**Why the prevalence of obesity in Ugandan females and males is of great public health concern**

By Rachael Nagaddya, 18th August 2025.

Diagnosis of obesity is made by measuring one’s weight and height, then using these to calculate the Body Mass Index (BMI). WHO defines a BMI ≥30 in adults as being obese and in 2022, [globally](https://www.who.int/news-room/fact-sheets/detail/obesity-and-overweight#:~:text=About%2016%25%20of%20adults%20aged%2018%20years%20and,under%20the%20age%20of%205%20years%20were%20overweight.), 16 percent of adults (18 years and older) were living with this heterogeneous condition. The significant drivers of obesity are categorized as genetic, lifestyle, environmental and medical factors which can be broken down as: consuming energy-dense foods, sedentary lifestyles, some medications, hormonal imbalances among others. Obesity is notorious for being a predisposing factor of the rapid upsurge of several non-communicable diseases (NCDs) including diabetes and cardiovascular diseases which result in increased health care costs and a reduced quality of life.

Addressing obesity in Uganda where the country faces a double burden of malnutrition (over and under nutrition) and the population is characterized by widespread poverty, undernutrition and hunger is particularly challenging. This is because the underlying pathways may not be the same among people at either end of the socioeconomic spectrum. Notably, there is a wider prevalence of obesity among women than men in Uganda which in addition to the aforementioned predisposition to NCDs is also a likely cause of reproductive health issues such as menstrual irregularities, infertility obesity and pregnancy complications.