

Executive Summary

Workshop on Social Sciences and Humanities contribution to tackle the Obesity Epidemic

Challenges & Potentials in Obesity Research towards Horizon 2020

9th-10th of January 2013

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Workshop on Social Sciences and Humanities' contribution to tackle the Obesity Epidemic Challenges & Potentials in Obesity Research towards Horizon 2020

On the 9th-10th of January 2013, more than 50 researchers and stakeholders from around Europe gathered in Brussels for the workshop *Social Sciences and Humanities contribution to tackle the Obesity Epidemic: Challenges & Potentials in Obesity Research towards Horizon 2020*¹.

Vision of the workshop

One current challenge for research in Europe is to identify the key issues that will push our scientific frontiers to achieve the greatest social, economic and societal impact for the citizens. We need to enrich and challenge current thinking in European obesity research, to help establish and strengthen networks in the field of social science and humanities in obesity research across Europe, to identify and eliminate barriers for successful trans-disciplinary research and presenting obesity as a showcase where trans-disciplinary approaches can deliver valuable impact both nationally and in Europe.

Obesity – a complex societal challenge

Obesity is a rapidly growing public health challenge heading to be one of the main health problems in the world with high societal and individual costs. More so, severe obesity is a gateway to many other chronic diseases such as type-2 diabetes, cardiovascular and heart diseases and cancer as well as to a multitude of social and psychological adverse conditions affecting quality of life, mental health, physical health and health and care costs as well as the efficiency of the workforce. We already know that to fully unravel the challenge of the obesity epidemic, we must take into account the obesogenic environment, the obese citizens and the way society and individuals address obesity. Insights from SSH will radically broaden the perspective on the *obesity epidemic*. The point of view of the obese, their rights and statuses as citizens, their life stories, narratives etc. will be included, as well as questions about the impact of obesity discourse on the non-obese population and on other societal issues pertaining to history, social conditions, morality, law, aesthetics, psychology and so forth.

In other words, to address obesity as a complex phenomenon, there is a need for integrating and mobilizing all relevant scientific disciplines building true trans-disciplinary research, which requires determination from all sides. We need to change and broaden our view on obesity by looking at the role of social structures, social inequality and stigma associated with obesity, the cost-effectiveness of initiatives and interventions and critically evaluate the potentials in choice architecture, behaviour change and various forms of policy development and political regulation. At the same time, we also need to heighten the awareness of societal effects and consequences of the obesity epidemic.

Sciences such as economics, anthropology, sociology, psychology, political sciences, architecture and urban planning, ethnology epidemiology, philosophy, history, geography, communication and information sciences, science and technology studies and many more disciplines within the social sciences and humanities all hold a piece of this highly complex puzzle. By combining these scientific fields with clinical research, physical activity, nutrition, biomedical sciences and with epidemiology, we will be able to answer new questions and thereby securing new findings, solutions and greater impact in obesity research. Thus, the future potentials in obesity research aim at adding to our understanding of the complex system of mechanism of obesity. The impact of such research includes identification of arenas for health promotion, prevention and policy making and offers a spectrum of refined and personalized approaches to treatment, which balance the responsibility of the society and the autonomy of the citizens.

¹ For more information of the workshop, participants, and virtual process, please see www.foodfitnesspharma.ku.dk/ssh/

Summary of the workshop

The objectives of the workshop was to create a cross-European forum for identifying, describing and discussing future potentials in obesity research, to establish new and nurture existing networks and collaborations of researchers across social sciences and humanities and the natural sciences with an interest in obesity research, and hereby to mobilize the significant European research capacities and potentials in preparing for Horizon 2020.

The workshop was initiated by the Danish Social Sciences and Humanities (SSH) research community in the area of obesity research, and organized with the European Association for the Study of Obesity (EASO). It builds upon a movement of on-going European and national initiatives across Denmark, France and Germany, with the common objective to outline obesity related national research priorities and roadmaps. The workshop opened with a joined presentation by Professor Lotte Holm (University of Copenhagen, Denmark) and Professor Jean-Michel Oppert (University Pierre-et-Marie Curie, France). This was followed by a keynote speech by Patricia Reilly, member of Cabinet of Máire Geoghegan-Quinn, Commissioner for Research Innovation and Science, underlining the urgency of changing research agendas in order to address obesity as a societal challenge. Concluding the workshop, President of EASO, Professor Gema Frühbeck (Clínica Universitaria of Navarra, Spain), gave a speech on the importance of involving social sciences and humanities and how the future of obesity research is dependent on trans-disciplinary collaborations and approaches.

The main session was the round table discussions, which took its starting point in the virtual hearing and 7 pre-defined themes. The themes built on some of the expectations and potentials for future obesity research, as previously identified by political stakeholders and researchers. The themes were:

- The obesity epidemic: costs, effects and consequences
- Rethinking policy and interventions
- Values and norms – blame and stigma from the citizens' perspective
- Dissemination of information: Power, knowledge and the citizen
- Social structures, urban environment and choice architecture
- Social inequality, the life course perspective and vulnerable groups
- SSH within medical sciences: towards cross-disciplinary research

The participants were asked to identify future research potentials for each of the themes and to discuss which impact such research would have for addressing the obesity epidemic. Further, necessary scientific collaborators, interested stakeholders and potentials, pitfalls and barriers were identified.

Through the round table discussions, it was clear that combining the scientific disciplines embattling a societal challenge like obesity, will pave the way for untapped and promising possibilities which can address obesity as a complex phenomenon. This can help identify future areas of actions and potentials to improve the tackling of obesity.

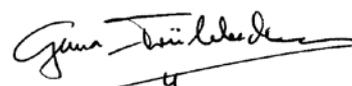
A full report of the workshop will be prepared and expectedly be launched by the beginning of March 2013. For an overview of the discussions and recommendations for future research potential for each of the 7 themes, please see the notes attached.

On behalf of the Organising group



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Professor Gema Frühbeck
President of EASO

EASO
European Association
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Outcomes from the workshop: Potentials of future obesity research

The following pages contain input on the 7 themes of obesity research discussed and developed in the workshop. The 7 overarching themes are composed based on a review of political literature and report highlighting some of the expectations and potentials for future obesity research, as previously identified by political stakeholders and researchers². The input should by no means be viewed as a complete list, but as inspiration for the potential that lies within research arising from the social sciences and humanities. The specific input under each heading are listed in no particular order of priority.

The obesity epidemic: costs, effects and consequences

SSH will enrich and broaden the perspective of obesity research as concerns the individual and societal costs and benefits, the metrics and measurement, and the distribution across segments of the population thereby adding a nuanced view regarding effects on quality of life and distributive justice.

- SSH could, based on conceptual clarifications, contribute to the creation of a robust common evidence base, by creating new tools, measurements and databases, enlarging the scope of assessing the extent and costs of obesity, costs and benefits of interventions and investments in prevention and treatment, including economy, as well as social, psychological and societal costs of obesity nationally and across Europe.
- Unfold the potentials for comparative studies across member states, and include (and build upon) natural experiments.
- Improve state-of-the-art measures of costs and benefits by addressing impact of interventions, short and long term effects (immediate costs and delayed benefits).
- Analysing the effect of the economic crisis on obesity-related behaviours and health inequalities by applying behavioural economics approaches, hereby addressing the consequences of changing economic conditions.
- Investigate moral costs, benefits, values and ethical issues and justification of normative interventions and learn from variation in interventions and health and care systems across Europe.
- Addressing the extent to which economic evaluations guides or should guide obesity policy measures and whether such evaluations do sufficiently value health itself, taking into account joined costs and benefits of interventions other than health and weight.

Rethinking policy and interventions

SSH will help qualify policies, health services and interventions by analysing and comparing effects of various intervention regimes, including their unintended consequences and by addressing underlying issues of legitimacy, responsibility, and costs broadly understood.

- Designing new types of effective interventions e.g. natural interventions involving and engaging the target group (their values and views), bringing together expertise and taking into account culturally and socially formed conceptions.
- How have public conceptions of public health and acceptance of intervening/governing people's lives developed through history and across countries, governmental regimes and cultures?
- Address the impact of welfare regimes on obesity levels in different cultures and countries across Europe in order to identify more efficient policies.
- Creating more effective health and care services by examining when and how to intervene and including the use of reward, nudging and economic incentives. Examine whether and to which extent rewarding and nudging function in the longer term.
- What are the potentials and possibilities in initiating regulation in the form of nudging based on soft evidence base and hunches and how could soft evidence be implemented?
- Critical examination of prevention policies: what are the drivers for policy makers and how is policy shaped (for whom, when, how and why?). Address the responsibility for obesity. How do we optimise the

² For more information on the literature and reports, please visit <http://foodfitnesspharma.ku.dk/obesity-2020/ssh/background-literature/>

path from evidence based research to the policy arena and end users for creating more (cost-) effective policies and interventions?

- Explore the role, effect and potential of social marketing and stakeholder engagement in preventing and treating obesity.
- Addressing the balancing of societal and individual responsibility and autonomy and re-evaluating the idea of paternalism in public health.
- What conceptions of the good life in relation for health can be found in local communities and how could this be used for adaptively and effective public health interventions?
- Does the perception of nudging differ from the individual and the societal view? What are the views and levels of acceptance of nudging in the public, or in different segments of the public?

Values and norms – blame and stigma from the citizens’ perspective

SSH will qualify the understanding and reframing of the concept of obesity and the normal by highlighting values and norms underlying various perspectives on obesity, and help understand and counteract blame, stigmatization and discrimination of obese individuals.

- How do stigmatizing attitudes work, what causes stigmatization and what are stigmatizing practices? Interrelations and interactions of stigma, cause, responsibility, shame and guilt - and of public opinion and legitimacy of obesity related health services and policies. How is stigmatization experienced in different population groups and from different perspectives? How can it be avoided?
- What is the extent of stigmatisation and discrimination in Europe in relation to medical treatment, employment, promotion, education? How is public acceptance of health service towards obesity affected? What are the individual and societal costs of stigmatization?
- How can BMI function as a vehicle for stigmatization brought about by the health and care sector, by the community and media and through self-stigmatisation? How can stigmatization be prevented by changing discourses, narratives and focus area e.g. from ‘avoiding obesity’ to ‘enjoying a healthy lifestyle’?
- Which values are embedded in key terms, in the ways of speaking and in different concepts of obesity and why?
- How is obesity socially constructed, by whom and how is it mediated as a phenomenon in different settings and through different channels e.g. media, fashion industry and sports? How does this differ across countries, cultures and languages?
- How is it possible to understand the psychological and social underpinnings of obesity by focusing on the individual experiences rather than pure outcomes of interventions?
- How can the concept of obesity be reframed by focusing not on body weight, appearance and body shape, but on specific behaviours such as physical activity, healthy eating and well-being?
- Which values and norms define being of *normal* or *average* weight? Addressing the paradox of stigmatizing and pathologizing of overweight and obesity, and the view of *average conditions* as *outside of the norm*. How is it possible to address the crossing of stigmatisation, i.e. obesity, SES, ethnicity, gender, age etc. and to address stigmatisation of children?

Dissemination of information: Power, knowledge and the citizen

SSH will enrich obesity research and understanding by focusing on how discourses of obesity, prevention, food, physical activity, and ‘the good life’ are formed, disseminated and perceived among various actors and on the role and consequences of empowerment, marketing and overload of information.

- How, why and when is information seen as valid by the individual, how, where and when are people seeking health information in modern society, how is information being re-distributed and what are the consequences of this?
- Which knowledge on health and obesity is seen as valid vs. invalid? By whom and why?
- Which information is needed by whom? How is it possible to get the right information to the right citizens taking into account competing messages and the fact that messages will change over time as a consequence of new emerging evidence?

- What are the potentials for 'personalised information'? Should the citizens be faced with 'clear cut messages' or 'insight into the complexity of obesity'?
- How is health literacy, availability and accessibility of coherent and credible information about healthy eating and other lifestyle aspects spread across countries, ages and socioeconomic classes?
- How do we make the healthy choice available and attractive, and how do we turn information and interventions into positive daily routines, connecting with communities and citizens in their everyday life?
- What are the effects of empowerment of the citizens and what are the effects of advertising vs. marketing vs. education vs. information - what could be learned?
- How is it possible to connect to communities, thereby creating new and more effective types of education and information respecting the citizens' own view of the good life? How are perceptions of the responsibility of obesity constructed and who's to blame (the individual, the community, the politicians, the society or other)?
- How is it possible to understand health communication and social media and how can information be framed in different settings?

Social structures, urban environment and choice architecture

SSH will contribute to understanding how social structures and concrete environments shape or affect the behaviour, choices and preferences of the individual vis-à-vis obesity and how choice architecture function and influence citizens, policies and societies.

- What are the effects of urban planning, rural vs. urban environment - which differences exist within and across member states and how do they affect the development of obesity? How do urban environments affect physical activity as well as food consumption (food availability and -promotion, food outlets and supermarkets as part of the urban environment)?
- How is it possible to develop intelligent and aesthetics architecture incorporating physical activity into daily routines for better understanding of the gap between active and sedentary lifestyle. How will it be possible to develop bottom-up approaches in architecture and urban planning to promote physical activity by involving the communities and citizens from an early stage? How and why do changes emerge and how is it best implemented?
- How can architecture, engineering and buildings best be regulated in order to promote healthy lifestyle and physical activity?
- How is it possible to learn from studying the rhythm and context of everyday life (time, space and daily routines) looking at 'subjective' environments, physical activity, and registration of eating and sedentary behaviour in different settings? How can choice architecture and nudging be used effectively to change relevant behaviour?
- How can the social, cultural, economic and political drivers of behaviours and the link to neuroendocrine function be understood?
- How can marketing and market mechanisms be used to promote healthy lifestyle? How do we evaluate/monitor the effects of such mechanisms? Can this change behaviour of the suppliers?

Social inequality, the life course perspective and vulnerable groups

SSH will contribute to research and policies by examining vulnerable and/or marginalized social groups, their life opportunities and challenges and by giving them a voice in obesity discourse.

- How can the different aspects and dimensions in inequality be investigated with special regard to vulnerable groups (wealth, education, culture, stress, migration, ethnicity, religion, gender, age group, socio-economic status (SES) and more) and their interconnectivity?
- How is it possible to develop more precise policies addressing inequalities by using differences between member states as *natural laboratories* for large-scale comparative studies for a better understanding of how social inequality differs across Europe and why?
- How can temporal patterns in obesity development be studied via longitudinal cohorts combined with in-depth qualitative investigation of relevant sub-groups?
- How is it possible to understand divergent paths: understanding the life events and counter-stories of people breaking 'bad' habits, changing life course, e.g. obese children not becoming obese adults?

- How is it possible to address the critical windows for susceptibility and for effective preventions/ interventions including the biological windows (puberty, menopause etc.), social (parents' divorce, unemployment) and institutional (school start)?
- How is it possible to understand knowledge and education gaps and their consequences: could e.g., marketing unhealthy products to vulnerable groups be regulated?
- How can the increased risk of obesity in different segments and groups be identified and tackled?
- How is the interplay between obesogenic environments vs. culture-ethnicity vs. socio-economic status? Why, how and when do institutional initiatives make a difference for obese or unhealthy migrants?
- How does (inequality in) access to information affect health inequalities and which measures can improve the access vulnerable groups have to health information?

SSH within medical sciences: towards cross-disciplinary research

SSH will enrich obesity research and policies by addressing the complexity of obesity, qualifying and broadening the standard bio-medical perspective on obesity and by enhancing interventions and programmes to better fit the individual and the social context.

- How can obesity be addressed as a complex condition trying to reflect 'real-life' settings and take into account other factors than the biomedical by integrating qualitative research methods?
- How is it possible to achieve real integration of scientific disciplines and how can we challenge the dominating hierarchies between the sciences?
- How do we balance the research aims of understanding complexity and identifying single key components in the cause and treatment of obesity? How is it possible to balance the focus on evidence and cost effectiveness with the high impact of applying the complex approaches?
- How is it possible to conduct follow-up research on interventions and programmes to make them more effective and inclusive e.g. by learning from families involved in the treatment of obese children what it means to live with obesity, and how treatment programmes are received and appropriated?
- How can we develop trans-disciplinary phenotyping, and thereby move beyond BMI involving multilevel analysis from psychosocial aspects, genetics, physical activity, biochemistry and many more?
- How can we establish and fully harvest the potentials of trans-European birth cohorts across the lifespan in understanding the role and interplay between genetic, physiological, social and societal factors in determinants of various health outcomes?
- Where, how and why do different scientific disciplines e.g. epidemiological studies on vulnerable groups meet research from social sciences and humanities?
- How is it possible to gain a better understanding of the interplay between different social, societal and institutional factors (school start, marriage, moving out) and the biological factors such as preconception, pregnancy and menopause in relation to obesity?