Through meetings, public workshops, background papers, and innovation collaboratives, the Roundtable provides a trusted venue for enhancing and accelerating discussion, development, and implementation of multi-sector collaborations and policy, environmental, and behavioral initiatives that will increase physical activity; reduce sedentary behavior; and improve the healthfulness of foods and beverages consumed to reduce the prevalence and adverse consequences of obesity and eliminate obesity-related health disparities.

45 MEMBERS

From the following sectors: local and national associations and non-profits; business community, private sector, health insurers, and industry; federal and local government; foundations; academia; and representatives from the areas of health care, public health, food, physical activity, education, early care and education, worksites, communities, media, and communications.

COLLABORATIVES

Work continues in four innovation collaboratives—satellite activities that engage interested members and others to develop tools, metrics, and frameworks for on-the-ground implementation and identify and disseminate promising practices:

- CEO Innovation Collaborative
- Early Care and Education Innovation Collaborative
- Integrated Clinical and Social Systems for the Prevention and Management of Obesity Innovation Collaborative
- Physical Activity and Health Innovation Collaborative

COLLABORATIONS

Each meeting of the Roundtable presents an opportunity for the members to interact with each other. The development of 25 reported collaborations among member organizations and invited speakers on obesity-related projects is an important way that the Roundtable continues to foster dialogue and accelerate implementation of multi-sector work.

COMMUNICATION

The Roundtable takes a systems approach to dissemination—a multi-layered process that meets people on all platforms. Visit us online.

SNACK-SIZE INFOGRAPHIC

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NATIONALACADEMIES.ORG/OBESITYSOLUTIONS
During its third year, the Roundtable hosted two public workshops and six planning discussions:

1. **DRIVING ACTION AND PROGRESS ON OBESITY PREVENTION AND TREATMENT (Workshop)**
   
   This public workshop explored how far the nation has come in tackling the obesity epidemic. Presenters and discussion reviewed the progress that has been made in obesity prevention and treatment, identified urgent issues and gaps in the field and high priority research opportunities, and highlighted promising approaches for future work. Discussion also focused on identifying those levers that will drive significant progress in obesity prevention and treatment, and how gaps in the field can be addressed. To learn more, visit [http://nationalacademies.org/hmd/Activities/Nutrition/ObesitySolutions/2016-SEPT-27.aspx](http://nationalacademies.org/hmd/Activities/Nutrition/ObesitySolutions/2016-SEPT-27.aspx).

2. **ROLE OF BUSINESS IN MULTI-SECTOR OBESITY SOLUTIONS: WORKING TOGETHER FOR POSITIVE CHANGE (Workshop)**
   
   This public workshop explored the role of the business sector in obesity solutions. The workshop featured expert speakers and discussion on why and how to encourage the business community to be involved, and ways businesses can be engaged in obesity solutions, with a focus on community level multi-sector collaborations. To learn more, visit [http://nationalacademies.org/hmd/Activities/Nutrition/ObesitySolutions/2016-APRIL-12.aspx](http://nationalacademies.org/hmd/Activities/Nutrition/ObesitySolutions/2016-APRIL-12.aspx).

3. **ADVERSE CHILDHOOD EXPERIENCES (ACES) (Planning Discussion)**

   A panel of presenters discussed the role of ACEs in obesity. Topics included: the biology of ACEs; the impact of adverse community experiences and environments, and building community resilience; individual and family-level effects of ACEs and implications for interventions; a patient’s own perspective on ACEs and living with obesity; and challenges and practice issues of addressing ACEs as they relate to the prevention and treatment of obesity.

4. **EQUITY IN SOLVING OBESITY (Planning Discussion)**

   The Roundtable continues to discuss how to incorporate obesity-related health equity strategies for addressing and preventing obesity-related disparities as a focus in its planning process and activities.

5. **TRENDS AND PREVALENCE OF OVERWEIGHT AND OBESITY (Planning Discussion)**

   The Roundtable reviewed new data regarding the trends and prevalence of overweight and obesity in the United States.

6. **INTERNATIONAL PERSPECTIVE ON OBESITY (Planning Discussion)**

   A panel of presenters discussed cross-sector efforts in obesity from an international perspective.

7. **DIGITAL HEALTH TECHNOLOGY (Planning Discussion)**

   A panel of presenters discussed current trends, what is working, and future directions in digital health technology and its applicability to obesity solutions.

8. **HEALTH FOUNDATIONS: WORKING ON OBESITY PREVENTION AT THE COMMUNITY LEVEL (Planning Discussion)**

   The Roundtable discussed efforts of health foundations that are working on obesity prevention at the community level, lessons from the work, and future opportunities.

This year, five perspectives*—expert commentaries and discussion papers by leading voices in health and health care and posted by the National Academy of Medicine (NAM)—grew out of Roundtable activities.

- **Can Breastfeeding Protect Against Childhood Obesity?** by Rafael Perez-Escamilla
- **Can We Change the Way Our Genes Behave and Pave the Way Forward for Childhood Obesity Prevention?** by Shari Barkin and Chelsea Lee
- **familyPower: A Referral-Based Pediatric Obesity Treatment Program that Connects Clinic to Family** by Craig W. Moscetti, Jane K. Haws, Craig B. Malm, and Nico Pronk
- **A Call to Action for Registered Dietitian Nutritionists and Pediatricians: Reflecting on Physical Activity: Moving Toward Obesity Solutions—Workshop Summary** by Natalie Digate Muth
- **An Educator’s View: Reflecting on Physical Activity: Moving Toward Obesity Solutions** by Georgi Roberts

* The views expressed in Perspectives are those of the author(s) and not necessarily of the author(s)’ organizations or of the National Academy of Medicine (NAM). The Perspective is intended to help inform and stimulate discussion. It has not been subjected to the review procedures of, nor is it a report of, the NAM or the National Academies of Sciences, Engineering, and Medicine.