

Executive summary

In Australia, rates of overweight and obesity have risen dramatically in recent decades in all age groups. The link between obesity and poor health outcomes is well established. As a result Australia is seeing an increase in diseases stemming from risk factors associated with obesity. This includes type 2 diabetes, cardiovascular disease and cancers. The causes of obesity are myriad and complex, as are the impacts and the potential prevention and treatment solutions.

Terminology

The importance of language when describing the problem or developing programs that attempt to tackle obesity was highlighted throughout the inquiry. Indeed, a high degree of stigma is associated with the term obesity. As a result, the committee supports a move away from using the term obesity in prevention and intervention programs and public information campaigns, and move the focus from weight to health. However the committee accepts that in medical and overarching policy settings, there is no current agreed alternative to the term, and as such it will continue to be used.

National Obesity Strategy

At present, Australia does not have an overarching strategy to tackle obesity. The committee heard compelling evidence around the need for a wide ranging array of multi-strategies to address obesity. The committee is of the view that a whole-of-government approach at the federal level is required to develop, resource and deliver a comprehensive National Obesity Strategy. The committee believes that key to the success of a national strategy is the establishment of a National Obesity Taskforce, which would comprise representatives from all levels of government alongside stakeholders from the NGO and private sectors. The inclusion of all stakeholders is critical to the taskforce adopting a coordinated response to improve diets and lifestyles, and reduce the burden of chronic disease in Australia.

Food labelling

While it is true that the causes of the rise in overweight and obesity can be attributed to multiple systemic factors, there is no doubt that a major contributor is poor diet and in particular the increased consumption of processed and discretionary foods. Inquiry participants identified several strategies to improve provision of healthier food choices, including better food labelling. A simple and consistent front-of-pack labelling system is essential for enabling consumers to make informed and healthier food choices. The committee heard that the Health Star Rating (HSR) system has the potential to empower consumers to effectively compare the nutritional value of foods. However, the committee was made aware of a number of significant problems with the current HSR. The committee is supportive of making the HSR system mandatory and recommends the adoption of some significant changes to address inconsistencies in the system. Importantly, the committee is of the view that making it mandatory will drive food companies to reformulate more of their products in order to achieve higher HSR ratings.

Food reformulation

Food reformulation initiatives can improve the availability of healthier products, and can contribute to improve diet at a population level. The committee received compelling evidence that reformulation works, especially around salt and sugar. The committee is of the view that reformulation of food and products must be accelerated to enable increased access to healthier food options.

Tax on sugary drinks

The committee is of the view that the introduction of a tax on sugar-sweetened beverages should be considered as it would have a significant impact on reformulation. It will compel the food industry to reformulate more of their products. This will drive food and drink companies to focus on producing and marketing much healthier products.

Advertising of discretionary foods

The committee heard compelling evidence supporting the introduction of stricter rules aimed at reducing children's exposure and influence of discretionary food marketing on children. The committee believes that there is a need to review the current rules around advertising on free-to-air television and recommends introducing restrictions on discretionary food and drink advertising on free-to-air television until 9.00pm. Additionally, the committee believe that children and their parents need to be better informed about the nutritional value of the foods and drinks advertised on all forms of media.

Education campaigns

The committee heard that there is a clear need for governments' leadership to establish and resource comprehensive education campaigns. The committee is of the view that public education campaigns are effective and play an important role in improving attitudes and behaviours around diet and physical activity. The committee agrees with submitters that there is a critical need for developing a suite of publicly funded education campaigns.

Health care interventions

Health interventions are essential for treating those already living with obesity. Prevention programs and early clinical interventions to reduce the prevalence of childhood obesity are also important. Inquiry participants identified that many factors influence whether children will become overweight or obese in their early years, pointing to the need to develop and implement a range of strategies to prevent and treat childhood obesity. The committee therefore proposes that there should be a subset of the National Obesity Taskforce created which would be responsible for the development, design, implementation, and management of funding for a National Childhood Obesity Strategy. Issues around access, availability, appropriateness and affordability of treatments are currently impeding the delivery of effective health interventions. In order to accelerate access to treatment options, the committee recommends that obesity is recognised as a complex and chronic disease and added to the list of medical conditions eligible for the Chronic Disease Management scheme. The committee received compelling evidence about the benefits of bariatric surgical

interventions for some patients. However, access to bariatric surgery services remains limited. Too few hospitals offer these services and many health professionals continue to be reluctant to offer this treatment option. Campaigns to educate the medical profession about the cost effectiveness and health benefits of bariatric surgical interventions should be considered.

Community-based multi-strategy interventions

The committee noted the success of multi-strategy, community-based and led prevention programs. Submitters identified that a whole-of-government approach combined with a whole-of-community approach is required for such prevention programs to be successful. The committee is of the view that a multi-pronged approach involving all sectors of the community work well to address the structural causes of obesity and is an effective driver to achieve systemic changes. The committee recommends that funding is directed toward the development and implementation of such programs.

Conclusion

The committee received a wealth of information and evidence throughout the inquiry and thanks all those who participated. As a result, the committee has made 22 recommendations, which aim at addressing in a holistic way the complex causes of obesity.

