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OPINION

Obesity: Is personal responsibility the answer?

By James F. Sallis

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Obesity is becoming a defining issue in the United States. So many children are now overweight that "adult" diabetes is an epidemic that foretells long-term suffering of individuals and enormous medical costs for the nation. Two-thirds of adults are now overweight, and the rate continues to increase. It has taken the federal government a couple of decades to decide obesity is a problem, but the government's strategy is now becoming apparent.

The House of Representatives recently passed the "Personal Responsibility in Food Consumption Act." The law would prohibit lawsuits holding restaurants liable for their customers' obesity. Last month, a Department of Health and Human Services representative objected to the World Health Organization global strategy to combat obesity by stating that the administration insisted on emphasizing personal responsibility instead of policy changes. On the day of the announcement that obesity and inactivity are now rivaling tobacco as the No. 1 cause of death, the Department of Health and Human Services began a public service ad campaign to encourage people to move more and eat less. One clever TV spot encouraged people to take the stairs to help them lose their "love handles."

These three apparently separate government actions define an approach to what is quickly becoming the most deadly and most costly health problem in the country. It is clear that the main strategy – perhaps the only one – is to promote personal responsibility for eating and exercise choices. Much can be said in favor of this approach.

Paraphrasing a recent statement from the president of the National Restaurant Association, it is obvious that everyone can freely choose whether, what, when, where and how much to eat. We also decide every day whether and how much to exercise.

Encouraging more healthful choices does not restrict any freedoms. As a health psychologist, for years I have studied programs to teach people behavior change techniques that help them make more healthful choices. There are many programs that significantly help people improve their lifestyles. Over the years people have reduced their fat intake, and there have been small increases in exercise levels and fruit and vegetable intake, proving the population can change.

It sounds like everyone agrees that helping people make more healthful choices is the way to go, so the government's strategy should be endorsed.

But there is another side of the argument. Although teaching behavioral change skills can be effective, many of us who develop and study these programs for a living have realized a number of limitations.

First, although many well-designed programs have significant effects, even the most motivated participants do not change, and changes generally are modest.

Second, most people do not want to participate in programs offered by work sites, health care organizations, schools and the Internet. Behavior change takes effort, and people prefer to use machines that promise "exercise without effort," pills that make unsubstantiated claims and fad diets.

Third, the biggest problem is that most changes don't last. About 50 percent of exercisers drop out after a year. Diets go back to normal after programs end. Success rates five years after behavioral obesity treatments are usually in the single digits.

Even though we have been promoting physical activity since the 1970s, only about 12 percent of adults claim to do regular vigorous exercise, and about 30 percent admit they do no structured activity. A consensus is developing among health scientists that the obesity problem is so widespread that programs promoting only personal responsibility will never be sufficient to control the epidemic.

Why does the personal responsibility approach not work better? To begin with, food choices are not entirely free. From birth, humans have biologically based preferences for sweet and fat foods, and these both drive consumer demand and constrain choice. The food industry is built around these preferences.

Not only are sweet and fatty foods vastly cheaper than nutrient-rich fruits and vegetables, but they are almost the only foods that are advertised. Take a look at the food ads on children's TV sometime and try to find an ad for something that is not sweet or fatty. It is clear to most of us that children are not able to make rational choices about foods, so foods ads can be considered exploitation. In an area of soaring childhood obesity, this is no longer acceptable.

Although individuals do need to take responsibility for what they put in their mouths, what about the responsibility of food companies? Is it responsible to heavily promote foods of low nutritional value to children and adults? Doesn't this make it more difficult for people to make healthful choices?

But people have free choice when it comes to physical activity, right? No one is chaining us to easy chairs, but a wide variety of companies spend a great deal of money to make it easy for us to be sedentary and difficult to be active. The billions of dollars spent on ads for TV shows, movies, DVDs, computer games, professional sports, cars and computers tell us how great it is to sit.

How many ads are there encouraging us to take responsibility to be active? Very few. When some people want to go out and take a walk, they find tree-lined sidewalks, well-lit trails and attractive parks. But when too many Americans go out their doors, there are no sidewalks or trails, the streets are filled with fast traffic, there are few safe street crossings and the parks are run-down.

Numerous studies show that people walk less in suburbs built on the assumption that people would drive everywhere. We have invested trillions of dollars to maximize the convenience of auto travel, with very little consideration given to making our streets safe and attractive for pedestrians. When we design for pedestrians, we find people walk more.

We know eating and physical activity are not driven only by personal responsibility. We have created environments that make it difficult to make healthful choices. A national strategy that addresses only part of the problem is likely to fail, and the stakes for failing to control obesity are too high. We need to motivate and help people make healthful choices, but we also need to create environments that make the healthful choice the easy choice.

We have a long way to go on both of these goals. The nation cannot afford to politicize the debate over personal versus societal responsibility for eating and physical activity. Individuals, families, community and faith-based organizations, corporations, and governments all must take responsibility for contributing to the solution of this national problem.

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