

British Heart Foundation briefing

Westminster Hall debate: obesity and the covid-19 outbreak

Key points

- In the UK, around 1 in 6 children have obesity. Children with obesity are five times more likely to become adults with obesity, increasing their risk of developing conditions like heart disease, stroke and vascular dementia.
- Emerging evidence shows obesity is linked to poorer outcomes from Covid-19 throwing into even sharper relief the need to address this public health crisis.
- The Government's recent Obesity Strategy was welcome, building on many years of positive recommendations made in Chapters 1, 2 and 3 of the Childhood Obesity Plan.
- If Government is to meet its previous ambition of halving childhood obesity by 2030, all commitments made in the Strategy must be implemented in full and at pace, including:
 - A 9pm watershed on junk food advertising on TV and online;
 - A ban on the promotion of unhealthy products in store;
 - Mandatory front-of-pack nutritional labelling and calorie labelling in the out-of-home sector
- Public Health England plays a crucial role in addressing obesity, and as we move towards a new public health model following its restructure, Government must ensure its expertise, accountability and leadership is retained, and relevant bodies are sufficiently funded.

Obesity and heart and circulatory diseases

In the UK, nearly two-thirds (63%) of adults and 29% of children have a weight that is classified as overweight or obese. Children with obesity are five times more likely to become adults with obesity, which can increase their risk of developing conditions such as heart disease, stroke and vascular dementia. **However, analysis suggests that a 1% year-on-year reduction in the number of people with an unhealthy weight between 2015 and 2035 could avoid around 45,000 cases of Type 2 diabetes and 17,400 cases of coronary heart disease in the year 2035 alone.**

As well as the health costs, obesity puts a significant financial strain on our NHS and the wider UK economy. It is estimated that the NHS spends around £6 billion each year on overweight and obesity-related ill-health. Furthermore, through direct medical costs and its impact on productivity, obesity costs the UK up to 3% of its GDP - equivalent to as much as £60 billion in 2018. **Latest modelling from IPPR has found that bringing childhood obesity levels down to 1980's level would save the NHS £66 billion and be worth £359 billion to the economy over the lifetimes of the current cohort of children.**

There are also stark links between obesity rates and inequalities. Analysis by the BHF found that the difference in obesity prevalence between the richest and poorest households in England is 6 percentage points in men, but 19 percentage points in women. **It is therefore clear that addressing this public health crisis would have direct benefits to the Government's levelling-up agenda.**

Obesity and Covid-19

The coronavirus pandemic has thrown into sharp relief the need to address high obesity rates in the UK. Emerging evidence has linked obesity to worse outcomes from Covid-19 – having a weight classed as obese increases a person's likelihood being hospitalised with Covid-19, admission to an Intensive Care Unit and their risk of severe outcomes or death once admitted to hospital.

This is especially concerning for the BHF, as Public Health England (PHE) reported that between March and May, heart or circulatory diseases were mentioned in 45% of all deaths from Covid-19 in England. Obesity and its associated risk factors could be putting heart and circulatory patients at further risk from the virus.

A comprehensive approach is needed to create a healthy food environment

Obesity is a complex issue with many contributing factors, including societal, economic and environmental pressures. We know there is no silver bullet to addressing childhood obesity, however there is significant evidence that shows peoples' dietary behaviours and choices are heavily influenced by the external food environment. This is something that Government recognised in Chapter 2 of its Childhood Obesity Plan, published in 2018, which stated:

"Every day we are presented with constant encouragement and opportunity to eat the least healthy foods. We face numerous decisions about the food we and our children eat created by the advertisements our children see on TV and on-line; the range of foods sold in our local shops or delivered straight to our doors; and the food that is promoted in-store and on-line. All of this is intended to influence the choices we make about the food we buy our children."

The BHF, alongside the Obesity Health Alliance (OHA), has for a number of years been calling for a comprehensive package of population-level interventions aimed at creating a healthier food environment which would help to ensure the healthy choice is the easy choice. This includes Government taking bold action to introduce:

- A 9pm watershed for foods high in fat, salt and sugar (HFSS), on TV and online;
- Mandatory calorie labelling for the out-of-home sector and traffic light front of pack labelling on all processed food and drinks; and
- A ban on place- and price-based promotions and marketing in store (e.g. end-of-aisle offers).

These interventions would help to empower individuals and families to make healthier choices by limiting their exposure to adverts for unhealthy products and provide better nutritional information. As well as being evidence-based, these measures are popular among the public, as shown by OHA polling from May 2020:

- 74% of people support not showing adverts for junk food before 9pm on TV and online.
- 72% of people support restrictions on shops promoting unhealthy foods in prominent areas such as checkouts and shop entrances.
- 62% of people support restrictions on promotional offers (e.g. buy-one-get-one free) on unhealthy foods in supermarkets.

The Obesity Strategy was a landmark step but must be fully implemented

The BHF welcomed the Government's latest obesity strategy, *Tackling obesity: empowering adults and children to live healthier lives*, which made many bold commitments, including a range of measures to curb the marketing and promotion of unhealthy foods. **If it is to meet its previous ambition of halving childhood obesity by 2030 and remain "passionately committed" to the prevention agenda, Government must now hold steadfast in its resolve and implement the entirety of measures included in the Strategy in full and as a priority.** The latest National Child Measurement Programme (NCMP) published in October further underscored this need to act, as prevalence of childhood obesity in England has had the biggest increase since 2015-16.

We also urge Government to reverse continued cuts to local authority funding by fully reinstating the Public Health Grant. This would ensure that weight management services – another cornerstone of the recent strategy – are fully funded and allow local authorities with high levels of deprivation to provide adequate support to people living with obesity in a way that works for them. **Government has an opportunity to provide this necessary funding in the upcoming Comprehensive Spending Review.**

The future of Public Health England (PHE)

Despite Government's renewed focus on addressing the obesity crisis, the BHF has serious reservations about the timing of the decision to disband PHE, which plays a critical role in this ambition. The desire to better embed prevention and health improvement across Government and the health system is welcome, but it is critical that valuable expertise and national-level leadership is not lost. **As we move towards a new public health system, Government must ensure the relevant bodies have adequate investment, clear accountability and strong leadership.**