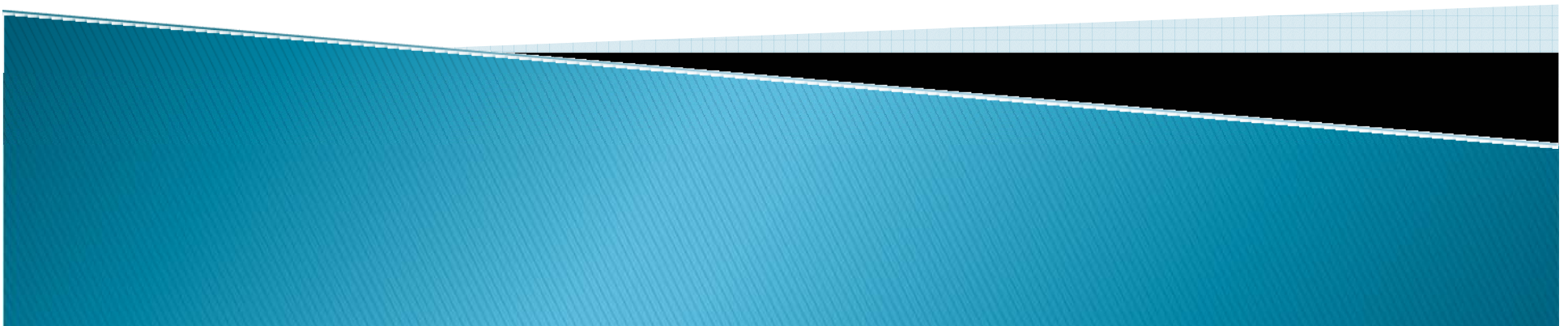


Obesity

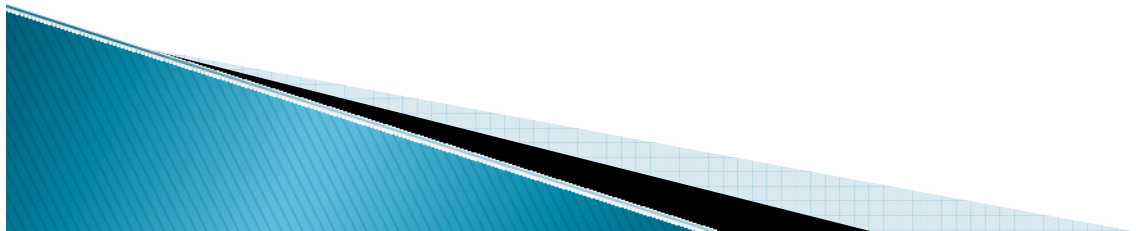
A personal illness or a public problem?

Ástríður Stefánsdóttir
University of Iceland School of Education
August 30th 2010
Public Health–Ethical Issues



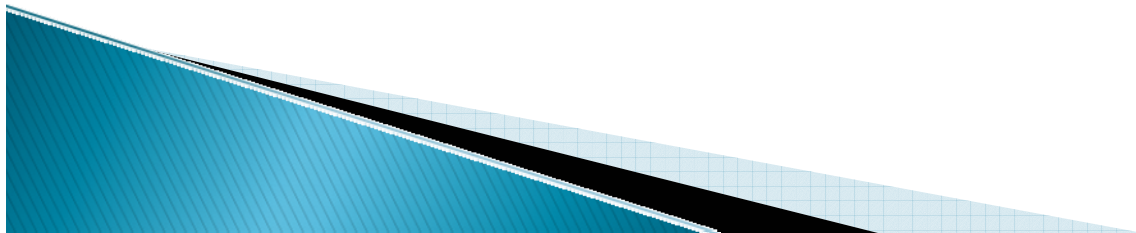
Medical management of obesity

- ▶ “Specialized hospitals and treatment centres for outpatients should take care of the 60% of the population suffering from overweight and obesity.”
- ▶ J.G. Wechsler, K. Leopold, „Medical management of obesity“, [*Langenbeck's Archives of Surgery*, 388 \(2003\)](#): p. 9 of 10 (internet version).



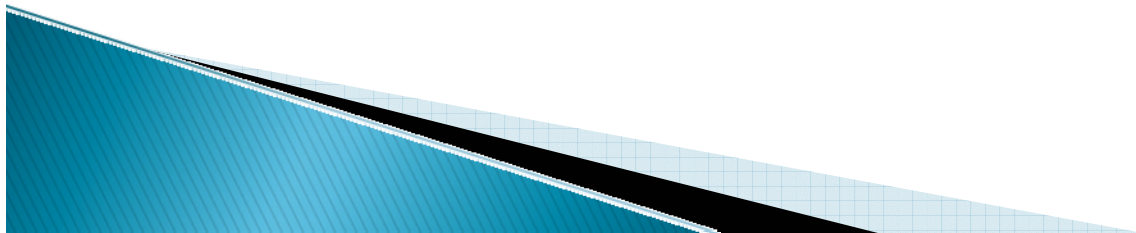
The thesis of the lecture

- ▶ If we regard obesity as a health problem, we make it primarily the task of medical professionals. That will lead us on the wrong track and make it more difficult for us to find realistic and sensible solutions.



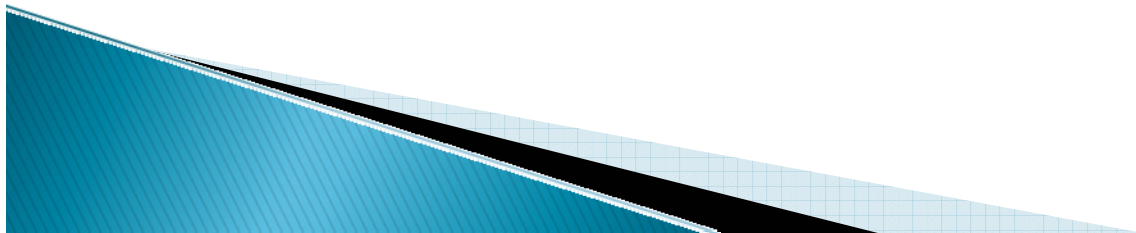
Talk Overview

- ▶ The medical approach
- ▶ The environmental approach
- ▶ Why obesity should not be defined as a disease?
- ▶ What is Obesity?
- ▶ Conclusion



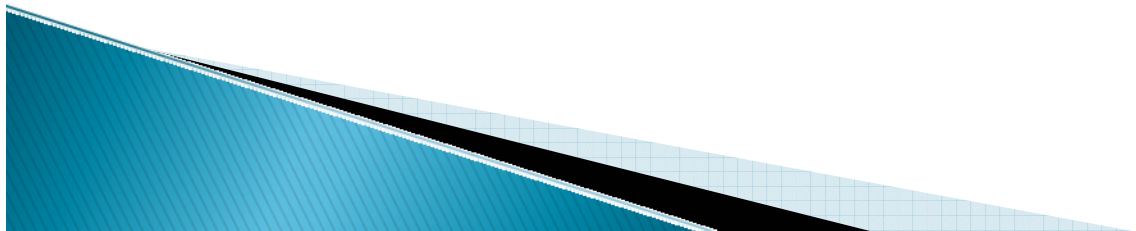
The medical view

- ▶ What is wrong with the individual?
 - Being overweight and obese is based on the fact that this imbalance is situated first and foremost within *the individual* and therefore it is crucial to treat the individual to gain the right balance.



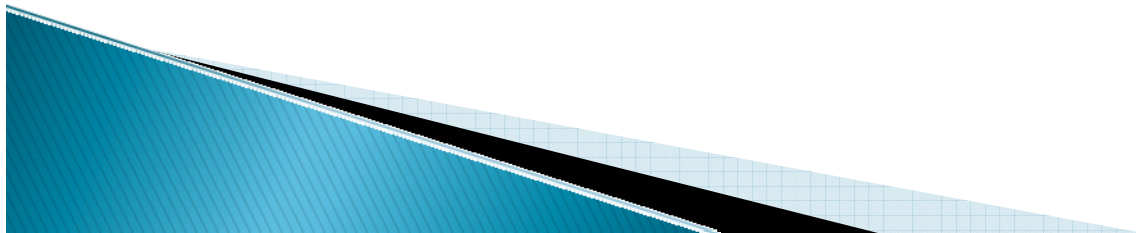
“The shame”

- ▶ **...Prejudice is revived daily in the routine interactions of doctor and patient in which patients are offered dietary treatments and fail to benefit from them. This ongoing failure demands a culprit: either treatment is flawed or the patient is flawed, failing to comply with the appropriate remedy. As the more credible medical profession is refusing to blame its prescriptions patients are left to absorb the stigma failure. We should stop offering ineffective treatments aimed at weight loss. Researchers who think they have invented a better mousetrap should test it in controlled research before setting out their bait for the entire population. Only by admitting that our treatments do not work-and showing that we mean it by refraining from offering them-can we begin to undo a century of recruiting fat people for failure.**
- ▶ Wooley C. S., Garner D.M. Controversies in Management: Dietary treatments for obesity are ineffective. BMJ 1994; 309:655-656 (10 September)



The “obeseogenic environment”

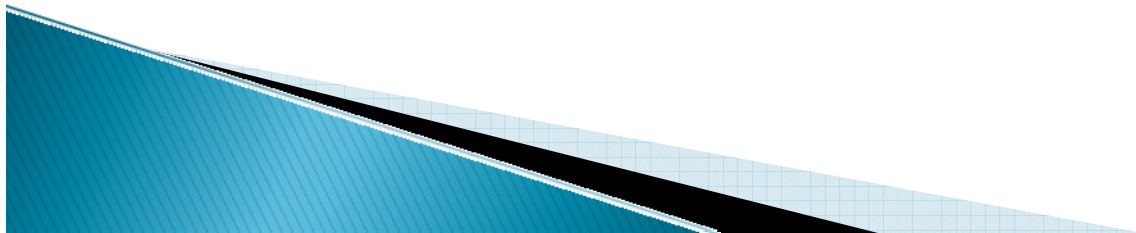
- ▶ What is wrong with our surroundings?
 - What is it in our surroundings that changes the energy balance of the body in a healthy individual?



Changes in the Environment

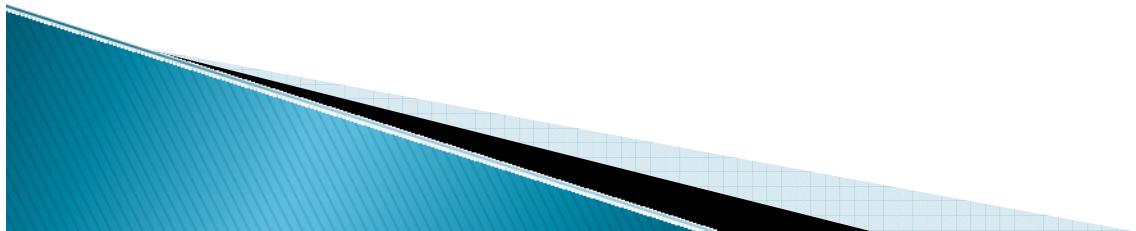
- “Safety concerns, such as heavy traffic and high crime rate, lack of equipment, lack of space, and urban development that favours vehicular transportation are barriers to activity outside school. The World Health Organization has identified transport-related physical activity as an important intervention with which to address the global obesity epidemic, as well as environmental issues such as traffic congestion and its associated pollutants. In the United States, a decrease in transport activity parallels the increase in paediatric obesity. Walking or biking to and from school can help students meet their physical activity needs. However, heavy traffic, lack of bicycle lanes, unmarked intersections, and other obstacles have reduced the number of children who transport themselves to school today, compared with previous generations”

Spear B.A, Barlow S.E., Ervin C., Ludwig D.S., Saelens B.E., Schetzina K.E., Taveras E.M. Recommendation for Treatment of Child and Adolescent Overweight and Obesity. *Pediatrics* (Official Journal of the American Academy of Pediatrics). Vol.120 Supplement December 2007, pp. S254-S288.



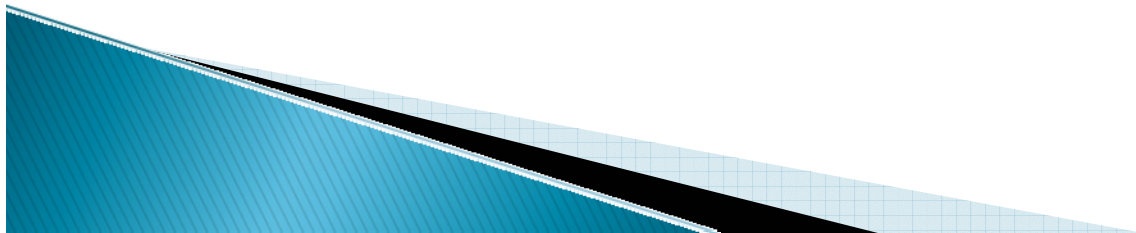
Effects of different environments

- ▶ In the UK and in the US the problem of obesity has increased faster in recent years than in other countries. Now about two-thirds of adults in these countries are overweight or obese (66.90%, 66.30%).
- ▶ A counterexample would be Norway where the problem seems to be a little better controlled where "only" about a third of the population is overweight or obese (33.40%).
- ▶ WHO, Global Database on BMI (last update 20/11 2008)
<http://www.who.int/bmi/index.jsp> sótt á netið 20.11 2008.,



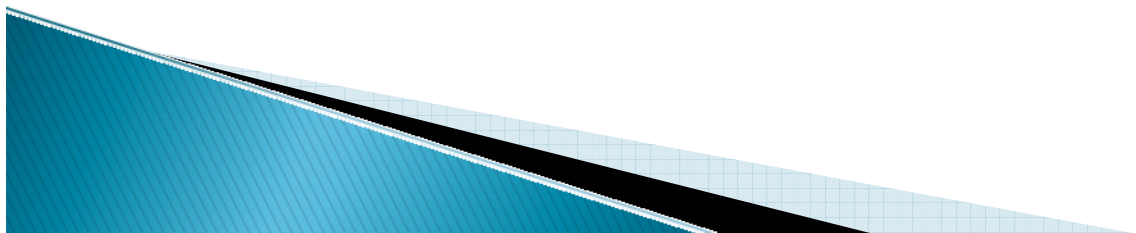
Two reasons for why it is wrong to look at obesity as a disease

- ▶ The problem of the environment becomes invisible.
 - The solutions offered by medicine do not attack the real root of the problem, as they are solely aimed at the symptom, which in this case is the overweight or obese individual.
- ▶ It can be harmful for the overweight or obese individual.
 - The responsibility and capabilities required of the person to tackle his or her problem is therefore grossly undermined because the doctor is supposed to cure the patient, patients are not supposed to cure themselves.



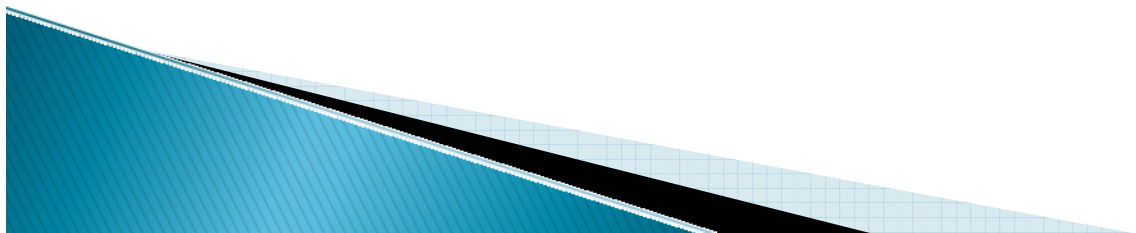
What is obesity?

- ▶ Obesity is not a disease, at least not a disease of individuals.
- ▶ It is an indication of a deep-rooted problem in society, and could even be described as a disease of society.
- ▶ It is a sign of an ethical problem
- ▶ A problem of the future



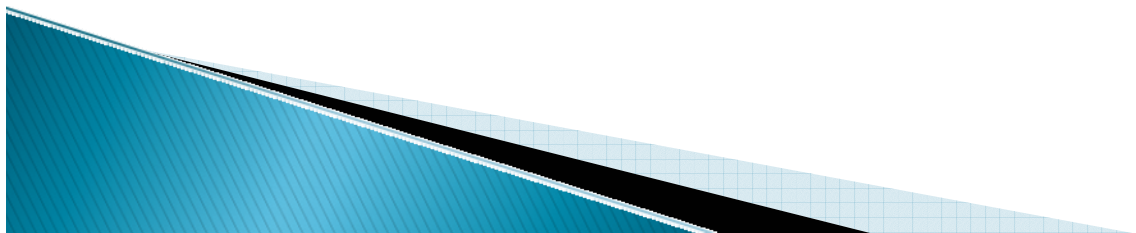
Conclusion

- ▶ It is necessary to approach the problem differently.
- ▶ We need to view obesity as a signal, indicating an environment where it is not possible for the majority of those living there to lead healthy lives.
- ▶ We need to make the responsibility for that political.
- ▶ Those who are responsible are those who structured this environment, not the children and the adults that grew fat in it.



This Train of Thought Leads to Two Things

- ▶ The view discussed here is a necessary foundation for the social solutions that need to be created, solutions that make it easier for people to live a healthy life.
- ▶ This view will take the responsibility of the problem from those who are fat and free them from the shame they live with in today's society. That might empower them to gain better control over their personal lives.



Questions?

Thank you for your attention!

