

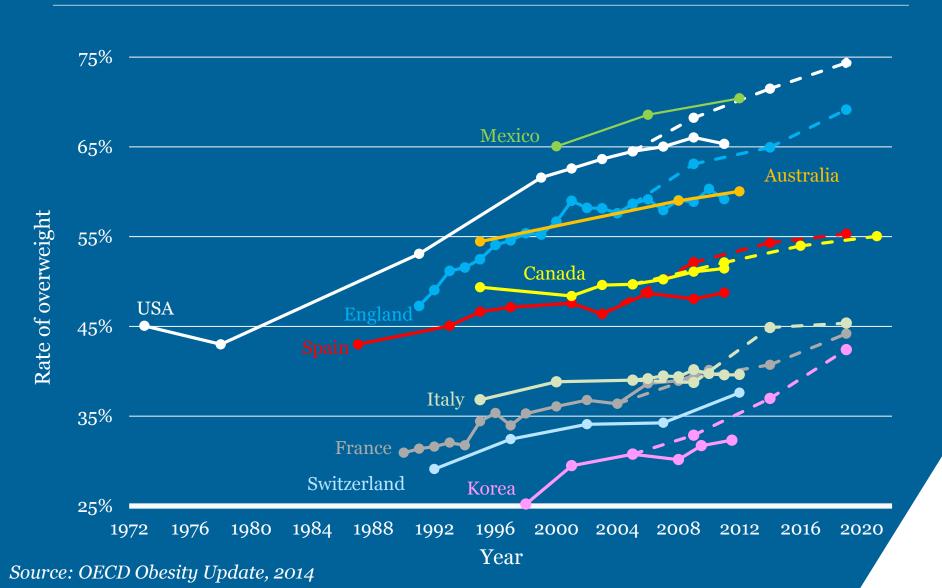
# IMPROVING LIFESTYLES, TACKLING OBESITY: THE HEALTH AND ECONOMIC IMPACT OF PREVENTION

Michele Cecchini OECD - Health Division





### Obesity: a Top Health Priority Good News for England, Italy and Spain



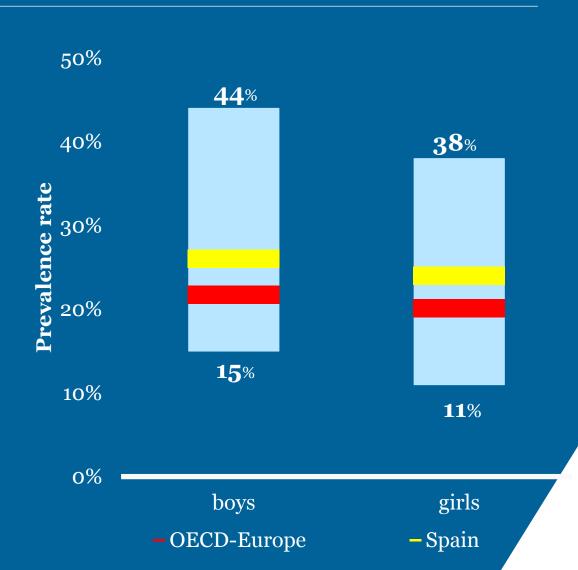


# Spanish Children Are More Likely to be Overweight Than the Average



children in OECD-Europe is overweight or obese

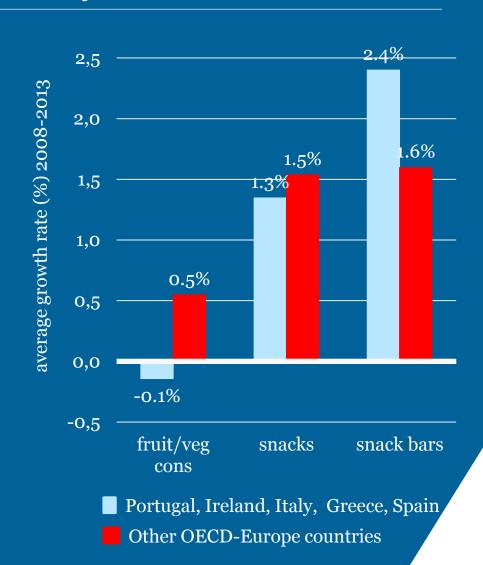
But in some countries this figure is much higher





### Most Affected Countries Are Likely to Shift to More Unhealthy Behaviours

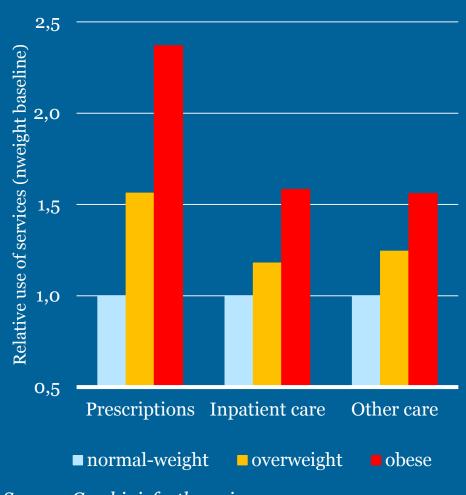
- Recession have exacerbated unhealthy behaviours in vulnerable groups
- Families decreased food expenditure and shifted to cheaper calories
- The financial crisis is increasing inequalities in obesity and health
- Food insecurity associated to 22% higher probability of child obesity



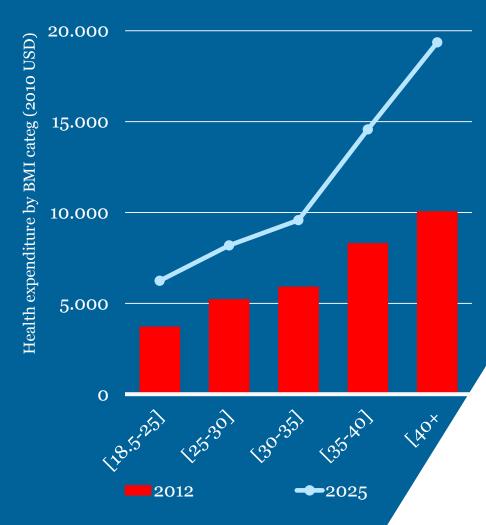


## Obese Patients Use More Healthcare Services and Cost More

Use of healthcare services – US (2012)



Healthcare expenditure – US (2012-25)



Source: Cecchini, forthcoming



#### Obesity: What Can We Do About It

- Increasing choice e.g. new products, reformulation, etc.
- Information, education, influencing established preferences (nudging) e.g. labelling, counselling, school-based int., etc.
- Raising prices on unhealthy choices e.g. fat/soda tax
- Banning unhealthy behaviours/products e.g. trans-fat regulation



#### What Policy Makers Needs to Know

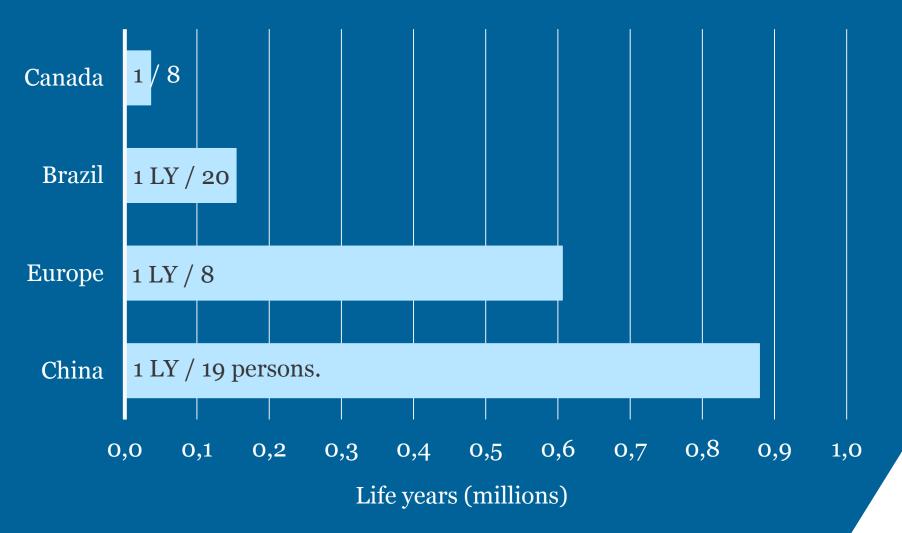
- Does prevention improve health?
- Does it reduce health expenditure?
- Does it improve health inequalities?
- Is it cost-effective?
- When will desired effect show up?



## A Comprehensive & Affordable Prevention Package

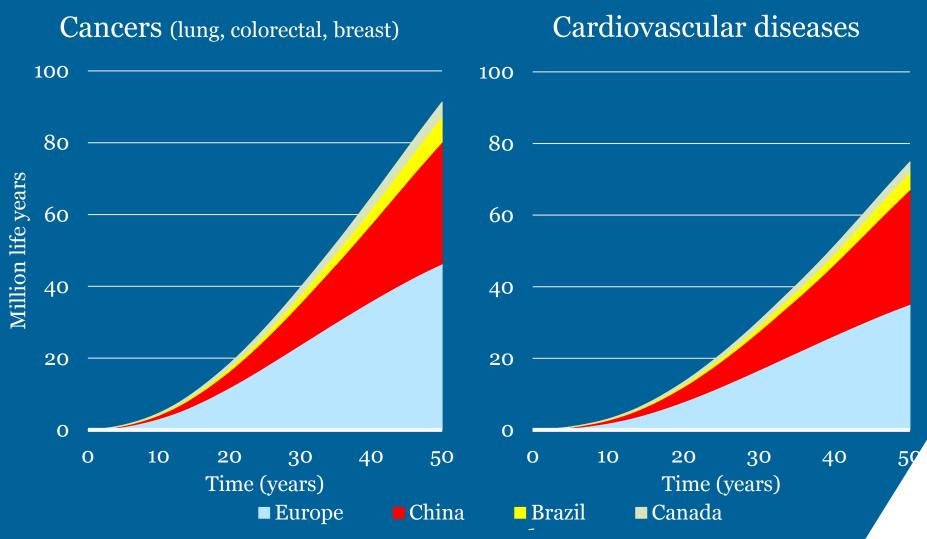
<b>High-income Countries</b>		<b>Emerging Economies</b>	
Mass media campaigns		Mass media campaigns	
Compulsory food labelling		Compulsory food labelling	
Self-regulation of food advertising to children  (targets agreed with govs & independent monitoring)		Government regulation of food advertising to children	
Physician-dietician counselling		Fiscal measures	
School-based interventions			
Canada	Europe	Brazil	China
24.03 \$/cap	22.45 \$/cap	o.40 \$/cap	0.20 \$/cap





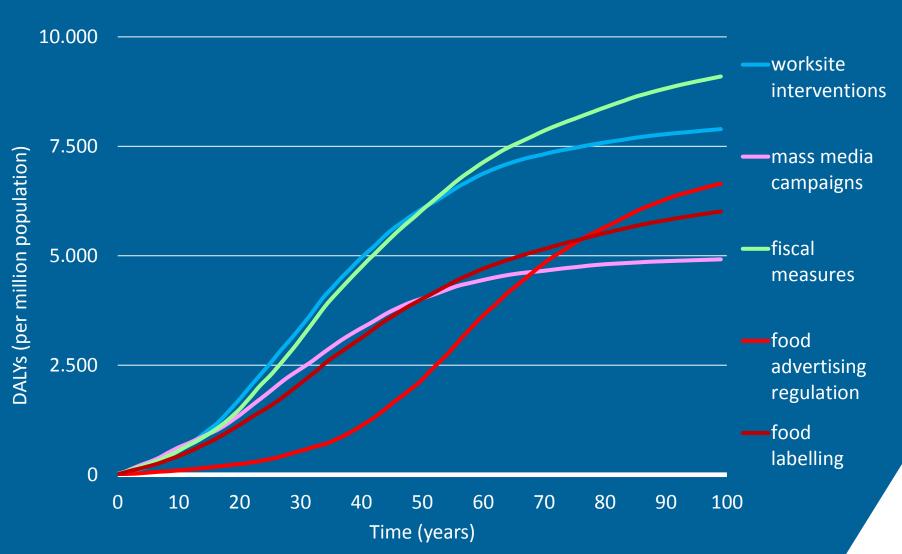
Source: OECD, HWP 48, Fit not Fat & Food Chain Network, 2012





Source: OECD, HWP 48, Fit not Fat & Food Chain Network, 2012



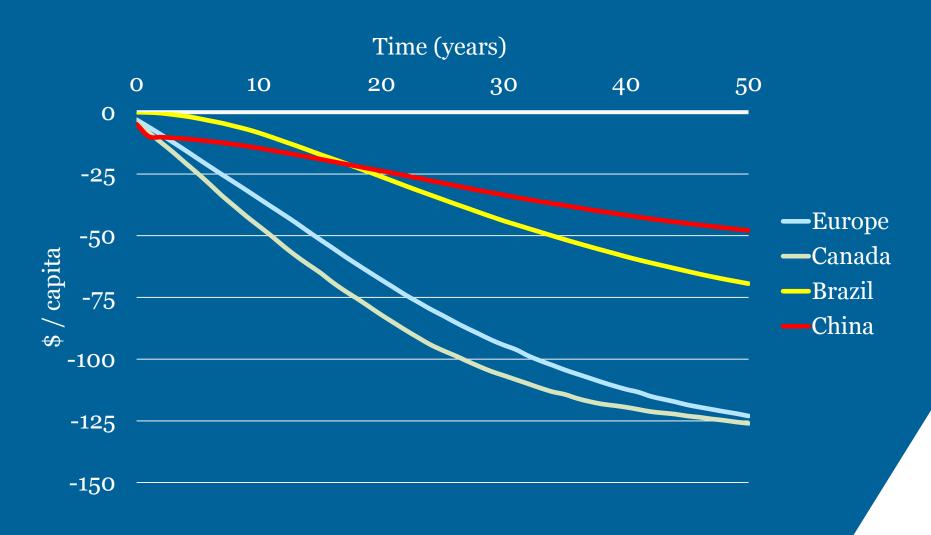


Source: OECD, Fit not Fat



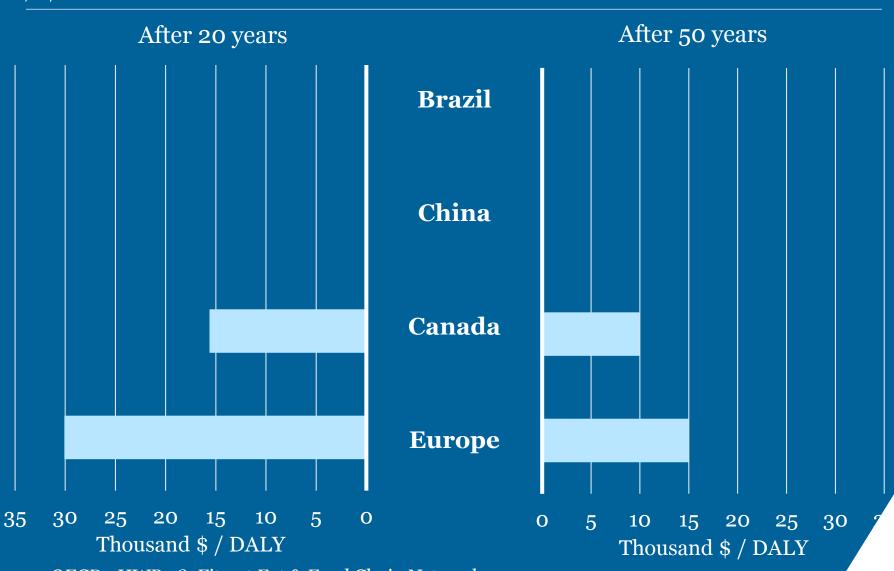
#### Prevention is a Good Investment

#### Impact on Health Expenditure





#### Cost-Effectiveness of Prevention



Source: OECD, HWP 48, Fit not Fat & Food Chain Network, 2012

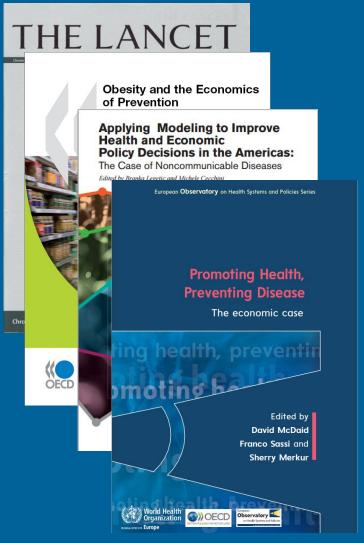


#### **Key Policy Implications**

- Obesity is a top health and economic priority
- Price interventions and regulation can produce the largest health gains. Primary care can be effective where capacity is less constrained
- Interventions on children produce results only in the long term. Regulation of food advertising is more efficient than school-based interventions
- Comprehensive strategies combining actions on different target groups provide best results
- Prevention is an effective and cost-effective way to improve population health and to decrease health expenditure



### OECD Modelling Work to Trigger Policy Change



- Applying modelling to improve health and economic policy decisions in the Americas
- Tackling harmful alcohol use –
   economics and public health policy
- Lancet papers on NCDs and priority interventions
- WHO/OECD "Best buys" paper for the UN Summit on NCDs
- Obesity and the Economics of prevention fit not fat
- OECD Health working papers