

Obesity is not a
personal problem



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Obesity is Not a Personal Problem As the obesity wave crashes over the United States, more Americans are paying out of pocket to flourish the \$33 billion commercial diet industry (Spake 283). As American's waistbands continue to expand, they immerse themselves in one of the largest, most scandalous consumer markets: the weight loss industry. Amanda Spake, author of " Rethinking Weight", addresses the question as to who should cover the overall cost of weight loss programs. Spake challenges that insurance companies should pay for the expenses that obese people encounter.

This, she states, is due to the fact that obesity is a biological " disease" and it should be treated and paid for like any other critical illness (283). In this article, Spake does not present the importance of physical activity, only discussing unsuccessful dieting experiences and bad genetic makeup. Although Spake briefly suggests that exercising is an advantage to those who are obese, she puts the solitary blame for obesity on the genetic aspect. From 1986 to 2000, the number of people who are severely obese—which is identified by having a body mass index of 40 or more—has quadrupled, from about 1 in 200 adults to 1 in every 50.

This startling statistic has caused more people to be aware of this rising occurrence that has swept over the United States. Obesity has medical professionals worrying; not only are the numbers of overweight people continuing to rise but weight-related medical costs are soaring. Healthcare costs for illnesses due to obesity have now exceeded those related to both smoking and alcoholism. The obesity epidemic is a big contributor to

skyrocketing healthcare costs in the United States, partly due to the weight-related diseases that come hand-in-hand with obesity.

Ailments such as type II diabetes, heart disease, hypertension, and high cholesterol are closely connected to obesity and an alarming 80 percent of obese adults suffer from one of these life-threatening diseases (Spake 283). Many research foundations are now connecting obesity to a person's genetic makeup, calling it a biological development that an individual cannot control. Spake suggests that insurance companies should cover the costs of obesity as it is a genetically and biologically determined disease thus the individual does not have the ability to lose weight on their own.

As a result, researchers suggest that including the treatment of obesity in health care plans might bring science and sanity to the anarchy of weight loss (Spake 286). Many researchers do not identify obesity as a disease in fear that unhealthy weight-loss programs will someday be considered acceptable treatment and ultimately mandated to be covered by insurance. Although Spake validates her assertions by backing up her words with credible opinions and statistics, she weakens her argument by not addressing the importance of physical activity. Maria Pfisterer is an obese mother who Spake claims has tried every weight-loss strategy imaginable.

However, nowhere does it say that in addition to the drugs and "quick-weight-loss fads" Pfisterer had attempted to include an exercise regime. She claimed that all of the programs she tried resulted in a few pounds lost and quite a few more gained; always returning to the same 197 to 202 pound range. Being overweight is the result of one thing: eating more food than one

burns (Spake 285). Nowhere in the article does Spake suggest that physical activity is an effective, healthy and inexpensive way to lose weight, choosing to put forth the idea that weight loss comes only from high-priced dieting programs.

In her article, Spake claims that genetics are the sole factor for obesity in America. There are many other factors mentioned in the article that play into someone's weight including the food they eat, their level of physical activity, and societal factors such as advertising. Also, Spake quotes Arthur Frank, director of George Washington University's Weight Management Program, "So saying to an obese person who wants to lose weight, 'All you have to do is eat less,' is like saying to a person suffering from asthma, 'All you have to do is breathe better'" (284).

Obesity and asthma are two very different things therefore should not be compared. An individual who is overweight can take control of their weight-gain by taking more personal responsibility and making healthier choices. However, asthma is an inflammatory disorder that can strike at any time which causes an individual to wheeze or gasp for air where an individual cannot control its effects. Not everyone agrees that obesity should be considered a disease, some stating that the obesity epidemic can be overturned by individuals taking more personal accountability for their wellbeing and opting to make healthier lifestyle choices (Spake 283).

In an alarmed attempt to make readers believe that obesity should be considered a disease and insurance companies should cover the cost of the individual's expenses, Spake fails to provide enough evidence to support her

claim. She maintains that overweight people have a genetic flaw that causes them to be susceptible to weight gain. Physical exercise, which is seldom mentioned in Spake's article, is an important weight loss tool that helps to burn the extra calories an individual's body does not burn on its own.

Spake portrays a defective argument that invalidates her main purpose.

People with health insurance should look to see what is covered and seek healthier, less-expensive alternatives to fix the things that are not included.

Regardless of what " Rethinking Weight" suggests, overweight individuals have an equal opportunity to replace their existing lifestyle with healthier

habits. Works Cited Spake, Amanda. " Rethinking Wight. " Writing and

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