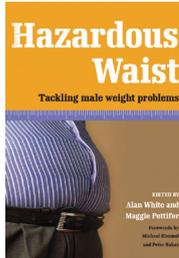


Hazardous Waist

Tackling Male Weight Problems



Editors: Alan White and Maggie Pettifer

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الخصر الخطر معالجة مشاكل الوزن لدى الذكور

المؤلفون : الان وايت وماجي بيتيفر

IF YOU THINK THAT YOUR *DISHDASHA**, AFTER tucking your *khanjar*** around it, is helping you hide your extended waistline, you may actually be hiding something of sinister consequence to your health. Male fatness, or android obesity, that manifests as an expanded waistline is now perceived in the medical profession as an key precursor of many intractable illnesses from diabetes to cancer, as well as a myriad of others that lead to poor quality of life, disability or simply shortened lives. Of course, this is not new; the 'father' of medicine, Hippocrates, long ago indicated that corpulence leads to untimely death. This view has been recently resurrected in the volume, *Hazardous Waist: Tackling Male Weight Problems*. When one sees the title of this book, it appears that it is one of those 'self-help' books with directions on how to curb one's mass of adiposis tissue. The title appears to suggest new age themes like those of Dr. Deepak Chopra, (Indian medical doctor and popular writer on spirituality and diverse topics in mind-body medicine), but browsing through the pages, we realize that this book is no 'psycho babble' or esoteric book enticing people to recharge their 'chakra'. The volume

is neither reminiscing of 'gutbuster' exercise or drugs that often appears as e-mail spam.

Alan White and Maggie Pettifer have edited chapters from presentations previously conducted under the auspices of the *Men's Health Forum* which took place from 2004 in the UK. It synthesises the literature and all that the services of weight problems entail among the male population. The statistics are staggering and the situation is overwhelming bleak. Males are more gluttonous and sedentary and are unlikely to be unaware of their belly fat or simply deny its size. More dishearteningly, males are less likely to do something about it than females. Most demoralising, males with central obesity have a higher risk of succumbing to ill-effects of obesity.

Although there are many academic publications highlighting the global epidemic of obesity, this volume uniquely focuses on the male gender. The motto of the book is the formula that what works for females may not be the best solution to preventing the rising tide of hazardous waist among males. Then, you may wonder, in the age of 'schism' and 'ism', is this book just dangerously revamping and evoking 'gender wars' and

* Traditional Omani men's robe

** Traditional Omani dagger

stereotypes? Is a thin veneer of health-speak actually just masking male bashing? The answer is emphatically no. The book simply raises awareness of male weight problems and it is built around the theme that the waist's circumference in males has reached the danger zone and that this trend is taking on epidemic proportions. The first part of the volume addresses the challenges of male weight problems. Under this heading, there are six chapters synthesising the multidisciplinary and gender sensitive approach to central obesity and its impact on psychological, medical and social outcomes. The second part of the book, divided into fifteen chapters, addresses how to tackle male weight problems. It highlights the important roles of primary health care, community and an 'obesogenic' environment in the effort to confront the health risks posed by obesity in men.

Although eating disorders are becoming global challenges, the book derives its database from the UK and Australian populations. Both of them are a heterogeneous collection of different ethnic groups, so the book does transcend the white middle class situation. References to the World Health Organization also crop up on many occasions. Scholarly work and statistics on the prevalence of obesity in minorities and even a chapter featuring the situation among South Asian men are given audience in this volume. Despite the well established association between genetic factors and obesity, it is the socio-cultural context that is central to the predisposition, onset, course and outcome of obesity and more importantly, biopsychosocial factors that are of major importance in designing interventions and obesity management plans.

Whereas the lower classes are increasingly succumbing to obesity in Western Europe and North America, in the Arabian Gulf its first victims are urban elites who are likely to live a sedentary life with no physical activity to balance out its effects. Related to this, in many societies, is the message that obesity is bad for health would likely go unheeded. There are many societies where thinness is perceived as socially undesirable whereas plumpness is regarded as a status symbol and beautiful. There is also the perception that the 'cult of thinness' pervading our media is deeply rooted in a western-centric perspective on body-image. Against this background, unless cultural forces are employed as catalysts for curbing obesity, health education among different ethnic groups will

have a limited impact due to their different concepts of health and body image. As this volume does discuss the situation in some sub-cultural groups in the UK, its message can be applied to situations elsewhere.

Reading between the lines, however, this volume appears to be insidiously polemical, trumpeting great tribulation. The argument is that if no urgent measures are taken, obesity will be equivalent to the mediaeval bubonic plague or other more recent scourges that have decimated humanity. As any fear monger or student of social stigmatisation would attest, the consequence of grandiloquent rhetoric can be the birth of negative perceptions which can in turn cause the intended message to trigger a boomerang effect. It is widely known that any social construct or culturally devalued phenomenon that is labelled as negative is likely to go underground only to resurface later when the condition has reached a stage of irreversible deterioration. Despite this caveat, the chapters are well-written, backed up with citations and fully indexed. Although the book has as many as twenty-five authors, we do not find the common rumblings often come across in books authored by many contributors. The approach of this volume is to give balanced practical guidance to individuals, institutions and all the stake-holders, derived from empirical and evidence-based research as well as personal experience. The book is technical and yet any avid reader could grasp its content. Most of the jargon is well defined. The book draws its expertise from the myriad talents of professors of men's health, dieticians, sociologists, psychologists and others. This is indeed a multidisciplinary endeavour. This volume should be on the reading list for all health care practitioners, nutritionists and other professionals who are advancing the cause of health education. If there is no steadfast effort to curb the obesity of their husband and boys in the household, women would also benefit from reading it to know why their husbands are likely to leave them as widows.

REVIEWER

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