

Title: DOM (UK)s submission of evidence to the Government's Health Select Committee into Obesity - evidence

Subject: New Inquiry – Obesity

Date: 30 April 2003

To: House of Commons Health Committee

- ***The health implications of obesity***

Obesity is now a major epidemic in the UK. The costs are enormous. Estimated costs to the economy as a whole is in the region of £2 billion. It accounts for 30,000 premature deaths per year, shortening those lives by 9 years and resulting in 40,000 lost years of working lives. Obesity costs the NHS £1/2 billion in treatment costs, and the medical consequences are well recognised in resulting CHD, Type 2 Diabetes, some of the cancers as well as a whole host of other conditions which can be directly linked to weight.

- ***Trends in obesity***

The incidence is increasing at an alarming rate and some experts estimate that the resulting costs in treating Type 2 Diabetes alone will not be sustainable by the NHS in 10 years time.

- ***What are the causes of the rise in obesity in recent decades?***

The environment in which we live is recognised as the key contributory factor in the rising trend in obesity. There is an abundance of high-energy dense foods available, which are heavily marketed and packed in a way that is attractive to adults and children alike. The decrease in manual work as well as the increase in TV viewing hours, the use of computers and the increase in electrical gadgets and car ownership all play a part in the decrease in physical activity, which is a major contributing factor towards obesity. Obesity is also linked with poverty and low levels of education, thereby having a greater impact on the most disadvantaged groups in society.

- ***What can be done about it?***

It is clearly time for action. The human costs in terms of the psychosocial aspects are very familiar to dietitians working in clinical practice, as well as those involved in health promotion and public health work. The health benefits of treating obesity are well recognised, yet effective preventive and treatment strategies remain elusive.

The impact of obesity is far reaching. Therefore, there needs to be a co-ordinated approach with cohesive strategies in place, which encompass all aspects of management. Obviously, prevention is an ideal, but simply halting the increasing trend would be a realistic initial target. Prevention involves a wide number of approaches at different levels, both national and local. Responsibility lies with individuals and groups as well as government.

Awareness raising is a key component of prevention. Obesity has crept up on this generation and it is clear that despite the increase in media coverage there is a lack of awareness amongst the general public about how obesity affects individuals. The medical professions still do not take obesity seriously and current attempts to treat and prevent obesity leave much to be desired. The food industry has a vital role to play in providing healthy food choices. Physical activity initiatives need to be properly funded and supported.

A campaign to raise awareness would be a good starting point. Canadian research has shown that TV health adverts are very effective. The media could also play a positive role in raising awareness, as well as the use of billboards in public places. There is little benefit in blaming individuals or certain groups. What is important is to get the message across about the seriousness of obesity as a disease and its impact on health. All of this needs to be accompanied with positive messages about realistic lifestyle changes. An excellent example is the 'Get Colorado Moving' campaign from the USA.

We know that eating healthier diets and being more physically active is the key both to prevention and treatment. All initiatives need to focus on these key messages.

Health professionals have not received adequate under-graduate training to equip them with the knowledge and skills to deal effectively with the increasing burden of obesity. Better training needs to be in place to meet this need. Dietitians are ideally placed to undertake this training and they have the expertise to do so.

- ***Are institutional structures in place to deliver an improvement?***

The DoH are best situated to direct national public health campaigns and to ensure that consistent messages are delivered. They can influence public health and health promotion strategies at regional and local level. It is crucial that the DoH links with other government departments and The Food Standards Agency as well as medical bodies, physical activity services and the food industry.

Dietitians are trained to understand the role of different agencies and they can play a vital role in influencing decision-making. There are well-established community dietetic services across the country, which have a public health remit, as well as a health promotion, training, community development and clinical role.

- ***Recommendations for national and local strategy***

Government strategy needs to be clear and supported by realistic targets with appropriate timescales. At the moment obesity strategies are 'lost' in other policies. Obesity needs a higher profile and higher priority. Key policies need to address the food supply chain and physical activity. There seems to be a lack of co-ordination currently and this needs to be address through better integration of services.

Priorities for action include:

- Raising awareness amongst the general public and healthcare professionals
- Prevention strategies aimed at children and families and involving schools and education services
- Stop advertising unhealthy foods to young people
- Better food choices in fast food outlets and restaurants
- Public health initiatives to support more physical activity.

Dietitians are the key professionals with the knowledge and skills to play a major role in combating the epidemic of obesity by playing a central role in national and local initiatives as part of multi-agency approach.