



REDUCING OBESITY AND FUTURE HEALTH COSTS – A PROPOSAL FOR HEALTH RELATED TAXES

ISPA Conference 1st July 2016

Michelle Murphy
Research and Policy Analyst – Social Justice Ireland
E: michelle.murphy@socialjustice.ie

Introduction



- Context
- Current situation
- Projections and trends
- Recommendations

Context



- Relationship between poor diet and disease
- Ireland – high levels of both
- Chronic disease identified as 1 of 5 social risks facing Ireland
- Obesity a major modifiable factor in chronic diseases

Current situation - obesity

Table 1: Obesity rates in Ireland by age

	Age	Obesity rate
Pre-schoolers	2 – 4 years	3%
	3 years	6%
Children	7 – 11 years	7.2%*
Teenagers	12 – 17 years	7.5%
Adults	18 – 64 years	24%
Older people	Over 50's	36%

** average over 3 studies of 7; 9 and 11 year olds*

Current situation - obesity

- Obesity in Ireland has increased significantly in last two decades:
 - Men: From 8% to 13%
 - Women: From 13% to 21%
- Mirrors international trends
- Pronounced social gradient
- Obesity in childhood tends to continue into adulthood with multiple risk factors from chronic disease

Current situation - food poverty



Table 2: Rising food poverty in Ireland

2010	2011	2012	2013
10.0%	11.4%	11.8%	13.2%

Source: Department of Social Protection (2014) *Social Monitor 2013*.

- Food poverty is the inability to have a nutritious diet due to affordability or accessibility.
- It is primarily the result of low incomes.
- Immediate impact - poor diet and lack of nutrients.
- Longer term - may lead to diet-related diseases, including obesity.

Current situation - food poverty



- 1 in 8 people experiencing food poverty.
- Food poverty is defined as:
having missed a meal in the previous fortnight due to lack of money; inability to afford a meal with meat or a vegetarian equivalent every second day; or inability to afford a roast, or vegetarian equivalent once a week
- Low-income households in Ireland are most at risk of inadequate diet.
- Calories from healthy foods (fruit, vegetables, lean meats, etc.) are up to ten times more expensive than from foods high in fat, sugar and salt .

Current situation - food poverty



- Families with children in Ireland are three times as likely as to be affected by food poverty.
- Refined grains, added sugars and added fats are amongst the cheapest sources of dietary energy, whereas the more nutrient dense foods such as lean meats, fish, vegetables and fruit are more expensive .
- Low income consumers with limited resources are more likely to select diets with high contents of refined grains, added sugars and added fats as the most cost-effective way to meet daily calorific requirements.

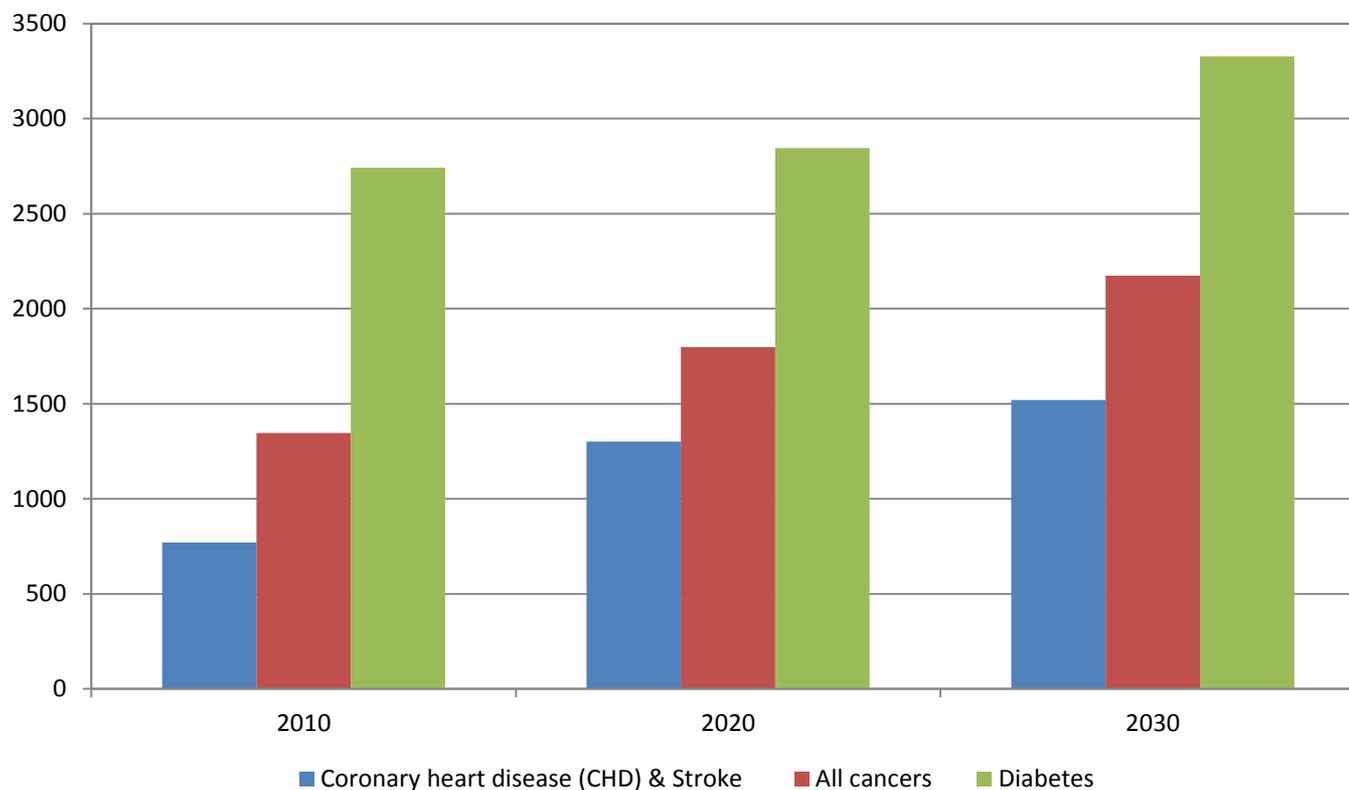
Government policy to date



- Healthy Ireland
- Cardiovascular Health Policy
- Better Outcomes, Brighter Futures
- Limited success – focus on individual behaviour change rather than tackling societal causes

Impact of obesity on health service

Chart 1: Ireland 2030 - Projected prevalence of cancers, diabetes, coronary heart disease (CHD) & Stroke per 100,000 of the population

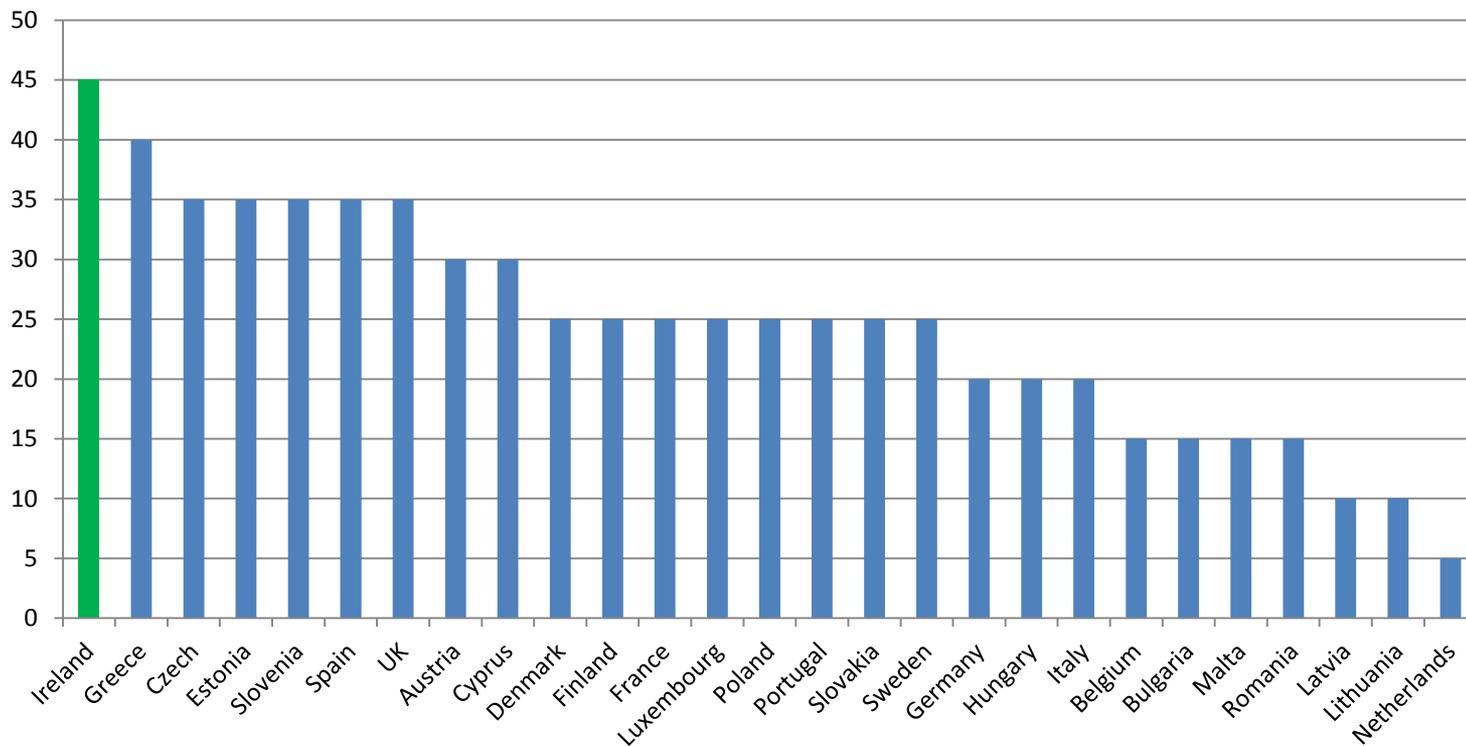


Source: Perry and Keaver et al (2013)

Projected obesity levels in EU28 2030

Projected Obesity levels 2030

% of population



Projected obesity levels in Ireland 2030



- The direct cost of overweight and obesity to the Irish health service is already almost €400m every year.
- Without any policy intervention it is projected that there will be an additional 717,950 overweight or obese adults in 2030.
- Significant increase in the number of people with chronic diseases and a significant increase in direct healthcare costs.



**IRISH HEART
FOUNDATION**
Fighting Heart Disease & Stroke

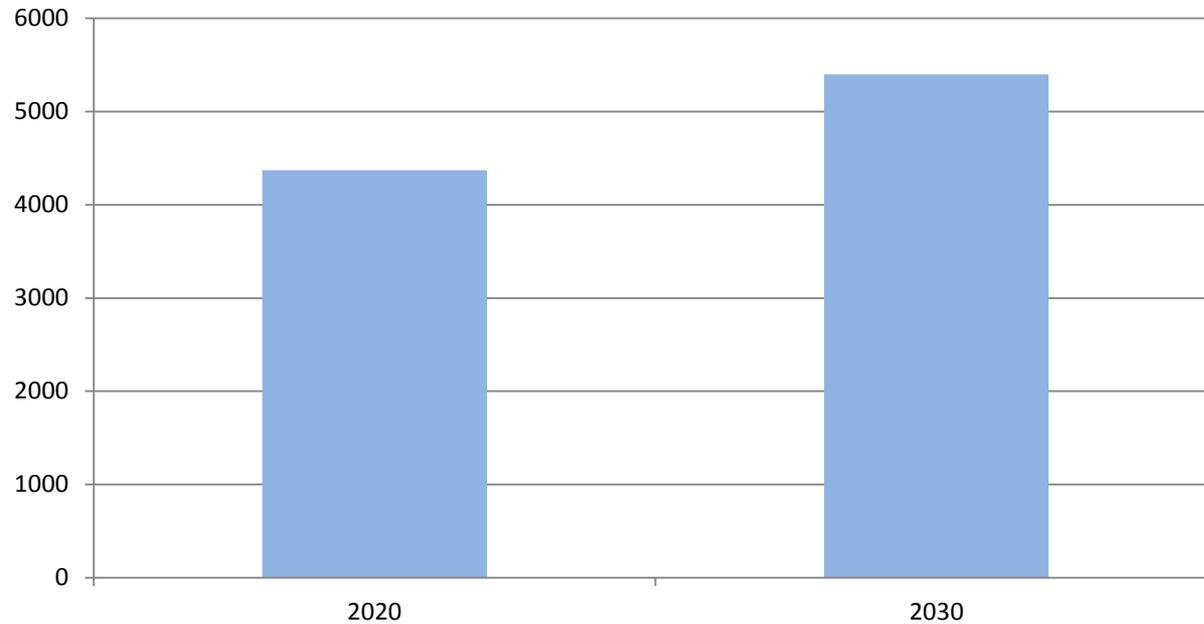
**SOCIAL
JUSTICE
IRELAND**
working to build a just society

Projected cost of obesity in 2020 and 2030*

*based on present trends

Projected direct cost of obesity

€ (millions)



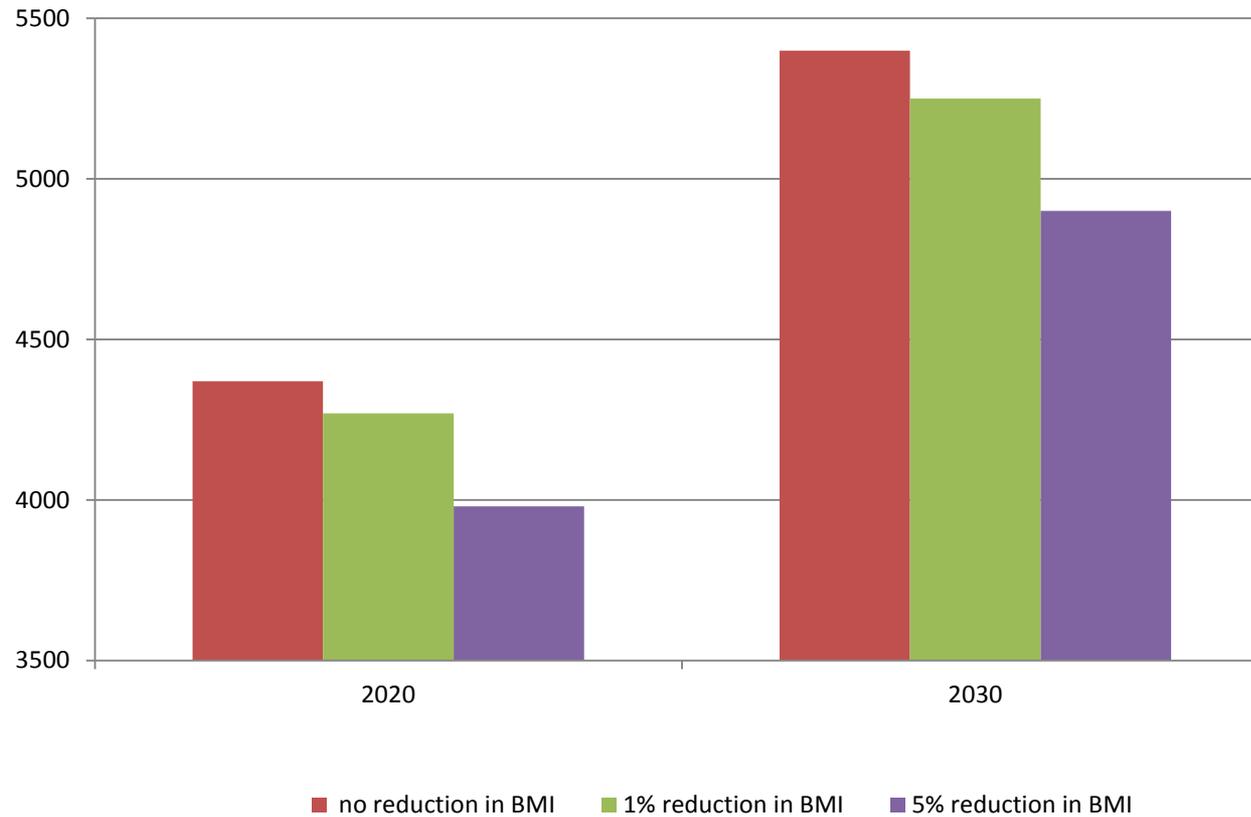


**IRISH HEART
FOUNDATION**
Fighting Heart Disease & Stroke

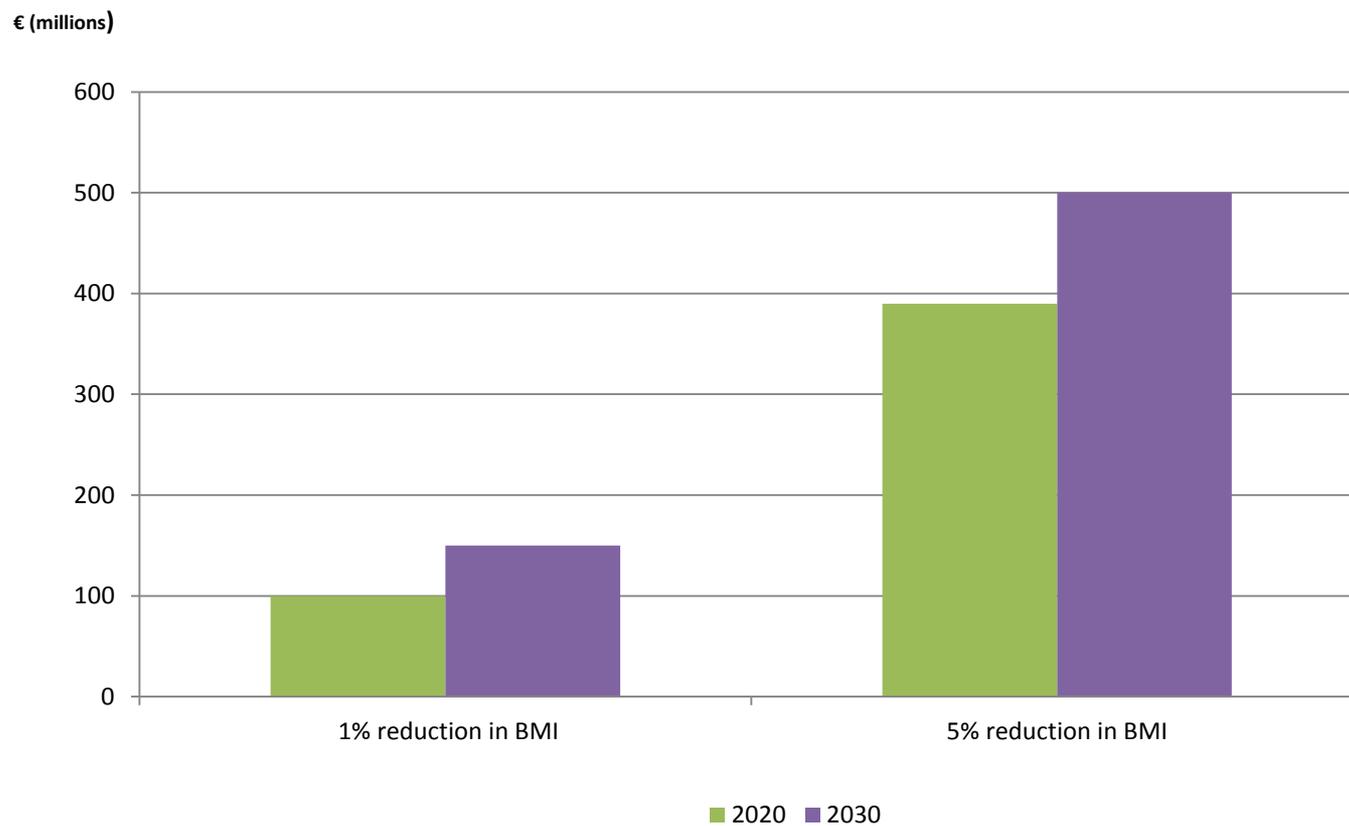


Projected obesity costs with BMI reductions 2020 and 2030

€ (millions)



Total projected savings of BMI reduction scenarios, 2020 & 2030



Policy implications



*Chronic diseases, such as heart disease and cancer, are the leading cause of death and morbidity in developed countries. The rise in childhood obesity and other trends can be seen as an indicator of future rises in chronic diseases. By 2020, the number of adults with chronic diseases will increase by around 40%, with relatively more of the conditions affecting those in the older age groups. For example, the obesity levels for both men and women aged over 20 years old in Ireland are higher than the Western European average. **It is estimated that 75% of healthcare expenditure relates to chronic diseases. The economic burden is considerable not only for the health system but also in terms of families and society as a result of reduced income, early retirement, an increased reliance on social care and welfare support and diminished productivity and absenteeism.** The World Health Organisation in Europe has estimated that the 10 - 15% increase in chronic diseases will reduce a country's GDP by an order of 1% over the next decade.*

Department of An Taoiseach (2015) *National Risk Assessment 2015*

Recommendations

- Adopt a target to reduce BMI of population by 5 per cent by 2021
- Introduce an SSD in Budget 2017
- Obesity prevention programme
- Eradicate food poverty



**IRISH HEART
FOUNDATION**
Fighting Heart Disease & Stroke



**SOCIAL
JUSTICE
IRELAND**

working to build a just society

Thank you

Michelle Murphy
Research and Policy Analyst – Social Justice Ireland
E: michelle.murphy@socialjustice.ie