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Fight Obesity: Get into ACTION before it shows its REACTION

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Executive Summary

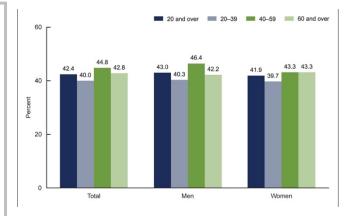
Obesity is a non-communicable disease and most common cause of preventable deaths in the USA. Obesity is caused due to multi structural components like socioeconomic status, physical environment and multifactorial lifestyle behaviours which are influenced at multi-institutional levels like schools, families, workplaces, government¹. In the United States more than one in two adults are diagnosed to be obese. With 36.2% of obesity rates in the United States, it ranks 12 in the world and ranks 1st among OECD countries². The obesity rates range from 23% to 38.10% among different states within the US².

Key messages and recommendations

- Obesity is a serious health concern because there are several health consequences associated
 with it. Identified system gaps include insufficient SNAP incentives, PHIT Act to be signed into
 law, Mandate one hour of physical activity daily at workplaces during working hours.
- Brief Statement: A Health in all policies approach and its subsequent implementation will
 have an impact on various factors which are responsible in shaping the health of the
 population. The health in all policies approach acts by closing the health gaps as shared health
 goals through cross-sector collaboration and will directly act on availability, effectiveness and
 distribution of Social Determinants of Health which influence obesity.
- Policy Recommendation System Social Determinants
 - Improve SNAP incentives up to 30% more to address month end crisis among lowincome people
- Policy Recommendation System Policy and Funding:
 - Sign Personal Health Investment Today Act H.R. 3109 & S. 844 into law
- Policy Recommendation System Community Infrastructure:
 - Mandate one hour of physical activity daily at workplaces during working hours

The Issue

Obesity is defined as the weight of the person higher than the weight which is considered healthy for a given height³. Obesity is measured by calculating the persons BMI. BMI greater than 30 in adults is obese³. The prevalence of Obesity in the United States among adults aged 20 to 39 years is 40%, 40 to 59 years is 44.8% and 60 years above is 42.8%³. Moreover, it is highest among non-Hispanic black adults 49.6%³. Obesity is a serious public health concern because it is associated with several physical and psychological co morbidities of health. Obesity increases cardiovascular mortality rates by 4 folds, cancer related mortality rates by 2 folds, and overall cause mortality rates are increased 6 to 12 folds⁴.



Strengths of the Current System

Given the high levels of adult obesity rates the overall systems are working collaboratively towards a common health goal by allocating resources and developing interventions at different levels as required to overcome the burden of the obesity epidemic. How policies and infrastructure are established based on the data on health behaviours and social determinants which are funded through the funding department, demonstrates the very well interconnection of the systems.

The system component strengths are highlighted as follows

• Health Behaviours

 Health behaviours helped to identify the significant behavioral trends among the studied population and risky behaviors resulting in obesity. They assisted in determining influencing factors which has an impact on health-related behaviours which resulted in obesity.

Social Determinants

Social determinants are the influencing factors over the entire system. The development
of every other component of the system is reliant on social determinants. The
subcomponents (Education, Economy, neighbourhood, employment, community
cohesion) are the major causes to develop obesity.

Policies

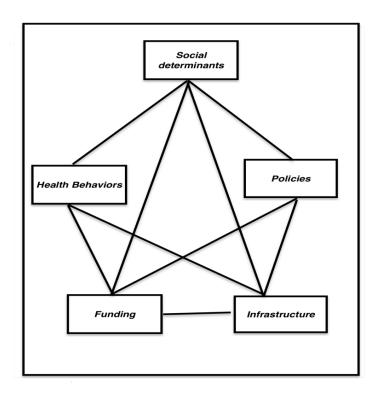
Federal, State and local Policies identified have great impact on the health issue as they
influence living condition of people. They are aimed at reducing health disparities and
improve health equity.

• Funding

Funding is the most essential part of the entire system. To remove social determinants of health, policies need to act and for the policies to act funding is required which highlights the interdependence of entire system on funding.

• The public health and community infrastructure

 The public health and community infrastructure is strongly built. They work in various ways to address social determinants from conducting research to developing strategies to combat obesity and they influence health behaviours based on the availability of resources.



Needs and Policy Recommendations

Despite of the fact that existing system is great, there is always room for improvements. The addition of recommendations will improve the system by achieving better outcomes than before. As nutritious food and regular physical activity are important in battle against obesity, recommendations are made at various levels based on them.



Recommendation 1: Improve SNAP incentives up to 30% more to address month end crisis among low-income people

It is found that 50% of SNAP benefits are getting exhausted by middle of the month making it difficult for low-income individuals and families to procure nutritious food at the end of the month. Moreover, due to depletion of sources they end up consuming low-price calorie dense fast food which is having ultimate impact in continuation of healthy eating behaviour. Therefore, if SNAP incentives are increased up to 30% more per month it would be beneficial.

Recommendation 2: Sign Personal Health Investment Today Act H.R. 3109 & S. 844 into law

The PHIT Act is bipartisan legislation where consumers can pay for physical activity expenditures like sports and fitness equipment, bike rentals, fitness tracking devices, health club memberships, exercise videos, etc., using funds from pre-tax medical accounts (Health Savings Accounts and Flexible Savings Accounts). If passed this act will allow consumers to use nearly 1000\$ from their pre-tax medical accounts on physical activity expenses and they can save 20% to 30% of fitness expenses through this Act.







Recommendation 3: Mandate one hour of Physical activity daily at work during working hours

As McAllen is considered as America's fattest city with 44.90% of adults being obese it is very important for regular physical activity to burn excess fat. By creating an atmosphere that integrates physical activity into the workplace can help employees to reach their fitness goals. In many cases it is difficult for the person to indulge in physical activity after a tired day at work. Therefore, if physical activity is made mandate at workplaces, then public health can make sure that majority of population is getting minimum physical activity in a day.

Opinion.

Obesity is a preventable non communicable disease. We can stop obesity reaction by getting into some action. Reaction of obesity is its related consequences like cardiovascular disease, osteoarthritis, sleep disorders, mental disorders, pulmonary diseases, and cancers. We can act by adapting healthy behaviours. Healthy food choices and lifestyle choices decrease the risk of obesity and its associated comorbidities by 80%. In many cases despite a person wants to follow healthy lifestyle habits, social determinants of health may act as barriers particularly socioeconomic status which will prevent a person from achieving desired health goals. Therefore, in such cases policies help people to overcome the barriers to health and funding helps these policies to run successfully. Despite the system is collecting data, developing strategies, implementing them, and getting support from the community the prevalence of obesity has not decreased. This might be due to insufficient incentives given to follow a healthy lifestyle regularly, not passing PHIT Act to law so that people can use their pre-tax accounts for equipment to improve their physical activities and adults might not be getting enough time to do regular physical activity due to their busy life schedules. Hence, the recommendations are made to close a few gaps in the system which are enabling people to follow healthy lifestyle habits.

Limitations.

Not all recommendations are imagined or dealt correctly. There are limitations within every system pertaining to life. Whilst recommendations were made based on 5 components of the system, there are other components with gaps to be identified and recommendations to be made. Recommendations do not state that the present system is ineffective, and does not cover all the existing gaps, rather they are few suggestions to help cover the identified gaps and enhance existing system, to achieve better goals. Recommendations made were limited at federal and community level, future recommendations can be made at other levels of the system. Another limitation includes that the recommendations were designed to compel behavioural change, but it is yet unclear if these changes will be sustained in the long run.

Challenges (and Solutions).

Every recommendation made has its own barrier in implementation known as implementation barriers. They can stem from variety of factors such as opposition, insufficient resources, conflicts with stake holders, political leaders, lack of political will or collaboration between required organizations. Increasing SNAP incentives or signing PHIT Act to law has its own challenges as they should be accepted by house of representatives and Senate, who may have their own political differences, even if both agree on a point increasing SNAP incentives would not be that easy because it may have overall impact on present SNAP budget grossly. Mandating physical fitness will create challenges to both employers and employees. Employers would not be happy to give away their paid working office hour for physical fitness for employees and there are chances that employees may not use that time for physical fitness but rather do some of their personal work. However, the challenges can be overthrown by cross sector collaboration between governments, organizations, groups, and stakeholders.

References and More Information

¹Sandra G. Affenito, Debra L. Franko, Ruth H. Striegel-Moore, and Douglas Thompson (August 16, 2012). Behavioral Determinants of Obesity: Research Findings and Policy Implications. Retrieved from Journal of Obesity, vol. 2012, Article ID 150732, 4 pages, 2012. https://doi.org/10.1155/2012/150732
²Britannica Procon, Global Obesity Levels ((March 2020). Retrieved from Britannica Procon.org. https://obesity.procon.org/global-obesity-levels/

³Centers for Disease Control and Prevention (February 11, 2021). Adult Obesity Facts. Retrieved from Centres for Disease Control and Prevention https://www.cdc.gov/obesity/data/adult.html
⁴Osama Hamdy, MD, PhD (March 09, 2021). Obesity. Retrieved from Medscape https://emedicine.medscape.com/article/123702-overview#a6