



AMERICANS VIEW OBESITY AS TOP HEALTH THREAT

NEW STUDY FINDS MOST AMERICANS THINK OBESITY IS JUST AS SERIOUS AS CANCER, BUT MOST TREAT

IT LIKE A LIFESTYLE CONDITION BROUGHT ON BY A LACK OF WILL POWER

Eight in 10 Americans (82 percent) believe obesity is just as big a health threat as cancer (82 percent),

but there is a significant gap between what people think and what people do when it comes to combatting a disease that puts them at risk for other life-threatening diseases, including heart disease, diabetes, and severe COVID-19. The findings are from a nationally representative survey of 1,714 adults conducted by NORC at the University of Chicago for the American Society for Metabolic and Bariatric Surgery (ASMBS).

No one ever blamed a lack of will power for cancer, but three-quarters (73 percent) of those trying to lose weight cite that as the biggest reason for obesity. Most also say the most effective treatment for the disease is self-help, through diet and exercise alone.

Both notions—a lack of will power as the biggest cause of obesity and that diet and exercise alone can fix it—show that major misperceptions persist in a country where obesity continues to be a significant public health crisis that affects 42.4 percent of the U.S. population. The ASMBS and NORC did a similar survey of Americans in 2016 that found obesity was considered the top



Three Things You Should Know

about the ASMBS and NORC Survey on Obesity Among American Adults...

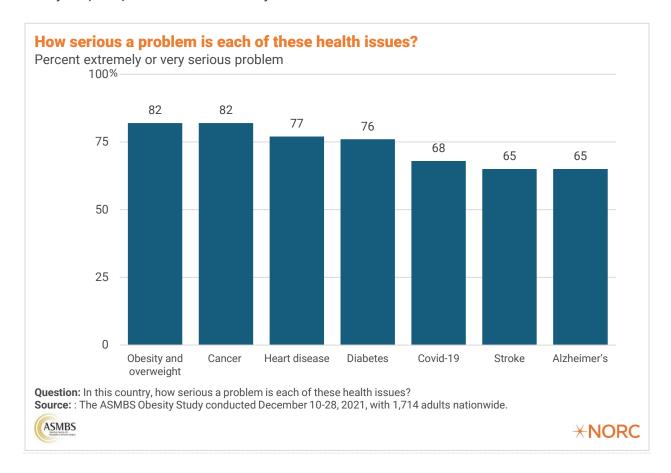
- 1) Obesity ties cancer as the top health threat facing Americans -- 82 percent say obesity is as serious as cancer; 68 percent think COVID-19 is the biggest health threat.
- Three-quarters of those trying to lose weight believe a lack of will power is the top cause for obesity despite scientific evidence to the contrary.
- 3) Misconceptions about obesity treatments are pervasive with 73 percent thinking diet and exercise alone are more effective than weightloss surgery (56 percent).

health threat (along with cancer); little has changed in terms of consumer perceptions and addressing

what many still call a lifestyle condition and not a disease, despite the classification of obesity as a disease by the medical community.

AMERICANS VIEW OBESITY AND CANCER AS EQUAL HEALTH THREATS

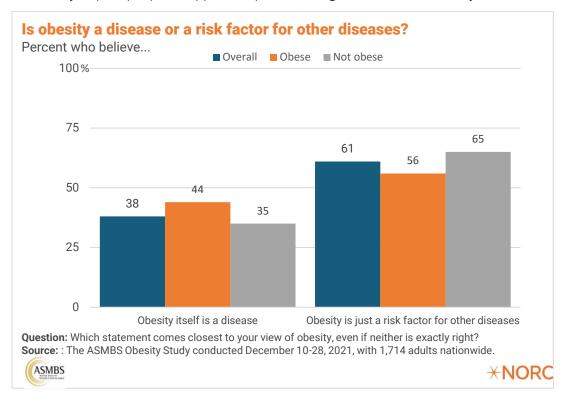
Obesity is considered as serious a health threat as cancer and even more serious than heart disease (77 percent), diabetes (76 percent), and COVID-19 (68 percent), a nearly identical view held by most Americans back in 2016, when ASMBS and NORC at the University of Chicago¹ did a similar national survey on perceptions related to obesity and its treatment.



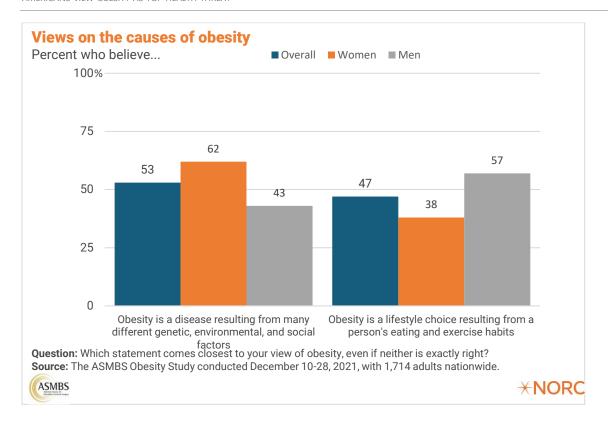
¹ https://pubmed.ncbi.nlm.nih.gov/28935198/

AS SERIOUS AS CANCER BUT NOT CONSIDERED A DISEASE LIKE CANCER BY MOST AMERICANS

While Americans understand the severity of obesity as a health issue, obesity is more commonly seen as a risk factor for other diseases rather than a disease itself. As in the 2016 poll, only 38 percent view obesity as a disease. Those who have obesity are more likely to see it as a disease (44 percent), compared with those who do not have obesity (35 percent). Views on obesity also fall along party lines, with Democrats (44 percent) viewing it as a disease more often than Republicans (35 percent), which may impact people's support for policies designed to address obesity.

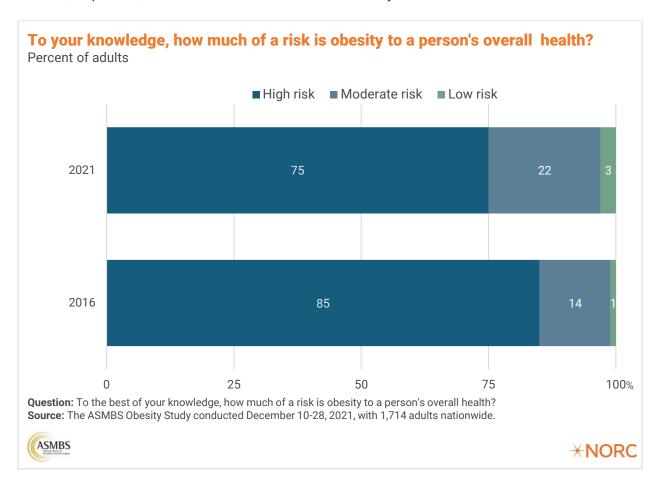


Furthermore, Americans are decidedly torn about what causes obesity. Americans are split as to whether it is the result of lifestyle choices (47 percent) or from genetic, environment, and social factors (53 percent). Men more than women tend to see obesity as a lifestyle choice resulting from a person's eating and exercise (57 percent vs. 38 percent), whereas women tend to view obesity more as resulting from different genetic, environmental, and social factors (62 percent vs. 43 percent among men).



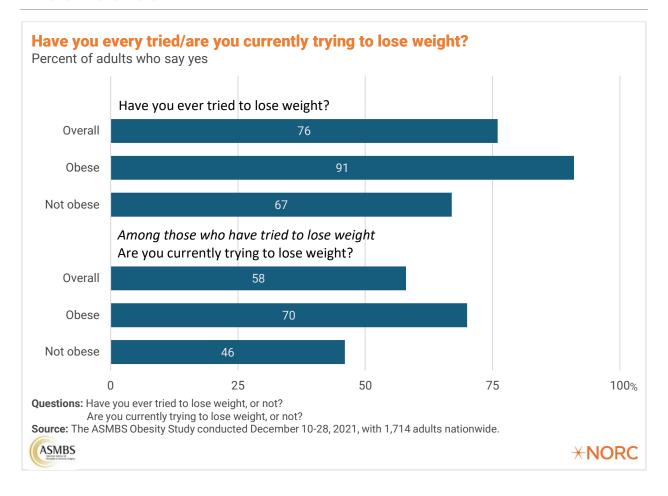
A CHANGE IN PERCEIVED RISK OF OBESITY IN THE LAST FIVE YEARS

Most Americans understand that obesity can pose a risk to a person's overall health; however, the assessment of how much of a risk has decreased. When asked in 2016 how much of a risk obesity was to a person's health, 85 percent indicated obesity posed a very or extremely high risk to a person's health. In 2021, those viewing obesity as a high risk to their health had dropped to 75 percent, despite higher obesity rates and new links to severe outcomes from COVID-19. Americans over 60 (79 percent) seem to be more attuned to the severity of the risk than others.



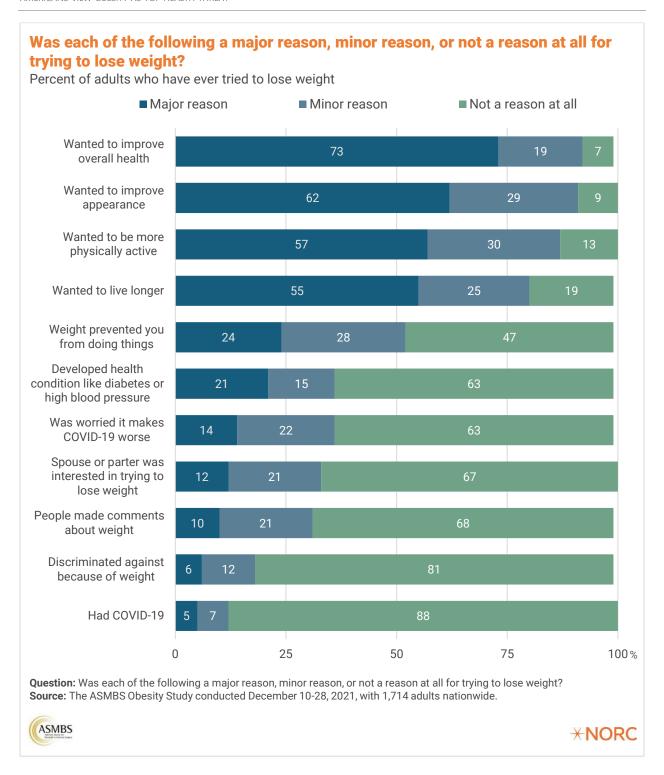
MOST AMERICANS TRYING TO LOSE WEIGHT

Weight loss is a struggle for most Americans. Three quarters (76 percent) of adults have tried to lose weight at some point in their lives, with more than half (58 percent) of those currently in the process. Most of those currently with obesity (91 percent) have tried to lose weight at some point, and 70 percent of those are trying to do so now.



IMPROVED HEALTH AND APPEARANCE TOP MOTIVATORS FOR LOSING WEIGHT

Similar to 2016, wanting to improve their overall health is the major reason cited for taking steps toward losing weight (73 percent). Other motivations include improved appearance (62 percent) and being able to be more physically active (57 percent). Five percent of Americans said having COVID-19 was a big reason for them to lose weight. Thirty-eight percent of Black Americans said it was in response to the development of health conditions such as diabetes or high blood pressure, compared to 21 percent of the general population.

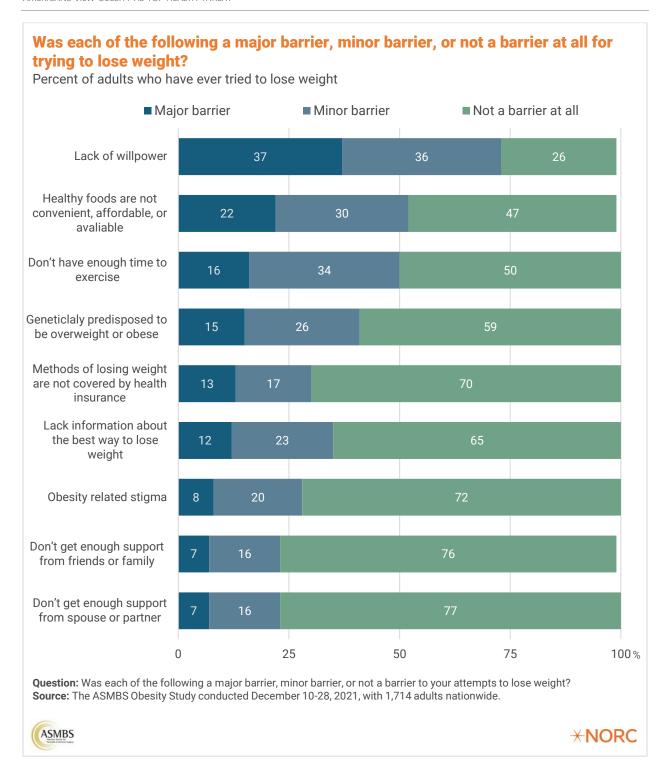


LACK OF WILL POWER BELIEVED TO BIGGEST BARRIER TO WEIGHT LOSS SUCCESS

Despite the knowledge that losing weight would improve their overall health, many Americans still face barriers to weight-loss success. Of those who have tried to lose weight, 73 percent blame a lack of will power, despite scientific evidence that genetics, environment, social, and behavioral factors are leading causes of obesity. Not being able to find healthy foods easily, conveniently, or cheaply were

also considered major or minor barriers to half (53 percent) of those who have tried to lose weight. One in ten (13 percent) felt that they could have a better chance of losing weight if weight loss methods were covered by their insurance. This is down from 20 percent in 2016 who cited this as a major barrier.

Those with obesity tend to feel those barriers more so than those who do not have obesity. In addition, more than half (56 percent) of Americans with obesity see a genetic predisposition to obesity as a barrier, compared with only a quarter (28 percent) of Americans who do not have obesity.



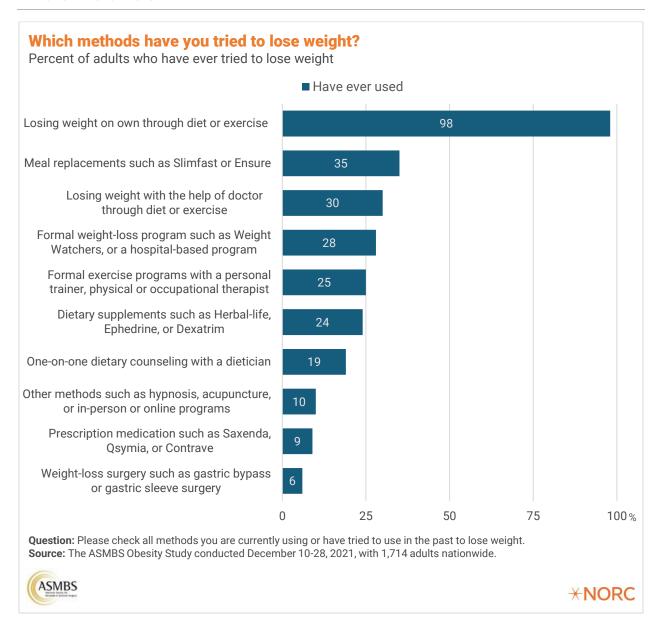
AMERICANS PREFER TO "GO IT ALONE" WHEN IT COMES TO WEIGHT LOSS

Trying to lose weight through diet and exercise on their own is the method nearly all Americans who have tried to lose weight have tried. Methods that include the help of professionals such as doctors, weight loss programs, or exercise programs were far less popular. However, minority populations and women were more likely to seek help from professional programs when they tried to lose weight.

Females are a bit more likely to enroll in formal programs than men. Thirty-five percent of women who have ever tried to lose weight had enrolled in a weight loss program, compared with only 19 percent of men, and exercise programs were used by women (29 percent) more often than their male counterparts (20 percent). Women were also more likely to use meal replacements (40 percent) and dietary supplements (29 percent) in losing weight than were men (29 percent and 18 percent).

Black Americans (41 percent) who have tried to lose weight tended to get help from their doctor more often than did white Americans (27 percent). Black Americans (28 percent) also tended more to seek help from a dietician, compared with white Americans (17 percent). Formal exercise programs were also more popular with Black and Hispanic adults, with one third using a personal trainer or physical therapist, compared with 21 percent of whites.

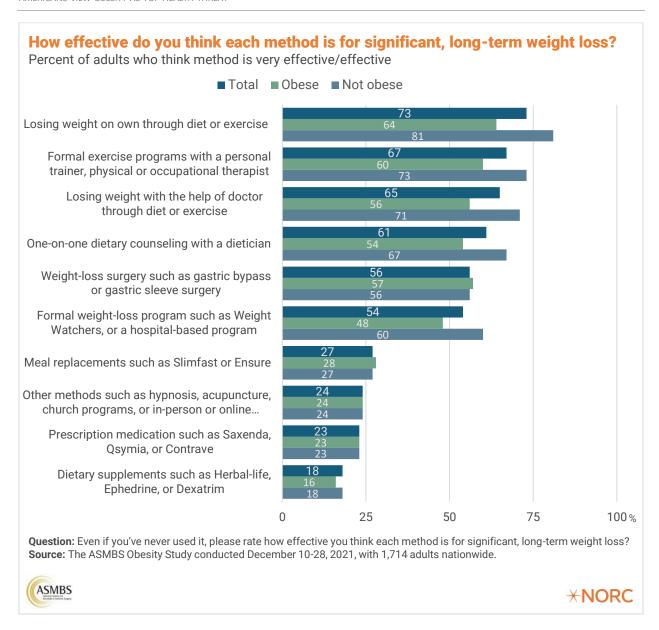
Those with obesity who are trying to lose weight also tended to get help losing weight from their doctor (38 percent) more often than those who did not have obesity (22 percent). Dietary counseling was also used more by those with obesity (23 percent vs. 14 percent).



WEIGHT-LOSS METHODS—PERCEPTIONS OF EFFECTIVENESS

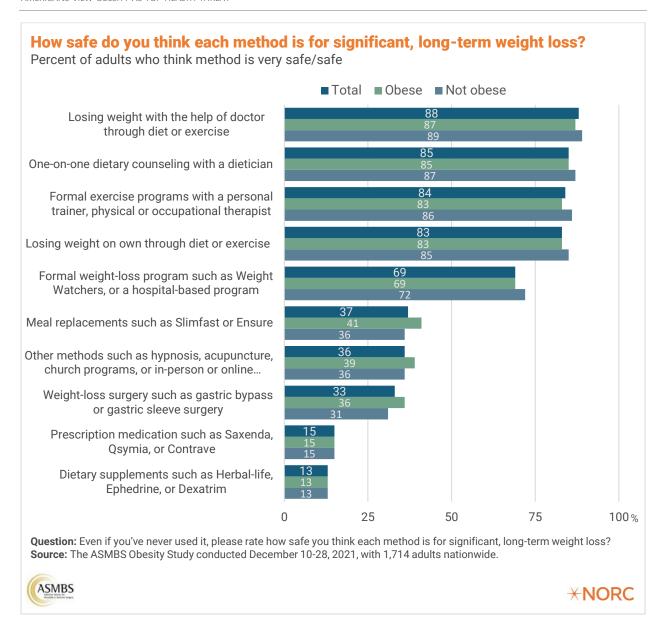
More Americans consider diet and exercise on their own to be the most effective long-term strategy for losing weight (73 percent) and consider dietary supplements (18 percent) to be the least effective. Just over half (56 percent) consider weight-loss surgery effective (slipping slightly from 60 percent in 2016); however, only 6 percent of those who have ever tried to lose weight have had the surgery to manage their weight loss. Nearly a quarter (23 percent) of Americans consider prescription drugs for obesity to be effective.

Those with obesity tended to consider methods such as losing weight on their own, with the help of a doctor, dietary counseling with a dietician, and formal exercise and weight loss programs as less effective than did their non-obese counterparts.



WEIGHT-LOSS METHODS—PERCEPTIONS OF SAFETY

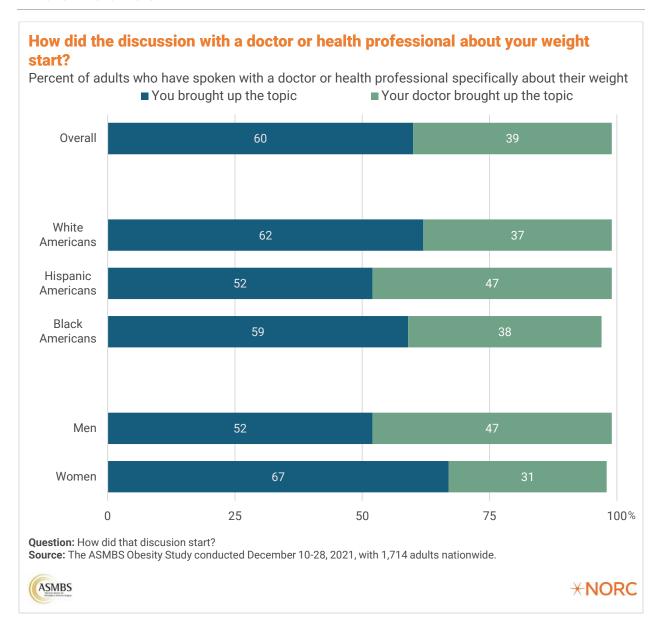
The methods that Americans consider safest for significant, long-term weight loss are among the least tried options when it comes to losing weight. Most Americans report doctor-supported weight loss (88 percent), dietary counseling (85 percent), and formal exercise programs (84 percent) to be among the safest methods of losing weight. Weight-loss surgery is seen as safe by a third (33 percent) of Americans.



DOCTOR INVOLVEMENT IN WEIGHT-LOSS STRATEGIES

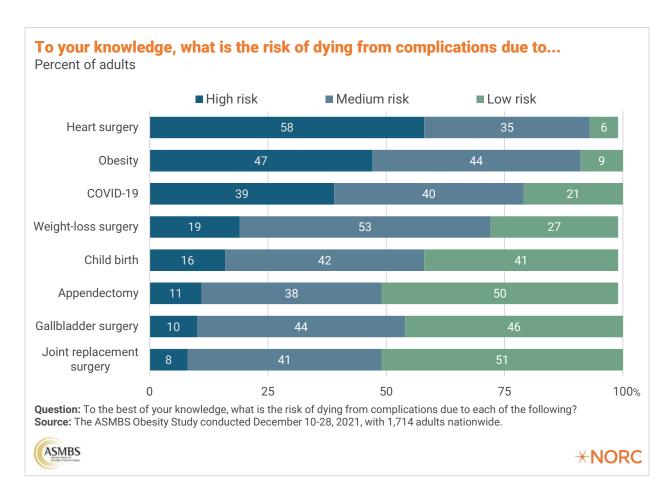
People report that doctors are not broaching the subject of obesity and weight loss; instead, patients are initiating the conversation.

In 2021, as it was in 2016, only 41 percent of Americans have spoken to their doctor about their weight. Among those who have had a discussion, patients themselves had to bring it up (60 percent), as only 39 percent report their doctor starting a conversation about weight. Doctors seem to have an easier time initiating the conversation with men. Nearly half of men (47 percent) who have spoken to their doctor about their weight report that their doctor brought up the conversation, compared to 31 percent of women.



WEIGHT-LOSS SURGERY STILL NOT SEEN AS AN OPTION FOR MOST AMERICANS WITH SEVERE OBESITY

Nearly all Americans with obesity who have tried to lose weight and who are surgically eligible by body mass index (BMI) have not had weight-loss surgery (93 percent) nor have they received a recommendation from their doctor to have weight-loss surgery (91 percent). It is not surprising then that most Americans who have tried losing weight have not considered weight-loss surgery as an option for them to manage weight loss (83 percent). For those who have considered it, women (20 percent) considered it more often than men (11 percent). Americans may be receptive to learning if weight-loss surgery is right for them, as nearly half (47 percent) see a higher risk of dying from obesity than from weight-loss surgery itself (19 percent).



THEN AND NOW—ENDURING BELIEFS

As in 2016, most Americans continue to see obesity as a very or extremely serious health problem (81 percent in 2016 vs. 82 percent in 2021). This ranks on par with cancer (81 percent in 2016 vs. 82 percent in 2021). Nearly seven in ten (68 percent) of Americans see COVID-19 as very or extremely serious health problem.

- While Americans see obesity as a serious problem, in our country today the percent who indicate that obesity poses an extremely or very high risk to a person's overall health has slipped from 85 percent in 2016 to 75 percent in 2021.
- Not quite half (41 percent) of all Americans have spoken with their doctor specifically about their weight. This has not changed since 2016 (41 percent).

- Three quarters of Americans (75 percent in 2016 and 76 percent in 2021) report having tried to lose weight. Of those who have tried to lose weight, six in ten are currently trying to lose weight (60 percent in 2016 and 58 percent in 2021).
- For those who have tried or are currently trying to lose weight, nine in ten (93 percent in 2016 and 92 percent in 2021) want to improve their overall health. In 2021, 36 percent were worried that having obesity could make COVID-19 worse, and 11 percent cited having COVID-19 as a major or minor reason for deciding to lose weight.
- For Americans who have tried losing weight but have not had weight loss surgery, 13 percent in 2016 and 16 percent in 2021 have considered it. Of those considering it in 2021, a third (33 percent) have considered getting weight-loss surgery at some point during the pandemic.
- Only a small percentage (3 percent in 2016 and 5 percent in 2021) of Americans who had tried at some point to lose weight and had not already had weight-loss surgery were recommended weight-loss surgery by a doctor or other health professional.

ABOUT THE STUDY

Survey Methodology

The survey was conducted by NORC at the University of Chicago and funded by the ASMBS and the ASMBS Foundation, a nonprofit dedicated to obesity research, education and advocacy. Data were collected using AmeriSpeak®, NORC's probability-based panel designed to be representative of the U.S. household population. During the initial recruitment phase of the panel, randomly selected U.S. households were sampled with a known, non-zero probability of selection from the NORC National Sample Frame and then contacted by U.S. mail, email, telephone, and field interviewers (face to face). The panel provides sample coverage of approximately 97 percent of the U.S. household population. Those excluded from the sample include people with P.O. Box only addresses, some addresses not listed in the USPS Delivery Sequence File, and some newly constructed dwellings. Staff members from NORC at the University of Chicago and the American Society for Metabolic and Bariatric Surgery collaborated on all aspects of the study.

Interviews for this survey were conducted between December 10 and December 28, 2021, with adults aged 18 and older representing the 50 states and the District of Columbia. Panel members were randomly drawn from AmeriSpeak, and 1,714 completed the survey—1,644 via the web and 70 via telephone. Panel members were invited by email or by phone from an NORC telephone interviewer.

Interviews were conducted in both English and Spanish, depending on respondent preference. Respondents were offered a small monetary incentive (\$2) for completing the survey.

The final stage completion rate is 22.9 percent, the weighted household panel response rate is 17.1 percent, and the weighted household panel retention rate is 75.6 percent, for a cumulative response rate of 3.0 percent. The overall margin of sampling error is +/- 3.3 percentage points at the 95 percent confidence level, including the design effect.

In addition, Black and Hispanic respondents were sampled at a higher rate than their proportion of the population for reasons of analysis. The overall margin of sampling error for the 471 completed interviews with Black respondents is +/- 5.8 percentage points at the 95 percent confidence level, including the design effect. The overall margin of sampling error for the 438 completed interviews with Hispanic respondents is +/- 6.6 percentage points at the 95 percent confidence level, including the design effect.

Sampling error is only one of many potential sources of error, and there may be other unmeasured errors in this or any other survey.

Quality assurance checks were conducted to ensure data quality. In total, 108 interviews were removed for nonresponse to at least 50 percent of the questions asked of them, for completing the survey in less than one-third the median interview time for the full sample, or for straight-lining all grid questions asked of them. These interviews were excluded from the data file prior to weighting.

Once the sample had been selected and fielded, and all the study data had been collected and made final, a poststratification process was used to adjust for any survey nonresponse, as well as any non-coverage or under- and oversampling resulting from the study-specific sample design.

Poststratification variables included age, gender, census division, race/ethnicity, education, housing tenure, and telephone status. Weighting variables were obtained from the 2021 Current Population

Additional information about the AmeriSpeak Panel methodology is available at: https://amerispeak.norc.org/about-amerispeak/Pages/Panel-Design.aspx

Survey. The weighted data reflect the U.S. population of adults age 18 and over.

ABOUT THE AMERICAN SOCIETY FOR METABOLIC AND BARIATRIC SURGERY (ASMBS)

The ASMBS is the largest organization for bariatric surgeons in the nation. It is a non-profit organization that works to advance the art and science of bariatric surgery and is committed to educating medical professionals and the lay public about bariatric surgery as an option for the treatment of severe obesity, as well as the associated risks and benefits. It encourages its members to investigate and discover new advances in bariatric surgery, while maintaining a steady exchange of experiences and ideas that may lead to improved surgical outcomes for patients with severe obesity. For more information, visit www.asmbs.org.

ABOUT NORC AT THE UNIVERSITY OF CHICAGO

NORC at the University of Chicago conducts research and analysis that decision-makers trust. As a nonpartisan research organization and a pioneer in measuring and understanding the world, we have studied almost every aspect of the human experience and every major news event for more than eight decades. Today, we partner with government, corporate, and nonprofit clients around the world to provide the objectivity and expertise necessary to inform the critical decisions facing society. www.norc.org.