

To what extent is the current UK obesity policy irresponsible considering the nature of eating disorders?

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Abstract

This article explores recent government policy towards obesity and diet, methods of reducing obesity in the UK, and evidence why the current governmental approach might be flawed, focusing on eating disorders. This is relevant in both primary and tertiary medical settings, as a high national obesity rate has far-reaching consequences.

The UK is an unhealthy nation. The UK ranks at 29 for life expectance¹ and 33 for the most obese nation,² indicating serious underperformance as one of the largest economies in the world. On 6 April 2022, new legislation from the government came into force, aiming to curb obesity by making it mandatory for restaurants to display the calorie content of their meals.³ This is a very brash strategy, criticised by many for its disregard for eating disorders, potentially exacerbating symptoms in those who suffer with eating disorders.

Eating disorders such as anorexia nervosa, bulimia nervosa and binge eating disorder affect an estimated 1.25 million people in the UK⁴ and remain an important yet under-represented issue in modern politics.⁵ In terms of severity, the Office for National Statistics reports a yearly average of 22 deaths due to eating disorders.⁶ However, when taking into account suicides and comorbidities, this number is estimated to be as high as 20% of sufferers.⁷ Calorie counting is often abused by those suffering with eating disorders.⁸ Despite this, there is no mention of eating disorders on the government's press release. They are briefly mentioned elsewhere, on one of the 76-pages of the 'Impact Assessment'. Here, eating disorders are dismissed, despite the majority of studies that the assessment itself cites agreeing that the Calorie Labelling scheme would worsen eating disorders.⁹

Calorie counting is a controversial concept of weight manipulation. Certain communities promote it as a tool that makes the process of weight loss easier and more convenient. This is the case with 'r/fitness',

an online physical health forum with almost ten million members, who use calorie counting as a core strategy of weight loss. ¹⁰ However, this method is hardly harmless, and can have adverse effects on the unfortunately large section of the population susceptible to eating disorders. As a consultant psychiatrist and specialist in eating disorders, Dr Sandeep Ranote states: "Some of what we know from those with lived experience [of eating disorders] is that seeing calories printed on menus could be a huge trigger to their anxiety." ¹¹

Beat¹² is a prominent UK charity focusing on helping those suffering with eating disorders. In response to the calorie labelling scheme, its Chief Executive Andre Radford stated "calorie labelling exacerbates eating disorders of all kinds".¹³ These exacerbations can cause dangerous weight loss and are strongly linked with depression¹⁴ and an increased risk of suicide.¹⁵ Emerging from this evidence, it appears that in order to make calorie counting safer the element of choice is key.

A less controversial scheme, the 2018 'Sugar Tax', ¹⁶ displays a different method of decreasing obesity. The scheme (which put charges up to 24p per litre on sugary drinks) was ultimately successful, decreasing sugary drink purchases by 10% in the following year. ¹⁷ In 2020, plans were put in place for similar monetary deterrents for high-calorie foods, however, these plans were recently shelved over concerns over their impact on the British economy. ¹⁸ It is worth noting that this scheme, owing to its monetary deterrent, did "disproportionately impact the poor". ¹⁹

Another solution, proposed by nutritionist Virginia Hendry,²⁰ is introducing cooking into schools in a more integrated manner than simply offering 'Food Technology' as a GCSE. She states that "cooking from scratch and teaching children to cook from scratch in schools is really important". It is easy to see why; ready meals, which are consumed by an estimated 2 in 5 UK families every week, feature high levels of salt, fat and sugar.²¹ High fat and sugar content have

been heavily linked to obesity²² and salt has been indirectly linked to obesity as well.²³ By educating children at an early stage about the health benefits of home cooking whilst equipping them with the necessary skills to cook their own meals, we might see a decrease in childhood obesity. Childhood obesity is a major risk factor for adult obesity, therefore we can expect to see the rates of adult obesity fall as well.²⁴ Additionally, compared to the Sugar Tax, this method would empower lower-income families as, per meal, home cooking is generally cheaper than buying ready meals.²⁵

The government's 'Calorie Labelling' scheme ignores eating disorders and more ethical methods of decreasing obesity, such as taxation and food education. The scheme ultimately forces people with eating disorders, who make up a significant portion of the population, to participate in calorie counting. This is known to worsen their health outcomes and demonstrates that the government acts irresponsibly in its scant consideration of eating disorders. It is for these reasons, I believe, in future, policy targeting obesity should not feature mandatory calorie counting.

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Arya Rassi is a third year medical student at the University of Bristol, now intercalating in Medical Education at the University of Brighton and Sussex Medical School. His keen interest in social issues led him to discussing current medical policy with several peers and friends. The topic of eating disorders and the

government's attitude towards them became a recurring theme. As the government moved to put calories on menus in April 2022, this inspired Arya to research how this decision might affect eating disorders, and the result was this article.