



About IASO

The International Association for the Study of Obesity (IASO) is a not-for-profit organisation linking over 50 regional and national associations with over 40,000 professional members in scientific, medical and research organisations. It is an umbrella organisation for 53 national obesity associations, representing 56 countries, along with a policy analysis body, the International Obesity TaskForce (IOTF). The headquarters are in London, UK.

IASO is officially recognised as a non-governmental organisation by the World Health Organization. Our mission statement is "To improve global health by promoting the understanding of obesity and weight-related diseases through scientific research and dialogue, whilst encouraging the development of effective policies for their prevention and management."

For further information see www.iaso.org and www.iotf.org.

Response to the consultation on the High Level Panel report "A New Global Partnership: Eradicate Poverty and Transform Economies through Sustainable Development"

Thank you for this opportunity to respond to the report of the UN High-Level Panel on the post-2015 Development Agenda. We wish to endorse the statements made by the World Cancer Research Fund International and the NCD Alliance, and to add the following comments:

Q. What do you not agree with about the narrative sections?

We are deeply worried by the report's lack of attention to the rising epidemic of obesity in less developed economies, which has been identified as a major concern by the World Health Organization (1).

Levels of overweight and obesity have risen dramatically in recent years in emerging economies, for example affecting 24% of adults in Thailand (2), 27% in the Philippines (3) and 62% in Egypt (4). Among children, surveys in recent years have shown:

* In Brazil, overweight had become more common than stunting among infants aged 4 by the early 1990s, and by 2004 overweight was at least three times more common than stunting (5).

* In India, nearly a quarter of school-age children in urban areas were overweight or obese in 2008 (6).

A review of the trends in child overweight in developing economies noted "*Important determinants of childhood obesity include high socioeconomic status, residence in metropolitan cities, female gender, unawareness and false beliefs about nutrition, marketing by transnational food companies,*

increasing academic stress, and poor facilities for physical activity.” (7) These are all issues of relevance to the post-2015 development agenda, in particular the role of transnational food companies.

We are concerned about the lack of reference to the ‘nutrition transition’ in the promotion of unhealthy dietary patterns (8, 9), and the need, expressed at the highest levels, for stronger global governance of transnational companies and the companies that market tobacco and alcohol products (10). In particular, the development agenda needs to acknowledge the relationship between the opening and expansion of markets and the promotion through these markets of products detrimental to health.

Q. What do you not agree with about the goals, targets and indicators?

The absence of a target on obesity and overweight under the goals on food security and good nutrition is a major shortcoming. The recent World Health Assembly endorsed a set of chronic disease targets which included a modest target of ‘no further increase in obesity by 2025’ (11). This needs to be supported with a set of operational targets which monitor levels of obesity in children and adults, monitor food supplies and dietary patterns, and establish cross-departmental mechanisms for controlling the main drivers of obesity, including food supplies.

The development agenda needs to be an agenda for ‘health-creating economies’ and to ensure that health targets are integrated into economic policies through Health Impact Analyses and cross-departmental accountability.

Thank you for your consideration of these matters.

Dr Tim Lobstein, Director of Policy and Programmes
Professor Philip James, President

IASO
12 July 2013

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1. <http://www.who.int/mediacentre/factsheets/fs311/en/index.html>
 2. <http://www.ncbi.nlm.nih.gov/pubmed/22526130>
 3. https://www.jstage.jst.go.jp/article/jea/22/5/22_JE20110095/article
 4. <http://english.ahram.org.eg/NewsContent/7/48/60973/Life--Style/Health/Egypt's-health-ministry-survey--pct-of-population-o.aspx>
 5. <http://www.ncbi.nlm.nih.gov/pubmed/22776157>
 6. <http://www.ncbi.nlm.nih.gov/pubmed/21158695>
 7. <http://www.ncbi.nlm.nih.gov/pubmed/22240243>
 8. <http://www.fao.org/focus/e/obesity/obes2.htm>
 9. http://www.unscn.org/files/Publications/SCN_News/SCNNEWS39_10.01_low_def.pdf
 10. http://www.who.int/dg/speeches/2013/health_promotion_20130610/en/
 11. http://www.who.int/nmh/global_monitoring_framework/en/