

Size Discrimination, Obesity, and Gender: Health Effects and Health Politics

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Presenter Disclosures

Donna H. Odierna

The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

No relationships to disclose

Social Epidemiology of Size Discrimination

- Apply social epidemiology framework
- Explore theoretical bases for relationship between size discrimination and health disparities attributed to obesity
 - Not measure/validate health effects
 - No discussion of biological contribution
 - Not gender-specific
 - Special relevance for women

Social Determinants of Health

- Mechanisms by which members of different groups experience varying degrees of health - Graham 2004. Tarlov 1996
- A variety of approaches..all concerned with the organization and distribution of economic and social resources among the population - Wikipedia

Some Social Determinants

- SES (income, education, occupation, wealth)
- Occupation/working conditions/unemployment
- Social support/cohesion/exclusion
- Physical/built environment
- Poverty/income inequality
- Race/Racism
- Discrimination Marmot 1999; Kawachi & Berkman 2000

Social Determinants of Obesity

- Social Contributions
 - Poverty, racism, access to services/resources
- Environmental contributions
 - Availability of fresh food, sidewalks, concentration of FF outlets
- Individual-level contributions
 - Behavior, cultural factors

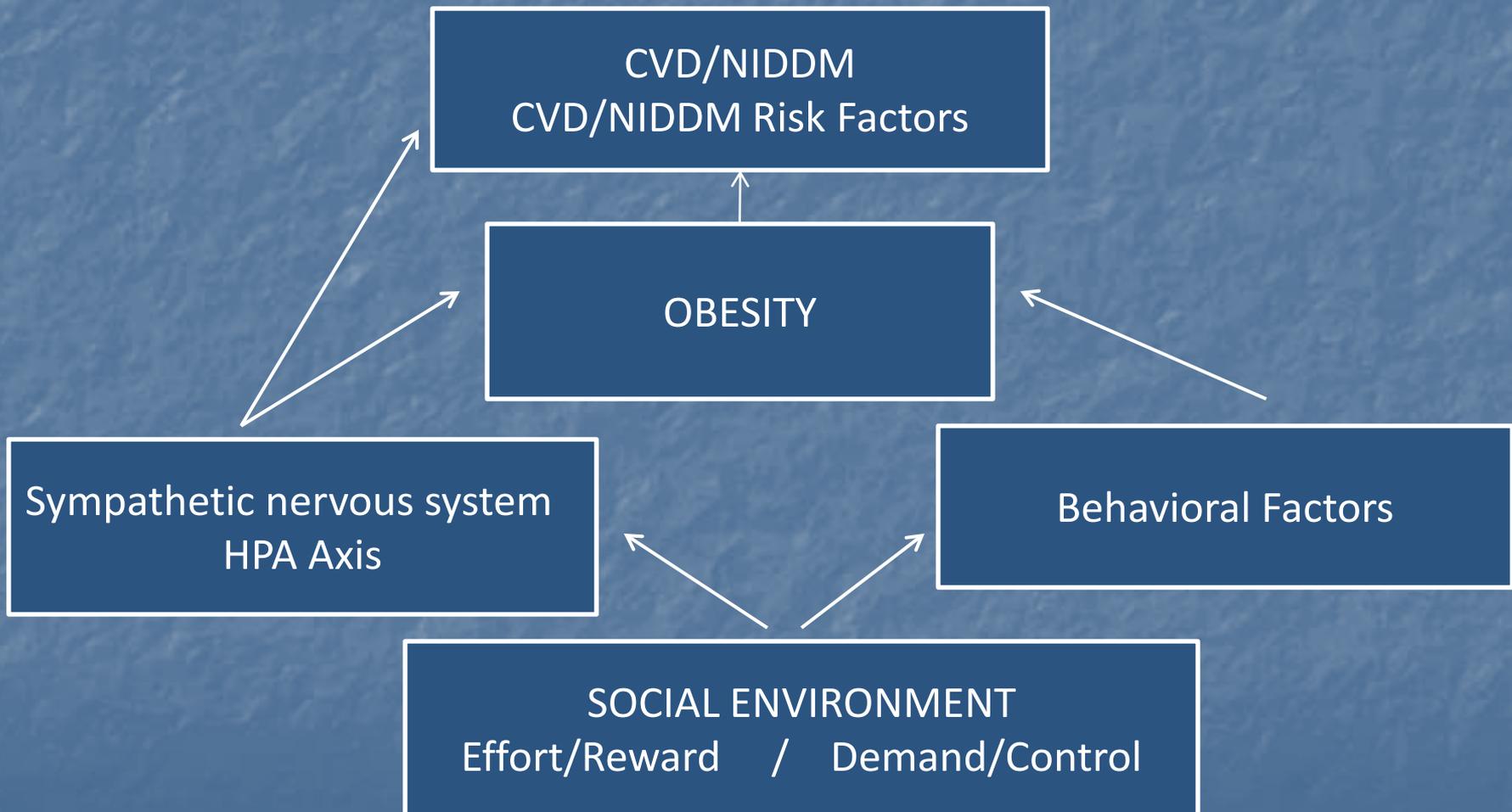
e.g., Brunner & Marmot 1999

Psychogenic Effects of Stress on Health

Direct

adapted from Brunner & Marmot, 1999

Indirect



Social Environment

Size discrimination

Obesity → Health outcomes



Manifestations of Size Discrimination

Economic Discrimination

- Social Determinant: Poverty, low SES
 - Gradient association of low SES on Health
 - Low SES: Higher morbidity/mortality

Marmot 1991; Singh-Manoux Marmot Adler 2005

- Obesity more prevalent among low-SES women in developed countries
 - Food insecurity related to obesity in women
 - Measurement, population issues

Townsend 2001

Women, Obesity, and Economic Discrimination

Fat women believed they NAAFA 1997

- were not hired (60%)
- were denied benefits/promotion (30%)

Employers said they Gustaafson 1993

- would not hire fat women at all (16%)
- or under some conditions (44%)

Fat women earned \$6000/yr less Gortmaker 1993

- Income disparities persist Han 2010

Medical Discrimination

Social Determinant: Access to Healthcare

■ Health Insurance

- 50% higher mortality in uninsured hospital patients 18-64 w/MI, CVD Dorn 2008
- 25% higher mortality in uninsured trauma patients 18-30 Hasan 2010
- Obese patients denied insurance or pay higher premiums Goodman 1995, Fraser 1997

Delays/Avoidance of Treatment

Infrastructure

- Physician training, equipment, difficulty in providing care DeWolf 2002, Allon 1982 , Ferrante 2009

Negative Attitudes: Healthcare providers

- Physicians, nurses, allied health Ferrante 2009, Averett 1994, Fraser 1997

Attitudes: Patients

- >50% of overweight nurses postponed getting medical care - Olson 1994

Weight bias may affect Tx outcomes Carels 2009

Social Discrimination

Determinants: Social Environment, Stigma

- Barrage of negative messages in media,
- Avoidance of situations that might provoke ridicule (i.e., physical activity) Brownell 2005
- Substantial social barriers
 - Dating, education, housing NHLLBI 2003
- Prejudice begins early in life Goodman 1995

Stigma

Link & Phalen: Social selection of consequential differences

Goffman: Spoiled social identity 1986

- Incongruity with stereotype

- Women / femininity Bordo 2003, Orbach 1997

Marginalization

- Actions of others (discrimination)
- Self-protection (internalization, "covering")

Embodying Discrimination

“Incorporating experiences of gender into the body...in ways that may or may not be associated w/biological sex.” Krieger&Zierler 1995

- Expanded to other discrimination Krieger 2000
- *A priori* assumption: disparate social and economic conditions will produce physiologic differences

Pathways into the Body

Endogenous: Perception/anticipation of discrimination provokes anger, fear, "flight or fight"

Exogenous: Poorer detection/management of disease

Krieger 2000

Research questions/framing guided by prevailing social beliefs about weight and gender

Interactions and Multiple Social Disadvantage

Obesity and Disability

Social Determinants: Multiple

- Disabled adults are... (Wall 2002)
 - almost twice as likely to be obese
 - w/mental disabilities; 1.5 times as likely
- Women with disabilities are... (Nosek 2008)
 - 6 times as likely to be diabetic
 - 3 times as likely to be hypertensive
 - more likely to have depression, osteoporosis, reduced access to healthcare

Obesity and Race/Ethnicity

Social Determinant: Racial discrimination

- Higher rates of Obesity, CVD, NIDDM in African Americans and Latinos
 - CHD, NIDDM higher in overweight AA women
Mahdavi 2003
- Substantial interaction with SES-related disparities
Karlsen 2002; Williams 2005; Kawachi 2005
- Biological/social interaction of race, sex, and SES changes risk profile for women
Krieger and Fee 2005

Addressing Size Discrimination: Who/what needs to change?

- Obesity, not weight prejudice and size discrimination often seen as the cause of stigma
- Compare w/other types of discrimination
- Change the terms of the debate
 - Does activism/advocacy reduce health disparities?

Topics for Study

- Relationships among size discrimination, gender, and health outcomes
 - Interactions w/other social disadvantages
 - "Successful" obesity and health
- Relationship between obesity
 - built environment, and health/social outcomes
 - health policy and practice
- Individual contributions of size discrimination and biological factors

The game is 90% psychological.
The other half is physical.

----- Yogi Berra

Thank you!

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