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The Gravity of Weight

We Hold These Truths to Be Self-Evident: The Obese Candidate

Should morbid obesity disqualify a politician from seeking higher office?

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Should morbid obesity be a disqualifier for higher office such as the presidency? This question has surfaced in the media recently as there is a political movement to encourage New Jersey Governor Chris Christie, an obese person, to join the 2012 Republican race against President Obama. According to an article in the Huffington Post by reporter Sam Stein, Peggy Howell, public relations director for the National Association for the Advancement of Fat Acceptance (NAAFA), has apparently come to Mr. Christie's defense.

This organization, founded in the late 1960s, under the name National Association to Aid Fat Americans, began as a nonprofit human rights organization to defend against discrimination. Over the years, it has functioned as a clearinghouse for lawyers who advocate for the rights of the obese, as well as provide support groups, a social network, and workshops. NAAFA has rejected the word *obese* because it "pathologizes heavier weights" but, analogous to gay activists who have claimed the word "queer," have reclaimed the word *fat*. For those in NAAFA, fatness is just "body diversity," analogous to racial, ethnic, or sexual preference diversity.

Prejudice and overt discrimination against the obese have a long history. Early Christian teaching labeled gluttony and sloth among the seven deadly sins. Albert Stunkard found, for example, that even in a scroll from 12th century Japan, men appear to be laughing at an obese woman who had to be carried by others. And even Shakespeare called Falstaff "fat kidneyed" and a "huge hill of fat."

There is also evidence that health care professionals, including physicians and nurses who work in the field of obesity, maintain certain prejudices against their patients, with some viewing their patients with typical stereotypes such as they are lacking self-control, worthless, and lazy. And one study found that those caring physically for the obese were repulsed by them and preferred not to have any physical contact with them. Even Ancel Keys, one of the foremost researchers in obesity and the first to popularize the use of body mass index (BMI) as a standard for classifying levels of obesity, called obesity "disgusting as well as a

hazard to health." And Wadden and Stunkard have described how some have called obesity an *aesthetic crime*--namely, "it is ugly."

Further, there are many studies that indicate that the obese are discriminated against in regard to education (e.g. college acceptances), employment opportunities and compensation, marriage, and even jury selection. In one study, children were asked whether they would like to befriend an obese child or one who is handicapped and in a wheelchair, they rated befriending an obese child as the least desirable among several other options, including the handicapped child.

Obesity is multi-faceted and involves far more than self-discipline. About 70 percent of our weight is determined by our genes, (with hundreds of gene loci regulating weight) but environmental (from portion control to circadian rhythms), neurochemical, gender, perinatal, developmental, and psychological factors also are involved.



The Presidents of Mt. Rushmore--should their weight have been a consideration?

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So are the obese physically and emotionally capable to withstand the considerable stress of higher office such as the presidency? That depends, and the situation is clearly a complex one. While there is a category of metabolically benign obesity in which an obese person exercises regularly and has not demonstrated any evidence of disease, most with obesity are much more highly likely to have the metabolic syndrome, a cluster of abnormalities including abdominal fat (the most dangerous place for fat accumulation), hypertension, abnormal glucose levels, insulin resistance, and overt diabetes, as well as abnormal blood lipid levels and even sleep apnea that make them more susceptible to chronic (and often debilitating) illness. Furthermore, obesity has not only been associated with cardiovascular disease, but also orthopedic problems, and many kinds of cancer. And there is evidence that obesity is associated with increased mortality, with the higher the BMI, the more likely an earlier death. Studies that have not demonstrated this connection are often those that have not controlled

for smoking so that a higher body weight seems erroneously protective against death.



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Further there is no specific personality found in all who are obese. And though it is also not clear which is cause and which is consequence, obesity has been associated with increased levels of anxiety and depression.

So while obesity, and particularly morbid obesity, with a BMI of 40 kg/m² (Class 3 obesity) itself is not a contraindication to seeking higher office, it certainly should be taken into consideration.

About the Author



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In Print: *The Gravity of Weight: A Clinical Guide to Weight Loss and Maintenance*

Online: my own website

