

# [Example of essay on the effect of obesity on students in high school or college](https://assignbuster.com/example-of-essay-on-the-effect-of-obesity-on-students-in-high-school-or-college/)

[Health & Medicine](https://assignbuster.com/essay-subjects/health-n-medicine/), [Obesity](https://assignbuster.com/essay-subjects/health-n-medicine/obesity/)

## Abstract

There are many victims of obesity. It affects entire families and communities. The victim of focus in this document is of course the person who has to endure the pain. The pain can be summarized by the psychological, social, physical and clinical consequences of obesity. The story of a fictitious boy precedes the introduction with the sorrow that is associated with obesity. However, he emerges victorious as a symbol of hope that still exists for anyone who is affected by this condition.

- Thesis statement: Psychological, social, physical and clinical effects of teenage obesity
- Psychological and social effects
- Prejudice, isolation and depression
- Physical effects
- Limitations of physical mobility among other issues
- Clinical effects
- Cardiovascular issues, diabetes and death
- Chemical concerns
- Conclusion
- Review of obesity effects on teenagers
- Alternative views of some obese teens
- A positive message of hope: The boy gets off of the bench
A boy sits on the bench watching the other kids play basketball until the bell rings for returning to class. A girl wants to sit on the bench to enjoy a candy bar but will not sit next to the boy. After all, he might stare at the chocolate or ask for some. Besides, there is hardly any room because he takes up a whole bench. So, she snickers at him after flashing a stabbing look of disgust and condemnation. The boy just sits there wishing that he didn’t have to spend his birthday this way, seeing his stomach spread out like that of an elephant seal. He wished he never ever had a birthday in the first place. There is really nothing to celebrate anyway. While silently managing the sharp pain in his chest, all he looks forward to is his Big Mac and a big pack of cigarettes.
Obesity is a major epidemic in United States. According to the Centers for Disease Control and Prevention (CDC), “ Obesity now affects 17% of all children and adolescents in the United States - triple the rate from just one generation ago” (" Defining overweight and,") The terms, overweight and obese are both labels for ranges of weight for a given height. People whose numerical weight amount falls within this range are subject to the increased likelihood of developing certain health issues. For instance, a person who is 5 feet, 9 inches tall is considered to be overweight at 169 to 202 pounds. They are obese if they are 203 pounds or heavier. Obesity is an extremely serious problem among teenagers. In fact, “ one in every five children is obese” (Cerrito & Sreepada, 2010) The scary thing about obesity is not only the medical costs on society and individual families, but the horrible side effects that can plague an obese body and human spirit. It is impossible to see a 400 pound person and not silently wonder, “ How in the world could they let themselves get that way?” One popular misconception is that obese people just want to be fat or they don’t care about themselves. This is not true. There are legitimate reasons that contribute to obesity. It is great to understand them even before considering the harmful effects as it might help with prevention. Nutritionally deficient foods, excessive sugars and lack of physical activity are the main culprits of teenage obesity. The rude girl who snickered at the boy should know that genetics, endocrine issues such as hypothyroidism and biochemical addictions to food are all contributors. No one wants to become immobilized and have the vitality of life ripped away by excessive pounds of body fat. This document focuses on the social and psychological, physical and clinical effects of obesity among teenagers.
In a nation that obsesses with body image and equates being sexy with skinny legs and a washboard stomach, it is nearly impossible to feel acceptable and beautiful with mounds of body fat dripping and jiggling with every move. Teenagers who are obese likely began the spiral into the fat trap as younger children. Even as a child they probably faced discrimination at school, church and even in the household. By the time a child is a teenager with an obese body; their psychological health will have already been adversely affected. They may suffer from low self-esteem and depression. Obese people face social exclusion and discrimination in many areas of their lives (Puhl & Brownell, 2001). In addition to living with believing that they are gross, hideous and unworthy of affection, they might turn to unhealthy activities for comfort. According to a published study which included 1520 children (who were studied over a period of 4 years), “ obese children with lowered self-esteem have a significantly higher incidence of sadness, anxiety and loneliness” (Strauss S., 2000). Consequently, they are more likely to experiment with high risk activities such as consuming alcoholic beverages or smoking. This exponentially increases the problem. Social interaction and acceptance are very important in the teen years. Many obese teenagers might form a group or club and it can be therapeutic. However, that group might still be subjected to abuse by other teens.
The physical effect of being enormously over weight is very easy to understand yet it is a hard pill to swallow. It recognizes no color or cultural barriers. In other words, boys and girls who are Caucasian, African American, and Hispanic or who represent other cultural groups of obese people will experience similar physical and medical consequences. It is painful to read about a 14 year old boy who suffered from a myocardial attack because he was running and his heart could not keep up. One obvious point that worsens the problem is having a low metabolism. The breakdown of food is slower in obese and over-weight people than in those who are a normal weight and have an active lifestyle. Believe it or not, the obese person might not eat often enough to raise their metabolism. Eating just once or twice per day is a quick way to gain too much weight. The body thinks that it must hold onto fat in preparation for starvation. This actually happens in the body one cell at a time. Secondly, the wrong things are being consumed in massive quantities and they have very little nutrient value to offer the body. The brain cannot detect that the body has received the nutrients needed and this may sound an alarm that says, “ I am still hungry”. Calorie dense, nutrient deficient meals are the sure way to live a life of obesity and all the painful consequences that follow.
Among the many physical problems, there is also high cholesterol and blood pressure leading to heart disease. In addition, there are dreadful blood sugar abnormalities leading to type 2 diabetes mellitus. In some cases organ system or cellular malignancies might begin to develop. This is validated by the fact that “ obesity is the seventh leading cause of death in the US.” (Wellman PhD, RD, FADA & Friedberg, 2002). Specific examples of more diseases that are associated with obesity are stroke, certain cancers, arthritis, atherosclerosis, hypoxia, hernia, and sleep apnea. These are the medical consequences of the physical burdens imposed on the body. According to journal reports and scientists, 300, 000 deaths per year in the United States are reported as being attributable to obesity (Forster, 1995).
There are some chemical concerns to consider when discussing obesity. The foods consumed often contain so many toxic elements that the body coats them with fat to protect systemic organs. This is one of the first things explained at alternative treatment centers for people wanting natural relief from pharmaceutical drugs. Some toxins found in foods are: Red #40, Red # 33, Yellow #5, Blue #1 and various other colors (Radomski, 1974). Secondly, monosodium glutamate and other sodium derivatives make no contribution to optimum health. Heavy metals like aluminum and oils that are hydrogenated and saturated are terrible contributors to obesity. While there are skinny or drastically underweight people consuming the same foods as obese people, they might also suffer from diabetic complications and cardiovascular issues due to these same chemicals. In a nutshell, obese people are at a greater risk for not shedding the weight if they are unable to rid their diets and bodies of these harmful agents.
In conclusion, teenage obesity has risen exponentially in the United States since the 1980’s. It corresponds to the increased demand and consumption of fast foods, artificially flavored and processed products, sugary drinks and desserts. Society in general has such an insensitive attitude towards people who are obese. This is reflected in the images of beauty displayed by the media and what young people subsequently impose on one another. Sadly, “ obesity is a stigmatized condition, and obese individuals face social exclusion and discrimination in many areas of their lives” (Wardle, PhD & Cooke, MSc, 2005). Instead of asking the question, “ What are they eating in order to get that big?” The right question to ask is, “ How can society help promote a healthy weight achievement and reinvigorate obese teens?” After all, there is still hope and giving up should never be an option. There are horrific psychological effects that come with being obese as a result of the prejudiced rejection that spins a person into isolation. While shrugging away from the world, low self-esteem can set in, only to be met with temporary relief from unhealthy habits. To put a positive spin on some of the statistics reviewed here, some obese teenagers still feel beautiful in all of their enormous short skirts. They might even flaunt long braids with confidence and pay no attention to their breathing issues, cardiovascular warning signs and diabetic symptoms that are ringing alarms throughout their bodies. Some obese boys might even feel a sense of power from being able to tip the scale to 350 pounds at 5feet 4 inches tall. They think that mass equals strength and all of the rejection from girls makes no difference. It is great to have a healthy attitude and self-image. However, just as depression can keep a person in a state of obesity, remaining in denial (and at the fast food window) can also make matters worse. What is really necessary is medical and counseling intervention. It is not enough to just assume that obese people need to exercise. The desire to lose weight and perform the actions that will promote weight loss must begin in the mind. It must begin with the re-establishment of self-worth and a lust for living healthy.
The boy who preceded the introduction still has options in life. There is no reason for teenage obesity to be a death sentence. He gets up and walks around the track. He recalls that his mother showed him a video of people who lost over 400 pounds. He figures that if other people can do it, he can successfully carve out a new body from all of his mass. He can dump the car cover that he uses for a rain coat. He can enlist the help of a local nutritionist. Together with the support from his family, he is well on his way to feeling better about himself.

## REFERENCES:

Cerrito, P., & Sreepada, A. (2010). Analyzing problems of childhood and adolescence. Louisville: DOI: http://www. igi-global. com/chapter/cases-health-outcomes-clinical-data/41572
Defining overweight and obesity. (n. d.). Retrieved from http://www. cdc. gov/obesity/adult/defining. html
Forster, J. (1995). A sane approach to weight loss. Patient Care, (29), 152-158.
Puhl, R., & Brownell, K. D. (2001). Discrimination and obesity . Obesity Research, 9(12), 788-805.
Radomski , J. L. (1974). toxicology of food colors. Annual Review of Pharmacology, 14, 127-137. doi: 10. 1146/annurev. pa. 14. 040174. 001015
Strauss S., R. (2000). Childhood obesity and self-esteem. Pediatrics, 105(1), e15. Retrieved from http://pediatrics. aappublications. org/content/105/1/e15. short
Wardle, PhD, J., & Cooke, MSc, L. (2005). The impact of obesity on psychological well-being. Best Practice & Research Clinical Endocrinology & Metabolism, 19(3), 421-440. Retrieved from http://www. sciencedirect. com/science/article/pii/S1521690X05000382
Wellman PhD, RD, FADA, N. S., & Friedberg, B. (2002). Causes and consequences of adult obesity: health, social and economic impacts in the united states. Asia Pacific Journal of Clinical Nutrition, 11(8), S705-S709. doi: 10. 1046/j. 1440-6047. 11. s8. 6. x