

Curbing the obesity epidemic

Excess bodyweight is one of the most blatantly visible, yet most neglected, risk factors contributing to the overall burden of disease worldwide. At least 1.1 billion adults and 10% of children are now overweight or obese, leading to decreased life expectancy due to cardiovascular disease, type 2 diabetes, or some types of cancer. The only world region in which obesity is not common is sub-Saharan Africa; elsewhere, though, obesity is linked to poverty and to being female.

The main causes of the obesity epidemic are clear: overeating, especially of foods rich in fats, extracted sugars, or refined starches; and a progressive decline in physical activity. Management depends on successful motivation of people to eat less, eat healthier foods, and to exercise more, all of which are difficult to achieve in societies where fatness is revered, where fruit and vegetables are more expensive and less available than high-fat processed foods, or where exercise plays no regular part in people's lives. Food labelling, too, is unlikely to help those who need it most—those on the lowest incomes—for whom the only relevant label is the price.

and from all schools by 2009. That might prove a start towards the USA shedding its label as the fattest nation on earth. Meanwhile, New Zealand's Health Minister, Pete Hodgson, is setting the agenda for fighting obesity not just in his country but worldwide. By announcing that work to combat chronic diseases and, in particular, obesity would be his first priority for the coming financial year, Hodgson has taken an important step to halt his country's problem. 35% of adult New Zealanders are overweight and another 21% are obese; one in five children aged 5–14 years is overweight and a further 10% are obese. Removing fizzy drinks from schools, which will now also happen in New Zealand, needs to become standard practice in all countries.

In the UK, doctors have been issued with new guidelines on how to advise patients to lose weight and take more exercise. And in Austria, subsidised gym or sports club membership for those covered by the state health insurance system is proposed. This might help affluent societies a little, but town planning to provide safe green spaces for walking, cycling, or play would achieve more in the longer term.



Getty Images

“ Battle of the Bulge ”

The Government’s campaign to reduce fatness among the young has a contemporary gloss, writes The Press in an editorial.

The Press (27 September 2006)

It involves celebrities and targets junk food and technological addiction - three things that help define today’s world. Its launch even included the cataclysmic concern that so infects today’s public discourse:

***“Unless something changes, the current generation of young New Zealanders may very well be the first to die at a younger age than their parents,”* Helen Clark proclaimed. The glitz is unconvincing.**

The Press: Criticisms

“ The Government has climbed on the bandwagon but it is in danger of falling off. Weight reduction is notoriously hard to achieve, even for determined and knowledgeable people.

Controlling children’s diets is particularly difficult. Advertisements and celebrities are unlikely to ease those problems, with the result that \$67 million of taxpayers’ money will quite likely be wasted as the nation’s children grow fat or lean according to the luck of their genes.”

The Press: Criticisms

“ Combating the genes’ dictatorship - controlling fatness - is mainly a matter of personal responsibility. Avoiding or reducing fatness depends on individual choices, on balancing food intake to energy output. ”

My reply:

“ The obesity epidemic must be tackled, even if the reasons for it are not fully understood. The editorial, *Battle of the Bulge*, (Sept 27) included inaccuracies, inconsistencies and ill-informed opinion relating to a disease regarded by the World Health Organisation and other international and national non-governmental agencies worldwide as the most important global epidemic of the 21st century. The suggestion that the “so-called obesity epidemic” might not exist is outrageous, when 10% of New Zealand children are obese.”

My reply:

“ To suggest that controlling fatness is mainly a matter of personal responsibility or parental authority is equally misleading. Expert opinion is unanimous in its view that environmental changes must accompany education aimed at influencing personal choice.”

My reply:

“ Healthy food choices are most likely to occur in an environment relatively free of advertisements for high-fat, high-sugar, high calorie, low-nutrient foods, when a clear system is in place for the signposting of good food choices and when good-quality fruits, vegetables and other appropriate foods are readily available at reasonable cost.”

My reply:

“ The measures suggested by the Government represent a reasonable first step, provided they are properly evaluated as promised. Should they prove to be inappropriate or insufficient, or should alternatives be shown to produce better outcomes, the approach may need to be modified. Inaction is not an option.”

"Government" sponsored activities

- HEHA: HEHA Coordination Group - HEHA Steering Group
(Govt. Agencies, NGOs, DHBs)
- HEHA Coordination Network (?)
- Fruit In Schools
- "Mission On": Ministerial Group, Joint Officials' Group, SPARC
- Food & Beverage Classification System: Stakeholders Group
Technical Group
- Health Sponsorship Council: Umbrella Social
Marketing Campaign
- PHARMAC
- Ministry of Health/HRC Initiative: Cancer Control Strategy
- DHBs: The Good (eg. Counties Manukau) →
The Bad (eg. HealthCare Otago)
- PHOs (?)



"Mission On" Activities (SPARC)

- Improving nutrition within schools and Early Childhood Education (ECE) environments
- Student health promotion
- Lifestyle Ambassadors
- New guidelines on advertising food to children
- Youth focussed websites

"Mission On" Activities (SPARC)

(2)

- Use of television and radio to encourage change
- Screen - free time
- Government "Getting Active"
- Expand Green Prescription programme
- Health impact assessments

Joint NGO Initiative

Cancer Society

Diabetes New Zealand

National Heart Foundation

Concerns

- **WHO IS IN CHARGE?**
- **NO** provision for any regulatory measures.
- **SOME** totally untried & costly measures.
- **PLANS** for monitoring & evaluation still not available.
- **WHAT** about those who are no longer children?
- **TOO** much left in the hands of DHBs.