National Obesity Strategy 2022–2032

This is a summary of Australia’s [**National Obesity Strategy**](https://health.gov.au/committees-and-groups/health-ministers-meeting-hmm).

Governments and other organisations will use the Strategy to prevent, reduce and treat overweight and obesity in Australia.

We use the word ‘obesity’ to mean ‘overweight and obesity’ in this document. Obesity is when our bodies store more fat than our bodies need.

More than 2,750 people and organisations said what should be in the Strategy. This included Aboriginal and Torres Strait Islander people and organisations.

It also uses the latest evidence and recommendations from experts.

# The Artwork: Mayiny Connection

I created this original artwork for the National Obesity Strategy to visually represent its importance to community and family, and to tie the principles of the strategy to culture.

Its colours reflect the environment, with the strategy closely aligning its efforts to sustainability. It recognises the health of Country directly and indirectly impacts people’s health.

The colour meanings show the strategy is part of the bigger picture. Yellow is the water. White is the sky and stars, filled with our ancestors. And black is the earth we walk together.

The white hands and stars topping the pages are offered in guidance, to help people who suffer physically, socially and mentally. They represent the strategy’s efforts in creating equity and empowerment.

The yellow design in the corner includes helping hands and the arched symbol for people, surrounding and protecting the family within. Our health, being closely connected with the land and waters, is symbolised in the yellow and black colours of the design.

The gradient of blues and artwork of concentric circles are the waterhole, where we share the purest giver of life and vitality.

Despite where and who we are, we come to the meeting places to reach the important outcomes of the strategy. Only by working in a way where systems intertwine will the strategy be successful.

Lani Balzan, Lani B Art

(Note: the artwork does not appear on this version. It can be found on the National Obesity Strategy 2022-2032 – Summary for Aboriginal & Torres Strait Islande1`rs pdf version.)

[www.lanibart.com.au](http://www.lanibart.com.au)

# Why we need action

## Obesity is a health risk.

The Strategy talks about ‘living with obesity’ because it impacts all parts of life.

Obesity affects people’s health. It can also affect a person’s mental health, their job, family and friendships.

It can cause diseases that make people sick and die earlier, like heart disease, type 2 diabetes and some cancers.

## Aboriginal and Torres Strait Islander people are at higher risk.

The Strategy is for everyone, but some groups are more likely to live with obesity than others.

Where we live, the type of job we do, our access to health services, and the cost and availability of healthy food and drink are all outside our control. These things can make it hard to make healthy food choices.

# Why we need action

## It starts early and increases with age

Obesity can affect how a child’s body grows and develops. Obesity in children is also likely to continue as they get older.

The biggest increases in weight gain are from childhood to early adulthood.

## It costs the whole community.

Money spent on preventing obesity and supporting people who are already living with obesity means that we have a better chance of stopping people from getting sick with the diseases that obesity can cause.

But obesity costs us a lot: $11.8 billion in 2018. This cost impacts our families, communities, society, the economy and the environment.

# Guiding principles

The Strategy has four principles that guide how this work will happen.

The principles are linked to every action in the Strategy.

## Building on our strengths.

The first principle is **creating equity.**

Many people have poorer health due to things outside their control.

This is unfair as everyone should be able to live a healthy life.

Together we will use our knowledge and strengths to look after our health in a culturally safe way.

## No more blame and shame.

The second principle is **tackling weight stigma and discrimination**. We feel like outsiders when we’re treated differently or unfairly because of our weight. This can happen in the community, at work, school, even at the doctor.

We should focus on what we can change.

# Guiding principles

## Taking care of the big picture.

The third principle is **addressing wider determinants of health and sustainability**.

Many things affect a person’s health. This could be where a person lives or what food a person can buy. This shows that obesity is not easy to fix and needs all levels of government and the community to work together to find solutions.

The Strategy considers the whole system.

## Taking care of yourself.

The fourth principle is **empowering personal responsibility to enable healthy living**.

We know that choosing healthy options can be hard but to help people make better decisions, it is important that everyone has opportunities to learn about how to live a healthy life.

We should all be able to choose healthy options.

# Making it happen

This framework for action shows the Strategy and how it works towards a healthy weight and healthy living for all Australians.

The framework has three **ambitions** and three **enablers**. Each ambition links back to the Strategy’s four principles.

The Australian, state and territory governments will lead this work, and will look for ways to work with new and existing partners.

This Strategy has links to similar strategies, such as the National Preventive Health Strategy. This will help to:

* measure change (for example, the number of people in Australia who live with overweight or obesity)
* share lessons from other activities to help us improve the way we work
* celebrate successes so we know what worked well.

# Strategy map

**Vision:** For an Australia that encourages and enables healthy weight and healthy living for all.

**Aim:** Fewer people’s health and wellbeing is impacted by overweight and obesity.

**Goal:** More people maintain a healthy weight.

## Objectives:

1. More consumption of healthy food and less consumption of discretionary foods.
2. More physical activity and less sedentary behaviour.

### Ambition 1: Creating supportive, sustainable and healthy environments.

1.1. Build a healthier and more sustainable food system.

1.2. Make sustainable healthy food and drinks more accessible.

1.3. Make healthy food more affordable.

1.4. Make processed food healthier.

1.5. Improve nutrition information to help consumers.

1.6. Reduce marketing of unhealthy food.

1.7. Build more connected and safe community spaces.

1.8. Reduce cost and access barriers to physical activity.

1.9. Boost the sport and active recreation industry.

1.10. Enable healthier schools and early childhood settings.

1.11. Enable workplaces to be healthier.

1.12. Enable healthier government, community and care settings.

### Ambition 2: Empowering people to stay healthy.

2.1. Improve knowledge, skills and confidence.

2.2. Use social marketing to shift norms and knowledge.

2.3. Establish lifelong healthy habits from childhood.

2.4. Harness young people’s passion for sustainability and better health.

2.5. Support communities to lead their own solutions.

2.6. Address systemic barriers to health.

### Ambition 3: Access to early intervention and care.

3.1. Enable better access to health services and programs.

3.2. Improve uptake of models of care and referral pathways.

3.3. Address and treat unhealthy weight.

3.4. Support positive discussions about weight.

3.5. Strengthen health workforce capacity.

## Enablers

Enabler 1: Lead the way

Enabler 2: Use evidence and data more effectively

Enabler 3: Invest for delivery.