

## The Castaway Effect of Obesity; the Need for Implication is Now!

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### Abstract :

Apart from the physical health implications obesity partakes on an individual; it also takes its toll on mental and psychological wellbeing of a person. A vicious cycle starts with hostility based on '*obesity stigma*', eventually leading the person being stuck in a positive feedback loop. Every attempt to correct his or her obesity problem results in severe detrimental health effects. It is necessary that appropriate awareness programs and legislations are drafted and implemented to strike out the root causes of obesity stigma.

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## Introduction :

Obesity, a worldwide epidemic, is defined as a complex disorder with excess accumulation of body fat to such an extent that it exerts negative effects on the body [1]. A body mass index (BMI) exceeding 30 kg/m<sup>2</sup> in European population [2] and exceeding 25 kg/m<sup>2</sup> in South Asian population is commonly used to categorize obesity [3, 4]. About 13% of the world's adult population is obese while the burden is projected to double by the year 2030 [5]. Pakistan is no different when it comes to obesity prevalence. Every 3<sup>rd</sup> person is said to be either overweight or obese [6]. In addition to the physical health implications obesity partakes on an individual; it also takes its toll on mental and psychological wellbeing of a person.

Over the past few years research has focused on understanding the patho-physiological basis of obesity and its social impacts. Within the boundaries of social effects of obesity; people with obesity feel detrimental effects on their physical, mental as well as emotional well-being called the 'obesity stigma' [7]. Obesity stigma or weight stigma is generally defined as "negative attitudes toward a person because he or she is overweight or obese, such as the stereotype that obese persons are lazy or lacking in willpower. These stereotypes can be manifested in different ways, leading to prejudice and discrimination" [8]. However, there is limited data on the mindset of non-obese people regarding obesity and how they interact with obese people. In this manuscript we aim to highlight the fact that obesity is not only due to a person's attitude and that the root causes of obesity stigma should be identified in order to reduce its negative psycho-social effects on the society. Lastly, we wish to propose a few strategies to overcome this stigmatization.

Many people, especially students acknowledge the need to have slim bodies for females and toned and muscular bodies for males as a part of fitting into society. An example can be given of the fashion industry

where obesity is increasingly considered as exclusion criteria for many aspiring models. Based on a study comprising of college students in USA, 10% identified themselves as being obese [9]. Furthermore, it indicated that students preferred to heed to the advice of the moderate weighed students for fashion recommendation, as they were considered flamboyant and confident. As confidence stems from having a more acceptable position in society it can be concluded that people with obesity may not be up to standards set up by the society and therefore are less confident and always vulnerable of being shunned and alienated. Many young subjects identified social pressures as being the prime factor that concerned them about body weight [10]. Another example of people with obesity being outcasted is the 'denormalisation' policy that is employed by certain governments. Based on this policy the government will literally try to humiliate adults into changing their behavior [11]. However, we believe that all these measures are making more social outcasts rather than helping people with obesity to feel accepted. A study conducted to identify stigmatization against obesity using images displayed in online news stories revealed that almost 72% of overweight and obese individuals represented in online news photographs were stigmatized. Moreover, the images showed; included only their abdomens or lower bodies, contrary to their non-overweight companions. Individuals with obesity were also more likely pictured consuming food and were never shown as experts, advocates, or journalists and healthcare providers [12].

The philosophies of general population regarding obesity and people suffering from obesity include a vast number of viewpoints. The reason that stands out the most is the societal view that obesity is a problem of low willpower and lack of self-discipline rather than a metabolic disorder with genetic background. Furthermore, people identify obesity as a

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personal problem that involve making bad choices [7]. Thus, obesity is considered mostly due to a behavioral problem and not related to metabolic disturbances. Some people compare obesity to smoking habit. They justify that as smoking; weight is also a personal choice and can be controlled if the person tries hard enough. Obese people are also considered to be lazy, indecisive and slow, having low self-esteem and are not suitable for work. In addition they are often discriminated against when seeking employment or a promotion [8].

When in reality, research has shown that obesity is not only due to overeating and being lazy, other factors like genetic and environmental changes also play an important role [13]. In fact, a study on twins who were separated at birth and grew up in different parts of the world showed that they both developed obesity despite having a completely different lifestyle [14]. A study titled "Y-Y paradox" is a true example of how wrong body shape and size can be when it comes to the health status of an individual. The paper discusses comparative analysis of two scientists (one Asian and other European) on the basis of BMI and body fat percentage (BF%). The BMI value of the two scientists were similar (i.e.  $22.3\text{kg/m}^2$ ), while the BF% analysis revealed a surprising result; the Asian scientist had a higher body fat (21.2%) than his European fellow (9.1%) despite the fact that they shared the same BMI. Here one important point needs to be elaborated i.e. the contribution of genes towards increased accumulation of fat [15]. One such idea is the "thrifty gene hypothesis" proposed by James Neel in 1962 which showed that human beings have a genetic predisposition for developing obesity and metabolic disorders. It is believed that due to certain environmental changes, this gene is now highly active particularly in the South Asian Population [8], additionally it is also linked with subclinical inflammation that leads to the development of metabolic syndrome [16] so the simple notion of obesity being a psychological disease is no longer valid.

Rather, all these scientific evidence support the role of obesity being a metabolic disease rather than a behavioral problem alone, though sometimes presence of both these factors may enhance the weight gain.

The question that arises now is how to make a difference in perceptions of obesity? For obesity to be highlighted as a problem bigger than just a lack of will power; what needs to be done for the general population to change their deep seated notions and views about obesity stigma. To overcome this problem, we can start by training ourselves and our families especially children, to not humiliate people with obesity, rather be compassionate about this issue, perhaps this will decrease their apprehension and motivate them to opt for seeking healthier non stigmatized solution. Individuals suffering from obesity are intensely aware of these obesity stigma's. A recent study conducted in Australia showed that the study subjects identified the world as an 'anti-fat' society. They also blamed themselves for feeling stigmatized, and felt emotionally distressed, socially isolated, and unwelcome, leading to withdrawal from routine chores and social activities [17]. We must overcome our victim-blaming attitude and in its place support and design an all-inclusive obesity prevention policy. This could be done by designing interventions that focus primarily on health to be a motivator and desired target for behavioral transformation, rather than focusing on achieving an ideal weight and body size. Children and their parents should be made aware of these facts through workshops/interactive sessions and anti-stigma messages at schools as well as at community level. This seems as a very minor change but it may make a huge impact if they knew at a younger age that being healthy does not necessitate them to have an ultimate waist line or body shape. More so, unhealthy eating practices should be condemned for everyone, irrespective of their weight and size. Not only should we recommend this to the general population but stigma-reduction training

should also be given to health care providers, since they are the major resource person in contact with people suffering from obesity.

Furthermore, media should also play a sensible role in not representing subjects with weight issues as outcast; instead they should focus more on the notion of being healthy rather than looking thin i.e. a size zero. Recently media has picked up on this notion, and started to highlight personalities involved in various industries such as fashion who are advocating the idea of obesity not being a personal choice only. Lastly, more focused research needs to be done to identify the reasons that are embedded in people's minds and to devise ways for them to be eliminated. What drives a person to stigmatize obese people? Is it that the person is insecure about his or her own body image?

To conclude; since enormous amount of resources are assigned towards health care and obesity prevention, it is also important to recognize and appreciate the multifactorial basis of obesity. It will not only support eliminate obesity stigma from the society along with its deleterious effects, but will also produce a support system that will favor responsible actions to improve overall health regardless of the weight status of an individual.

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