



18th September 2024

To the attention of: Mr. Orazio Schillaci
Minister of Health
Italy

Cc: Mr. Mark Holland
Minister of Health
Canada

Ms. Catherine Vautrin
Minister of Labour, Health and Solidarities
France

Mr. Karl Lauterbach
Federal Minister of Health
Germany

Mr. Keizo Takemi
Minister of Health, Labour, and Welfare
Japan

Mr. Wes Streeting
Secretary of State of Health and Social Care
United Kingdom

Mr. Xavier Bercerra
Secretary of the Department of Health and Human Services
United States of America

Object: Unhealthy Economies: Addressing the Hidden Syndemic of NCDs and Obesity

Dear Representatives of the G7 Countries,

We, at Competere.eu, a think tank comprised of scientists, academics, and concerned global citizens, along with the Center for the Study and Research on Obesity at the University of Milan, urgently call on the G7 Health Ministers to prioritize the escalating crisis of Non-Communicable Diseases (NCDs) by addressing the rampant rates of obesity, overweight, and eating disorders in the upcoming agenda for the G7 Health Ministers' and Related Meetings.

Obesity, a severely neglected syndemic, stands as a major cause of mortality worldwide, exerting profound costs on public health systems and national economies. It also undermines productivity and



individual well-being. Urgent, robust policy action is essential to mitigate these impacts and empower individuals to adopt balanced lifestyles.

Alarmingly, over 1 billion people globally now suffer from obesity, with particularly devastating effects on women, children, and communities across Asia and Africa. The rise of obesity among children and youth is especially concerning, with 159 million affected worldwide and the obesity rate for this group having quadrupled since 1990. Yet, the implications of obesity and overweight extend beyond health ethics; they pose significant economic threats as well. By 2035, the global economic impact of obesity is projected to soar to \$4.32 trillion, nearly 3% of global GDP – comparable to the economic fallout from COVID-19 in 2020. Humanity stands at a critical juncture, facing the real possibility of a decline in life expectancy due to widespread weight gain and malnutrition for the first time in modern history.

Current policies have proven inadequate, ineffective, and fraught with unintended consequences. Measures such as nutrient-based taxes and front-of-pack nutritional labeling are superficial solutions, more often driven by ideological bias and the rush to deliver political outcomes, as well as by commercial interests, rather than by an experimental approach that considers all facets of human life. Furthermore, these measures have frequently undermined core democratic values that must remain inviolable, including individual freedom of choice, fair competition, and the pursuit of economic and social prosperity.

Indeed, these instant fixes overlook the complex conditions that lead to obesity. Weight gain stems from a caloric and nutritional imbalance with diverse causes linked to lifestyle, psychosocial factors, and to a lesser extent, individual nutrients, with only about 20% attributable to genetics. Each of these causes is further divisible into many other factors unique to each individual. In other words, the causes of obesity can vary from one person to another.

Therefore, to effectively tackle the obesity syndemic, we must embrace a multidisciplinary and personalized approach, starting from childhood. Introducing compulsory physical, motor, and nutritional education programs at an early stage can foster a balanced lifestyle and instill an appreciation for the vital relationship between body, mind, and social environment. Fortunately, the era of scientific breakthroughs and technological advancement provides us with the tools to discover more effective solutions. By empowering individuals to make informed lifestyle choices, and moving away from rigid, 'one size fits all' models that have proven ineffective and dangerous, we can create interventions tailored to the diverse needs of those affected by obesity.

Policy Proposals

Recognition of Obesity as a Disease: Obesity should be recognized as a chronic disease requiring a range of therapeutic services, which national healthcare systems should cover.

Promoting Knowledge and Balanced Diets: Governments must intensify their efforts to disseminate knowledge, empowering individuals to make informed, critical choices regarding their diet and lifestyle. They should advocate for the adoption of the principles of the Mediterranean Diet – or similar dietary plans like the Atlantic Diet – as effective tools for a balanced lifestyle. The Mediterranean Diet, more than just a nutrition regimen, represents a comprehensive approach to balanced living. Its principles can be adapted to other geographical areas by utilizing local foods that echo the nutritional values typical of the Mediterranean.

Combating Obesity Stigma: Public and private sectors should work to eliminate stigma and social disapproval towards people with obesity.

Comprehensive Diagnosis: Overweight and obesity should go beyond BMI to include body composition, fat localization, metabolic health, and psychological factors.



Obesity Care Centers: Governments should establish multidisciplinary obesity care centers as part of their healthcare system model, ensuring comprehensive, patient-centered care that addresses all aspects of obesity management, from prevention and treatment to long-term support.

Multidisciplinary Working Groups: Governments and institutions should establish working groups of experts from various fields to tackle obesity from multiple angles, enabling the development of more effective policies that empower individuals to take control of their health.

Education from Childhood: Integrating nutritional education into early childhood curricula is crucial. Children should learn about the nutrients they consume, how their bodies function, and how to create a balanced diet tailored to their needs. This knowledge empowers them to make informed choices, supporting long-term health and well-being. In parallel, physical, and motor education should be reinforced through fun and engaging activities. Rather than simply preparing children for competitive sports, this approach should foster an understanding of movement mechanics, posture, ergonomics, and mindfulness. With the right infrastructure, these activities promote a healthy lifestyle, maintain physical well-being, and inspire lasting commitment to personal health.

Therapy as Prevention: Therapy is a component of prevention: we advocate for promoting access to pharmacological treatments that are proving and will continue to prove increasingly effective. However, the therapeutic phase should not be seen as a justification for poor behavior. Instead, it is an essential tool in extreme cases, complementing a broader preventative strategy.

Policies for Active Lifestyles: Governments must combat obesogenic environments by promoting physical activity not only for competitive (sport) purposes but also as a lifestyle. More parks and sports facilities should be created to support this initiative.

Designing Balanced Cities: Urban development and regeneration plans should prioritize the creation of spaces that not only encourage physical movement for transportation and exercise but also reduce various types of environmental stress, such as noise and air pollution, which can contribute to weight gain. New buildings and public spaces must promote not only physical activity but also a balanced diet. Moreover, these urban projects must facilitate access to a diverse array of foods and actively work to eliminate so-called ‘food deserts’, ensuring that all residents have easy access to nutritious options.

Assessing Impact on Personal Lifestyles: Governments must ensure that all legislative, financial, and public planning initiatives include a comprehensive assessment of their impact on personal lifestyles. This will help align policies with the daily realities and well-being of citizens, promoting healthier living conditions through informed decision-making.

Regulating Food Promotion and Portion Sizes: Food production and distribution companies, along with sector associations, must collaborate to limit promotional campaigns during protected time slots and locations. Additionally, they are invited to reduce portions where possible.

Promoting Responsible Media Practices in Public Health Reporting: We urge governments and political leaders to encourage the media, within the broad respect for press freedom, to exercise greater caution in disseminating information related to nutrition and lifestyle. It is vital to avoid spreading misinformation, biases, or emotionally exploiting the vulnerabilities of citizens through sensational headlines that mislead consumers. Additionally, paid articles that promote commercial interests, or uncritically following fleeting trends without scientific backing, should be critically examined. In matters of lifestyle influence, media groups should ethically prioritize the dissemination of scientifically validated information, adhering to professional ethics rather than chasing trends or commercial interests.

Conclusions

We are convinced that the proposals put forward represent a more effective and innovative approach compared to previous policies, which have shown limited success in combating obesity.



Given the urgency of this global issue, we urge you to seriously consider the solutions we present and to contemplate establishing a specific working group within the G7 dedicated to non-communicable diseases and obesity, open to diverse stakeholders.

Such an initiative would send a strong and clear signal to citizens around the world, demonstrating a concrete commitment to finding effective and sustainable solutions. We are ready to actively collaborate with you to develop and implement these strategies.

Yours sincerely,

Pietro Paganini

President, Competere.eu

Michele Carruba

President, CSRO (Center for the Study and Research on Obesity)