

6 July 2018

Committee Secretary  
Select Committee into the Obesity Epidemic in Australia  
Department of the Senate  
PO Box 6100  
Parliament House  
Canberra ACT 2600

Dear Committee Secretary,

**RE: VicHealth submission to the Senate Select Committee into the Obesity Epidemic in Australia**

The Victorian Health Promotion Foundation (VicHealth) is pleased to respond to the Senate Select Committee into the Obesity Epidemic in Australia.

The Australian Institute of Health and Welfare has recently described obesity as ‘a major public health issue in Australia’, adding that ‘the growing obesity trend has costly impacts for the individual and for the Australian economy and health care system’.<sup>1</sup> VicHealth agrees with this view.

The Senate Select Committee into the Obesity Epidemic in Australia represents an opportunity for the Senate to assess the extent of the problem, understand its causes, and then lay out a decisive plan for action. And despite the enormity of the problem there is strong consensus among Australia’s public health and medical community about what needs to be done. This is discussed later in VicHealth’s submission.

**Obesity: key facts and statistics**

In its recently released report on Australia’s health (*Australia’s Health 2018*), the Australian Institute of Health and Welfare noted that:<sup>1</sup>

- Almost two-thirds (63%) of Australia adults were overweight or obese in 2015. The rate of severe obesity (defined as those with a body mass index of 35 kg/m<sup>2</sup>) almost doubled between 1995 and 2014-15.
- Twenty per cent (20%) of children aged 2-4 years were overweight or obese in 2015 and more than one-in-four (28%) children 5-17 years were overweight or obese.
- In 2012-13, Indigenous people aged over 18 years were 1.2 times as likely to be overweight or obese as non-Indigenous people and 1.6 times as likely to be obese.

Overweight and obesity follows a socioeconomic gradient and is also associated with the geographical location where a person lives. Again, *Australia’s Health 2018* reported that:<sup>1</sup>

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- Adults in the lowest socioeconomic area were more likely to be obese (34%) than adults in the highest socioeconomic area (22%).
- One-third (33%) of boys and 38% of girls aged 2-17 years in the lowest socioeconomic area were overweight or obese compared to 22% of boys and 24% of girls in the highest socioeconomic area.
- Adults living in the major cities were most likely to have a body weight in the normal weight range compared to adults living in inner regional, outer regional and remote locations.
- Boys aged 2-17 years living in outer regional and remote areas were 1.3 times as likely to be overweight or obese as boys living major cities. Similarly, overweight or obesity was 1.5 times as high for girls in outer regional and remote areas as girls in major cities.

### **Recommendations for obesity prevention**

Several factors explain why so many Australian children and adults are overweight or obese. Professor Boyd Swinburn, who led the development of The Royal Australasian College of Physicians' Position Statement on Obesity has noted:<sup>2</sup>

*"We need to recognise obesity as a systemic and societal problem. It's not simply a matter of personal choice and responsibility as it is often framed. The underlying drivers of the obesity health crisis are the political, commercial, economic, and social systems that create the 'obesogenic environment' which promote the unhealthy weight gain."*

For this reason, any response to tackle obesity must ensure that the underlying causes of the problem, including the role of the food industry,<sup>3</sup> are fully addressed. The good news is that Australia has a plan for what needs to be done. This is outlined in [Tipping the Scales](#), which should form the basis of a national obesity prevention plan.<sup>4</sup>

VicHealth recommends the Senate Select Committee into the Obesity Epidemic in Australia endorses the eight recommendations to prevent obesity outlined in [Tipping the Scales](#). Those recommendations are:

1. Legislate time-based restrictions on exposure of children (under 16 years of age) to unhealthy food and drink marketing on free-to-air television up until 9.30pm.
2. Set clear reformulation targets for food manufacturers, retailers and caterers with established time periods and regulation to assist compliance if not met.
3. Improve the Health Star Rating System, and make it mandatory by July 2019.
4. Develop and fund a comprehensive national active travel strategy to promote walking, cycling and use of public transport.
5. Fund high-impact, sustained public education campaigns to improve attitudes and behaviours around diet, physical activity and sedentary behaviour.
6. Place a health levy on sugary drinks to increase the price by 20%.
7. 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.

8. Develop, support, update and monitor comprehensive and consistent diet, physical activity and weight management national guidelines.

As well as the support from Australia's public health and medical community, recommendations in [Tipping the Scales](#) are also favoured by the community. In 2015, VicHealth convened [Victoria's Citizens' Jury on Obesity](#), which was 'designed to empower everyday citizens to identify solutions and initiate change to stem the obesity epidemic'.<sup>5</sup> As part of the process, 100 everyday Victorians were brought together to consider the following question: 'We have a problem with obesity. How can we make it easier to eat better?'. After receiving 64 submissions and hearing evidence from experts, the jury made 20 recommendations to address obesity. Among those consistent with [Tipping the Scales](#) were:

- Ban junk food and beverage marketing to children under the age of 16 years.
- Impose an additional tax at the point of purchase on sugar-sweetened beverages to raise prices by at least 20%.
- Introduce a government-mandated health star labelling system.

#### **Concluding remarks**

Writing last year in the *Medical Journal of Australia*, its Editor-in-Chief Nicolas Talley argued that 'the health of future generations should not be abandoned for short term and short sighted commercial interests'.<sup>3</sup> VicHealth urges members of the Senate Select Committee to take these comments into account and to make recommendations for long-term, lasting change.

Yours sincerely



**Jerril Rechter**  
Chief Executive Officer

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<sup>1</sup> Australian Institute of Health and Welfare, *Australia's health 2018*, Australia's health series no. 16, AUS 221, 2018, p. 231.

<sup>2</sup> The Royal Australasian College of Physicians, *RACP releases new position statement to tackle obesity*, Media release, 2018, Available from <https://www.racp.edu.au/news-and-events/media-releases/racp-releases-new-position-statement-to-tackle-obesity>.

<sup>3</sup> Talley N, 'National Health Summit on Obesity calls for Australia to take action to stem the pandemic', *Med J Aust*, 2017; 206 (3): 106-107.

<sup>4</sup> Obesity Policy Coalition and The Global Obesity Centre, *Tipping the Scales: Australian Obesity Prevention Consensus*, 2017.

<sup>5</sup> VicHealth, *Victoria's Citizens' Jury on Obesity, Insights Report 2016*, 2016.