Time for a New Obesity Narrative

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Current understanding of obesity is often deeply flawed. The prevailing narrative suggests that obesity is a matter of individual responsibility and mainly an issue in affluent countries, yet the reality is that the majority of the world’s population live in places where overweight and obesity kill more people than underweight. In 2016 over a third of adults were classified as overweight or living with obesity, as were 41 million children under five. Obesity affects people of all ages, all geographies and all socioeconomic backgrounds.

The misleading narrative about the causes and nature of obesity has inhibited coordinated action, in part because the language and images that describe the problem wind up distorting it. Long-term impact requires multiple approaches knit together through a common language. It is time for a new story that will finally shift the obesity trajectory.

Why now?

Obesity is not only a risk factor for non-communicable diseases (NCDs) but also a complex chronic disease in its own right.[1] Yet efforts to address obesity have been stymied, not by a lack of knowledge of what works, but by faulty framing of the issue. This has led to stigmatisation, siloed approaches, political inaction, and an absence of coherent strategies within food and health systems.[2]

The need to rewrite the narratives is critical as follow-up to the third UN High Level Meeting on NCDs, at which language on obesity was included in the Political Declaration [3] and it was acknowledged that countries are significantly behind in meeting World Health Organization (WHO) targets to halt rising obesity prevalence.[4] To date obesity has lacked a coherent thread to connect its range of drivers and solutions. That thread is obesity framed through human experience: a new story is needed to change the course of the disease.

The current narrative

The current narrative on obesity relies on a simplistic causal model, with language and imagery that tends to place blame on ‘weak’ individuals who bear sole responsibility for their obesity. This disregards the complex interplay between factors not within individuals’ control (epigenetic, biological psychosocial) and powerful wider environmental factors (food availability/price, the built environment, marketing, policies, culture) that underpin obesity.[5] A siloed focus on individual responsibility leads to a failure to address these wider factors, and it is in addressing these in which government policy can and should take a leading role. Potential health-systems solutions are also held back by a lack of understanding of obesity as a chronic disease and of the necessary integration across specialties.

Behind every obesity statistic are real people living with obesity.[6] The prevailing narrative wrongly paints people with obesity in villainous terms, guilty of inviting obesity into their lives through weakness and lack of willpower – succumbing to the siren call of fast and other poor food choices. This narrative leads to stigmatisation, discrimination (including in health services, employment and
education) and undermining of individual agency. The established narrative also oversimplifies and/or obfuscates the causes of obesity.[7] For example, the food industry has engineered ultraprocessed foods to enhance their addictive properties through manipulation of levels of salt, sugar and fats. [8] Moreover, the role of the built environment or epigenetics in obesity are rarely included outside scientific journals, and the temptation to chase easy wins (such as focusing solely on school programmes or taxation without addressing the wider obesogenic environment) has the potential to be as harmful as doing nothing. This narrative tends to pit potential solutions against one another rather than linking them together: media stories focus on prevention versus treatment, or nutrition versus clinical treatment, instead of framing these as interlinked pieces of a comprehensive approach.[9] [10]

A more recent narrative has shifted the role of the individual from villain to victim, at the mercy of the environment and unable to make healthy choices.

Both these narratives fail to recognise the importance of lived experience when seeking to address multiple drivers and solutions. If the narrative is instead reframed around individuals at risk of or living with obesity as protagonists – with agency, but also operating within physiological limitations and a much larger obesogenic environment over which their control is limited – a better, more accurate story can be told, and efforts targeted to more effective actions to deliver progress and better long-term outcomes.

**Shaping a new narrative**

A new narrative is needed which includes people at the centre, words and images that are translatable across cultures and languages, framed around an interrelated set of approaches rather than single, siloed solutions. It will require alignment across sectors, with common language around both the environmental, social and commercial determinants of obesity that acknowledges the importance of evidence-informed and affordable prevention and treatment services.

Specifically, the new narrative must incorporate the following:

- Recognise that obesity requires multiple discrete actors and sectors to work together simultaneously through multiple entry points.
- Change the words and images used to portray obesity shifts blame away from individuals and towards upstream drivers. For example, photographs of anonymous or faceless people with obesity must be substituted with images of real people that foster respect and identification.
- Prioritise childhood obesity and the growing burden of obesity in low-income settings[11] Policy approaches addressing inequalities and social and physical determinants of obesity are particularly relevant.[12]
- Appreciate that obesity is a chronic disease within the health system, with both its prevention and treatment/management embedded within calls for effective and comprehensive Universal Health Coverage globally.

Obesity is not simply about body weight or body image. It is about human vulnerability arising from excess body fat, the origins of which lie in multiple determinants ranging from molecular genetics to market forces. Shifting to a human-focused narrative that encompasses this vulnerability and complexity will require effort and commitment across many sectors. We call on all affected by or concerned with obesity to come together with a common sense of purpose and shared accountability for crafting this new story.

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The views expressed in this Commentary are those of the authors and do not necessarily reflect those of the organisations with which they are affiliated.


