

# **OBESITY – POSITION STATEMENT**

## **1. INTRODUCTION**

1.1 NZMA is concerned about the rapid rise in obesity rates in New Zealand and the associated health issues that accompany it. Obesity is one of the leading causes of type 2 diabetes and in addition leads to numerous complications, including:

- Impaired glucose tolerance;
- Hypertension;
- High blood pressure;
- High cholesterol levels;
- Liver disease (Non-alcoholic fatty liver);
- Hyperuricaemia and gout;
- Gestational diabetes mellitus;
- Cardio-vascular disease;
- Sleep apnoea;
- Bony deformities;
- Gall bladder disease;
- Some cancers;
- Osteoarthritis;
- Respiratory and skin problems;
- Reproductive disorders, including infertility;
- Psychological and social effects, including low self-esteem, depression, and body dissatisfaction.

1.2 Of even more concern are the obesity rates of our children which are among the highest in the world. The National Children's Survey 2002 found that -

- One-third of NZ children are overweight or obese;
- Nearly one in 10 children are obese;
- Pacific Island children are the heaviest with over 60% either overweight or obese.

- 47% of Maori girls and 35% of Maori boys are overweight or obese.
- 1.3 If the rise in obesity rates continues unchecked, obesity is likely to be one of the leading causes of non-communicable diseases in this country in the future.
  - 1.4 For this reason the NZMA has developed the following policy:

## **POLICY**

### **2. Developing a Whole of Society Approach to Combating Obesity**

- 2.1 NZMA strongly supports the increased attention Government has given the issue of rising obesity rates in New Zealand and its decision in June 2006 to invest some \$76 million over the next three years in fighting the obesity epidemic.
- 2.2 To date the Government's approach to obesity issues has been fragmented, with different government departments responsible for different parts of the jigsaw and without coordination from one central body. NZMA is concerned that without collaboration and coordination between government, councils, communities, families, schools and health professionals, it is likely that this funding will be wasted. For this reason, the NZMA calls for the creation of a Nutrition Taskforce that will be responsible for liaising with all of the stakeholders and leading the campaign to fight obesity. To work the taskforce needs to have a mandate, be accountable, well resourced and have good monitoring systems in place.

### **3. Infants**

- 3.1 NZMA encourages all women to breastfeed their babies for the first six months of life. In addition we applaud the recent formation of the National Breast Feeding Advisory Committee and believe that Committee will further encourage women to breastfeed.

#### **4. Children**

- 4.1 It is trite to say that children are our future but nonetheless true. To ensure our children have a healthy future New Zealand needs to take steps to ensure their long term health. To do so will require a multi pronged attack as the “good nutrition” message needs to get out in a variety of ways – through schools, families, and in consultation with the family doctor.
- 4.2 In regard to school nutrition we believe that government should develop a programme that requires schools to offer healthy food through their tuck shop. One way to do this would be to offer schools who meet specified standards set by the government some form of incentive. In particular schools with tuck shops should sell mainly healthy food and remove all vending machines selling confectionery and soft drinks.
- 4.3 We consider that as part of the overall strategy there should be a ban on all junk food advertising targeted at children. For example, advertising on television during peak child viewing times, advertising through other electronic media such as text messaging etc. Further, the ability to advertise unhealthy foods on billboards around – or close to – schools, needs to be carefully regulated.

Note: In clause 4.3 above the term “junk food” means food that is high in calories but has little nutritional value.

- 4.4 Finally, we are concerned about inappropriate sponsorship programmes, targeted at school children. In regard to this however the NZMA notes that a number of schools may rely on that sponsorship for further funding of their big ticket items and accordingly do not go so far as to support a ban on such sponsorship.

## **5. Information – Food Labelling**

- 5.1 Although we currently have reasonable food labelling guidelines in New Zealand, the complexity of nutritional information, especially on food labels, may seem confusing to the public
- 5.2 Energy and fat content is the most common reference point on food labels. It is still important for other information contained on the labels to be understood by consumers. Consumers tend to focus on one nutrient, usually fat, rather than consider the overall nutritional value of the foods. Given the choice, many consumers opt for a product slightly lower in fat over one where the difference in another nutrient is greater in magnitude and significance. This problem is likely to be even greater for those with lower educational attainment.
- 5.3 Similarly, the National Heart Foundation's "*Pick the Tick*" programme is problematic in that the approval is given within food in categories. This leads to some high fat food items gaining the Tick.
- 5.4 NZMA is concerned that many consumers do not appreciate this distinction. We therefore believe consideration should be given to the traffic light system as proposed in the UK House of Commons report on obesity. The system gives an energy density rating to all food where red is high energy dense, amber medium and green is low.

## **6. Education**

- 6.1 NZMA calls for a sustained and consistent public education campaign to improve parents' and children's understanding of the benefits of healthy living. Families need to be educated and empowered through guidance that recognises the impact they have on their children's development of life-long habits of eating and activity. Further, children often only consider the short-term consequences of their behaviours, so ongoing nutrition education needs not only to address the

*immediate* benefits of healthy eating, but also highlight the benefits of *long-term* healthy eating.

## **7. Physical Activity**

7.1 NZMA applauds the initiatives taken to date to get our children doing more exercise.

7.2 However, we still consider that more work needs to be done across sectors to ensure that New Zealanders live in an environment which encourages more physical activity. In particular, greater thought needs to be given to safety issues so that parents can feel more comfortable in allowing their children to walk to school instead of driving them, and that people generally feel more comfortable walking along their local streets (through a combination of increased police resources, better lighting, a clean-up of streets in lower socio economic areas etc).

7.3 NZMA is delighted to learn that some local government councils are funding walking school bus programmes and hopes that more will do so in the future. In addition we call for councils to provide for more parks and recreational facilities in local communities, and the building of malls and shops in areas that are accessible by foot.

## **8. Primary Health Care**

8.1 We believe that Primary Care has an obvious part to play in fighting the obesity epidemic.

8.2 NZMA calls for increased training for medical students and General Practitioners on how to use behaviour change strategies with the 5-A model (ask, advise, assess, assist, and arrange) to help their patients combat issues of overweight and obesity.

8.3 Further patient education materials and tools for the assessment, prevention, and management of obesity need to be developed that:

- are relevant and clinically accurate;
- provide simple, understandable messages;
- account for low health literacy;
- recognize culture/gender/age differences.

8.4 Finally, NZMA calls for the availability of more evidence-based dietary information to General Practitioners and other medical practitioners.

## 9. **National Accreditation System for Providers of Dietary Solutions**

9.1 NZMA calls for a national accreditation system for providers of diet solutions that take into account long term success, good nutrition and a healthy diet.

## 10. **Ongoing Research**

10.1 NZMA believes that research into obesity and its associated problems must continue, particularly in regard to the following:

- The longitudinal impact of obesity on individuals and society;
- The effectiveness of policy interventions;
- The effectiveness of weight management and treatment programmes;
- The best measure to use to assess childhood overweight;
- Achieving behavioural change;
- The impact of physical activity (by type) on obesity and co-morbidities;
- The relationship between environmental factors and obesity prevalence;