## **EDITORIAL**



## UK policy targeting obesity during a pandemic — the right approach?

In July 2020, the UK Government began the Better Health campaign to target overweight and obesity in light of the ongoing COVID-19 pandemic. This free weight loss plan is meant to encourage healthier eating habits and a more active lifestyle, but the approach is flawed.

A range of studies have suggested that obesity can influence the risk of developing severe COVID-19 (REF. ¹). In July 2020, in an attempt to encourage people to lose weight and improve their overall health, the UK Government announced a new set of policies² to tackle obesity, alongside a 'Better Health' campaign³. While the intention to encourage people to improve their health is a positive one, flaws exist in the approach and key opportunities for real change have been missed.

The Policy Paper emphasizes the impact of obesity on the National Health Service (NHS), which implies that individuals are to blame for this effect and not pathophysiological processes or a historical lack of effective public health policies. This lack of context could result in individuals with obesity being blamed for problems in the NHS and affected individuals being likely to feel shame and guilt. Indeed, the Policy Paper states that "we owe it to the NHS to move towards a healthier weight". The document also says that "Tackling obesity would reduce pressure on doctors and nurses in the NHS, and free up their time to treat other sick and vulnerable patients." The paragraph concludes with: "Going into this winter, you can play your part to protect the NHS and save lives." This choice of language could be damaging as it encourages the blaming and shaming of people with overweight and obesity. Stigmatizing obesity in this way could encourage crash dieting and an unhealthy relationship with food, which can be very detrimental to long-term mental and physical health.

The Policy Paper sets out the steps that will be taken to help people improve their health; limiting advertising of foods high in fat, sugar or salt, improving food labelling in shops, cafes and restaurants and providing more support for people who wish to lose weight. However, the policy document does not address the complex underlying causes of obesity; genetic, environmental and socioeconomic factors are involved. The simplistic message of eating less and moving more is not enough. More needs to be done to change our society to bring physical activity and healthy eating within reach of everyone, and to stop equating obesity to unhealthiness and/or laziness. We need to move away from a culture of blame and shame. People with obesity are not necessarily unhealthy, just as not all people with a normal BMI are

healthy. Many people who are classified as obese based on their BMI (which is an imperfect measure of adiposity and health risks) are metabolically healthy, with a minimal increased risk of the comorbidities that are often associated with increased weight<sup>a</sup>.

The campaign focuses on reducing calorie intake and making healthier choices based on calorie content, but, again, this is simplistic. Reducing calorie intake is not the only measure that is needed to improve health. Instead, more focus should be given to educating people on what constitutes a balanced diet, namely, a diet rich in a wide range of vegetables and whole grains, with healthy fats and proteins. Several years ago, the UK Government introduced a levy on sugar-sweetened soft drinks, with similar initiatives also in place in other countries. This approach seems to be effective, with the volume of sugar sold in drinks per capita declining after the introduction of the levy<sup>5</sup>. Could the Government not introduce similar initiatives for other ingredients that are known to be detrimental? Subsidizing vegetables and fruits would also help make these ingredients more accessible to more people. Steps could also be taken to make our environments less obesogenic, for example by making active commuting easier and safer, limiting the number of fast food outlets near schools and improving access to green spaces.

In conclusion, this Policy Paper is a positive first step, but it is flawed. This policy misses the nuance of the situation, and does not take an individualized approach; people need support to find a lifestyle, and a body weight, that works for them. We urge governments around the world to take a more holistic approach to their efforts to address obesity.

- Stefan, N., Birkenfeld, A. L. & Schulze, M. B. et al. Obesity and impaired metabolic health in patients with COVID-19. *Nat. Rev. Endocrinol.* 16, 341–342 (2020).
- Department of Health & Social Care. Tackling obesity: empowering adults and children to live healthier lives. GOV.UK https://www.gov.uk/ government/publications/tackling-obesity-government-strategy/ tackling-obesity-empowering-adults-and-children-to-live-healthierlives (2020).
- National Health Service. Better health. NHS.uk https://www.nhs.uk/better-health/ (2020).
- Lavie, C., De Schutter, A. & Milani, R. Healthy obese versus unhealthy lean: the obesity paradox. *Nat. Rev. Endocrinol.* 11, 55–62 (2015).
- Bandy, L. K. et al. Reductions in sugar sales from soft drinks in the UK from 2015 to 2018. BMJ Med. 18, 20 (2020).

More needs to be done to change our society to bring physical activity and healthy eating within reach of everyone