



## **WIN - Response to National Obesity Strategy Consultation Document**

### **Overall**

*There is an absence of any reference to the lived experience of those who struggle with obesity, and minimal attention to the impact of weight stigma. This, together with the complete omission of treatment, makes it clear that the strategy is not “for” people who have obesity.*

*WIN reached a strong consensus that the strategy should include tertiary prevention activities if it is serious about changing the trajectory of obesity at a population level. Treatment & management are at one end of the prevention continuum and cannot be neglected without compromising the intent of the whole document.*

*The population level primary and secondary prevention initiatives outlined are to be commended. However **while they are necessary, they are not sufficient**. We do not need more of the same talk about changing behaviour and taking personal responsibility, we need to change the dialogue and begin to acknowledge the huge range of factors that influence obesity.... and stop perpetrating unrealistic expectations about exercise and diet.*

*The title “National Obesity Strategy” is misleading if in fact there is no capacity to include treatment.*

### **Timeframe:**

Q7 Agreed that while 10 years is required in order to see change at a population level, the strategy requires clear measurable short term outcomes in order to build momentum and maintain commitment.

### **Scope:**

Q10 General agreement that the principles of healthy eating and physical activity are important to the entire population – not solely in obesity prevention. But there are other issues that would be useful to include in this document – for example: obesity treatment, weight management, mental health and wellbeing, stress management & sleep hygiene.

### **Supporting Children & Families**

Q15 Need to address affordability of out of school care and after school activities to ensure inclusion and accessibility. (what does “affordable” actually mean? & for whom? )

### **Mobilising people & Communities**

Q18; Need to ensure availability of fresh food outlets in ALL communities

### **Building a healthier and more resilient food system**

Q30: Include use of incentive promotions which appeal to children and promote healthy eating and positive relationship with food, while restricting (banning) such promotions that focus on ‘junk food’.

Q 32 The wording of the last objective needs to be reconsidered. The reference to “cost of obesity” in the same sentence as “greenhouse gas emissions” and “food & drink prices”, is stigmatising. Could be reframed as cost of “*chronic diseases and ultra-processed foods*”