

Obesity: dont judge me while i eat research paper example

[Health & Medicine](#), [Obesity](#)



Introduction

For the past 30 years overweight and obesity among Australians has been on a gradual increase, with 60% of adults categorized as overweight and more than 25% obese (National Health and Medical Research Council, 2013). The obese are perceived to be personally responsible for the cause of their own state. Changing the negative attitudes towards obese people, while trying to instill a view of empathy, has been somewhat unsuccessful (Gapinski, Schwartz, & Brownell, 2003; Teachman et al., 2003). This negative attitude encourages stereotypes that the obese and overweight are unmotivated and lazy, as well as many other negative characteristics (Persky & Eccelston, 2010).

Previous Research

Previous research by McClure, Puhl & Heuer (2011) has examined whether photos of obese individuals whilst reflecting the news story related to obesity, influence public attitudes toward the obese which resulted in negative attitudes and reinforced stereotypes toward obese people. Other research such as Monteiro, & Popkin, (2007) point out and examine that an issue that lies within this problem, is the persistently obese person. These authors discuss how Obesity is when a person's body weight is 25-30% above normal. The research shows how while overweight is considered to be somewhere around 20-30 pounds over normal. Most individuals, including health care providers look at the issue with obesity as eating way too much food and exercising much too little. These authors explore that for many obese individuals the issue lies with others things such as metabolic

problems, binge eating, genetic predisposition, or sometimes all. The point in the previous study was that these factors make dieting virtually impossible for the reason that these difficulties are not ones that can be solved by just cutting down on the calories. Especially, the issue of binge eating.

Other previous research by Shaya & Wang (2008) discusses more detail about Compulsive "binge" eating in the obese and how it is not directly caused by a person just wanting to eat all the time. This research goes on to explain how their wanting to eat is caused by looking out for some kind of a sense of security. Shayne and Wang present the study of showing that a person that is suffering from very low self-esteem will identify with the food but at the same time will get rid of it as soon as they swallow it. The research goes on to say that when a compulsive overeater or binge eater start dieting, the diet is almost a failure from the start for the reason that the weight comes back when the person goes back to their normal routine of eating. Therefore, producing a depression that is much greater.

However, the research from Young and Dewailly (2007) deal more with the prevalence of obesity and how its metabolic correlates among the circumpolar Inuit Indians in three countries. Their research also goes on to explain that many obese people now days have medical research to go to as to why the weight they were able to get rid of more than likely would just come right back.

Theories

However, when it comes to theories, recent research has sturdily backed the set-point theory, which makes the point that when a person starts to lose

weight, the body's metabolic rate will make some kinds of adjustments in order to return to the starting point weight. Obesity is a consequence of the multifaceted interplay among environment and genetics. There are several studies which have shown that body weight is kept at a stable range, recognized as the " set-point," in spite of the variability in expenditure and energy intake. Furthermore, it has been shown that the body is more well-organized when it comes to protecting against weight loss throughout caloric deprivation compared to circumstances of weight gain with a lot of overfeeding, signifying an adaptive role of protection throughout eras of low food intake. Mayer-& Davis (2006) attempted to do their study on breast-feeding and the risk for childhood obesity: this study goes in deep to try and figure out rather or not maternal diabetes or obesity status actually matter. With this theory, there is emerging evidence on bariatric surgery results, chiefly gastric bypass, proposes a novel role of these surgical events in starting a new set-point by changes in body weight monitoring physiology, as a result causing maintainable weight loss results. However, many experts suggest with this theory that continuing research is really necessary in order to elucidate the biological mechanisms that are responsible for this change, which may provide new choices for the worldwide burden of obesity. Other theories are what are known as the Externality theory and the restrained eater theory and both of these theories are considered to be psychological. For instance, the Externality theory is when obese people have a habit of being more sensitive to external cues that are related to eating, and are less sensitive to things such as internal cues related to eating, than people who happen to have what is considered to be normal weight. The Restrained

eater theory makes the point how obese individuals are the ones that have a habit of restraining their food intake by dieting and then doing other things such as avoiding the start of food intake. On the other hand, once these people start eating, they eat much more than individuals that are having just normal weight.

The purpose of this study is to see whether participants who view healthy food will be viewed more positively than those in the unhealthy conditions. With that said, it is hypothesized that participants who see healthy food will provide higher responses for the four conditions; food rating, colleague rating, colleague liking and lunch rating than those who see unhealthy food. It also can be concluded that people were aware of health issues when rating the food.

Hypothesis

It is hypothesized that participants who saw healthy food would relate to higher food ratings, colleague ratings, and colleague liking and lunch ratings than those who see the unhealthy foods.

Discussion

These results suggest that that people appeared to look at the healthy food condition more confidently than those in the unhealthy food condition. When it came to healthy food condition, students appeared to see that the students had a much higher opinion of food in this category and that they obviously felt better about looking at foods that were healthy in appearance. The food that was not healthy looking is the foods that seemed to get the much lower scores. This shows that even during the lunch servings when

some would be famished and ready to dig into a meal regardless of what it may look like, chose to pick foods that looked healthier over the foods that were not. These results show that even mentally, in a fast paced and fast food society with pictures of different kinds of foods plastered everywhere that at the end of the day, people would like to eat much healthier even though the unhealthy food appears to be much more widespread.

In the end, the results established that, as imagined, contestants who see healthy food will give out much more higher responses for food rating, colleague rating, colleague liking and lunch rating than people who happen to look at food that is considered to unhealthy to eat. Therefore, this study does make the suggestion that people would look at the food, colleague and lunch more optimistically than those in the unhealthy circumstances. This study was able to prove that healthy food is something that people desire way more than unhealthy food. It appears that the healthy looking food was associated with healthy living and also healthy weight. The food that was unhealthy showed the opposite because it related to possibly weight gain and future on healthy lifestyle.

Limitations

After completing your interpretation of the findings, the researcher discovered that the way in which he gathered data may have inhibited the ability to conduct a thorough examination of the results. For instance, the researcher regrets not adding a specific question the survey that, he believes in retrospect, could have assisted in addressing a particular matter that emerged later on study. Other possible limitations in the study was the

fact that some of the participants may not have been focused when answering the questions and therefore may have put things down that were not helpful.

Further Research

Much of the current research is disadvantaged by the lack of good methods to precisely, objectively, and economically measure healthy and unhealthy food sources as it relates to obesity. With that said, more research is as a result needed to emphasis on measures to evaluate consumption of fat and other dietary constituents, levels of physical activity, energy metabolism, and body fat and visceral obesity in terms of healthy and unhealthy foods. Furthermore, better methods for assessment of psychological, behavioral, and psychosocial variables that may be connected to behavioral risk issues for obesity (for instance poor diet and inactive lifestyle) are desired, and chiefly so for special population segments founded on race, ethnicity, and socioeconomic position. Methods for evaluating culture, social assimilation, and psychological stress should also be established.

Conclusion

It is clear from the research, that healthy living is a great concern among people when it comes down to making the right choice for healthy eating. It also is quite obvious that people do prefer healthy foods over the ones that are considered not so healthy based off of what the food looks like.

Appearances seem to actually make a difference when it comes down to what people look at as being healthy or not.

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