

NORTH EAST OBESITY FORUM REPORT

Regional Group of the Association for the Study of Obesity

TOPIC: ‘Is fast-food the fast-track to obesity?’

The North East Obesity Forum held a meeting on Wednesday 7th October 2015 from 4 – 6pm at Teesside University where obesity and fast food was discussed. Approximately 25 delegates attended the session where 3 speakers presented. An overview of each presentation is described below.

Abstracts

Dr Thomas Burgoine, Career Development Fellow, CEDAR & MRC Epidemiology Unit, University of Cambridge

Title: “Is the proliferation of takeaway food outlets contributing to unhealthy diet and obesity?”

Neighbourhood food environment characteristics are increasingly seen to matter for health. Takeaway food outlets in particular have proliferated in our towns and cities over recent decades, especially so in more deprived regions. They are commonly implicated in societal trends of increased takeaway food spending and consumption, and an obesity ‘epidemic’. It follows that worsening systematic differences in neighbourhood takeaway outlet exposure may contribute to observed UK socioeconomic inequalities in diet and health. However, while foods available from takeaway outlets tend to be less healthy than those prepared within the home, associations between neighbourhood access, dietary behaviours and body weight have typically proved difficult to ascertain. Further, factors such as education and income, which have been independently associated with diet and weight may influence the extent to which neighbourhood takeaway exposures are translated into unhealthy behaviours. The extent of this moderation is not well understood. In this talk, Tom highlighted recent CEDAR and other research that has begun to unpick the importance, magnitude and specificity of the effects of this abundant access to takeaway food. This evidence suggests neighbourhood planning regulation as a promising strategy for population health improvement. Tom discussed how such policies may also serve to reduce socioeconomic inequalities in both diet and body weight.

Peter Wright, Environment Health and Trading Standards Manager, Gateshead Metropolitan Council

Title: “Wading through the fast food swamp”

Peter Wright is the Environmental Health and Trading Standards Manager for Gateshead Council. His team worked with public health colleagues to gather samples from independent hot food takeaways in 2012 and 2013. Peter highlighted at the meeting that the results were far worse than anticipated, and the team also unearthed far more takeaways than had been anticipated. When the findings were discussed with local families, it was found that ordinary people had great difficulty in using the information to make informed choices when buying for their family. In areas where takeaways had proliferated, businesses had to compete hard to stay in business, meaning portion sizes were larger and prices were lower. In high density areas, prices fell as low as £1 for 910 calories, and some meals had 3,000 calories per portion. In 2015 Gateshead Council introduced a Supplementary Planning Document to restrict the further proliferation of hot food takeaways. Peter outlined some of the difficulties in creating such a document and discussed some of the limitations in using Planning as a tool against obesity.

Louis Goffe, *Research associate, Human Nutrition Research Centre, Institute of Health & Society, Newcastle University*

Title: Takeaway engagement: Ways to bait the vendor

Out-of-home food, particularly from independent takeaways, are broadly less ‘healthy’ than home cooked food. Thus, takeaways and other catering outlets are suitable targets for nutritional interventions. Such interventions aim to encourage caterers to voluntarily provide ‘healthier’ menus. Many chain restaurants signed up to specific food pledges, within the UK government's ‘Public Health Responsibility Deal’. Yet, it was the responsibility of local authorities to deliver a change within independents. Louis highlighted how independent takeaway vendors are particularly difficult to identify and engage with, as they operate in a competitive market and view the standard intervention, the healthy eating award, as adding little or no value to their business. Louis discussed how interventions that are dependent on vendor engagement should: add value to the business; be cost neutral at worst; identify possible incentives; have minimal disruption to business practices; and where possible be covert to the customer. Alternatively, strategies that circumnavigate vendor engagement should be explored such as: creating change through customer demand; enabling a cultural shift; development and promotion of ‘healthier’ options and packaging through the supplier; or financial incentives to provide ‘healthier’ options.