



THE MCDUGALL NEWSLETTER | *It's the food.*



Diet Is Destroying Workers' Competitiveness

At the beginning of the second decade of the 21st century, the number one concern for Americans is jobs, and the primary topic for politicians is job creation. I have yet to hear anyone speak about improving the health of our workforce, a fundamental step to solving the problems with our economy and unemployment.

In order to ready our workers, there are three major issues that need to be addressed:

1) Most American Are Too Sick to Compete in the World Market

National statistics are damning, with two-thirds of adults overweight and one-third obese. Based on pharmaceutical company-sponsored TV commercials, we know that cholesterol, erectile dysfunction, GERD, diabetes, and arthritis are rampant among our workforce. Employees spend valuable work hours worrying about and dealing with their minor and major health issue, from constipation to cancers. Most employees feel so poorly on a day-to-day basis that they dread starting their workday. The byproducts of poor health in the workplace include reduced productivity and intellectual capacity, as well as increased absenteeism. Sick employees contribute to the failure of businesses, and that means even more unemployment. To keep the doors open, many employers have resorted to exporting jobs to other countries.

America's jobs are being lost overseas to "starch-eaters" living in Asia, India, and Central America. This workforce is getting most of their calories from rice, corn, and beans (few from meat and dairy) and they are thinner, more active, younger-looking, and healthier because of the foods they eat. Better health translates into more productivity and less expensive medical care.



[Research Shows Fat and Sick are Less Desirable:](#)

American society adores the slim and deplores the fat.

Obese applicants are rated as less qualified for jobs.

Obesity has led to weight-focused job interviews, forced resignations, denials of promotions and insurance coverage, and exclusion from office social functions.

Both the diabetic and obese applicants are less likely to be hired.

Obesity lowers self-confidence, forces concealment of weight, and channels the obese into low-paying jobs.

Both the obese and the diabetic applicants are viewed as having poorer work habits.

Obesity has also led to lower incomes (\$6,700 a year less), and higher rates of poverty (10 percent higher) are found among obese women.

Wages of mildly obese white women were 5.9 percent lower than standard weight counterparts; morbidly obese white women were 24.1 percent lower.

Diabetics are rated as much more likely to have medically-related job absences.

Obese applicants are rated as more likely to have other absences (e.g. abusing company privileges by feigning illness) and to have emotional and interpersonal problems.

A survey found 47 percent of obese Americans believe they have suffered discrimination in the workplace, while 32 percent think obese employees are less likely to be respected and taken seriously in the workplace.

Overweight and obese students, especially girls, are less likely than the non-obese to be accepted by the more competitive colleges.

Overweight people are less likely to attend college even though they score high on standardized tests and are academically motivated.

Overweight students are more likely to be refused letters of recommendation from faculty members.

2) Employees Weighed Down by Health Insurance

Healthcare expenditures in the United States are out of control and growing at epic proportions. In 2008, spending on sickness in the US surpassed \$2.3 trillion, which is more than three times the \$714 billion spent in 1990, and over eight times the \$253 billion spent in 1980. These expenses represented more than 17 percent of the GDP in 2009. Employers fund most of this expense with a usual 70/30 split with the employee on premiums. The [average insurance premiums](#) for families in 2011 jumped to \$15,073 (workers pay, on average, \$4,129 and employers are paying the rest, at nearly \$11,000).

Exorbitant healthcare costs also make American goods less competitive. For example, General Motors covers more than 1.1 million employees and former employees, spending roughly \$5 billion on healthcare expenses annually. This adds between \$1,500 and \$2,000 to the sticker price of every automobile. Money spent on health care could be better spent on innovations for businesses that lead to real job creation and better wages for employees. (Don't talk to me about tax breaks for the rich for job creation until our workforce has had an opportunity to regain its lost health and appearance.)

In addition, comprehensive insurance coverage hides the real costs of sickness from the consumer (the employee). Since they are not paying out of pocket (aside from maybe a small co-pay), the patient finds little need to investigate the real worth of treatments. If \$40,000 for ineffective MS drugs, \$100,000 for heart surgery with no survival benefits, or \$3,000 for diabetic medications proven to kill came out of their family's budget then employees would take the trouble to do a little pre-purchase research—like when they buy a car or a refrigerator. The current system allows doctors, drug companies, insurance companies, and hospitals to steal from employers and employees—and nobody notices.

3) Job Creation Is Limited to Careers in Sickness-care

Today 14 million US workers are unemployed, and the economy is losing more jobs everyday; the rare exception is the healthcare industry, where employment is increasing. Since 2001, 1.7 million new jobs have been added, while private sector employment, outside of the healthcare systems, is being lost. While northeastern US cities were once robust centers for the production of goods—steel mills, coal mines, and other manufacturers—now the biggest employers are hospitals, clinics, and related medical services. The Cleveland Clinic is the largest employer in the region, with 29,000 workers.

[A well-balanced economy](#) needs to produce goods and provide for a wide variety of jobs (not just more doctors, nurses, and medical technicians). Healthcare is largely a service industry with few goods produced (medications and devices are notable exceptions). Without manufacturing, where does all the money ultimately come from? We are borrowing from overseas to fund the creation of jobs in healthcare. Our debt to China is a short-term, risky solution, which can only temporarily prop up our failing economy.

The Long-term Solution Is a Fit American Workforce



The downhill spiral for the American worker must be stopped, and there is no better place to start than at the dinner table. Replacing the current animal-food-based diet with a starch-based diet will return workers to a productive state of health, almost overnight. You, personally, do not have to wait to be saved by another government-sponsored stimulus program. Take control, get back your health, get off medications, and away from frequent visits to doctors, laboratories, and hospitals. Switching from beef and butter to beans and barley will cut your [personal food bill](#) too, from \$14 to \$3 a day today. That would mean a \$44 a day savings for a family of four, which equates to an extra \$1,300 a month saved on food alone.

President Obama has asked Americans to make sacrifices. Healthy delicious food is no sacrifice. Americans forfeit nothing when they lose excess body fat, stop unnecessary medications and surgeries, and regain their strength. They do, however, avoid illnesses, disabilities, and the likelihood of premature death with this simple change. In order to have this option, people need to be told the truth and to receive a little guidance on switching to a [starch-based diet](#).

The pessimist can take some consolation in the observation that the exportation of the American diet is leveling the playing field to a new low. Sickness and obesity are escalating in China, Korea, Japan, India, Argentina, and the rest of those countries that have recently acquired the jobs once held by Americans. The right approach for America is to take a giant positive step forward to a starch-based diet in order to return productivity and prosperity to our workforce. In the process, American leadership in nutrition-based health will raise living standards worldwide.