





Is obesity policy in England fit for purpose? Analysis of government strategies and policies, 1992 - 2020

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2021 = 30 year anniversary of Government obesity policy!

- 1991: The UK government first formally recognised obesity as a problem it should seek to address
- 14 Government strategies: Since 1991, there have been 14 government obesity strategies published by four different governments, totally almost 700 policies
- So, why haven't they worked?



William Waldegrave, Secretary of State for Health in 1991







But first: what even is policy?

- Policy is often seen as something related to politics so, what's the difference?
- Politics: The activities of government and anything related to the way
 a country is run "the art and science of governing"
- Policy: The vision & goals of who's in charge
 - Strategy: Overview of how to get there/achieve the vision
 - Individual policies: Individual principles, programmes and statements of intent or action – basically the ideas!
 - Plan: The technicalities cost, who's involved etc
 - Truth is, these terms are often used interchangeably and people even in government do not consider the distinctions!









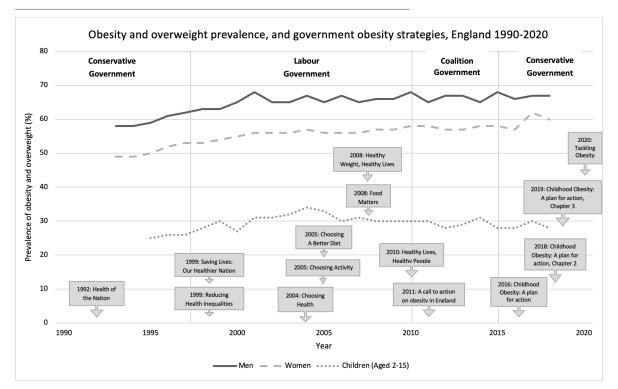
What we did

- Developed an analytical framework containing 5 themes: target behaviour, policy type, likelihood of being implemented, regulation approach and demands the policy made on individual agency
- Identified the main government obesity strategies (n=14)
- Extracted the individual policies in them (n=689)
- Analysed each policy by the 5 themes









Timeline of government obesity strategies and prevalence of obesity and overweight in England (using Health Survey for England data)







Results – overview & behaviour type

- Conservative Government 1979-1997 (n=1), Labour Government 1997-2010 (n=7), Coalition Government 2010-2015 (n=2), Conservative Government 2015-2020 (n=4)
- 7 broad public health strategies & 7 obesity specific strategies
- 12/14 had obesity reduction targets 5 were numerical
- 689 policies: 231 diet (33%), 169 physical activity (42%) & 289 nonspecific (42%)







Results – summary of what we found

- Policies were largely unfit for purpose
- Often proposed in a way that would not likely lead to implementation
- Lack of policy learning few evaluations and almost no reflecting on past policy attempts and strategies, including any successes and failures
- Reliance on trying to persuade individuals to change their behaviour (e.g. Change4Life, cooking lessons in schools) without making that as easy as possible by tackling unhealthy environments and the other many influences
- Unpredictable regulation approach sometimes voluntary, sometimes sudden legislation, sometimes both, sometimes U-turns!







Results – *implementation viability*

Target population	Responsible agent	Monitoring or evaluation	Timeframe	Cost/budget	Evidence	Theory of change
57%	71%	24%	50%	9%	19%	56%

- Majority policies proposed with target population, responsible agent and theory of change
- Half proposed with a timeframe
- Minority of policies proposed with a monitoring or evaluation plan, cost or budget, or cited evidence
- Largest proportion of policies did not have any of the above information!







Implications for policy and practice

- What is the point of a strategy if it's unlikely to be implemented?
- How should policies be proposed?
- What policies should government focus more on?
- Do policies get evaluated?
- How to deal with ideology?
- How can government increase possible effectiveness of policies?

Education campaigns

What	Who	When
Discuss with the food industry how it might contribute to funding national campaigns and other national initiatives to promote positive health information and education	DH with other government departments (OGDs) and agencies	Mid-2005
Develop obesity campaign and trial	DH	September 2005
Pilot obesity campaign regionally and evaluate	DH with creative media	2006
Launch obesity campaign nationally	DH	March 2007
Impact of obesity campaign monitored and evaluated	DH	After launch
Promote and integrate messages with National Institute for Clinical Excellence (NICE) guidance	DH	2007
Continue 5 A DAY targeted campaign	DH	Ongoing
Promote simplified 5 A DAY portion sizes	DH	Mid-2005
Salt reduction campaign – phase 2	FSA	2005

Implementation table for education policies in *Choosing a better diet* (2005)







Future possible research

- Evidence quality
- Possible effectiveness of policies proposed
- Whether policies were implemented and evaluation
- Who and what is behind the formulation of government policies (the next stage of PhD research...)









Thank you for listening! Any questions?

