

Obesity in nurses

Occupational challenges contribute to weight gain.

By Loretta T. Lee, PhD, RN, CRNP, FNP-BC, CNE, and Holly Carpenter, BSN, RN

Nurses alone can't solve the challenge of being overweight or obese simply through dieting and exercising. They need support from their employers and the communities they serve.

RESEARCH shows that about half of American nurses are living with obesity or are overweight. American Nurses Association (ANA) research via the HealthyNurse® Survey reports that nurses' average body mass index (BMI) is 27.58, kg/m², which falls into the overweight category. The survey finds that nurses eat about half of the recommended daily servings of fruits and vegetables, and only a third meet the aerobic and strength activity recommendations.

Nurses receive education on nutrition, portion size, mental well-being and physical activity—all of which contribute to their knowledge for maintaining a healthy BMI. However, many nurses, and their patients, still don't recognize that obesity is a chronic disease.

A complicated condition

Nurses face several occupational challenges that contribute to weight gain, including the following: stress-filled environments, long and varying shifts, mandatory overtime, limited options for healthy eating, insufficient meal breaks, and limited or no downtime. These factors lead to fatigued nurses who frequently are too tired to prepare healthy meals or exercise. Comorbid conditions, such as diabetes and polycystic ovary syndrome, along with potential genetic predispositions to obesity, add pounds in some nurses. Still others juggle myriad responsibilities, from family and second jobs, to school and household tasks. It's no surprise that many nurses struggle with their weight.

What can be done?

Nurses alone can't solve the challenge of being overweight or obese simply through dieting and exercising. They need support from their employers and the communities they serve.

Nutrition—Employers that serve food should provide healthy, appropriately portioned, and affordably priced options for all shifts. Healthy pre-packaged food could fit this bill with simplicity and convenience. Adequate coverage to ensure patients' needs are met allows nurses to take meal breaks without worry.

Health plans should cover and employee wellness programs should provide nutritional counseling. Communities may offer farmers markets with discounts for nurses. Food gifts for nurses could include healthy options, such as a bushel of apples or a nutritious meal subscription.

Physical activity—Some employers offer paid exercise outside of work hours. Other options include discounts on gym memberships, access to hospital exercise equipment, community gardens, and safe walking areas.

Mental health—Employers should ensure breaks, particularly after stressful events. Confidential and convenient mental healthcare and coverage encourage participation. To ensure anonymity, fellow employees shouldn't administer this care. Resilience and well-being resources should be engaging, accessible, and free or low cost. Reasonable workloads, safe staffing, and positive work cultures complete the picture.

Employers should provide health plans that cover the full spectrum of care for overweight and obesity, including anti-obesity medications and bariatric surgery.

Many misconceptions contribute to under-recognition and undertreatment of obesity. The Nurses Obesity Network aims to shift the narrative and treatment paradigm (nursesobesitynetwork.org). It works to dispel the myth that maintaining the proper diet and exercise guarantees protection from obesity and advocates for policies promoting the full continuum of obesity care. With education, policy changes, and healthy work environments, nurses can exemplify how obesity, a multifactorial disease epidemic, can be eradicated.

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Loretta T. Lee is an associate professor and the department vice-chair for Family, Community, and Health Systems in the School of Nursing at the University of Alabama at Birmingham. Holly Carpenter is a senior policy advisor for the American Nurses Association.

Reference

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