

Nutrition and inequalities in health: the role of prevention policy

Marion Devaux

OECD – Health Division

Athens, 25th February 2014

OECD Work on Prevention

Obesity and the Economics of Prevention

FIT NOT FAT

Franco Sassi



THE LANCET

Chronic Diseases - November, 2010

www.thelancet.com

“Non-communicable diseases have been a silent killer for too long. They are a major cause of poverty, a barrier to economic development, and a serious threat to achievement of the Millennium Development Goals.”

Chronic Diseases 3: Chronic Diseases and Development

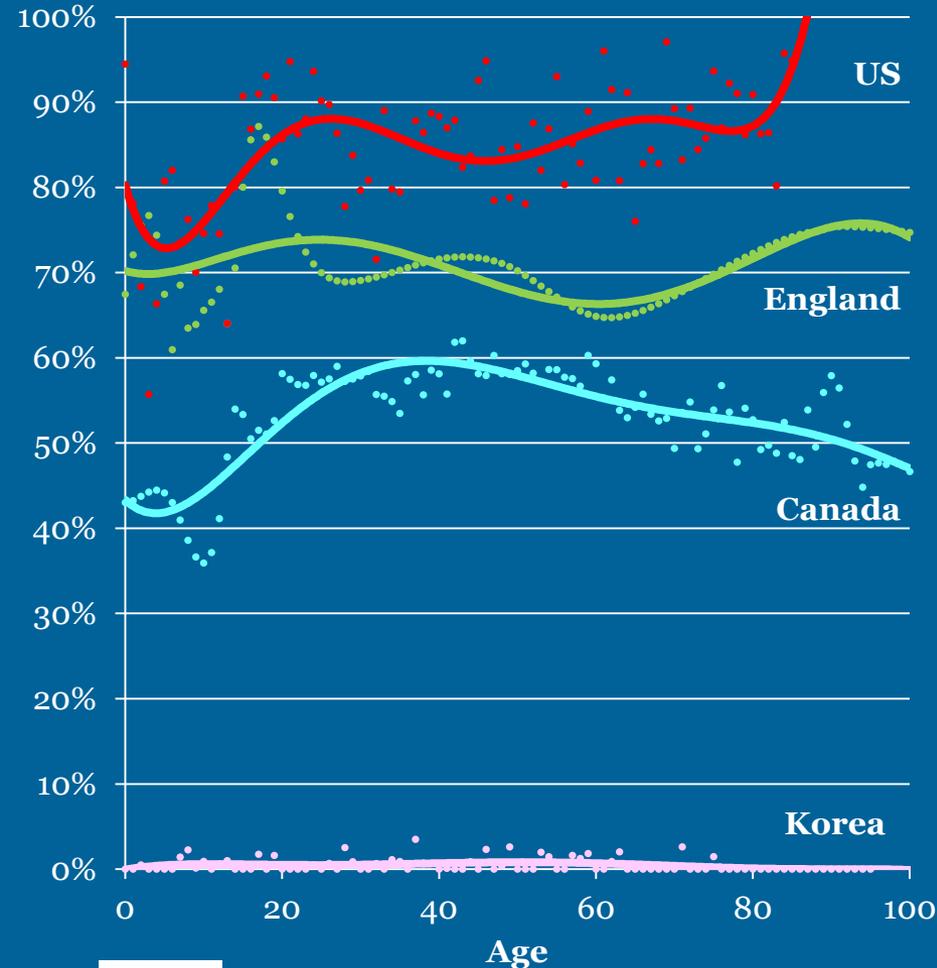
Health Risk Factors

- Nutrition and physical activity important determinants of health
- Risk factors for a number of chronic diseases
- Unequal distribution of healthy lifestyle habits across SES groups

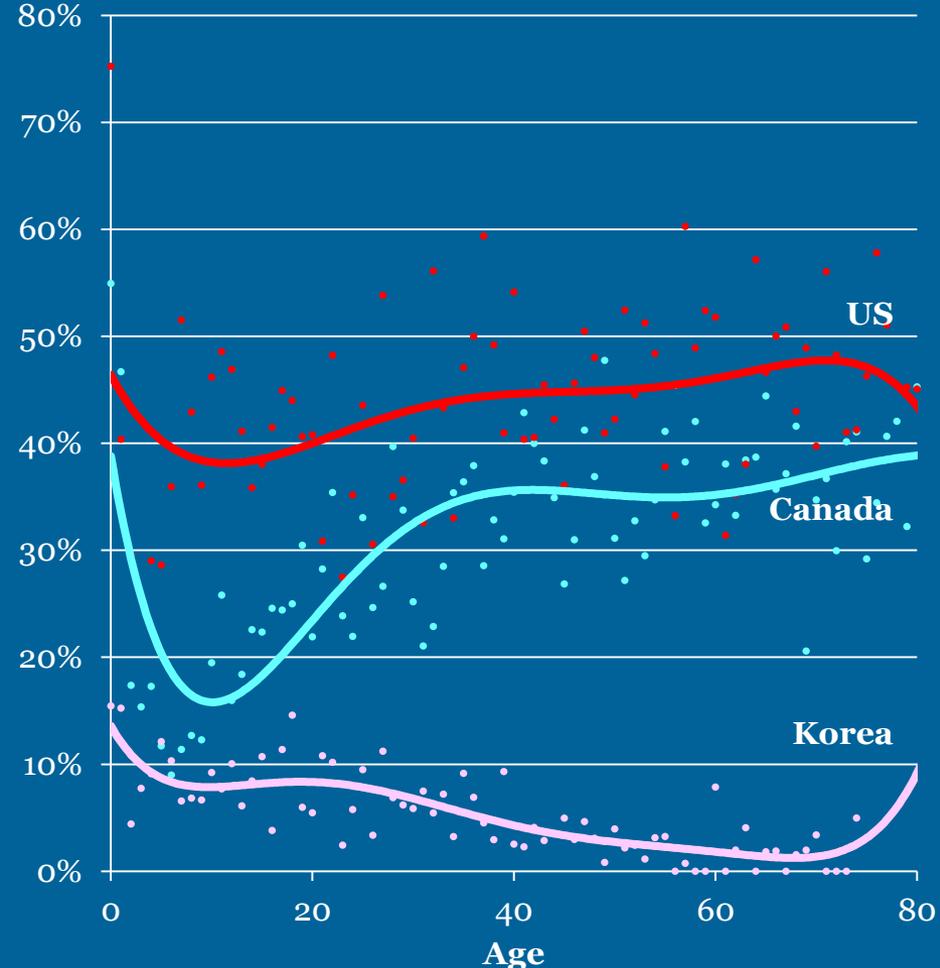


Unhealthy Dietary Behaviours

Insufficient Fiber consumption

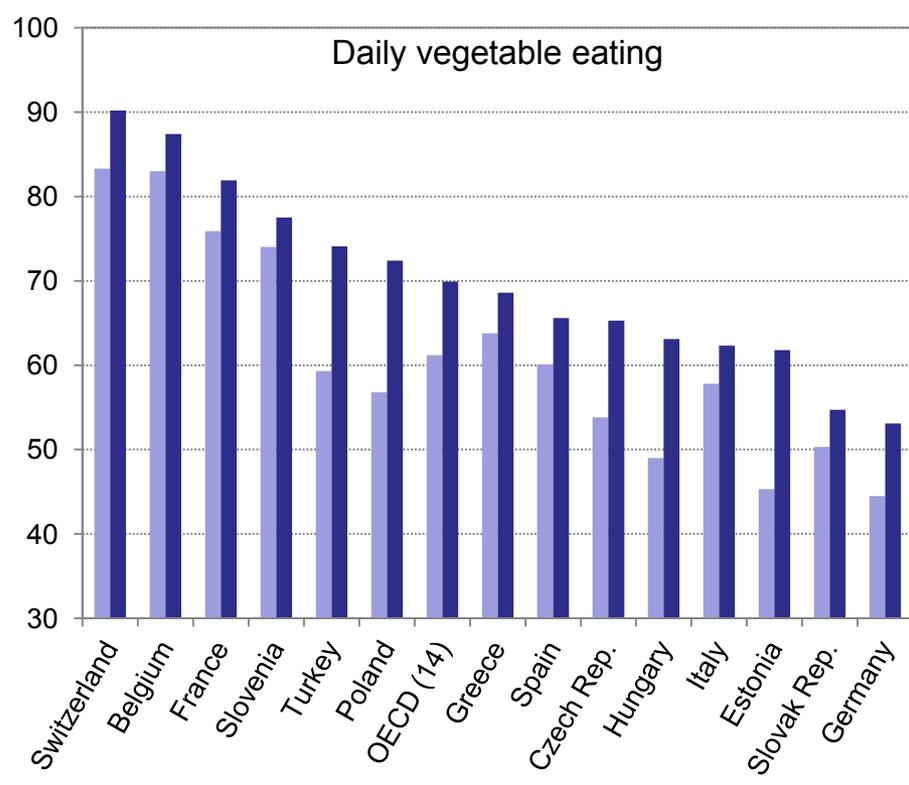
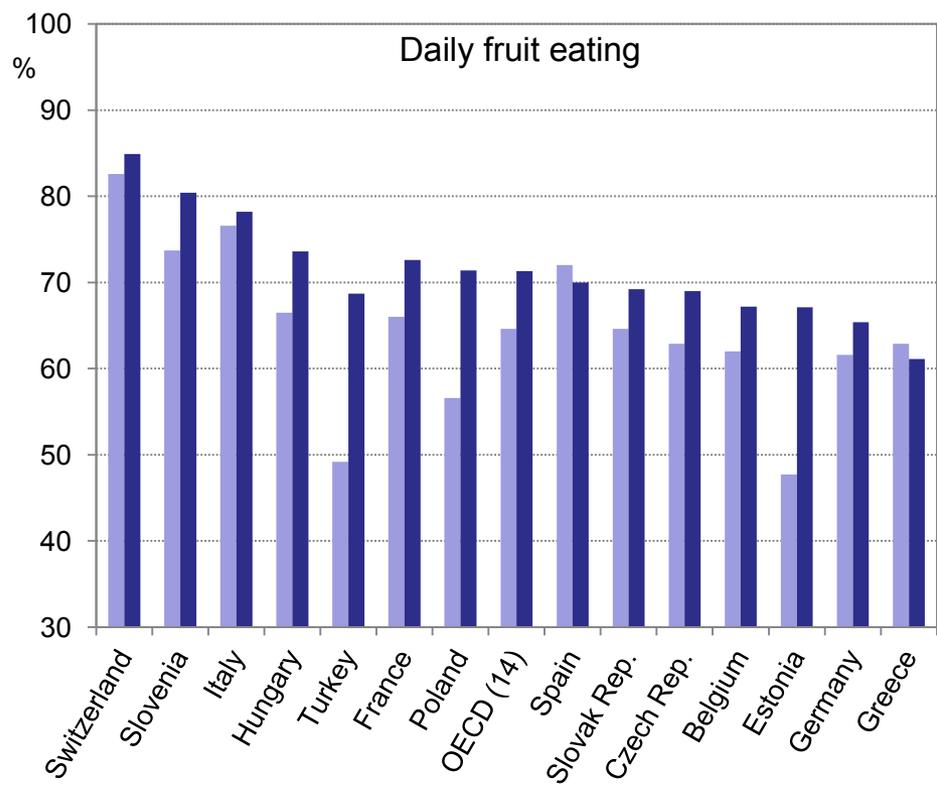


High Fat consumption



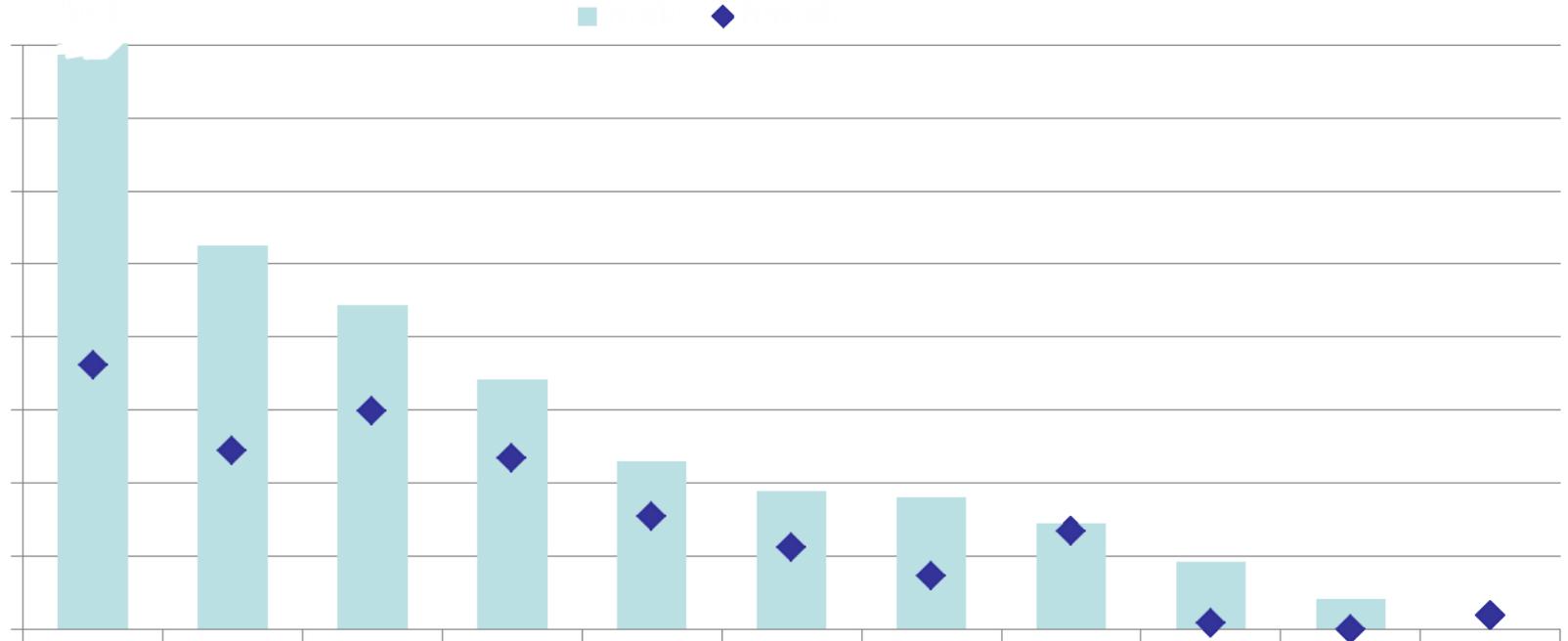
Fruit and vegetable consumption by Education level

■ Lowest educational level
 ■ Highest educational level



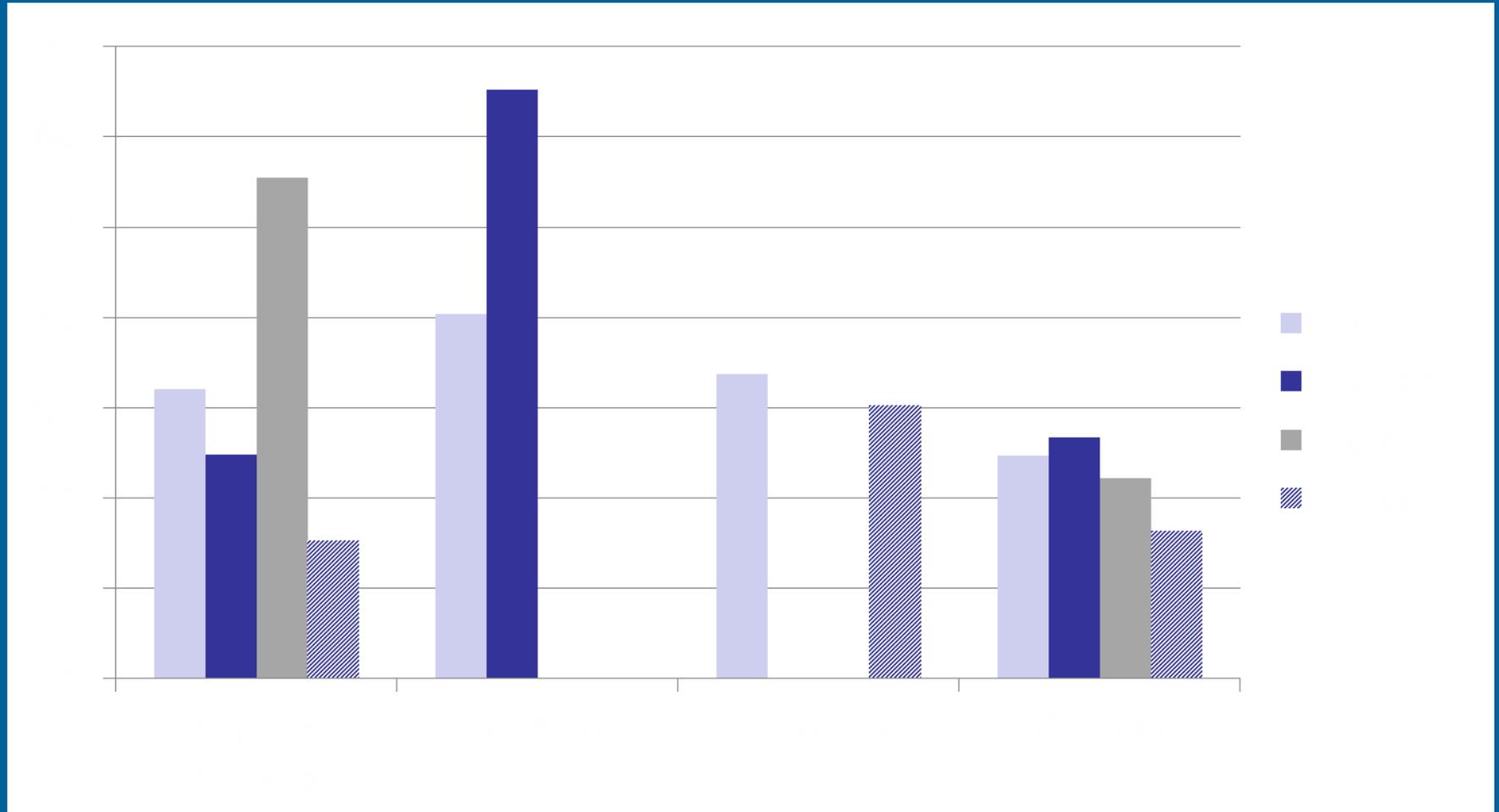
Physical activity by area of residence

- People in urban areas are less likely to have sufficient levels of physical activity.

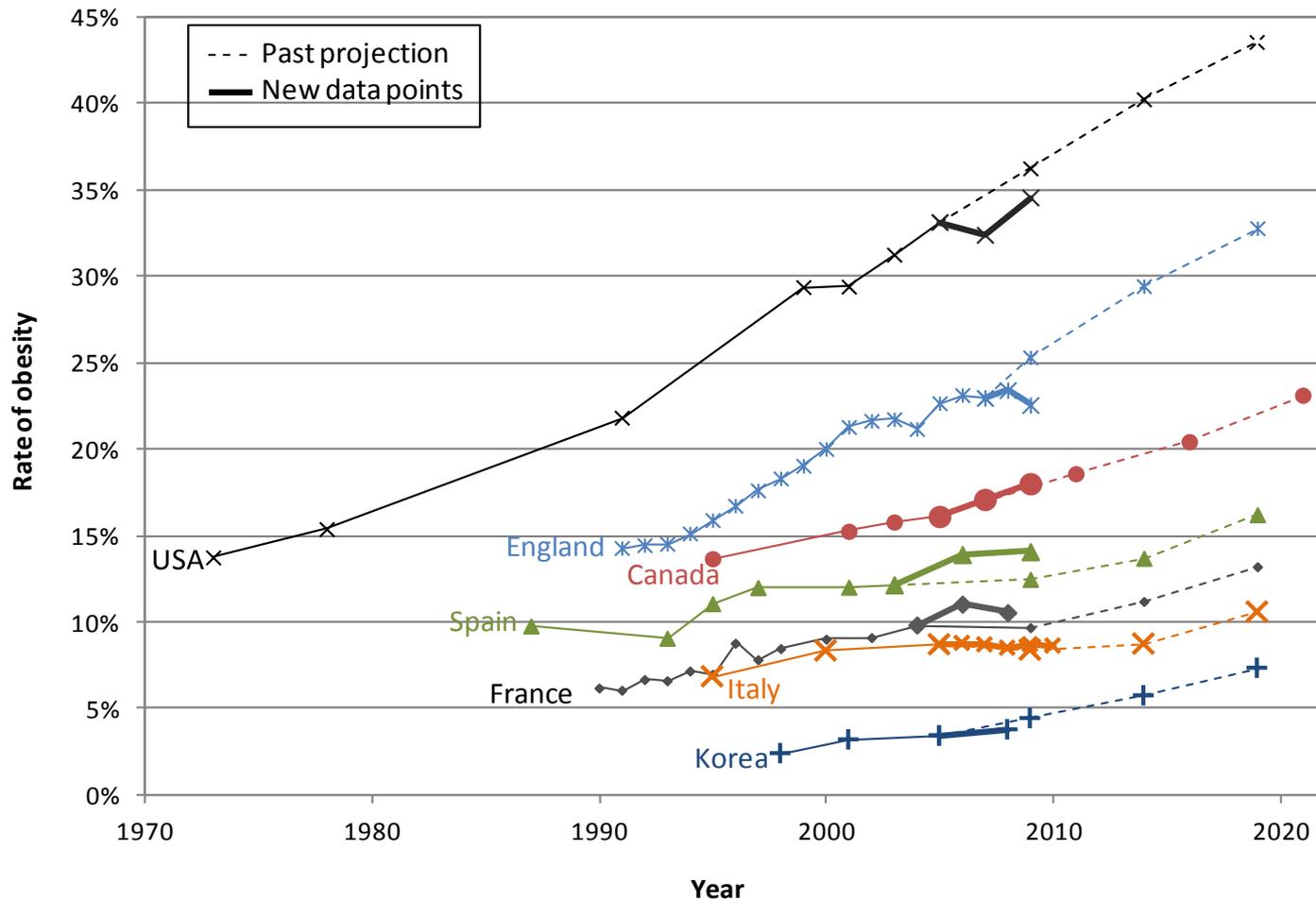


Strong correlation within households

- People living in the same household share lifestyles.

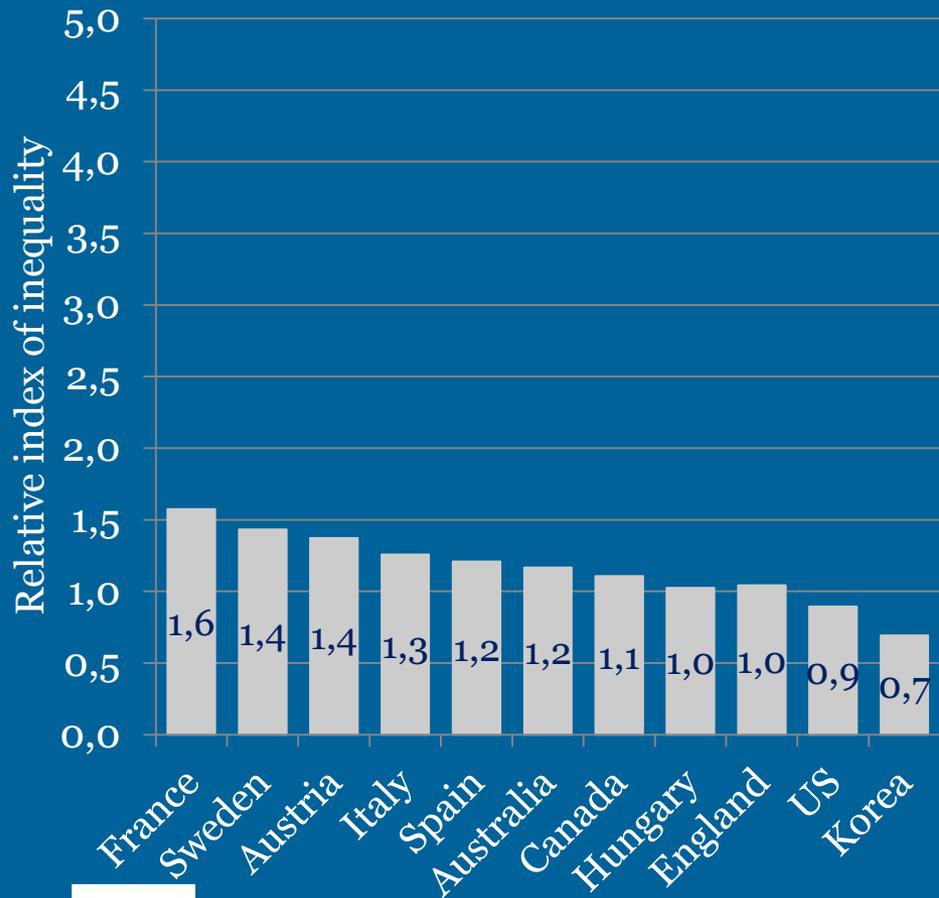


Obesity: a Growing Problem

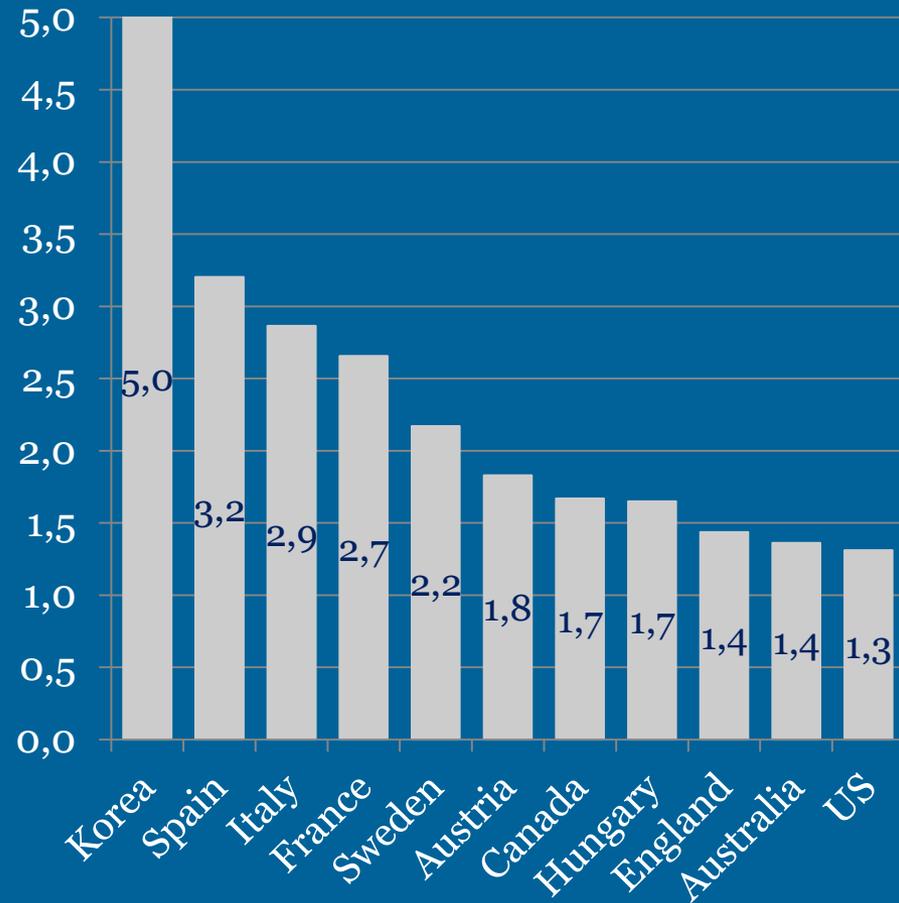


Inequalities in Overweight by Level of Education

Men

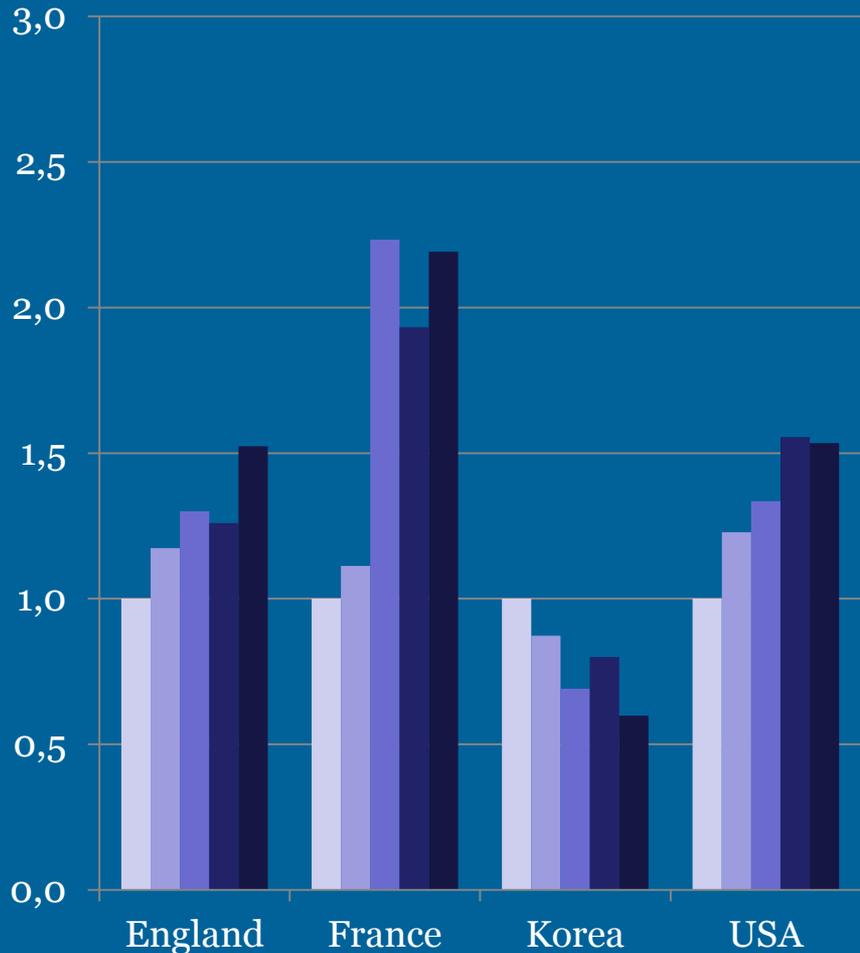


Women

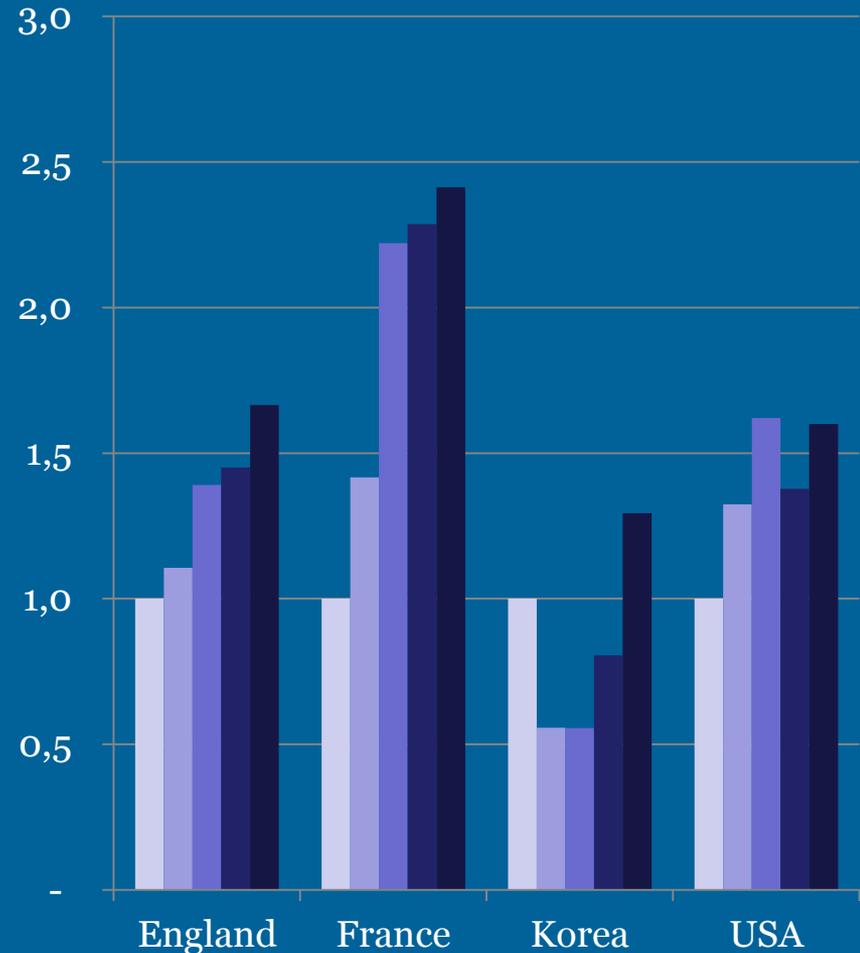


Social Disparities in Child Obesity

Boys



Girls



Higher SES (ref.)

Lower-middle SES

Higher-middle SES

Lower SES

Middle SES

Interventions

Health education and health promotion

Regulation and fiscal measures

Primary-care based interventions

Mass media campaigns

Fiscal measures
(fruit and vegetables and foods high in fat)

Physician counselling of individuals at risk

School-based interventions

Government regulation or industry self-regulation of food advertising to children

Intensive physician and dietician counselling of individuals at risk

Worksite interventions

Compulsory food labelling



Expectations Must Be Realistic

- Does prevention improve health?
- Does it reduce health expenditure?
- Is it cost-effective?
- Does it improve health inequalities?

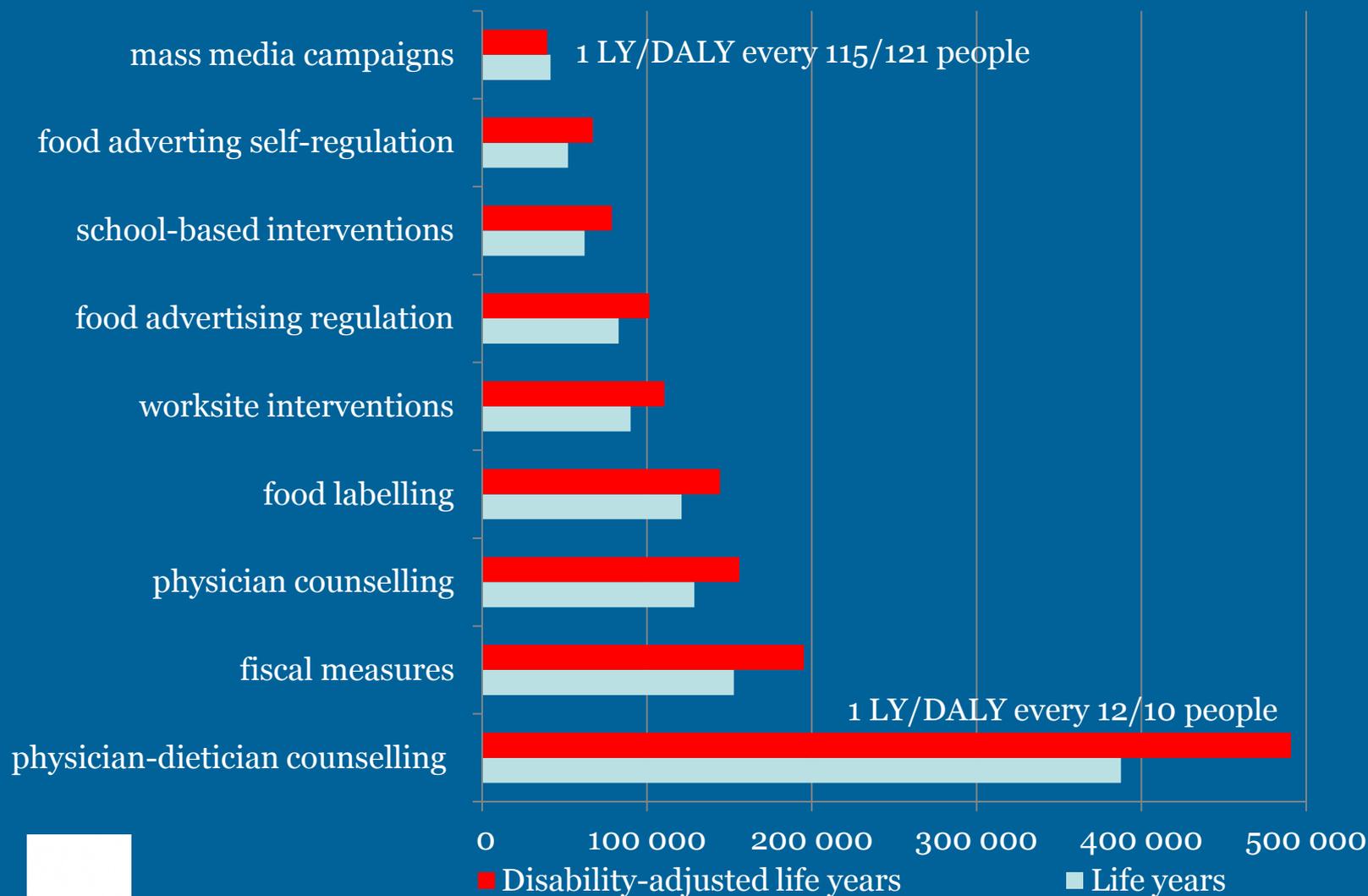


Does Prevention Improve Population Health?



Health Outcomes of Prevention

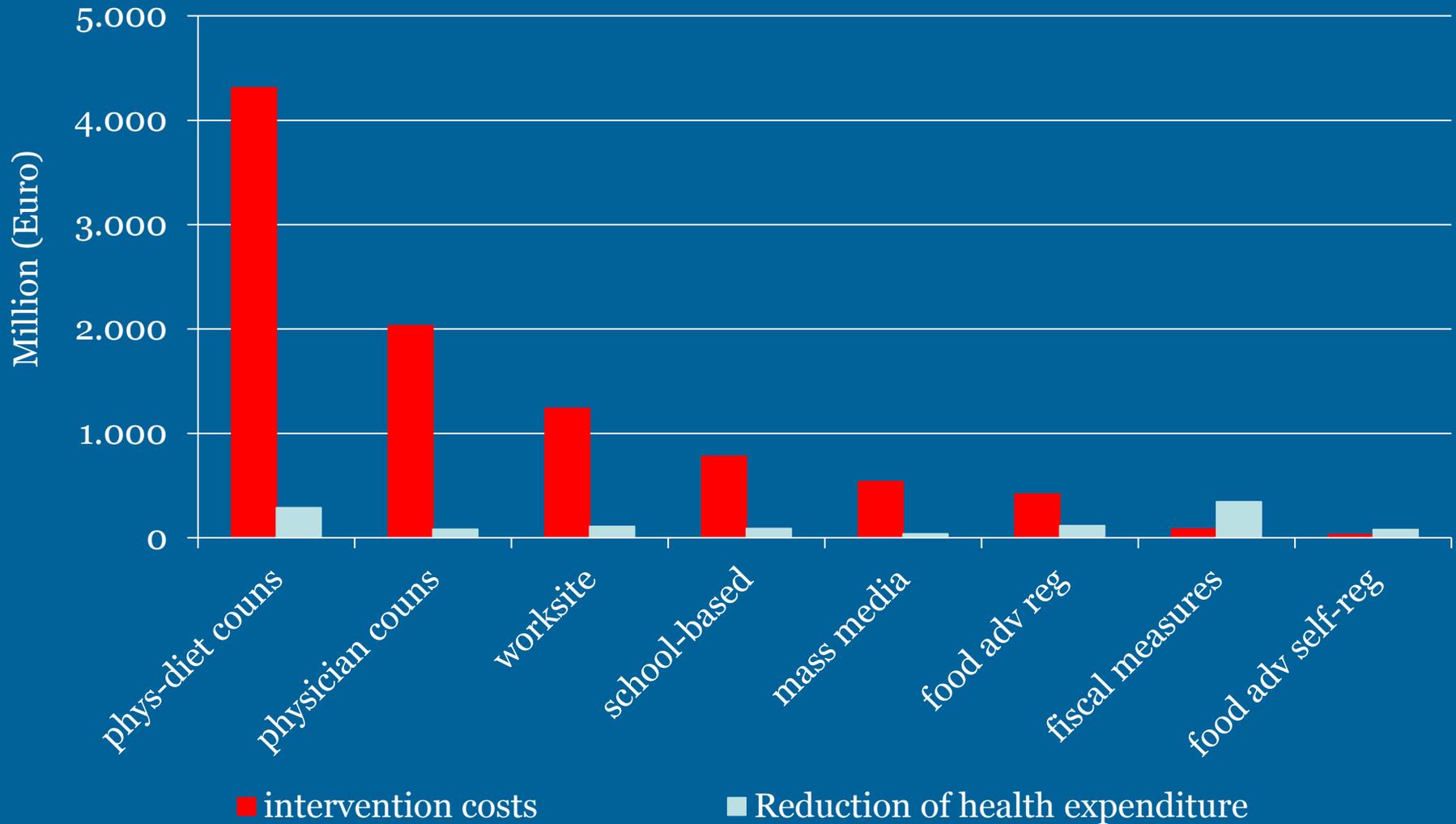
Average health effects per year



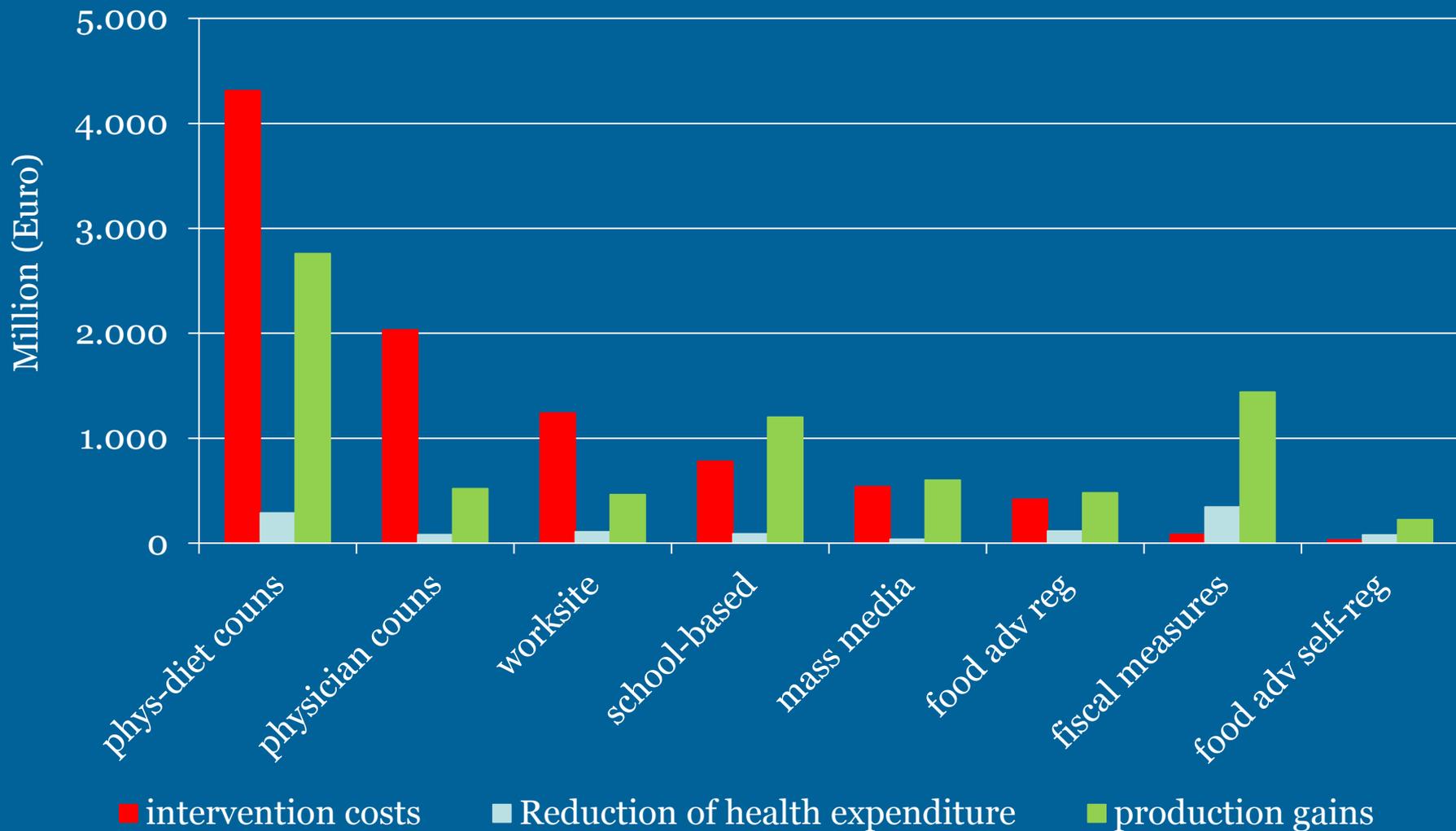
Does Prevention Reduce Expenditure on Health Care?



Economic Effects of Prevention



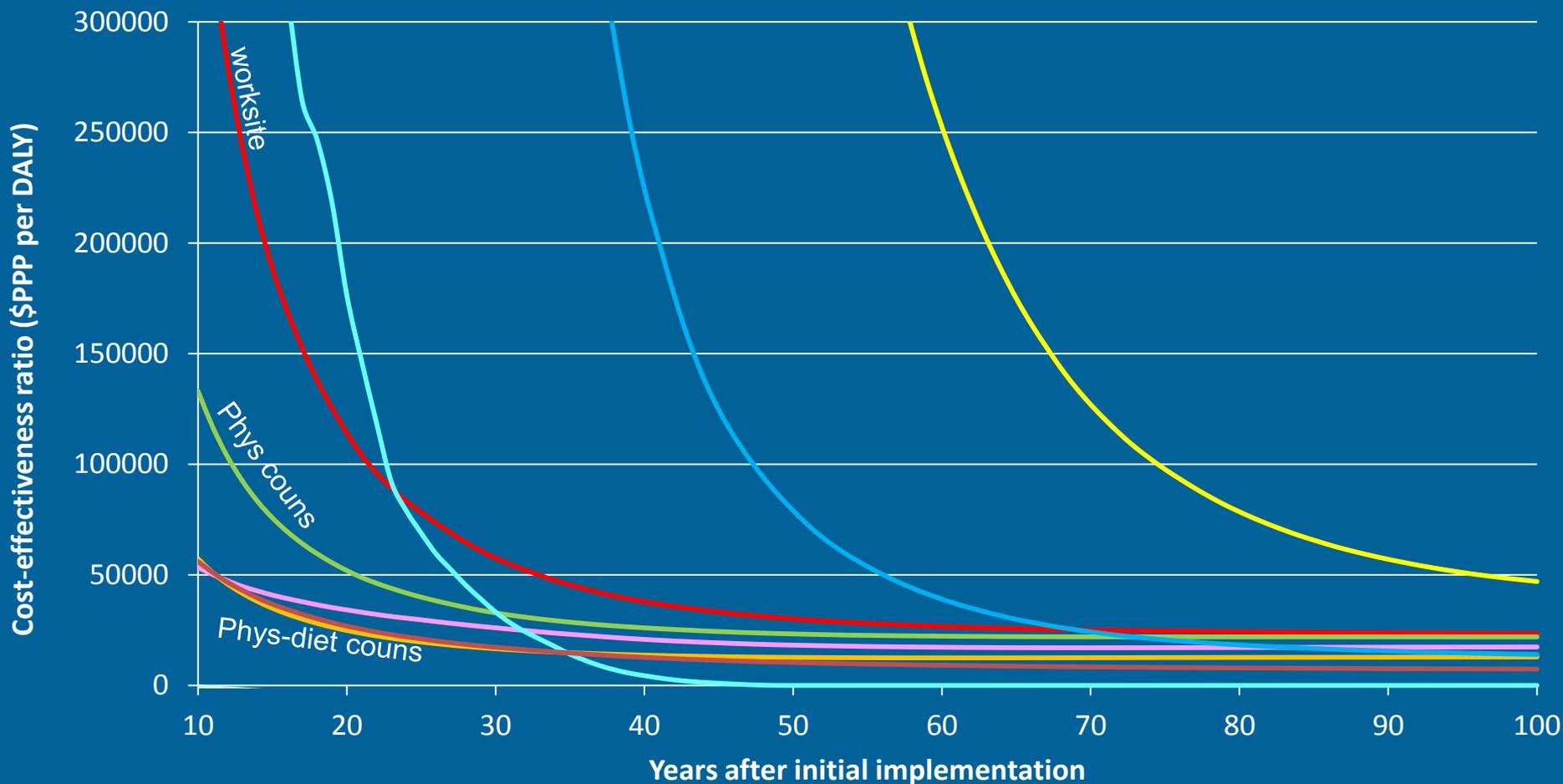
Economic Effects of Prevention



Is Prevention Cost-Effective?



Cost-Effectiveness of Prevention



- school-based interventions
- worksite interventions
- mass media campaigns
- physician counselling
- food advertising regulation
- food advertising self-regulation
- physician-dietician counselling
- food labelling

Does Prevention Improve Health Inequalities?



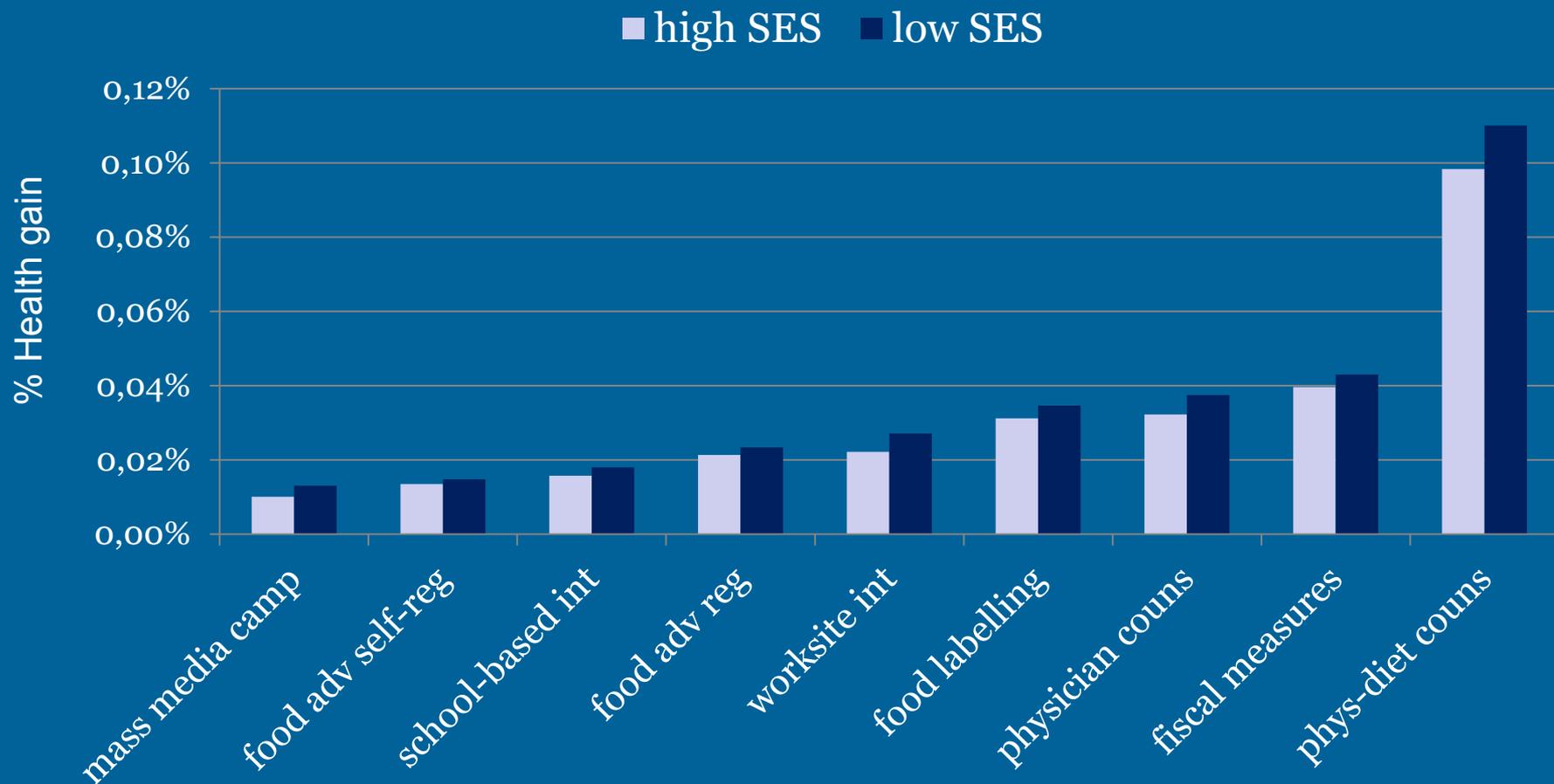
Impact on Inequalities

Different social groups have:

- Different risk profiles:
 - Larger benefits in those most at risk (~)
- Different responses to interventions:
 - Larger benefits with a greater response

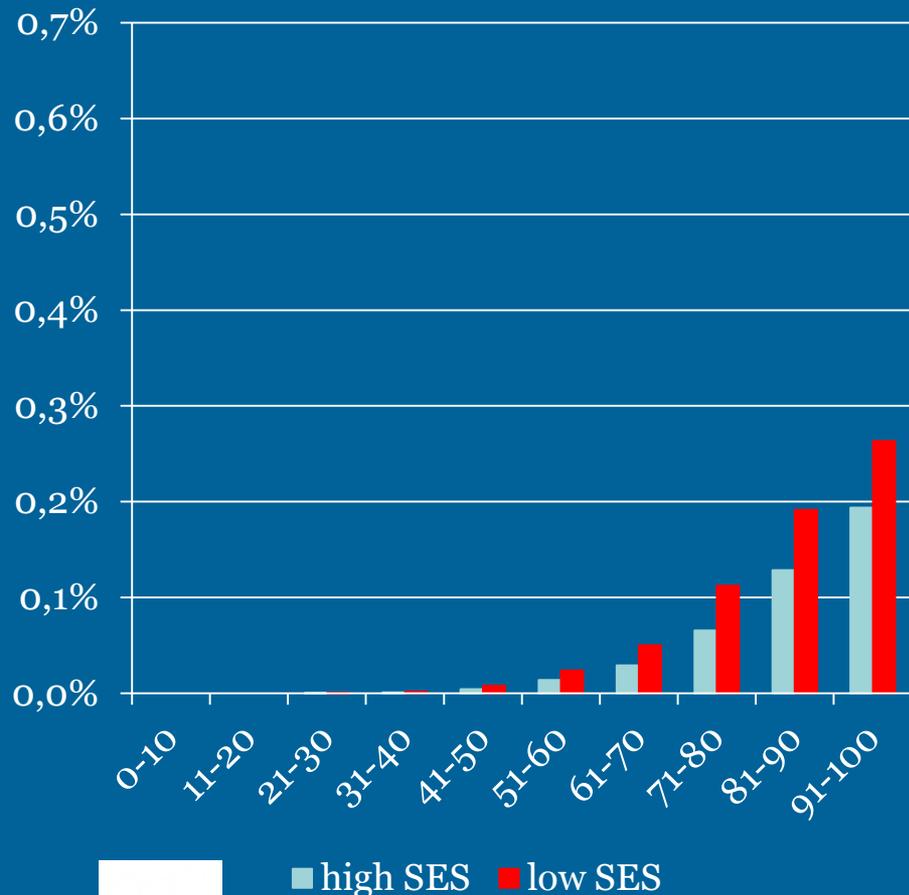


Impact on Inequalities

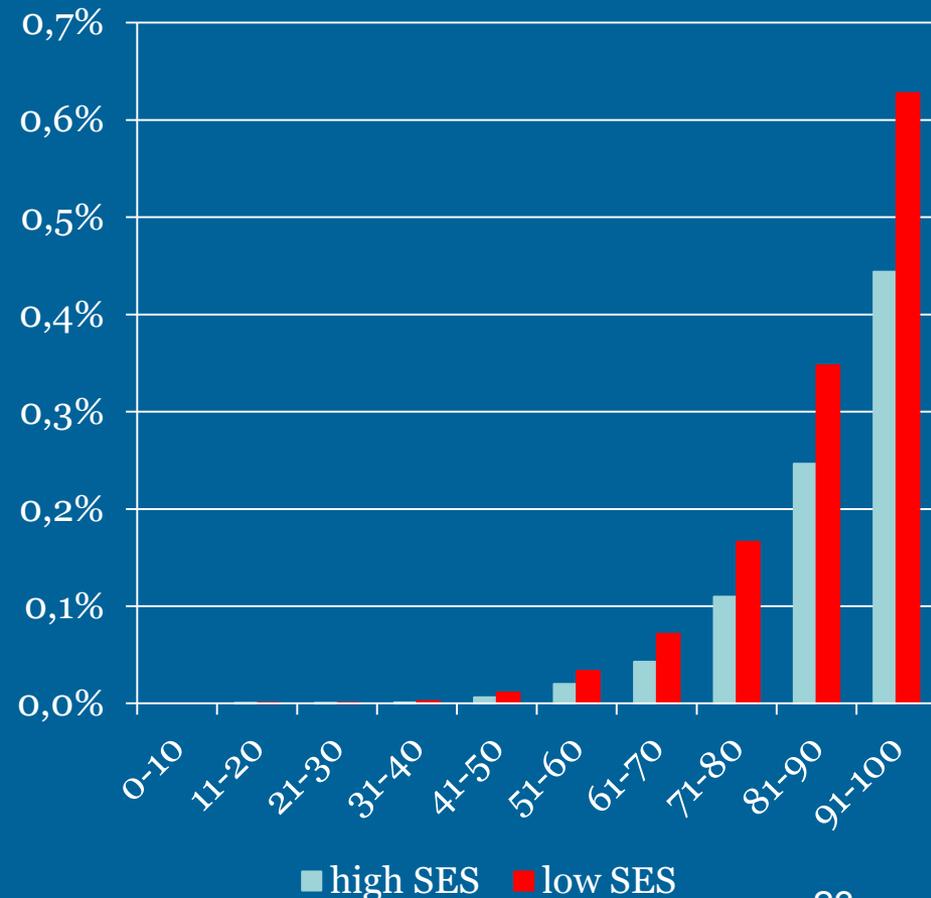


Impact on inequalities over the life course

Worksite interventions



Fiscal measures



Policy Implications

- Prevention is an effective and cost-effective way to improve population health
- Prevention can decrease health expenditure and improve inequalities, but not to a major degree
- Comprehensive strategies combining population and individual approaches provide best results
- Multi-stakeholders approach is key to the success of prevention



Thanks for your attention

- OECD Health Prevention work
www.oecd.org/health/prevention
- OECD Health Statistics
www.oecd.org/health/healthdata
- OECD Health Working Papers
www.oecd.org/els/health/workingpapers

