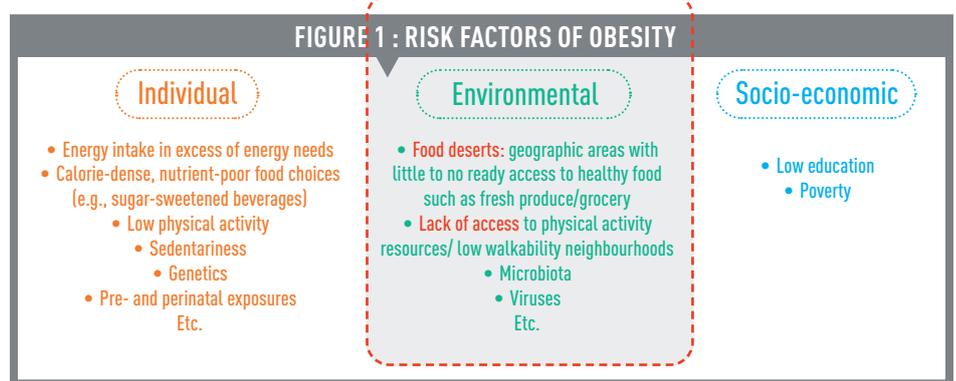**SHEET** | **09**

HOW TO DEAL WITH THE OBESOGENIC FOOD ENVIRONMENT?

▶ An increasing prevalence of obesity is a major health dans le monde entier, concern worldwide, especially in almost every European country and the rest of the industrialized world[1].

▶ It has been projected that by 2030, **nearly 40 % of the world's population will be overweight and one in five people will be obese**[2].

▶ Energy balance related behaviours are influenced by a range of determinants:

   - Dietary behavior may be influenced **by access to different foods** through various types of outlets and services.

   - Physical activity levels may be influenced **by access to recreational or sport facilities,** green spaces or parks, as well as transport infrastructure and land use[3].

▶ **Obesogenic environments** are those that do not enable healthy dietary choices. These environments make it difficult - or impossible - to buy or eat whole foods and healthier prepared and prepackaged options[3].

▶ Some environments may be more 'obesogenic' than others, such that they are more likely to promote weight gain and obesity in individuals or populations[3].

▶ The obesogenic environment significantly contributes to **the genesis and the diffusion of the global epidemic of overweight and obesity**[4].

▶ Better understanding the environmental determinants of obesity allow health professionals **to improve their ability to provide recommendations that are relevant** to patients and their families[5,6].

The environment – a risk factor of obesity

Supportive environments are fundamental in shaping people's choices, **by making healthier foods and regular physical activity the easiest choice** in terms of accessibility, availability and affordability[7]. That is why the environment (including the built environment, school environment, workplace, advertisement, etc.) is considered a risk factor of obesity, along with individual and socioeconomic factors[2] **(Figure 1)**.

FIGURE 1 : RISK FACTORS OF OBESITY

Individual
- Energy intake in excess of energy needs
- Calorie-dense, nutrient-poor food choices (e.g., sugar-sweetened beverages)
- Low physical activity
- Sedentariness
- Genetics
- Pre- and perinatal exposures
Etc.

Environmental
- Food deserts: geographic areas with little to no ready access to healthy food such as fresh produce/grocery
- Lack of access to physical activity resources/ low walkability neighbourhoods
- Microbiota
- Viruses
Etc.

Socio-economic
- Low education
- Poverty

1. The built environment

- **Young children, as compared with adolescents or adults, are more influenced by their immediate environment.** For example, youngsters with limited access to recreational facilities had a 68 % greater chance of being obese[1].

- In urban environments, **a positive relationship** has been reported **between increased availability of healthy foods and better quality diets (i.e. consumption of F&V)**[3].

- Similarly, grocery stores selling a variety of affordable, fresh, whole foods are associated with healthier weights, while an abundance of convenience stores selling less healthy packaged food products are associated with higher rates of overweight and obesity[3].

2. The role of school environment

- The school food environment **refers to all the spaces, infrastructure and conditions inside and around the school premises where food is available, obtained, purchased and/or consumed** (for example tuck shops, kiosks, canteens, food vendors, vending machines); also taking into account the nutritional content of these foods.

- It also includes all of the **information** available, **promotion** (marketing, advertisements, branding, food labels, packages, promotions, etc.) and the **pricing** of foods and food products.

- A healthy school food environment allows and encourages the school community (children, families, school staff, etc.) to make food choices that are consistent with better diets and improved wellbeing[8].

3. The role of workplace environment

- As with school in youth, the **workplace** is very much a microcosm of the adult world-filled with **elements that promote health** as well as elements that squeeze it. This makes the workplace an ideal, focused, and efficient avenue for improving health and tackling many of the key contributors to the obesity epidemic.

- Programs that focus on workplace obesity prevention have been shown to reverse the trends of obesity and its related consequences such as reduced productivity, worsen mobility and self-esteem, and increased healthcare claims, sick days, and occupational injuries[9].

4. The impact of unhealthy foods advertisement on food choices

- **Healthy foods are advertised less than their counterparts**. This has a direct impact on all people's food preferences, although young people are the main targets of food marketing activity and are the most vulnerable to its effects.

- Marketers try **to speak directly to children** by using some techniques such as featuring brand characters, suggesting themes of fun and offering gifts and rewards like toys. **These things would hook children** into that brand and that product but would also **establish associations between that product and positive outcomes.** They will make them later on purchasers not just for themselves but probably for a family of their own[1, 10, 11].

- This has a direct consequence on the development of potentially lifelong unhealthy food preferences associated with the development of obesity and its complications:

- **Children who watch commercial TV for more than 3h/day are:**
  → **More than twice** as likely to pester their parents for junk food;
  → Almost **3 times more likely to buy junk food;**
- Children who use the internet for more than 3h/day will **eat around 3 times less F&V**[12].

BOX 1: SOME PRACTICAL ADVICES

1. The counseling begins in the waiting room: health professionals can expose their patients to healthy choices by putting posters about healthy foods such as F&V and their health benefits[13,14] .

2. Eating at home as often as possible, before going out if possible, may be recommended to avoid falling to the temptations of fast foods which tend to have larger portions and be less nutritious[15].

3. If eating in a restaurant, patients should be mindful of two common challenges: 1/ the urge to order more food than one needs and 2/ the impulse to eat every bit of food on the plate — even when the portion size is much too large for one person. **Some practical tips that health professionals could give to their patients for choosing lunch or dinner in a restaurant may be to:**

- Favor the starters based on vegetables or raw vegetables;

- Pay attention to cooking methods by trying to look for these healthy terms: steamed, boiled, and poached[16];

- As soon as satiety is felt, asking to take uneaten food after a meal in a «doggy bag» is an effective strategy to reduce overconsumption from large portions[17].

4. Doing shopping without being hungry could also be very helpful because high-calorie foods may be more tempting than usual when hungry[18].

5. Always having a healthy snack (i.e. fruit, nuts, etc.) in your pocket or bag could be a smart choice in case you couldn't eat before going out to prevent surrendering to cravings[19]. Parents could also **always give their children healthy and easily consumed snacks** for school such as a bag of sliced fruit: apple, banana, orange, grapes, etc..[9]

6. Families should be encouraged to review school menus and provide alternatives if healthy choices at school are lacking. Thus, they should be encouraged to join school wellness committees and suggest to limit the use of unhealthy foods at school parties and celebrations[5].

7. Families should be **informed about the negative impact of food advertising and the digital techniques on food choices, and recommended to:**

- **limit television and newer forms of electronic entertainment or communication** (e.g. phone, tablets, video games, etc.), for children 2 years and older, and

- **exclude** them for children aged less than 2 years[5].

To know more about
→ sheet 7 "How and why F&V prevent overweight and obesity in adults"
→ sheet 8 "How and why F&V prevent childhood obesity"

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