

WHO-SA and University of the Witwatersrand School of Public Health: Workshop on Obesity

December 2013

Comments on the workshop
and proposals for a research agenda

Effie Schultz

12 December 2013; edited 12 March 2015.

Introduction

The workshop with its focus on the prevention of obesity recognised the food industry¹ as an important link in the chain of causality of obesity as well as other non-communicable diseases (NCDs) and recognised the need for the industry's current policy and practices to be challenged. Experience in confronting the tobacco and alcohol industries as shared at the workshop emphasised the need for concerted action against vested economic interests. Could people power subvert this relationship while simultaneously promoting a healthy and sustainable food culture?

Participants at the workshop were asked to submit suggestions on research priorities on the prevention of obesity. Mindful of the above I propose that priority should be given to exploring strategies and tactics on how best to empower people with the knowledge and motivation to adopt healthy eating habits and to fight for food justice and against domination by industry. Research priorities should therefore include:

1. public education² and advocacy on food and eating practices
2. regulation of catering in institutions

General Considerations

- education material must be accurate, unbiased, continuously up-dated
- preconceptions and assumptions on food need to be critically reviewed
- knowledge³ empowers and empowered people become advocates/activists
- health and disease are a continuum as are health promotion, disease prevention, disease management and control, and the management of convalescence, rehabilitation. Obesity operates similarly at all these levels.

¹ food industry/agri-business = agrichemicals, breeding, crop production, distribution, farm machinery, processing, seed supply, marketing, and retail sales as well as all agents of the food value chain and those institutions that influence it. Wikipedia last modified 14/2/15

² education not as a top-down exercise but as a process of imparting, acquiring, and sharing information and knowledge and developing the powers of reasoning and judgment

³ knowledge as acquaintance with facts, truths, or principles, as from study or investigation

- define the populations to be educated and motivated
- use an integrated needs-based systems approach
- investigate up-front the cost implications of the research, the recommended interventions, and those who fund the research and interventions
- avoid all cooperation with the food industry unless convinced of its independence
- involve other disciplines, academic departments, and sectors in research projects
- involve the public in a participatory process
- be vigilant against covert and overt financial and ideological influences
- contrary to current practice there should be no targets of process or outcome – only to do lists of essential research projects that address prioritised objectives

Research Priorities

1. public education and advocacy on food and eating practices

i. education material

People want to know what healthy food is. This need has spawned a confusing plethora of information most of it wrong, usually influenced by market forces, and often self-referential. Education programmes and dietary guidelines should therefore be critically re-examined⁴ to ensure that they are up-to-date, unbiased, and scientifically accurate as well as intellectually, emotionally, and culturally accessible to both the lay public and professionals. Terms such as healthy and unhealthy food – separately as nutrients and nutrient groups and jointly in food and eating patterns or diets⁵ – must be correctly defined, and their determinants outlined. This will serve as education material – the common song-book from which everybody shall sing – and will contribute towards the formulation of valid study questions and variables.

ii. education methodology

Study the tactics of the food industry as hidden and overt persuaders and purveyors of misinformation in all communication formats. Investigate also whether and how to:

- be pro-active not reactive – take the fight to the enemy
- put the onus on the enemy to comply or face punishment
- contextualise the process within social and economic reality
- maintain internal message consistency, clarity, directness, and simplicity
- customise the message and the methodology without comprising accuracy

⁴ see critique in: In the face of contradictory evidence: Report of the Dietary Guidelines for Americans Committee. Adele H. Hite et al. Nutrition 26 (2010) 915–924

⁵ http://www.effieschultz.com/files/pdf/2014_diet-and-CVD-slides.pdf

- exploit humour, satire, ridicule, anger, fear, and dread⁶
- incorporate traditional social education techniques such as drama⁷, storytelling
- integrate hands-on learning experiences such as vegetable gardening, cooking
- explore formats to promote the accessibility and use of food labels⁸
- use modern technological aids⁹ and be on the look-out for new ones

iii. the educators

Research should be carried out on whether population subgroups such as health and medical workers, teachers, church leaders, and other people who have situational credibility and access to captive audiences should be preferentially trained. The training and deployment of a new cadre of workers/professionals dedicated to health and medical education and straddling several disciplines¹⁰ – much more than health promoters – should be investigated. It will also be valuable to investigate the relative effectiveness of educators who practise what they preach.

iv. the knowledge sharers

The audience/recipients should be both generalised and targeted. The integration of all aspects of food into the curricula of students at teachers training colleges, schools of public health/medicine, and other institutions of learning should be investigated.

2 regulation of catering in institutions

The modalities of legislating to ensure by regulation that places of learning and work, hospitals, children and old age homes, and similar public, state-supported, and private institutions serve and make available for on and off-site consumption (eg food parcels) only healthy food should be investigated. As there is a need for local outlets where affordable healthy food can be obtained, the establishment and regulation of public eateries and road-side stalls serving only healthy food should be studied.

Research that should not be done now

- research to strengthen a case against the food industry. More research is exactly what the purveyors of misinformation want – an effective delaying tactic
- esoteric, stand-alone, academic research for personal aggrandisement

⁶ fear and dread of disease, distress, disability, and premature death (leaving young dependents unsupported) associated with obesity

⁷ drama by Barney Simon in Transkei, puppets by Gary Freeman in SA, Eric Krystall in Kenya

⁸ http://www.fffieschultz.com/files/pdf/SA_food_labels_2014.pdf

⁹ <http://leftoverswap.com/> <http://www.fooducate.com/>

¹⁰ <http://foodtank.org/news/2013/10/twenty-three-mobile-apps-changing-the-food-system>

<http://www.fffieschultz.com/files/pdf/4-HealthEducators.pdf>

- research into cognitive behaviour therapy and food choice psychology as part of a “lifestyle modification programme”. Singing the same correct song from all platforms, restricting confusing and undermining messages, social nudges, and preventing by legislation the marketing of unhealthy dietary items should make this possibly industry-supporting but certainly diverting research unnecessary
- research on eating practices and on public perceptions on what constitutes a healthy or unhealthy diet – almost always inaccurate, biased, and invalid
- research that is outside the current brief such as research on isolated nutrients, food groups, and food additives. Leave this diverting game to the food industry.

Coordinating Body¹¹

A body into which research on the prevention of obesity could slot should be set-up to coordinate action on the risk factors for obesity and other food-related conditions. It should not be a NGO or a QUANGO¹² but should be located within the routine structures and responsibilities of the National Department of Health (NDOH). In this way accountability to the public could be optimised and opportunities for any undermining influences by the food and related industries hopefully limited. If such a structure already exists, the functions of the proposed body should devolve to it.

functions of the coordinating body

1. develop and manage an electronic information-sharing and networking platform on current and completed research, on-going interventions, and publications, ...
2. initiate, promote, motivate, or otherwise direct relevant research projects
3. facilitate the integration of research and intervention
4. facilitate the participation of different constituencies, disciplines, and sectors¹³
5. monitor research projects to prevent third party interference.

members of the coordinating body

1. relevant divisions/directorates within all government departments of health
2. relevant divisions/directorates within other government departments.
3. relevant disciplines within academia
4. medical/health professionals
5. civil society – with majority representation (see Brazilian set-up).¹⁴

¹¹ see also: http://www.effieschultz.com/files/pdf/2015_SAHS_diet_action.pdf

¹² Quangos are arms-length bodies funded by government departments but not run by them.

¹³ an example – investigating obesity-causing endocrine disruptors used in agriculture, foodstuff packaging, disease vector control, and the production of cosmetics, ...

¹⁴ Boyd Swinburn, et al. Strengthening of accountability systems to create healthy food environments and reduce global obesity. The Lancet published online 18 February 2015.