aggression caused the teenager to change schools, in order to minimize the consequences of this type of violence.

"The problem was bullying. They give us a lot of nicknames, too. They called me Jabulani (name of the ball of the 2012 World Cup). They called me everything and nothing was done. They just called the secretary, and I had to stay away from high school. They left me at home one day because they saw that I was no longer able to stand and that I was already aggressive leaving for the fight "(A12).

In any culture there is prejudice and violence, attitudes that cause psychic and emotional suffering, isolation and learning difficulties. The victims, in this case, obese adolescents who, because of their insecurity, do not have the courage to ask for help. Faced with the stigma in the school by his supposed friends, the individual with obesity becomes disinterested in the school, avoiding attendance and, in some cases, simulating illnesses not to leave home, nor to find their aggressors, or leaving for physical aggression<sup>16</sup>.

Bullying has a high potential for corrosion of self-esteem because the victim needs to remain in school, despite the anguish of daily humiliation before hundreds of colleagues who do not try to prevent aggression because they interpret the treatment given to the victim as joke or opt for invisibility so as not to become the target of bullies. As teenager A15 says, sometimes he does not carry out activities because he feels excluded due to being overweight. "So, sometimes, I feel excluded by my weight. Sometimes yes, I do not do the activities, but it is not always<sup>17</sup>.

According to Mattos and Luz<sup>18</sup> obese people self-understand as stigmatized because they cannot perform everyday activities with the same functionality and practicality as the others do, or because they are jokes, wherever they are, by their disfiguring appearance. Regarding A15 and A12, it is noted that there is a mismatch between the student / school / family relationships, since in the case of A12 the aggressors were only referred to be registered and nothing else happened. A15 comments on another serious problem of this mismatch, while after being excluded, he only tells what happens at school to his mother. It is observed that teachers have little perception of bullying, because the victims do not defend themselves or do not speak about the subject, and that the acts, for the most part, happen without the presence of an adult. In this sense, Almeida<sup>19</sup> points out that the child's revelation about the occurrence of mistreatment is rare, for being ashamed and afraid of suffering any kind of retaliation.

Due to the lack of dialogue between the contexts, it is noticed that some principals do not recognize bullying, or any other type of aggression within the school context, as an obvious problem, since they do not associate obesity with the exclusion processes. To this observation, D8 reports: "Some exclude themselves, I think no one excludes anyone inside the school, much less because they are fat. It is a matter of personality not of obesity "(D8). D3 corroborates that "I realize that there is a bit of respect for the colleague's situation. I do not see cases of prejudices in the classroom and in the intervals." D9, however, cannot identify if the difference in the behavior of adolescents in relation to the others occurs because they are obese. He says: "Most people have the same behavior as others, but I see that some are shyer, but I do not know if it's because they're obese or because they're shy."

D8 also does not seem to identify problems with obese students and addresses: "Some of them are quieter, do not interact much. Others are thinner and have no problem being obese."

Some principals, however, do not perceive any kind of discrimination regarding obese adolescents

in school. Thus, D10 states, "No, here at school they can relate to each other equally."

D5 corroborates, stating: "All are friends".

In D5's response, it is observed that, despite his seven years working at school, he does not seem to notice a difference in behavior, but his other colleagues say they perceive changes, mainly those related to bullying. With this, it is evident that the perceptions of the principals are distinct and may be related to the type of management that they seek to develop within the school context.

Another factor of the mismatch in the family / school relationship to be evidenced is whether the schools had received information from their families about the treatment for obesity of the students and about giving some special attention to these adolescents. On this issue, the directors answered:

"No, I've never been informed" (D1).

"I've never been wanted to deal with obesity issues" (D2)

"No, they never told me anything. Does any student at the school do it? "(D8).

"No, I only know that some use medicine for anxiety" (D9)

In relation to the speeches discussed above, the lack of dialogue (mismatch) between families and schools becomes evident. All the investigated principals in this study are linked to the obese adolescents seen at the Obesity and Obesity Outpatient Clinic, because it was sought to evaluate the principals of the schools where these adolescents are regularly enrolled.

Faced with this reading, it is very important to emphasize that the school knows the ties of its students, because, in this way, it can adequately understand their need. In other words, if the school can envisage the structured and consolidated links in the school environment as well as in the family and in the different social contexts where its students are inserted, they will give them the autonomy to deal with conflicts, approaches and situations arising from these links, solve problems jointly or separately. However, from the report of the principals, it is verified that the families do not get involved effectively with the school subjects of the adolescents. The school has no answer when it asks for the presence of the parents, when communicating the family about the change of behavior of the adolescent, when they perceive that something is bothering him or bringing him some loss<sup>20</sup>.

In this sense, D9 addresses:

"Sometimes I see that a student is very uncomfortable with his colleagues. We have already called those who bother this student here in the direction, but we do not have any kind of support from families. It's all in the hands of the school and in that sense, we have become a bit impotent, because it's no use talking to students today unless we have the support of their parents. "

D9 report shows that the school seeks to promote actions to minimize this distance between contexts, however, there seem to be barriers that generate discontinuity and conflicts in the integration between these two microsystems. One of the difficulties in integration is that sometimes the school does not have the different segments of the community in its academic, social and interaction spaces and therefore does not allow an equitable distribution of skills and the sharing of responsibilities. Carneiro<sup>21</sup> affirms that the change of this paradigm will only occur if there is a transformation in the current culture of the school and that the political-pedagogical project could be one of the means to promote this insertion. As a way of

ensuring their understanding and effecting parental involvement, which is still a critical point in the educational sphere, the family must be present in the school context. If the family becomes involved in the issues that contemplate the school context, the approximation with the other social spheres of the adolescent's life will be understood more effectively<sup>22</sup>.

Finally, it is believed that the school and the family should share social, political and educational functions, and contribute to the formation of the citizen. Both contexts are responsible for the transmission and construction of culturally organized knowledge, modifying the forms of psychological functioning according to the expectations of each environment. Therefore, the family and the school constitute two fundamental institutions to trigger the evolutionary processes of people, acting as propellants or inhibitors of physical, intellectual, emotional and social growth<sup>21</sup>.

Regarding the supervision of what adolescents consume in the meals offered by the school, if there is a differentiated Menu for them and if principals believe that it is important to offer this distinct Menu, all the interviewees emphasized that there is no relation of dishes or differentiated foods, since the menu is stipulated by the State Education Department. About the menu, D6 mentions: "The menu is sent by SMED (Municipal Education Department) and we cannot modify it. I think it would be important to have a healthier menu with less food and more fruit."

D4 Corroborates, saying, "There is a menu prescribed by the state secretary of education, we cannot intervene in the school context in this regard." It is noticed that the schools do not have autonomy in front of the menu of their students. However, they recognize the importance of a readjustment of this front to the new nutritional needs of their students.

In this perspective, D1 comments that: "I would say that food is not adequate. The food is usually very salty and greasy. The juices are artificial, in addition, they use sugar in an exaggerated way and there are few fruits in the menu. As for supervision, I do not see any concern in that regard. I believe that due attention is paid to food, since it is directly related to the good or bad health of people. I see that most teachers are badly fed. So as many do not have healthy eating habits (not to mention physical exercise) do not emphasize this issue with students."

It is noticed that although some principals have a concern about what is served, little has changed in relation to the menu stipulated years ago when the percentage of undernourished students was higher than those who were overweight and obese.

Mascarenhas and Santos<sup>23</sup>, in a study in the State of Bahia, found that the meals offered in the schools are unsatisfactory, since they present little presence of fruits, vegetables, vegetables in natura and the vegetables, most of the time, were not bought regularly, for school feeding, which interfered in the quality of the composition of the menu. The few vegetable growers who came to some schools were donated by staff or school friends, who planted, or bought, and brought in to temper the dishes offered. With this, it is evident that foods rich in vitamins, minerals and fibers and proteins are little offered in school feeding, corroborating with the findings of this study.

Despite this finding, some principals believe that a change in the menu is not necessary because, as D8 states: "I do not think I should make a differentiated menu, otherwise we will end up excluding these adolescents."



D7 puts it: "I think the menu is appropriate, because the same is done by a nutritionist." It is noticed that some principals seem not to worry about what is served on the menu of their school, since, according to them, the ratio of food served is prepared by a qualified professional. In this sense, school meals should be a well-being provided to the students during their stay in school, and their main objective is to partially meet the nutritional needs of the students in order to improve learning capacity, to form good eating habits, keep the student in school.

The schools investigated are assisted by a nutritionist who prescribes the menu weekly according to the availability of food offered by city halls or by the state. With this, it is understood that although the menu is prescribed by a qualified professional, there is no certainty that the nutritional values of the snacks offered in schools are adequate to the real needs of the students. Another relevant factor refers to the quality of food offered, because, through this evaluation, the impact of public policies on the quality of life of the students is visualized.

From the interview responses, it is noted that the menu is lacking in vitamins, fiber and minerals required for good school performance, as well as an expressive supply of high-fat foods and carbohydrates. In this way, it is perceived that it is a great challenge to develop a school nutrition policy that provides a healthy and nutritionally balanced diet that meets the needs and at the same time does not contribute to obesity. With the current social changes, there was a change in the eating habits of schoolchildren, but the Brazilian school feeding program in some places, such as the one presented in this study, did not fit the political, economic and health issues of the population. Therefore, there is still a long way to go, once we realize the need for better planning and improvement of school feeding programs, in order to meet the nutritional demand of schoolchildren. It is believed that for a school nutrition program to meet the demands of schoolchildren, it is necessary to consider the socioeconomic characteristics of the region where the school is located, to use local resources to improve the quality of food, and to offer non-industrialized products to order to develop good eating habits in the school population.

#### *4. Final Considerations*

Regarding the mentioned, one can observe that there is little dialogue between obese adolescents and school, with the adolescents being the most affected, since the principals are unaware of the treatments performed for obesity by their students. In relation to school feeding, there is little concern on the part of the principals, while they assign responsibility only to the nutritionist of the Education Department. This indicates that a policy with action strategies focused on health care is necessary.

It is important to emphasize bullying as a factor that is present in the school context. The school, which is represented in this study by the governing body, shows little interest in the subject of teenage obesity. There seems to be no effective concern with bullying, which occurs expressively in the school context, as well as, obesity is not understood as a disease, nor as a factor of social exclusion, so, like the family, educators also exempt themselves from any responsibility or interference in this matter. Finally, it is inferred that obese adolescents are neglected in the context studied.

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