## Critical thinking on behavioral risk factors

Health & Medicine, Addiction



A strong influence can exerted on human health by certain behaviors that increase the chance of developing a wide variety of diseases, and these behaviors are collectively known as behavioral risk factors. Ever since the 1980s, there has been epidemiologic evidence that supports the relationships between various health outcomes caused by particular behaviors. The purpose of this paper is to identify and discuss the reasons why a large portion of Americans smoke cigarettes, eat a very poor diet, and are physically inactive, which are three major behavioral risk factors in the United States.

Cigarette Smoking: Each year, Americans waste a great amount of money on smoking, and most of these smokers started smoking cigarettes when they were still teenagers. Surprisingly, teenage girls are more likely to start smoking than boys (Laurance, 2004). Some reasons why teenagers start smoking include the fact that their parents smoke, to cultivate the image of leaders of their groups, and because of personal problems such as difficulty communicating with parents, loneliness, etc. From a biological perspective, smokers get addicted to nicotine, just like drug addicts. From a psychological and social perspective based on the social learning theory, teenagers often try smoking as a result of an influence of actors, peers, pop stars, or their own parents. Smoking cigarettes immediately affects the brain, so people keep smoking, and also because they are afraid of the withdrawal symptoms that keeps them from quitting. People also start smoking because of everyday stress. Smoking also plays an integral role in peer and social groups, and peer pressure can influence a person to try smoking. Last but not least, an effective association has been built up between cigarette

smoking and glamour, risk-taking, and sex, and this is another major reason people take up smoking (Lader & Goddard, 2004).

Poor Diet: Numerous factors can cause poor eating. According to a study, psychological and social factors influence our diet. This study suggests that not only preferences and tastes but even things around people influence their poor diet choices ("Food environments and," 2005). One of the reasons people are left with no choice but to opt to a poor diet is due to low income because of which they cannot afford healthy foods like fruits and vegetables (Binkley, 2010). People residing in low-income neighborhoods or rural areas also have a poor diet and their diet mostly comprises of fast food because shopping areas and supermarkets might be farther away, and they might not have the transportation to get there so they find it more viable to eat from fast food places (" Food environments and," 2005). Finally like smoking, parental influence can cause children to adopt a poor diet. Parents with bad eating habits tend to pass these habits onto their children. Similarly, children growing up in families with a poor diet are likely to continue these bad eating habits once they are teenagers and even throughout adulthood as well (" Reward positive behavior").

Physically Inactivity: In the recent years, people in the United States have become increasing concerned about the lack of physical activity in their lives, especially in the youth. There are a variety of conditions and factors because of which people do not engage in physical activity. The first is their socioeconomic status. Poorer people often do not have enough time to participate in leisure-time physical activities and they do not have access to proper facilities or environments (Gordon-Larsen, 2006). Increased car use is

another reason that now people have become less active, and opportunities to cycle and walk have been reduced. Being physically active also depends on social influences, especially the environment they are living and working in. For instance, people in urban environments are less physically active because they are more dependent vehicular use and have less open spaces for leisure and recreational activities. Certain barriers also prevent people from being physically active, for instance they may not have the time, they might be concerned about their personal safety, and they might prefer to relax in their free time.

## References

(2005). Food environments and obesity—neighbourhood or

nation?. International Journal of Epidemiology, 35(1), 100-104. Retrieved

from http://ije. oxfordjournals. org/content/35/1/100. full

Binkley, J. (2010, Feb). Low i1come a1d poor health choices: The example of

smoki1g. Retrieved from http://ageconsearch. umn.

edu/bitstream/58419/2/10-3. pdf

Denscombe, M. (2001). Smoking cessation among young people: The need

for qualitative research on young people's experiences of giving up tobacco

smoking. Health Education Journal, 60(3), 221-231. Retrieved from http://hej.

sagepub. com/content/60/3/221. abstract

Gordon-Larsen, P. (2006). Inequality in the built environment underlies key

health disparities in physical activity and obesity. PEDIATRICS, 117(2), 417-

424. Retrieved from http://pediatrics. aappublications.

org/content/117/2/417. abstract

Lader, D., & Goddard, E. (2004). Smoking-related behaviour and attitudes,

2003. Retrieved from http://www. dh. gov.

uk/prod\_consum\_dh/groups/dh\_digitalassets/@dh/@en/documents/digitalassets/dh\_4085159. pdf

Laurance, J. (2004, Sep 24). Girls more likely to smoke than boys. Retrieved from http://www. independent. co. uk/life-style/health-and-families/health-news/girls-more-likely-to-smoke-than-boys-6161019. html

Reward positive behavior. (n. d.). Retrieved from http://life. familyeducation. com/parenting/discipline/45284. html