



©Gary V Koyen, Ph.D.  
Cruxpoint Health Breakthrough, Inc.

### ***Excess Bodyweight: The Most Hated Condition In The Largest Number Of People***

Overweight and obesity are among the most prevalent health conditions, affecting tens of millions of people across every socioeconomic group every age bracket. These are not rare or exotic illnesses. They are the most common chronic disorders of our time. They are also among the most despised by the most people.

Few conditions carry the same intensity of personal shame, social judgment, and self-loathing as being significantly overweight. People do not want to be fat. That simple truth cuts through every attempt to soften or reframe the conversation—no matter how carefully we choose words like “body positivity,” “health at every size,” or “weight-neutral care,” those carrying excess weight wish they did not have it.

The emotional pain of obesity is profound and relentless. It is not merely disappointment over clothing sizes or photos; it is a daily confrontation with a body that feels foreign, unresponsive, and betraying. People describe feeling invisible yet hyper-visible, simultaneously ignored as individuals and stared at for their size. They endure casual cruelty—comments from strangers, jokes from friends, dismissive treatment from healthcare providers—and internalize a narrative that they are lazy, weak-willed, or morally flawed.

This stigma compounds the isolation, anxiety, and depression that can accompany excess weight. Many live in quiet desperation, trying diet after diet, hiding their efforts, and fearing judgment whether they succeed or fail.

Physically, the burden is equally unforgiving. Joints ache under loads they were not designed to carry. Breath comes shorter with even moderate exertion. Sleep is disrupted by apnea or reflux. Blood pressure climbs, blood sugar destabilizes, and the liver quietly accumulates fat. The body sends constant signals of distress—fatigue, inflammation, hormonal chaos—yet these warnings are often dismissed as personal failings rather than symptoms of a legitimate metabolic disorder resulting from living in a human-created

obesogenic environment. People feel these consequences in every step, every flight of stairs, every moment their body reminds them it is struggling.

We can—and should—treat every person with dignity and compassion. We can reject cruelty and stigma in all forms. But we cannot pretend away the reality that most individuals who live with overweight or obesity do not choose it, do not want it, and deeply feel its toll. Cushioning the message may spare feelings in the moment, but it risks minimizing the very real suffering that drives people to seek help. Acknowledging the pain—emotional and physical—is not judgment; it is the starting point for genuine empathy and effective care. Only by facing the truth without flinching can we offer the support that actually helps people reclaim their health, daily vitality, and quality of life.