

EXECUTIVE SUMMARY**REVERSING THE
OBESITY EPIDEMIC:***Policy Strategies For Health Funders*

As part of its continuing mission to serve trustees and staff of health foundations and corporate giving programs, Grantmakers In Health (GIH) convened a group of health funders and policy experts on November 3, 2006 to discuss policy strategies to reverse the obesity epidemic.

This report, drawing upon a background paper prepared for the Issue Dialogue and discussion at that meeting, provides an overview of the costs and consequences of the obesity epidemic; presents the rationale for using policy approaches to change food and physical activity environments; and highlights the efforts of health funders supporting policy change in schools, food systems and sustainable agriculture, the built environment, and across communities. It also briefly examines trends and opportunities in health systems, workplaces, and state programs, and concludes with a discussion of challenges and opportunities for moving forward.

Overview of the Obesity Epidemic

The U.S. Surgeon General, Institute of Medicine (IOM), and director of the Centers for Disease Control and Prevention (CDC) have all declared that the U.S. is facing an obesity epidemic and have made it a public health priority. Two-thirds of U.S. adults (over 97 million people) are overweight or obese. Close to 31 percent of U.S. children (over 9 million) are overweight, and childhood obesity has more than doubled in the past 25 years (Hedley et al. 2004; Ogden et al. 2006). Overweight and obese individuals are at increased risk for many chronic diseases and

health conditions, including heart disease, stroke, some cancers, and type 2 diabetes. Annual national health care expenditures related to obesity are estimated to range from \$98 to \$129 billion (IOM 2005).

A 2006 report by the IOM assessing progress in addressing obesity found that many policies and programs are being put in place to increase physical activity and promote healthful eating among children and youth. These interventions, however, generally remain fragmented and small scale, and the current level of investment still does not match the extent of the problem (IOM 2006). Moreover, the lack of

systematic monitoring and evaluation has hindered the development of an evidence base to identify, apply, and disseminate lessons learned and support promising childhood obesity prevention efforts. The IOM's review of progress also noted that foundations are becoming important leaders in the response to obesity.

Why Pursue Policy Change

Historically, strategies to reduce obesity have focused on individual behavior modification and treatment without addressing the context in which behavioral choices are made. The obesity epidemic has resulted from significant changes to our culture and to the environment in which food and physical activity choices are made, which suggests a number of rationales for using policy strategies to address obesity. Public policy can create behavioral norms and shape the environment in which personal choices are made and provide a mechanism for reaching large numbers of people. There are also several economic arguments to support the development of public policy interventions to address the obesity problem, including consideration of the cost to taxpayers, imperfect information in the marketplace, and recognition that children are highly vulnerable to advertising and marketing and are typically not able to make fully informed decisions of their own. Public health law provides the legal basis for using policy interventions.

Philanthropic Activities

Some of the most common policy approaches funders are supporting to address obesity seek changes in schools, food systems and sustainable agriculture, and the built environment. Funders are also forging coalitions that bring partners together across sectors including education, civic groups, health care, public health, industry, transportation, and development.

Schools: Schools play a leading role in addressing childhood obesity. They present opportunities to teach concepts related to energy balance, good nutrition,

physical activity, and their relationships to health. Schools are prime venues for children to engage in physical education and make healthy food choices before, during, and after school. In recent years, there has been a growing movement to develop school policies that support better nutrition and physical activity for all students, culminating in a new federal requirement for all schools that participate in federal school nutrition programs to have a school wellness policy in place by the beginning of the 2006 school year. Several health funders are at the forefront in promoting improvements to school health policies, focusing on a wide range of activities and approaches including advocacy to restrict access to soda and junk food and promoting more physical activity among students.

Food Systems and Sustainable Agriculture: American diets are shaped by relatively easy access to abundant and affordable food, much of it of poor quality, while fresh and locally produced food is unavailable in many low-income areas. Public health advocates argue that current agricultural policy produces large amounts of unhealthful food, and that any public health policies addressing obesity will have limited success unless underlying problems with agricultural policy and overproduction are addressed (Roberts 2005). The farm bill offers an opportunity to advocate for changes to national food policy in America, and efforts are underway at local and state levels to change the incentives that encourage the production and consumption of less healthy foods and enhance access to healthy foods, particularly in low-income areas. Funders are supporting efforts to examine the benefits of local, sustainable food systems; create food policy councils; support farmers markets; and promote other efforts to improve access to healthy foods, particularly in underserved communities.

The Built Environment: Community design and the built environment are gaining increasing attention for their role in promoting or inhibiting physical activity. Health professionals are increasingly interested in the question of how community design affects individuals' ability to be active, and what policy changes can facilitate more active communities. There is a growing

movement underway to promote smart growth and active living, which advocates for comprehensive planning to guide, design, develop, revitalize, and build communities that promote public health and healthy communities. Influencing policy on land use is a key strategy of the smart growth movement, along with creating incentives for developers to create communities more conducive to active living. Policy opportunities include zoning, growth management, and incentive programs, and funders are supporting activities to enhance research in this area and increase opportunities for active living.

Challenges and Opportunities

Reflecting the belief that no single intervention will succeed in reversing the obesity epidemic, many health funders are supporting comprehensive efforts that span several sectors and engage multiple partners. Several participants in the Issue Dialogue discussed the opportunity funders have to mobilize cross-sectoral collaborations, and many examples of funder-supported efforts exist. Public policies targeting health care providers, employers, and state health care programs can also play an important role in addressing obesity. To date, philanthropy has been less active in championing or monitoring these efforts but could do so in the future.

Changing policies is not easy, and as the IOM indicated, the investments so far have not matched the scale of the problem. Funders can be leaders in changing the debate about who is responsible for obesity, and can play a critical role in the adoption of local, state, and federal policies that lead to healthier lifestyles. Funders can also foster development of networks or coalitions that bring together multiple sectors including education, sustainable agriculture, public health, transportation, parks and recreation, development, and urban planning. By supporting data collection, convening, and offering organizational support for coalitions, foundations can provide a neutral meeting ground, motivation, and support for sustained action. Finally, funders can also

support research and evaluation to advance understanding of which strategies are effective. Sharing results with others in the field of health philanthropy and beyond will help us build the evidence base and learn about what strategies are most effective in reversing the obesity epidemic.

References

Hedley, Allison A., Cynthia L. Ogden, and Clifford L. Johnson, et al., "Overweight and Obesity Among US Children, Adolescents, and Adults, 1999-2002," *Journal of the American Medical Association* 291:2847-50, June 2004.

Institute of Medicine, *Preventing Childhood Obesity: Health in the Balance* (Washington, DC: The National Academies Press, 2005).

Institute of Medicine, *Progress in Preventing Childhood Obesity: How Do We Measure Up?* (Washington, DC: The National Academies Press, 2006).

Ogden Cynthia L., Margaret Carroll, Lester Curtin, et al., "Prevalence of Overweight and Obesity in the United States, 1999-2004," *Journal of the American Medical Association* 295:1549-1555, April 2006.

Roberts, Susan L., "Obesity: A Food & Agricultural Policy Perspective," <http://www.wkcf.org/DesktopModules/WKF_DmaItem/ViewDoc.aspx?fld=PDFFile&CID=19&ListID=28&ItemID=190786&LanguageID=0>, April 2005.