

# Obesity in america: the cost of poor dietary choices and sedentary lifestyles res...

[Sociology](#), [Population](#)



## **Abstract**

This paper will delve into obesity, an epidemic in America, as a consequence of poor diets and sedentary lifestyles. The paper will highlight the historical beginnings of the epidemic, the affected population, causes and overall economic costs. Furthermore, we will examine current interventions from the local to the federal level and examine the role of the media in creating awareness. In conclusion, the paper will suggest possible solutions to the epidemic.

## **Introduction**

Poor diets and inactivity have been cited as the 2 major culprits for the growing population of obese Americans. This is because obesity is by and large caused by an intake and storage of more calories than the body needs. The current American population is considered the most overweight and the most inactive. Presently, the typical American diet is composed of prepackaged foods such as French fries and hamburgers which are dense calorie foods (Bailey, 2006). At the same time, many Americans opt for home entertainment options which include little or no physical activity. This paper theorizes that poor diets and low physical activity have combined to make the ballooning American waistline a national epidemic.

## **Historical Perspective**

Currently, the United States has the highest prevalence of obesity in the world. In 1962 obesity affected just 13% of the population. By the turn of the 21st century, the numbers had grown to 24.5% in 2004 and by an additional

2. 1% two years later. Data from the National Health and Nutritional Examination Survey (NHANES) (2009-2010) indicated that one third of the population was obese. According to this Centre for Disease Control and Prevention (CDC) survey, 36% or 78 million adults and 17% or 12.5 million youth are obese. When the threshold is lowered to overweight, nearly two thirds of the American population can be included (Cynthia et al. 2010).

## **Population Affected**

Studies have shown that obesity affects some populations more than others. Historically, obesity has been associated with adult populations. However, in the last two decades, alarming incidences of obesity have been reported among adolescents and children. 15% to 25% are currently considered obese (Cynthia et al. 2010). This is a population of about 9 million children. This is cause for concern among health experts because childhood obesity increases the chances of adulthood obesity. Between 1980 and 2008, the incidence of obesity tripled among children aged 6 to 11 years. According to the CDC survey, the prevalence grew to 19.6%, up from 6.5%. Similarly, the prevalence among teenagers tripled from 5% to 18.1%.

The CDC survey indicates that about 76 million American adults are obese (Over 30 BMI). The distribution of obesity varies significantly across the major racial groups. In 2010, the prevalence of obesity among Caucasian adults was 27.5% for men and 24.5% for women (CDC, 2012). Among African American men, the rate stood at 31.6%. 41.2% of adult African American women were considered obese. The cumulative prevalence rate among American Indians was 39.6%. 31.9% of the Hispanic population was

obese. Within the Hispanic group, 34.1 % of Mexican Americans were found to be obese. The adult Asian population was found to be 11.6% obese (Cynthia et al. 2010).

## **Environmental Issues**

In any society, eating habits are affected by cultural, environmental and social factors. America's culture as regards food has changed dramatically in the last three decades. The exponential growth of efficient fast food franchises combined with limited time for home cooking have made pre-packed fast food an American staple. Americans list doughnuts, chicken nuggets, hamburgers and French fries as their favorite food. Established fast food chains are located conveniently within cities and suburbs and in shopping malls. The franchises have perfected cost efficient to the point that their food packages are cheaper than healthy food options such as vegetables and fruits. Additionally, they serve their food in large portions which have increased the average calorie intake per meal for Americans. Three studies conducted in the past found a strong link between sweet drinks and obesity. America's consumption of sweetened drinks has doubled in the last 3 decades. One of the studies found evidence that sweetened drinks affected the genetic predisposition of some causing them to gain excessive weight. Other studies showed children who drank mineral water with artificial sweeteners lost weight.

America is one of the industrialized countries in the world. The average American household owns a number of energy saving equipment such as a dish washer and washing machine. This means that no energy is spent in

performing simple household chores since machines are employed to do the tasks. Furthermore, families have acquired elaborate entertainment indoor entertainment options. Computer and video games are the primary entertainment choice for many American children and adults.

Studies have shown that parents are no longer willing to allow their children to play outside. This is majorly because of Insecurity and the recent spate of terrorism. Parents prefer to keep their children in the limited household space thereby hampering their level of physical activity.

## **Epidemiological Research**

According to data from NHANES, African Americans (21%) and Mexican Americans (23) aged 12 to 19 years are more susceptible to obesity than White non-Hispanic (14%) adolescents. In the same survey, 39% of children with American Indian descent were likely to become obese (Cynthia et al. 2010).

Another study found that long term use of food stamps for a period of 24 months or more increased the prevalence of obesity among female adults by 50%. This finding introduces poverty as a variable in the obesity equation.

## **Morbidity and mortality**

Currently the prevalence of severe obesity (BMI over 40) and Extreme obesity (BMI over 50) has grown tremendously. One in fifty Americans is considered severely obese up from one in two hundred in 1986. The incidence of extreme obesity is one in four hundred from one in two thousand 27 years ago. The obesity levels in the USA have reached epidemic levels. 58 million individuals are overweight; 40 million obese while over 3

million are morbidly obese. Obesity is cited as a contributory factor in 100,000-400,000 deaths reported in America annually. Obesity is the second cause of all preventable deaths in the USA.

## **Public Health Issues and Interventions**

Health experts are concerned over the health issues associated directly with obesity. Incidences of type II diabetes have increased by 76% since the levels recorded in 1990. Out of these, 80% are recorded among obese patients. 70% of all cardiovascular conditions are associated with obesity. About 26% of obese people suffer from high blood pressure. Obesity has been linked to cases of breast and colon cancer. 42% of all breast cancer and colon cancer diagnoses were found among obese patients.

Obese individuals are encouraged to set small personal goals which they can use as milestones in their battle against obesity. Such individuals are encouraged by primary healthcare givers to reduce their food portions and incorporate some physical activity in their daily routine. They are also advised to incorporate fruits and vegetables in their while cutting down on carbohydrates, fats and refined sugars. Extreme cases of obesity are managed using surgical procedures. More doctors are performing gastric bypass surgery and other invasive interventions where doctors reduce the size of the stomach and suck out deposited fat from the body. This procedure is expensive and could cause other complications and even death. Other forms of intervention include pharmaceutical drugs and weight loss boot camps.

## **Government Response**

Widespread concern from the healthcare sector and lobbying by various interest groups, have led to several interventions at all levels of the government. Locally, parents are fighting to ensure that the local government allocates adequate funds for healthier lunches for their children. At the state level, up to 20 states revised upwards their mandatory nutritional standards for schools. These standards are recommended by the Department of Agriculture. The federal government is running various initiatives that target specific concerns (Edelstein, 2011). The white House Task Force on Child Obesity together with the First Lady's initiative is working to eliminate childhood obesity within one generation.

## **Economical Issues**

Economic estimates show that obesity costs America \$ 147 billion in both direct and indirect costs. Direct healthcare costs such as prevention, diagnosis and treatment were as high as \$117 billion. Indirect economic expenses such as absenteeism from work and premature death added another \$30 billion to the costs (Edelstein, 2011) .

## **Media Coverage and Communication Issues**

Obesity has enjoyed a steady stream of media coverage in the recent past. Studies conducted at Yale University by the Rudd Centre for Food Policy and Obesity found that news items are often discriminatory or derogatory towards people living with obesity. Overweight or obese persons are portrayed negatively. This has led to discrimination and stigma. To change this, the Rudd Centre developed guidelines for portrayal of obese persons in

the media. These guidelines would streamline the content, language choice and style of coverage to reduce stigma and increase the impact of the media items.

## **Logistical Issues**

Despite all the efforts geared towards tackling obesity, the results have been less than impressive because the efforts are disjointed. Before the Federal Task Force on Childhood Obesity, most of the activities were led by interest groups and local governments. To change this, Jordan (2008) proposes that the federal government should spearhead the fight against obesity at the policy and financial level . The federal and local governments should be in charge of adopting the policies to local needs and managing state and local weight management and lifestyle change programs.

Aftermath and Lessons Learnt

## **References**

Bailey, E. J. (2006). Food choice and obesity in Black America: Creating a new cultural diet. Westport, Conn: Praeger.

CDC (2012). Summary Health Statistics for Adults. Web. Retrieved from

Cynthia L Ogden, Margaret D. Carroll, Brian K. Kit & Katherine M. Flegal

(2010) Prevalence of Obesity in the United States (2009-2010). National Health and Nutrition Examination Survey. Web. Retrieved from

Darnell, W. H., Northern Kentucky University., & ProQuest Information and Learning Company. (2009). Institutionalizing obesity in America's youth: Parental perceptions about school lunches.

Edelstein, S. (2011). Nutrition in public health: A handbook for developing

<https://assignbuster.com/obesity-in-america-the-cost-of-poor-dietary-choices-and-sedentary-lifestyles-research-paper-examples/>



programs and services. Sudbury, MA: Jones & Bartlett Learning.

Jordan, A. B., & American Academy of Political and Social Science. (2008).

Overweight and obesity in America's children: Causes, consequences, solutions. Los Angeles: Sage Publications.