**BACKGROUND**

In England, *1 in 3* children aged 10-11 years live with overweight or obesity [1].

Some children remain overweight or continue to have obesity whilst others return to healthy weight by end of childhood [2]. *We do not know why...*

**UK Millennium Cohort Study**

- Ages 11 & 14 → baseline
- Age 17 → follow-up
- 3-year follow-up
- 6-year follow-up

Children *with overweight or obesity* at baseline were included.

**METHODS**

Main analyses

- The associations between baseline indexes (caregiver-reported child mental health, child-reported psychosocial well-being) and returning to healthy weight vs. persistence of overweight and obesity were examined.
- Sociodemographic characteristics and pubertal status were controlled.

Additional analyses

- Evaluating the role of individual psychological well-being measures
- Examining whether the timing of psychological well-being being assessed (ages 11 vs. 14) is more important.

**RESULTS**

- **Children with better mental health and psychosocial well-being at age 11** were *16%* and *29%* more likely to return to healthy weight by age 17, respectively.
- Neither better mental health nor psychosocial well-being at age 14 was associated with returning to healthy weight by age 17.

- **Children with better psychosocial well-being at age 11** were *20%* more likely to return to healthy weight by age 14.
- Better psychosocial well-being at age 11 compared to age 14 had a stronger association with returning to healthy weight by age 17.

**KEY MESSAGES**

- Better psychological well-being at age 11 is associated with returning to healthy weight by age 17.
- Late childhood or early adolescence (age 11) may be a sensitive period in which psychological well-being has a pronounced relationship with future weight trajectory.

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**REFERENCES**