

UK government plan to prevent child obesity is 'severely limited,' argue experts

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The UK's action plan to significantly reduce childhood obesity is "severely limited", argue a team of experts in *The BMJ* today. They say the government missed an opportunity to take global leadership of child health

Professor Mark Hanson from the British Heart Foundation, University of Southampton, Professor Neena Modi, President of the UK Royal College of Paediatrics and Child Health, and Professor of Neonatal Medicine, Imperial College London, and Dr Edward Mullins, a trainee in obstetrics and gynaecology, criticise a number of key failings within the report.

They say following publication of the report 'Childhood Obesity: a Plan for Action' last year, there was an "immediate outcry from the medical and public health communities, who had hoped for much more."

They warn that "strong actions were conspicuous by their absence, and the desired discussion of anti-obesogenic medicine [countering [obesity](#) onset] had been watered down to an emphasis on voluntary actions by industry, consumers, and schools."

The report, they say, "fails to recognise that overweight and obesity in children and [young people](#) are driven by multiple modifiable biological, behavioural, environmental, and commercial factors, some of which operate before conception and birth."

Furthermore, the report does not "recognise that the harm extends across generations," and "this failure", they say, represents "a major lost opportunity for effective prevention."

The report also does not include the World Health Organization's (WHO) Commission on Ending Childhood Obesity (ECHO) recommendations, and by doing so, the UK government 'missed an opportunity to show global leadership in [child health](#)."

They say it could be considerably strengthened by including evidence based interventions, such as an industry levy on sugar sweetened beverages, nutrient profiling to identify healthy and unhealthy foods, clearer food labelling, and promoting physical activity in schools.

Other recommendations absent from the report include stronger controls on advertising, mandatory food reformulation, and nutrition education.

They say to achieve these recommendations, health professionals should use their national and global professional networks to coordinate action between sectors including education, industry, government, and the public.

As such, they suggest a new global alliance against child obesity led by an international alliance of healthcare organisations, which "the UK government would work with the alliance to build on their plan for action and develop it into a strategy for childhood and future societal health."

They recommend the new alliance should focus on a life course approach, where the preconception period is an "important opportunity for engaging parents to prevent obesity and promote health."

Furthermore, there needs to be effective training of health and education

professionals on how to engage parents, children, and young people with the issue of overweight and obesity.

Experts need to formulate key questions around preventive measures and methods of implementation, and to set key research priorities on infancy and the preconception period.

They stress that dialogue needs to be encouraged between industry, policy makers, scientists, educators, professional bodies, children and young people.

Lastly, they call for campaigning of government actions on policies, regulation, fiscal actions, and investment, as some of these have brought "enormous benefits" to child and population [health](#), while voluntary action has been ineffective.

More information: Time for the UK to commit to tackling child obesity, *The BMJ*, www.bmj.com/cgi/doi/10.1136/bmj.j762

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