

# Children's Healthcare of Atlanta: "Stop Sugarcoating it, Georgia"

View the ad. Then, answer questions in the space provided. Be prepared to discuss.

1. Who is the speaker?
2. What is the subject?
3. Who is the target audience? (remember to consider both general and specific audiences here)
4. What is the purpose?
5. What appeal(s) are most evident? Explain how & why.
6. How would you describe the tone?
7. Is the visual effective? Why or why not?
8. Is the visual ethical? Why or why not?

[When you finish, listen to this short newscast. Note the professional opinions that represent both sides of the issue.](#)



Children's Healthcare of Atlanta, 2012

## The Government's Role in Public Health: Is Food the New Tobacco?

According to a Harvard study, Americans overwhelmingly support at least some government intervention to help prevent obesity and other noncommunicable diseases (Koebler, 2012). But how much involvement is necessary? "Don't Blame the Eater" and "What You Eat is Your Business" offer differing perspectives on the obesity epidemic in America and how we should respond to it. Read the articles, and determine how effectively each writer argues his case.

### ***Don't Blame the Eater***

DAVID ZINCZENKO

If ever there were a newspaper headline custom-made for Jay Leno's monologue, this was it. Kids taking on McDonald's this week, suing the company for making them fat. Isn't that like middle-aged men suing Porsche for making them get speeding tickets? Whatever happened to personal responsibility?

I tend to sympathize with these portly fast-food patrons, though. Maybe that's because I used to be one of them.

I grew up as a typical mid-1980's latchkey kid. My parents were split up, my dad off trying to rebuild his life, my mom working long hours to make the monthly bills. Lunch and dinner, for me, was a daily choice between McDonald's, Taco Bell, Kentucky Fried Chicken or Pizza Hut. Then as now, these were the only available options for an American kid to get an affordable meal. By age 15, I had packed 212 pounds of torpid teenage tallow on my once lanky 5-foot-10 frame.

Then I got lucky. I went to college, joined the Navy Reserves and got involved with a health magazine. I learned how to manage my diet. But most of the teenagers who live, as I once did, on a fast-food diet won't turn their lives around: They've crossed under the golden arches to a likely fate of lifetime obesity. And the problem isn't just theirs -- it's all of ours.

Before 1994, diabetes in children was generally caused by a genetic disorder -- only about 5 percent of childhood cases were obesity-related, or Type 2, diabetes. Today, according to the National Institutes of Health, Type 2 diabetes accounts for at least 30 percent of all new childhood cases of diabetes in this country.

Not surprisingly, money spent to treat diabetes has skyrocketed, too. The Centers for Disease Control and Prevention estimate that diabetes accounted for \$2.6 billion in health care costs in 1969. Today's number is an unbelievable \$100 billion a year.

Shouldn't we know better than to eat two meals a day in fast-food restaurants? That's one argument. But where, exactly, are consumers -- particularly teenagers -- supposed to find alternatives? Drive down any thoroughfare in America, and I guarantee you'll see one of our country's more than 13,000 McDonald's restaurants. Now, drive back up the block and try to find someplace to buy a grapefruit.

Complicating the lack of alternatives is the lack of information about what, exactly, we're consuming. There are no calorie information charts on fast-food packaging, the way there are on grocery items. Advertisements don't carry warning labels the way tobacco ads do. Prepared foods aren't covered under Food and Drug Administration labeling laws. Some fast-food purveyors will provide calorie information on request, but even that can be hard to understand.

For example, one company's Web site lists its chicken salad as containing 150 calories; the almonds and noodles that come with it (an additional 190 calories) are listed separately. Add a serving of the 280-calorie dressing, and you've got a healthy lunch alternative that comes in at 620 calories. But that's not all. Read the small print on the back of the dressing packet and you'll realize it actually contains 2.5 servings. If you pour what you've been served, you're suddenly up around 1,040 calories, which is half of the government's recommended daily calorie intake. And that doesn't take into account that 450-calorie super-size Coke.

Make fun if you will of these kids launching lawsuits against the fast-food industry, but don't be surprised if you're the next plaintiff. As with the tobacco industry, it may be only a matter of time before state governments begin to see a direct line between the \$1 billion that McDonald's and Burger King spend each year on advertising and their own swelling health care costs.

And I'd say the industry is vulnerable. Fast-food companies are marketing to children a product with proven health hazards and no warning labels. They would do well to protect themselves, and their customers, by providing the nutrition information people need to make informed choices about their products. Without such warnings, we'll see more sick, obese children and more angry, litigious parents. I say, let the deep-fried chips fall where they may.

*David Zinczenko is the editor-in-chief of Men's Health magazine and the author of numerous best-selling books, including Eat This, Not That. This piece was first published on the op-ed page of the New York Times on November 23, 2002.*

**Answer questions in the space provided. Code passages in the actual article that back your answers / understandings. Be prepared to discuss.**

1. What **claims** does Zinczenko make (highlight & label the main claim and subclaims)? What evidence does he use to support his claims? Is the argument effective? Why or why not?
2. How does Zinczenko establish his **ethos**? What's his **persona**? Do you trust him? Why or why not?
3. One important move in all good argumentative writing is to introduce possible objections to the position being argued. What objections does Zinczenko introduce, and how does he respond? Can you think of other objections he might have noted?
4. How does the story that Zinczenko tells in paragraphs 3 and 4 about his own experience support or fail to support his argument? How could the same story be used to support an argument opposed to Zinczenko's?
5. Compare and contrast the Children's Healthcare of Atlanta anti-obesity ad with Zinczenko's argument. What major difference exists between them? Which argument is more reasonable? Why?

## ***What You Eat is Your Business***

RADLEY BALKO

This June, Time magazine and ABC News will host a three-day summit on obesity. ABC News anchor Peter Jennings, who last December anchored the prime time special “How to Get Fat Without Really Trying,” will host. Judging by the scheduled program, the summit promises to be pep rally for media, nutrition activists, and policy makers — all agitating for a panoply of government anti-obesity initiatives, including prohibiting junk food in school vending machines, federal funding for new bike trails and sidewalks, more demanding labels on foodstuffs, restrictive food marketing to children, and prodding the food industry into more “responsible” behavior. In other words, bringing government between you and your waistline.

Politicians have already climbed aboard. President Bush earmarked \$200 million in his budget for anti-obesity measures. State legislatures and school boards across the country have begun banning snacks and soda from school campuses and vending machines. Sen. Joe Lieberman and Oakland Mayor Jerry Brown, among others, have called for a “fat tax” on high-calorie foods. Congress is now considering menu-labeling legislation, which would force restaurants to send every menu item to the laboratory for nutritional testing.

This is the wrong way to fight obesity. Instead of manipulating or intervening in the array of food options available to American consumers, our government ought to be working to foster a sense of responsibility in and ownership of our own health and well-being. But we’re doing just the opposite.

For decades now, America’s health care system has been migrating toward socialism. Your well-being, shape, and condition have increasingly been deemed matters of “public health,” instead of matters of personal responsibility. Our lawmakers just enacted a huge entitlement that requires some people to pay for other people’s medicine. Sen. Hillary Clinton just penned a lengthy article in the New York Times Magazine calling for yet more federal control of health care. All of the Democrat candidates for president boasted plans to push health care further into the public sector. More and more, states are preventing private health insurers from charging overweight and obese clients higher premiums, which effectively removes any financial incentive for maintaining a healthy lifestyle.

We’re becoming less responsible for our own health, and more responsible for everyone else’s. Your heart attack drives up the cost of my premiums and office visits. And if the government is paying for my anti-cholesterol medication, what incentive is there for me to put down the cheeseburger?

This collective ownership of private health then paves the way for even more federal restrictions on consumer choice and civil liberties. A society where everyone is responsible for everyone else’s well-being is a society more apt to accept government restrictions, for example — on what McDonalds can put on its menu, what Safeway or Kroger can put on grocery shelves, or holding food companies responsible for the bad habits of unhealthy consumers.

A growing army of nutritionist activists and food industry foes are egging the process on. Margo Wootan of the Center for Science in the Public Interest has said, “we’ve got to move beyond `personal responsibility.’” The largest organization of trial lawyers now encourages its members to weed jury pools of candidates who show “personal responsibility bias.” The title of Jennings special from last December — “How to Get Fat Without Really Trying” — reveals his intent, which is to relieve viewers of responsibility for their own condition. Indeed, Jennings ended the program with an impassioned plea for government intervention to fight obesity.

The best way to alleviate the obesity “public health” crisis is to remove obesity from the realm of public health. It doesn’t belong there anyway. It’s difficult to think of anything more private and of less public concern than what we choose to put into our bodies. It only becomes a public matter when we force the

public to pay for the consequences of those choices. If policymakers want to fight obesity, they'll halt the creeping socialization of medicine, and move to return individual Americans' ownership of their own health and well-being back to individual Americans.

That means freeing insurance companies to reward healthy lifestyles, and penalize poor ones. It means halting plans to further socialize medicine and health care. Congress should also increase access to medical and health savings accounts, which give consumers the option of rolling money reserved for health care into a retirement account. These accounts introduce accountability into the health care system, and encourage caution with one's health care dollar. When money we spend on health care doesn't belong to our employer or the government, but is money we could devote to our own retirement, we're less likely to run to the doctor at the first sign of a cold.

We'll all make better choices about diet, exercise, and personal health when someone else isn't paying for the consequences of those choices.

*Radley Balko is a senior editor at Reason, a monthly magazine that claims to stand for "free minds and free markets." He is also a columnist for FoxNews.com and has contributed to the Washington Post. This essay was first published on May 23, 2004, on Cato.org, a site sponsored by the Cato Institute, a foundation that aims to promote the principles of "limited government, individual liberty, free markets, and peace."*

**Answer questions in the space provided. Code passages in the actual article that back your answers / understandings. Be prepared to discuss.**

1. What **claims** does Balko make (highlight them)? What position is he responding to? How do you know?
2. Reread the last sentence of paragraph 1: "In other words, bringing the government between you and your waistline." Imagine that this statement were not there, and reread the first three paragraphs. How does this sentence impact your reading of Balko's argument?
3. Balko makes his own position about the so-called obesity crisis very clear, but does he consider any of the objections that might be offered to his position? If so, how does he deal with those objections? If not, what objections might he have raised?
4. How would you describe Balko's tone? How does his tone compare with David Zinczenko's tone in "Don't Blame the Eater?"