



ANZOS Response to the National Obesity Strategy Consultation Paper

The Australian and New Zealand Obesity Society (ANZOS) is, by its nature and statutes, diverse both in its membership and in the ways that it endeavours to deal with issues around obesity. This is appropriate, as such diversity reflects the multimodal and complex causes and considerations related to the obese condition. Like most peak obesity bodies, ANZOS recognises obesity as a chronic relapsing disease process. As such, ANZOS recognises the need to both treat those who have obesity, and prevent, as much as possible, development of the disease, particularly in children and adolescents. This is the background to our response to the proposed National Obesity Strategy.

General views on the Strategy as it stands:

- ANZOS supports the proposed principles that enshrine "People First" (reflecting respect and engagement
 of those living with obesity) attitudes and policies that are respectful of the diversity of those with lived
 experience as well principles that promote equity and the right (and opportunity), irrespective of social
 circumstances, to achieve good health and well-being. In the context of the points raised in the second
 part of this response (see below), there should be included in the document a right to appropriate care
 and treatment for those living with obesity.
- ANZOS would support, in line with the notion of people first, that groups of individuals with lived experience, such as those from the Weight Issues Network (WIN), are integral in considering what is required for their care and support as well as in the development of strategies for effective prevention.
- ANZOS applauds the call for collective and sustained action, recognising that combating obesity is not
 easy and will require input from government, academia, some parts of the private sector, thought leaders
 and the community at large. These principles are in direct alignment with those of The Collective for
 Action on Obesity, which ANZOS supports.
- ANZOS, as largely (but not exclusively), an academic Society naturally supports the focus on evidence based strategies espoused in the document. In this context the statement in the consultation paper, "Prevention is key, because it works" needs more scrutiny. ANZOS supports broad based system approaches to prevention that create environmental change but recognises that more targeted programs, often relying on education, to change individual's attitudes and behaviours have been less successful.
- ANZOS sees the need in formulating a National Obesity Strategy to recognise and incorporate approaches
 that support obesity prevention while, at the same time, developing better strategies to ensure good
 quality and readily available treatment and care. The "Tipping the Scales" (September, 2017) document
 to which ANZOS and a large number of relevant agencies are signatories contains recommendations, in
 regard to prevention, that should be recognised and incorporated in a National Obesity Strategy.





• ANZOS supports the proposed priority areas including children and families, mobilisation of those in communities, enabling active living as a general principle and better eating. What is missing from this "National Obesity Strategy" is a strategy to help the 28% of Australian adults and 10% of children who are currently living with obesity. This needs to extend beyond the points raised in the consultation paper in relation to priority areas 1-3, which are framed entirely around lifestyle modification focussing on healthy eating and physical activity. We acknowledge that these are vital, but without adjunctive treatment and support, are ineffective in generating durable weight loss (>5 years) for most people. As a starting point, the Australian Obesity Management Algorithm, developed partly by ANZOS and the ADS, is a good (existing) reference point for treatment and management of those with overweight and obesity. The need for care, management and treatment is further expanded in the points below.

Concern over the lack of support for treatment, care and management of those living with obesity in what is described as "National Obesity Strategy"

- Under the heading "Causes of increasing overweight and obesity in Australia", it is said that "overweight and obesity is a complex, systemic problem with multiple causes. The issue is rooted in people having access to more unhealthy food and drinks, and the sedentary nature of modern living". This statement unwittingly tramples two of the guiding principles of the Consultation Paper, that is a stated concern about weight based stigma and support of evidence based information.

 While ANZOS recognises the importance of personal responsibility it feels strongly that the facts related to biology and genetics that are well established and recognised by agencies around the world must be incorporated into the considerations of this strategy. There is currently no recognition of the biological and genetic drivers of obesity that are pervasive not only in the generation of obesity but in its maintenance. Without reference to, and understanding of, these major biological contributors to overweight and obesity we are left with the erroneous view that those suffering the condition do so solely because they have made poor lifestyle choices, albeit under the pressures of an obesogenic environment. An understanding of the basic biological and pathophysiological principles driving obesity makes it easier on a daily basis for those living with obesity to avoid self- blame and helps to deconstruct stigmatising attitudes that align overweight and obesity with personal choice.
- Many agencies who represent health care professionals in this country who are well versed in the needs
 of those living with obesity should be included in the consultancy if it is to be a true National Obesity
 Strategy. ANZOS and other groups such as The Collective for Action on Obesity with broad based
 constituencies are keen to provide input on the elements that need to be addressed in relation to the
 management and treatment of obesity in Australia to create a more rounded and holistic National
 Obesity Strategy.





• Finally, we would repeat the point that strategies to effectively reduce the health and societal impact of obesity must be multimodal. They must at the very least include aspects of prevention and treatment, considered cooperatively. It would be inconceivable to develop a strategy for any other chronic disease that did not include both considerations of care and treatment **and** prevention. For example, the National Diabetes Strategy includes both elements that promote prevention of Type 2 diabetes and those improving access to treatment while at the same time strengthening prevention and treatment through research. If this does not occur it is likely there will be an opportunity lost and there is a danger of repeating yet again a unilateral and unsuccessful approach to addressing the complex issues that drive overweight and obesity in this country.

In the absence of a cogent and complementary treatment/management/care component to this strategy, it would more aptly be described as an Obesity Prevention Strategy. Given that the majority of Australia's population is overweight or has obesity, if treatment is not to be included in the current strategy, it is important to explicitly identify what other national strategy it will be considered within, the timeframe for its development, who is responsible and how it will be executed.

In short, ANZOS through its expert representation in areas from prevention through care and treatment to the translation of research into clinical practice, stands willing and able to help in the development of this strategy both in terms of elements where it affirms the process as outlined and others where it sees opportunities for greater impact.

Signed on behalf of the ANZOS Council

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