



**School of Public Health
El Paso**

**Center for Community
Health Impact**



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Take Home Points

- Recognize obesity is a complex disease caused by the body's inability to regulate energy storage in a health range resulting in excess body fat.
- Factors extrinsic to the individual that can increase the rate or timing of the expression of the disease of obesity are contributors
- Power influences availability of, access to, and the use of solutions that address both the causes and contributors (Dr. Odoms-Young, Mr. Archer, Dr. Iton)
- Even if all Contributors went away, we would not address the millions of people who have obesity

Take Home Points

- Focus on evidence-based treatments of the causes and contributors will drive the greatest impact on obesity at community and population level
 - Challenges & barriers for evidence-based treatment of causes
 - Diversity/variety of treatment options for the many causes – addressed through ongoing research
 - Access – addressed through
 - provider training – ~8000 specialists, >600,000 PCPs, 145million in need of treatment (Dr. Castrucci)
 - healthcare coverage – no meds received by ~12% of patients with diabetes vs. 98.7% of patients with obesity* (Dr. Castrucci)
 - continued research focused on implementation and scalability (Dr. Cardel and Dr. Pérez-Escamilla)

*Dolton & Tafesse, *Childhood obesity, is fast food exposure a factor?* Econ Hum Biol. 2022 Aug;46:101153.

*Saxon, et al.. *Antiobesity Medication Use in 2.2 Million Adults Across Eight Large Health Care Organizations: 2009-2015.* Obesity (Silver Spring). 2019 Dec;27(12):1975-1981.

Take Home Points

- Focus on evidence-based treatments of the causes and contributors will drive the greatest impact on obesity at community and population level
 - Challenges & barriers for evidence-based strategies for contributors
 - Much evidence shows contributors do not directly influence weight*
 - Access to healthy environments will facilitate evidence-based treatment – this access is influenced by power, politics (Dr. Iton)
 - “Everyone has power” (Ms. Moskowitz Brown)

*Dolton & Tafesse, *Childhood obesity, is fast food exposure a factor?* Econ Hum Biol. 2022 Aug;46:101153.

*Hobbs et al. Access and quality of parks and associations with obesity: A cross-sectional study. SSM Popul Health. 2017 Aug 12;3:722-729.

*Lam, et al. *Associations between the built environment and obesity: an umbrella review.* Int J Health Geogr. 2021 Feb 1;20(1):7

Take Home Points

- When developing strategies to address the causes or contributors of obesity, we need to:
 - Engage members of the community that we are aiming to serve (i.e. participatory approaches) (Dr. Cardel, Dr. Okihiro, and others)
 - Use the tools of implementation science
 - Evaluate the outcomes we intend to change (Dr. Pérez-Escamilla, Dr. Okihiro)

Take Home Points

- Take care with our communication and framing:
 - Be clear when we are targeting obesity vs when we are targeting broader or more general health
 - Are we targeting F&V intake because of overall health or to decrease obesity?
 - A focus on eating more F&V did not decrease BMI, but using it as a strategy to maintain a negative calorie balance was useful
 - Measure and report what we are targeting (Dr. Okihiro)
 - Importance: ensuring we don't perpetuate misperceptions about obesity.
 - Conflating contributors and causes can fuel the bias that people with obesity “choose” to have excess weight because they don't eat healthy or exercise enough (Dr. Castrucci)

INTEGRATION of individual strategies that are scalable and available regardless of location, income level, race, ethnicity
AND system-wide changes that make the individual strategies available and sustainable



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