



Consumers Health
Forum OF Australia

SUBMISSION

Select Committee into the Obesity Epidemic in Australia

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Consumers Health Forum of Australia 2018
*Select Committee into the Obesity Epidemic in
Australia*

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Introduction

The Consumers Health Forum of Australia (CHF) is the national peak body representing the interests of Australian healthcare consumers and those with an interest in health consumer affairs. CHF works to achieve safe, quality, timely healthcare for all Australians, supported by accessible health information and systems.

CHF has consistently advocated¹²³ for a national, whole-of-society obesity strategy. This is because recent reports show that years of public education campaigns have failed to reverse the rise in obesity, showing that it is well past time for individual-oriented prevention to become a priority. Most alarming is the rising rate of childhood obesity, which indicates a future where health levels and life expectancy will decline.

In this submission, CHF urges the Committee to address the multiple influences - access, affordability, time, marketing - that determine daily choices and individual behaviour. Regulatory changes such as taxes can make the healthier choices more appealing and help to modify unhealthy behaviours that are known to be linked to obesity.

A survey conducted by Essential Research in December 2014⁴ showed that consumers believed that Government could and should take an active role in trying to reduce obesity. CHF and three other leading health groups, the Heart Foundation, the Public Health Association of Australia and the Obesity Policy Coalition called on the Government at that time to take decisive action to end the widespread marketing of junk food and drink to children after the poll revealed widespread unease about unhealthy diets.

The survey found more than 80 per cent of Australians said unhealthy eating habits were a major problem for children. More than three quarters said that if Australians didn't lower their intake of fatty, sugary and salty foods, today's children would live shorter lives than their parents.

The groups called on Federal ministers to develop a comprehensive national obesity prevention strategy including: action to support more active urban design, easily understood food labelling, curbs on junk food advertising and public education campaigns. Price signals are important in modifying consumers' behaviour and so the group joined the calls for a tax on sugar sweetened non- alcoholic beverages.

The success Australia has had in reducing tobacco consumption through a sustained, multi-faceted and evidence based public health efforts provides a model to use for current public health challenges such as obesity.

¹ Consumers Health Forum (2016), [Tax on sugary drinks hits the sweet spot for our health](#) (Media Release). Canberra: Australia.

² Consumers Health Forum (2016), [Obesity's steady rise demands concerted action](#) (Media Release). Canberra: Australia.

³ Consumers Health Forum (2018), [Put our children's health first](#) (Media Release). Canberra: Australia.

⁴ Essential Research (2014), *The Essential Report – Health Star Ratings*. 16 December 2014.

Rationale

Obesity is one of the greatest public health challenges of our time. In 2017, over a quarter of children and nearly two-thirds of the Australian adult population are classified as overweight or obese⁵. Combined, obesity and diet have overtaken tobacco smoking as the leading burden of disease in Australia⁶.

The health impacts of obesity are well documented as a major risk factor for chronic and preventable conditions such as type 2 diabetes, heart disease, hypertension, stroke, musculoskeletal disorders and impaired psychological functioning⁷. Estimates put current annual spending on the direct and indirect health costs close to \$120 billion – the equivalent of 8% of the Australian economy's annual output⁸.

If current trends continue, there will be approximately 1.75 million deaths in people over the age of 20 years caused by being overweight and obesity between 2011 and 2050, with an average loss of 12 years of life for each Australian who dies before the age of 75 years⁹. As with many chronic diseases, obesity prevalence is inequitable; it is higher among Aboriginal and Torres Strait Islander Australians, people outside major cities, and in lower socio-economic groups^{10,11}.

The Australian Obesity Prevention Coalition's 2017 report *Tipping the Scales* Australian Obesity Prevention Consensus and several reports by the World Health Organisation¹² highlight that obesity is a complex issue and requires national prioritisation at a policy level and a whole of government multi-sectoral approach. Like tobacco control and reduction, obesity cannot be addressed as an isolated health issue. Policy interventions to modify the 'obesogenic' food and built environments will need to address societal norms and provide incentives for Australians to choose a healthier alternative.

Action to address these risk factors is urgently needed to reverse the increasing burden of chronic disease.

⁵ Australian Obesity Prevention Consensus, (2017), *Tipping the Scales: Australian Obesity Prevention Consensus*, Accessed at: <http://www.opc.org.au/downloads/tipping-the-scales/tipping-the-scales.pdf>.

⁶Ibid.

⁷ OECD (Organisation for Economic Co-operation and Development) 2015. *Health at a Glance 2015: OECD Indicators*. Paris: OECD. Viewed 1 July 2018

⁸ Australian Obesity Prevention Consensus, (2017), *Tipping the Scales: Australian Obesity Prevention Consensus*.

⁹ Ibid.

¹⁰ AIHW (2018), *Australia's Health: 6.0 Indigenous health*. Canberra.

¹¹ AIHW (2018), *Australia's Health: 4.0 Social Determinants of Health*. Canberra.

¹²Australian Obesity Prevention Consensus, (2017), *Tipping the Scales: Australian Obesity Prevention Consensus*, Accessed at: <http://www.opc.org.au/downloads/tipping-the-scales/tipping-the-scales.pdf>.

Recommendations

Following the *Tipping the Scales* consensus paper, CHF united with over thirty organisations in supporting the recommendations to slow and prevent this crisis in the future.

In this submission, CHF calls for the development of a comprehensive, community-focused strategy to address the growing issue of obesity in Australia. This national strategy should be based upon the eight critical actions outlined in the consensus paper and emphasize health promotion and prevention and comprise elements including:

- Establish obesity prevention as a national priority, with a national taskforce, sustained funding, regular and ongoing monitoring and evaluation of key measures and regular reporting around targets
- Legislate to implement time-based restrictions on exposure of children (under 16 years of age) to unhealthy food and drink marketing on free-to-air television until 9:30pm
- Set clear reformulation targets for food manufacturers, retailers and caterers with established time periods and regulation to assist compliance if not met
- Make the Health Start Rating System mandatory by July 2019
- Develop and fund a comprehensive national activity strategy to promote walking, cycling, and use of public transport
- Fund high-impact, sustained public education campaigns to improve attitudes and behaviours around diet, physical activity and sedentary behaviour
- Federal government to place a health levy on sugary drinks to increase the price by 20%
- Develop, support, update and monitor comprehensive and consistent diet, physical activity and weight management national guidelines. ¹³.

As the crisis reaches Australian children, it becomes difficult to ignore the scale of this problem and the future implications if no action is taken. For decades the general health of Australians improved, however the numbers of obese and overweight adults and children show that the level of good health are sliding backwards.

CHF also agrees with the recommendations of the Royal Australian College of Physicians' *Position Statement*¹⁴ on obesity and The George Institute for Global Health's submission to this Committee.

¹³ Ibid.

¹⁴ Royal Australian College of Physicians (2018), *RACP Position Statement on Obesity*, Sydney: Australia.