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Description automatically generatedBRIEFING PAPER**

**Committee**: Health

**Topic**: The Question of Addressing the Obesity Crisis

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**Summary**

Obesity is defined as abnormal or excessive fat accumulation that presents a risk to health. According to the WHO (World Health Organisation), worldwide obesity has nearly tripled since 1975, with over 1 billion people affected in 2022, including 340 million children and adolescents. Obesity increases the risk factor for numerous NCDs (non-communicable diseases) such as diabetes and some cancers.

The obesity crisis is driven by a range of factors, including unhealthy diets, sedentary lifestyles, genetics and socio-economic issues. Obesity has an economic effect; affecting healthcare systems and national productivity, but the human effect it has is even greater, impacting quality of life and contributing to preventable diseases and deaths.

Efforts to solve the obesity crisis must aim on prevention and treatment plans. These may use policies to push healthy food, boost fitness, or limit advertisements for undesirable products.

**Background Information**

In 2023, almost 2.6 million deaths annually were attributed to obesity or obesity-related conditions. Usually considered a problem of high-income countries, obesity is now rising rapidly in low- and middle-income countries due to urbanization, changing dietary patterns, and reduced physical activity.

The worldwide increase in processed foods and foods high in sugar, salt, and saturated fats has further increased unhealthy dietary habits. Combined with sedentary lifestyles encouraged by modern technology and urban living, obesity has become a leading public health concern.

These statistics highlight the level of the crisis:

* 39% of adults were overweight, and 13% obese in 2022 (WHO).
* Obesity is responsible for 4% of global GDP in health-related costs annually.
* Nearly 50% of children with obesity reside in Asia, underlining the crisis's widespread impact.

**Major Countries and Organizations Involved**

**World Health Organization**: Part of efforts to combat obesity through campaigns like GAPPA and targets for reducing NCDs by 2030.

**United States**: The country with one of the highest obesity rates (42% of adults in 2020) has implemented policies like calorie labelling on menus but faces challenges due to disparities in healthcare and socio-economic conditions.

**Mexico**: One of the first countries to introduce a national soft drink tax in 2014, reducing sugary drink consumption, a valuable study of fiscal initiatives.

**United Kingdom**: Implemented initiatives such as the sugar tax to reduce obesity (especially in children).

**India**: Experiencing a significant rise in obesity due to urbanisation and dietary changes.

**UNICEF**: Addresses childhood obesity through initiatives promoting maternal and child nutrition, breastfeeding, and access to healthy food.

**Timeline of Events**

**1997**: WHO declares obesity a global epidemic.  
**2004**: WHO releases the Global Strategy on Diet, Physical Activity, and Health.  
**2011**: UN High-Level Meeting on NCDs identifies obesity as a key risk factor.  
**2014**: Mexico implements a national soft drink tax.   
**2018**: WHO GAPPA sets a target to reduce physical inactivity by 15% by 2030.

**Relevant UN Treaties, Events and Strategies**

**Global Strategy on Diet, Physical Activity, and Health (2004)**: Promoting healthier diets and physical activity globally.

**2030 Agenda for Sustainable Development (2015)**: Includes goals to reduce NCDs.

**World Health Assembly Resolution 66.10 (WHA66.10) (2013)**: Endorsed global targets for the prevention and control of NCDs, including halting the rise in obesity by 2025.

**Key Terms**

**Obesity**: A medical condition characterized by abnormal or excessive fat accumulation, measured by a body mass index (BMI) of 30 or higher.

**Overweight**: A condition where a person’s BMI is between 25 and 29.9.

**WHO:** World Health Organisation

**Non-communicable Diseases (NCDs)**: Chronic diseases not passed from person to person, often caused by lifestyle factors, including obesity-related conditions such as diabetes and hypertension.

**Sedentary Lifestyle**: A type of lifestyle with little or no physical activity, often associated with prolonged sitting or inactivity.

**Food Deserts**: Areas with limited access to affordable and nutritious food.

**Caloric Imbalance/Surplus**: A state where the number of calories consumed exceeds the number burned through physical activity and metabolic processes, leading to weight gain.

**GAPPA**: Global Action Plan on Physical Activity

**Metabolic Syndrome**: a group of health problems that put you at risk of type 2 diabetes or conditions that affect your heart or blood vessels.

**Malnutrition**: A condition resulting from imbalanced nutrient intake, encompassing both undernutrition and overnutrition, the latter of which can contribute to obesity.

**Processed Foods**: Foods that have been altered from their natural state for convenience, preservation, or taste enhancement, often high in added sugars, unhealthy fats, and calories.

**Bariatric Surgery**: A medical procedure for weight loss that involves altering the digestive system to limit food intake or nutrient absorption, used to treat severe obesity.

**Dietary Guidelines**: Recommendations provided by health authorities for optimal nutrition and eating patterns to maintain health and prevent diseases like obesity.

**Endocrine Disruptors**: Chemicals in the environment that interfere with hormonal systems, potentially contributing to weight gain and obesity.

**Microbiome**: The community of microorganisms in the human gut, which can influence metabolism, digestion, and weight regulation.

**Possible Solutions**

**Financial Alterations**  
Implement taxes on sugary drinks and unhealthy snacks, perhaps coupled with subsidies for fruits, vegetables, and whole grains.

**Public Awareness Campaigns**  
Education campaigns on the health risks of obesity and the benefits of a balanced diet and regular exercise.

**Improve Access to Healthy Foods**  
Address food deserts by increasing funding for farmers' markets, urban agriculture, and affordable food items.

**Promoting Physical Activity**  
Invest in safe urban infrastructure like parks, bike lanes, and walking trails to discourage a sedentary lifestyle.

**Regulate Food Marketing**  
Restrict advertising of unhealthy foods, especially ones targeted at younger demographics.

**Enhance Healthcare Support**  
Provide access to affordable obesity prevention and treatment services.

**Bibliography**

World Health Organization. (2022). Obesity and Overweight.

The Lancet. (2019). Global Burden of Disease Study: Obesity.

United Nations Children’s Fund. (2021). Preventing Childhood Obesity.

National Institute for Health and Care Excellence. (2020). Tackling Obesity at a Population Level.

**Useful Links for Further Research**

WHO Obesity Information: <https://www.who.int/obesity>

UNICEF Nutrition Programs: <https://www.unicef.org/nutrition>

Global Burden of Disease Study: <https://www.thelancet.com/gbd>

National Institute for Health: <https://www.nice.org.uk>