

New Zealand failing in obesity prevention

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A disinvestment in obesity prevention and failure to enact any major healthy food policies is contributing to New Zealand's worsening obesity statistics compared to other OECD countries, according to researcher, Professor Boyd Swinburn, and serious action will be needed to reverse this trend.

Professor Swinburn is the Professor of Population Nutrition and Global Health at The University of Auckland and co-director of the World Health Organisation's Collaborating Centre for Obesity Prevention, based at Deakin University in Melbourne.

In a recent paper, published in the journal *Obesity Reviews* Professor Swinburn presented the lessons learned from more than 20 years of [obesity prevention](#) efforts in Australia and New Zealand.

"Both countries have remarkably little progress to show for more than two decades of awareness of the escalating [obesity crisis](#)," he says. "In some cases this inaction has been due to the government having a world view dominated by individual responsibility and choice, but at the same time they have provided no policy support for people's [healthy food choices](#)."

"This approach is perpetuating the current conditions that are driving obesity," he says. "It also seems that the food industry has become both heavily embedded in the policy-making process, (despite glaring [conflicts of interest](#)), and enormously successful at applying lobbying pressure to keep [healthy food](#) policies off the agenda."

New Zealand is now the third fattest of OECD countries, behind the United States and Mexico, and [childhood obesity](#) continues to increase in this country, whereas it has plateaued in Australia, the United Kingdom, several European countries and even the United States.

Australia and New Zealand should have provided much more international leadership in obesity prevention than they have done, he says in the report. In terms of specific policy actions, such as in marketing to children, front of pack labelling, fiscal policies and public sector healthy food service policies, both countries had made little progress.

"The rapid increase in media reports on obesity in the early 2000s created the pressure for action," says Professor Swinburn. "Several comprehensive reports produced some programme investment, but no substantive healthy food policies were implemented."

"The powerful lobby from the processed food industry has ensured that any healthy food policies which might threaten their profits do not get up. Governments in both New Zealand and Australia have even been spooked into not daring to regulate unhealthy food marketing to children, despite being the middle of a childhood obesity epidemic. ", he says.

"The New Zealand government also back-pedalled by rescinding healthy school food guidelines and withdrawing funding for the comprehensive national obesity strategy."

On a positive note, the Australian governments started a major long-term investment in preventative health in 2007 in order to improve economic productivity, he says. Other positive initiatives in Australia were the establishment of several advocacy organisations; successful long-term whole of community projects reducing childhood obesity; a national

knowledge exchange system for practitioners; and some innovative programmes and social marketing.

"New Zealand has shown some areas of leadership such as green prescriptions, and community programs among Maori and Pacific populations, but despite multiple reports and 20 years of advocacy from public health and consumer groups, key recommended food policies are still not being implemented, largely due to the private sector interests dominating public policy development," says Professor Swinburn.

"New Zealand signed up to WHO's Global Action Plan to address the mounting toll from [obesity](#) and chronic diseases in May this year and I hope that provides a fresh stimulus to revisiting some of these recommended policies."

Provided by University of Auckland

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