

# Queensland Obesity Prevention Strategy and foundational action plan

## INSIGHTS FROM ENGAGEMENT ROUND 1

### The Strategy

Health and Wellbeing Queensland (HWQld) is leading the development of a new Queensland Obesity Prevention Strategy and a series of action plans, on behalf of the Queensland Government. Queensland's Strategy and action plans form the implementation response to the [National Obesity Strategy \(NOS\)](#), released in March 2022. Queensland Health led development of the NOS, which was agreed by the Commonwealth and all state and territory governments as the Strategy **'for an Australia that encourages and enables healthy weight and healthy living for all'**.

The 10+10 year Queensland Obesity Prevention Strategy will be delivered over three phases. Each of the phases will be supported by a corresponding action plan. The first action plan will cover the period of 2023-25 and will focus on establishing strong foundations for change. The second action plan (2025-2029) will focus on bold innovation and transformational change and the third (2029-2032) on amplifying and scaling success to achieve sustainable changes.



### Key themes identified during the engagement processes included:

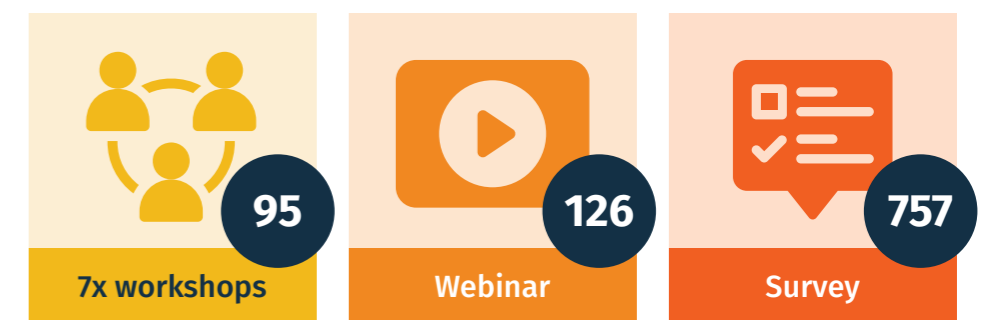
- Equity** – While acknowledging the importance of health promotion programs, participants suggested that an obesity strategy needed to tackle inequities at a systems level to make access to food, physical activity and healthy environments more equitable.
- Government leadership and collaboration** – Participants said governments need to show leadership and demonstrate actions, and thought it was particularly important that Queensland leads and advocates for changes in relation to pricing, advertising and marketing, and food and drink labelling. People suggested collaboration across government and for governments to be able to influence industry, business and sporting sectors to improve healthy food and drink options.
- Local and community-led solutions** – There was very strong support for actions that drive community-led solutions and initiatives. This included investing in locally-driven and community programs, and co-designing with communities.
- Capacity building and education** – Participants highlighted the importance of education across settings to improve healthy behaviours. They suggested that education on causes of overweight and obesity, alongside inclusive and positive messaging, could help to reduce weight stigma.

### Engagement

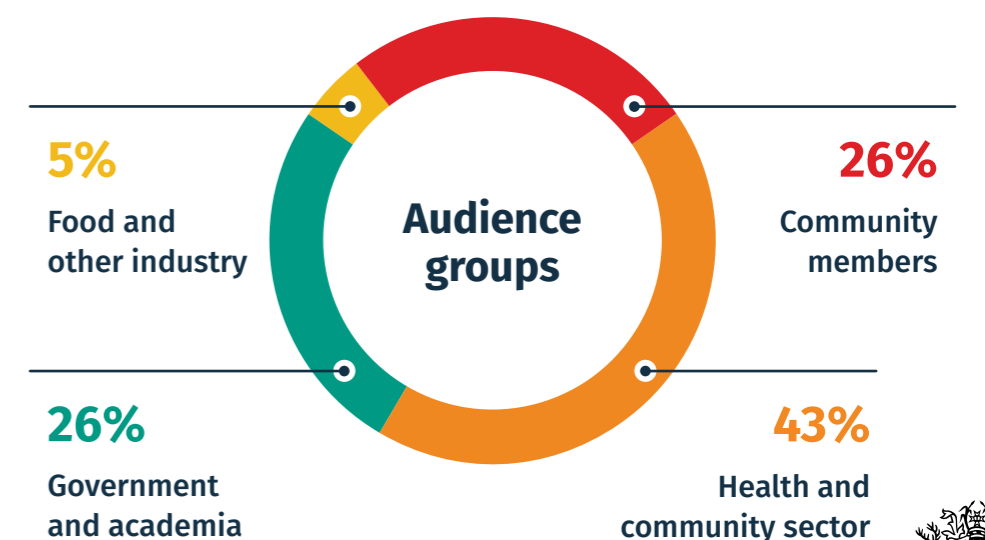
During June and July 2022, Queensland-based social researchers and engagement specialists, The Social Deck, supported HWQld to directly engage with 221 stakeholders from government, community and health sectors, and industry through workshops and webinars. A community survey was also distributed and completed by 757 people.

Consultation results were collated and independently analysed by The Social Deck and build on what Queenslanders said during the 2019 National Obesity Strategy consultations<sup>1</sup>.

### Participation across activities



978 total participants



1: National Obesity Strategy Consultation Report, November 2020 [https://consultations.health.gov.au/population-health-and-sport-division/national-obesity-strategy/results/nos\\_consultationreport.pdf](https://consultations.health.gov.au/population-health-and-sport-division/national-obesity-strategy/results/nos_consultationreport.pdf)

## Priorities for a Queensland Obesity Prevention Strategy and action plans

Key priority action areas identified during the engagement processes included:



### Enhance access to early intervention and care

- **Improving access to healthcare services** was rated as a top priority for stakeholders and community members in the survey. Participants put forward actions designed to assist with the affordability of access to health care services for management of overweight and obesity.
- **Improving models of care** were a priority for stakeholders in workshops, and the survey. This included a focus on improving referral pathways, such as from GPs to allied health professionals.
- **Training and capacity-building for the health workforce.** Stakeholders and community recognised the negative impact that weight stigma from health care professionals can have on outcomes for people experiencing overweight and obesity.



### Enable physical activity and access to healthy environments

- **Building more connected and safe community spaces.** Participants recognised the relationship between good infrastructure and improved community participation activities. They also recognised the unique opportunity that Queensland has to improve infrastructure in the lead up to the Brisbane 2032 Olympic and Paralympic Games.
- **Actions in school settings.** Stakeholders particularly focused on provision of healthy food in schools and inclusion of more physical activity.
- **Encouraging people to participate in physical activity and sport.** Participants particularly recognised the significance of cost as a barrier to increased participation.



### Empower people to stay healthy

- **Improving children's healthy eating and physical activity habits** would result in ongoing benefits throughout their lives.
- **Building awareness of and addressing social determinants of health** that contribute to overweight and obesity was recognised by the participants as necessary for future success.
- **Supporting local communities to lead their own solutions.** There was a particular focus on funding and supporting more local community organisations, and local councils, to develop initiatives so they meet the needs of local communities.
- **Education, which included building knowledge and skills.** Participants focused on building community capacity to deliver programs.



### Improve access to healthy and sustainable food

- **Making healthy food more affordable.** Participants identified actions to make unhealthy food comparatively less affordable.
- **Making sustainable, healthy food and drinks more accessible.** This included the importance of prioritising access to healthy food in schools, workplaces and other institutions as well as ensuring access for people in lower socioeconomic, rural and remote communities. People recognised the importance of ensuring healthy foods are equitably distributed to different regions across Queensland.
- **Reducing exposure to unhealthy food and drink marketing and promotion.** This was identified as a priority as well as increasing the marketing of healthy foods and drinks.



## Next steps

HWQld will use the insights from Engagement Round 1 to draft the Strategy and the foundational action plan.

Subsequent consultation will be undertaken with key stakeholders and community to ensure that strategies and actions are practical, achievable, and responsive to the needs of the Queensland community.

This will include:

- further analysis of feasibility and cost-benefits for suggested action areas
- further consultation and testing for Strategy and action plan naming.

In addition to this, the Strategy and action plan will be informed by a:

- rapid review of evidence, including the emerging evidence of how COVID-19 has impacted nutrition, physical activity and obesity-related determinants of health
- Measuring Change Framework that will guide monitoring, evaluation and learning during implementation.

For more information please email [consultation@hw.qld.gov.au](mailto:consultation@hw.qld.gov.au)