Introduction

As you think about a plan of action for managing obesity, you first need to size up your opponent. The statistics are mind-boggling — obesity is an epidemic. Each year approximately $150 billion dollars of medical costs in the U.S. are attributed to obesity. One in three adults and one in six children are obese, making it more probable that these individuals will develop a serious illness in the future. Three factors influence whether someone becomes obese: genetics, environment, and behavior. While you cannot change your genetics you can change your environment and behavior.

According to the study *F as in Fat: How Obesity Threatens America’s Future 2012*, one can see how obesity is affecting the country. By 2030, 13 states are on track to have obesity rates of 60 percent, 39 states may be above 50 percent, and all 50 states above 44 percent. If obesity rates continue at this pace, cases of Type 2 diabetes, heart disease, stroke, hypertension, and arthritis may increase 10 times by 2020. That is just a few years away.

This fact sheet will focus on the environmental and behavioral factors that create challenges in achieving a healthy weight. Included will be a look at food, activity, and emotions to get a snapshot view of why the United States has an obesity epidemic, and look at ways to manage it.

The Food

Calorie balance is one key to a healthy weight. Calorie balance is achieved when the calories consumed from food and drinks equal the calories used for physical activity and metabolic processes. It may sound simplistic but calorie imbalance — or consuming more calories than the body uses — is one reason for the growing national and global epidemic of obesity.

Consider the quality of calories and nutrients in the foods consumers are choosing. Research reported in the *American Dietetic Association Complete Food and Nutrition Guide* found that regardless of body weight, many people of all age groups consume too much solid
fat, cholesterol, sodium, added sugar, and refined grains. Too much of these may increase the risks of certain chronic diseases. A small serving of these energy-dense foods contains a large number of calories. Choosing unhealthy foods instead of nutrient-dense choices, foods that contain many nutrients in relationship to the number of calories, makes it harder to meet nutrient recommendations and control calories. Many choices high in sodium, added fat, and added sugar come from highly processed food. Or they may be choices made from a fast food menu. Preparing more food at home, where you control the ingredients, provides the best chance for healthy alternatives.

What should your healthy plate look like? According to the ChooseMyPlate.gov website, fruits and vegetables should cover half the plate. A generous serving of grains, preferably whole, along with a small serving of low-fat protein round out the plate. A serving of low-fat, calcium-rich food is also an important part of a person’s balanced diet. Remember too, that the MyPlate recommendations are based on using a plate 9 inches in diameter. A larger plate, psychologically, invites people to over-consume.

Just as important as the plate you are eating from is the beverage you choose to drink. Sugary soft drinks or fruit drinks fill you up with empty calories and provide little nutrition. Water is the healthier choice.

Other points to consider as you work toward eating a healthier diet are in the “Six Healthy Habits” box on this page. These habits, and more, can be found in the K-State Research and Extension publication MF3053, Action Plan for Healthy Living:

Eating less and making more choices of whole, nutrient-dense food could be the simple advice for slowing down the obesity epidemic. Unfortunately it is not that simple. If it were, a detailed menu plan of meals with the right number of calories would have been included. And everyone who follows it would achieve a healthy weight and live happily ever after. But to make changes that will reduce obesity, those who are buying and preparing food for the family must see the importance of serving nutrient-dense whole foods and stay diligent in their mission. If you want a family member to stop drinking empty calorie sodas or snacking on junk food, stop buying it! Substitute healthier food choices, such as fresh fruits and vegetables and whole-grain snacks. An added bonus will be the amount of money you have in your pocket to spend on nutrient-dense food choices.

The Activity

Eat less, exercise more. It sounds like a simple enough solution to put a stop to the rise in obesity. Some research suggests that the United States is an “Obesogenic” environment — one that encourages overeating and too little exercise. It can be tempting to jump straight into action. “Kids are overweight? Let’s offer lower-fat school lunches! Organize soccer games after school! Tell parents to offer more fruits

### Six Healthy Habits

1. Start your day with breakfast.
2. Include a fruit or vegetable at every meal or snack.
3. Reduce portion sizes.
4. Eat slowly and eat only until you are no longer hungry.
5. Choose to eat more nutrient dense foods.
6. Eat whole foods instead of highly processed foods.
and vegetables as school treats!” But if your action does not address the root causes of the problem, your intervention is likely to have little effect, especially in the long term.

In a study shared during the online Cornell University course “Preventing Childhood Obesity: An Ecological Approach,” the question was posed, “Why are so many children in the U.S. overweight?” The simple answer — eating too much while moving too little. The childhood obesity epidemic is due to both inadequate physical activities among U.S. children and excess caloric intake, which has increased from 1977 to 1996, particularly in adolescents.

The average child or adolescent watches nearly three hours of TV a day. The amount of time spent watching television is directly correlated with obesity. More importantly, reducing TV time through educational interventions has been shown to be an effective way to reduce childhood obesity. TV viewing is thought to impact obesity through dietary choices as well as inactivity. The average child watches nearly 10,000 food and beverage commercials a year. The more children watch TV, the more they request the foods they see advertised. When parents purchase these foods, studies show that children consume more calories. Additionally, many kids associate TV viewing with eating and may overeat while watching because they are distracted and do not realize when they are full.

Regular physical activity, whether structured or unstructured, is associated with a reduced risk of childhood obesity. However, almost two-thirds of 9- to 13-year-olds participate in no organized physical activities outside of school, and more than 1 in 5 engage in no physical activity in their free time. Only 1 in 8 children walk or bike to school. Kids spend a lot of time in sedentary activities such as playing video and computer games and little time in active play or outside, in part because of unsafe neighborhoods, parental absence for work, and long commutes for both parents and their children. Additionally, physical education and recess in schools has been cut back to make more time for academics.

As overweight or obese children grow to adulthood, it is easy to see that the pattern has been set and the challenge to achieve a healthy weight may seem impossible. Regular physical activity is good for overall health.

Despite all the benefits of being physically active, most Americans are sedentary. Technology has created many time- and labor-saving products. Cars are used to run short-distance errands instead of people walking or riding a bicycle. Physical activity does not have to be strenuous to be beneficial. Moderate physical activity, such as 30 minutes of brisk walking five or more times a week, also has health benefits. The key is to find some sort of physical activity you enjoy doing, and then do it!

The Emotions

People struggling with obesity may find themselves on a virtual roller coaster, with several failed diets, badgering from family members or friends, and mood swings looming in their past. Low self-esteem, lack of energy, and dealing with health issues caused by significant weight gain add to the frustrations of daily living.

“Emotional eating is eating for reasons other than hunger,” says Jane Jakubczak, a registered dietitian at the University of Maryland. “Instead of the physical symptom of hunger initiating the eating, an emotion triggers the eating.”

Much of emotional eating is so unconscious that it happens mindlessly. Consider keeping a journal to help you get control of emotional eating. Record where and when you stress eat. The office? When you are alone? Late at night? Every time you eat, ask yourself how physically hungry you are on a scale from 1 to 10. If
you are a 6 or higher it is likely that you are physically hungry. A 3, though, would show that you are stress eating.

If you take out stress eating, you have to put something in its place. Write down a concrete list of all the healthy, noncalorie related activities that give you a quick pick-me-up on a tough day. Here are some simple examples:

- Sip a cup of hot tea. A study in the *Journal of Psychopharmacology* found that people who drank black tea experienced a 47 percent drop in their cortisol levels, the stress hormone that makes you crave food, compared to 27 percent among those who drank a placebo.

- Try self-massage. It can be as simple as placing your foot over a tennis ball and rubbing until it feels relaxed.

- Try a quick breathing exercise to help relax your body. This practice is a healthy way to clear your mind.

For a more in-depth look at emotional eating, refer to the K-State Research and Extension Publication MF2972, *The Ups and Downs of Emotional Eating*.

**Developing an Action Plan**

It is not hard to find studies that correlate negative environmental factors with the obesity epidemic. **Limited access to healthy affordable food; increasing portion sizes; advertising of less healthy foods; no safe place in community to play or be active** — the list goes on and on. You have limited control over some environmental factors, but consider taking action regarding the factors you can control. Consider developing an action plan to manage obesity.

**“What Is an Action Plan?”**

1. **It is choosing to do something you want to do.** If your doctor, friend or spouse is nagging you to lose weight, your commitment and efforts are likely to fizzle out over time. When you choose something you want to do, you will increase your chance of success.

2. **Next, your action plan needs to be something reasonable;** something you can expect to be able to accomplish in a week or a month. A true action plan is behavior specific. Losing weight is **not** a behavior; replacing one sugary snack with a piece of fruit at least three days a week or replacing one 20-ounce soda with water at least four times a week **is**. An action plan answers these questions: What? How much? When? How often?

3. **A successful action plan assesses your confidence level to fulfill the contract.** On a scale of 1 to 10, where 1 represents little confidence and 10 represents total confidence, your plan should rank at least a 7. If you find yourself assigning a confidence level below 7, you need to go back to your plan and see what barriers are preventing you from having a higher confidence level.

**Where to go from here?**

Managing obesity in your daily living through using the action plan concept can create internal motivators — better health, increased energy, feeling in control, and improved self esteem. T. Colin Campbell, co-author of *The China Study*, says, “We need a sustainable solution that becomes part of a lifestyle.” He emphasizes how no one can do it for you. Each person must take personal responsibility related to food and activity choices.

Good health is one of the most precious gifts of life; one often taken for granted. A healthy weight, maintained throughout life, helps you achieve good health in many ways: look your best, feel your best, and reduce your risk for many serious diseases.