

Healthway's position on Obesity and Overweight

Obesity Position Paper

Healthway's Strategic Plan 2004-2007 identifies both nutrition and physical activity as high priority health areas in recognition of the adverse trends in both areas and the increasing prevalence of overweight and obesity in Western Australia.

After tobacco control, Healthway allocates a greater proportion of its budget for grants, sponsorships and support sponsorships promoting nutrition and physical activity collectively, than any other health issue.

Obesity and Health

Overweight is defined in terms of Body Mass Index (BMI), measured as a function of weight and height (kg/m^2). The World Health Organisation (WHO) defines overweight as a BMI equal to or more than 25, and obesity as a BMI equal to or more than 30 (age 15 years and above).¹ The WHO has described the rising rates of overweight and obesity in the developed world as an epidemic and one of ten preventable conditions that require urgent attention.² Between 1994 and 2004, overweight and obesity increased across the Australian population. The greatest increases were among men aged 35-44 years (from 52% to 65%), women aged 64 - 74 years (40% to 50%) and women aged 25-34 (26% to 35%).³

In Australia, 2.5 million adults were obese in 2004/05 (1 in 5 males and 1 in 6 females aged over 18 years), and a further 4.9 million were overweight. Overall, 53% of Australians were overweight, and of these over one third (35%) were classified as obese.⁴

Overall, Western Australian obesity levels are comparable with those in other states and the national average, with 54% of West Australians overweight or obese. Despite these findings, only about one third of overweight or obese people accept that they are overweight (32% of men and 37% of women).³

Obesity and overweight are major risk factors for chronic diseases, including Type 2 diabetes, cardiovascular disease, hypertension, stroke

and some cancers.⁵ In 2003, overweight and obesity was the leading contributor to the burden of disease in Australia, counting for approximately 9% of the total burden of disease.² The health consequences range from increased risk of premature death, to serious chronic conditions that reduce the overall quality of life.⁵

Obesity can also compound other social determinants of health, for example contributing to poor body image and self-esteem that can manifest in social isolation and reduced connectedness with others.⁶

Groups most at risk

The prevalence of obesity and overweight is unequally distributed in the population. Middle aged people are at a greater risk of being overweight or obese compared with other age groups, with 78% of men and 58% of women aged 55 – 64 years overweight or obese.³

There is mounting evidence that overweight and obesity is increasing among children and that obesity is now developing much earlier in life than in the past.⁶ The WA Children and Adolescent's Physical Activity and Nutrition Survey found that in children aged 7 to 15 years, overweight and obesity increased from 9% to 23% in males and 10% to 30% in females between 1985 and 2003.⁷

There are also gender differences, with 60% of males in WA classified as overweight (46%) or obese (14%), compared with 44% of females (27% overweight and 17% obese). Geographically, men and women in cities are less likely to be obese or overweight than those living in regional areas of Australia in 2001.⁶

Although low Socio Economic Status (SES) is associated with nutritional deprivation, it is also associated with a greater likelihood of obesity and overweight.⁸ This is evident in Australia, where people with a high SES had the lowest prevalence of overweight in 2001.⁹ There was also a dramatic increase in obesity among Aboriginal and Torres Strait Islanders between 1995 and 2001. Indigenous Australians are more

likely to be obese than other Australians and in 2001, 31% of Indigenous Australians were obese compared with 16% of non-Indigenous Australians.⁹

Contributing Factors

The explanatory causes of obesity are multiple and include increasing consumption of energy-dense foods high in saturated fats and sugars, and decreasing levels of physical activity.⁵

While individual behaviour often contributes to obesity and overweight, the concept of 'obesogenic environments' is also gaining interest. Environmental factors contributing to obesity include technological and social changes leading to less physically demanding work, increasing dependence on cars, the rise in technology in the home and more passive leisure pursuits. In addition, the marketing, wide-availability, low cost and convenience of so-called 'fast' foods and "super-sized" portions are also considered to be important factors, along with increasing availability of high sugar drinks and declining availability of healthy food and drink choices in some food outlets.^{5,10}

Social determinants of health are also implicated in the causes of overweight and obesity. Relevant factors include income and the affordability of healthy food options;¹¹ social norms and peer pressure relating to fast foods reinforced by intensive food industry marketing running counter to healthy eating messages;¹² inadequate transport for delivery of healthy foods to rural and remote areas,¹³ and education and literacy to interpret food labels.¹¹

Healthway's Position:

Healthway supports the WHO recommendations on Obesity: preventing and managing the Global Epidemic¹⁴ and the National Obesity Taskforce report, Healthy weight 2008- shaping Australia's future.¹⁵ The latter recommends a focus on young people and their families, supportive environments and prevention of obesity, all of which align with Healthway's strategic priorities.

Healthway recognises that approaches to prevent overweight and obesity need to not only address poor nutrition and physical inactivity, but also increase the focus of these programs on obesity prevention. A sustained and multi faceted approach is needed to make a meaningful impact on the many social,

economic and physical factors that influence weight and unhealthy lifestyle. Approaches should better integrate activity, increase community understanding of the potential risks associated with overweight and obesity at different stages in the life course, promote and create environments to support behaviour change, and motivate and support a healthy lifestyle. Population based approaches should be complemented by more targeted interventions for populations at higher risk of obesity related conditions.

Healthway also recognises that there is evidence that increased consumption of fast/snack foods and soft drinks, and of more inactive behaviour (eg through excessive computer TV watching and computer use) are key contributors to increasing levels of obesity in children and supports efforts to restrict or regulate the influence of advertising or promotion of these unhealthy behaviours.

Healthway supports research to identify effective interventions to address overweight and obesity. Nutrition and physical activity initiatives are funded through Healthway's health promotion projects and support for programs and projects that will increase participation in physical activity and create healthier environments is a priority for Healthway's sponsorship programs. The promotion of the 'Be Active' and 'Go for 2&5' messages through sport, arts and racing activities is also a priority. Healthway's commitment to these areas complements the work of a range of other government and non government organisations involved in nutrition and physical activity promotion in Western Australia.

In particular, Healthway supports:

- Initiatives and policies that reduce the barriers to physical activity and healthy nutrition
- Creating supportive environments through policies that promote the availability and accessibility of a variety of low-fat, high-fibre foods, and provide opportunities for physical activity.
- Efforts to control the promotion and advertising of high energy dense food and drinks to children.

Healthway will:

- Contribute to improving the health of all West Australians by supporting nutrition and physical activity initiatives including campaigns and evidence-based health promotion projects
- Pro-actively fund new research that will help to increase the evidence-base regarding effective health promotion interventions to reduce obesity
- Focus on participation of and engagement with population groups most at risk of being obese or overweight, including children, Indigenous people, other disadvantaged groups and those with sedentary lifestyles and/or unhealthy eating practices.
- Work with Healthway- sponsored organisations and settings to promote policies and practices that increase the availability of healthy food choices and reduce the availability of less healthy choices
- Avoid sponsoring events and activities that could position Healthway's name or health messages alongside promotions for energy dense foods or drinks
- Build strategic alliances with sectors, settings and organisations outside health that have the potential to contribute to reducing the prevalence of obesity and overweight
- Ensure all organisations receiving Healthway funding of \$20,000 or more, develop and implement policies on healthy food choices where applicable.
- Encourage collaboration among all organisations working in the areas of obesity prevention, nutrition and physical activity
- In particular, Healthway's sponsorship program will promote the following messages which encourage behaviour changes that can reduce obesity:
- Go For 2 & 5
- Be Active

References

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