

Effecting obesity solutions through community systems change: ROOS perspective

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Framing issues as causes and contributors

Helps to clarify that solutions are not “either, or” but “both and” with respect to prevention and treatment or individuals vs. populations

Emphasizes the importance of obesity solutions that mitigate factors that are outside of the direct control of individuals, while also emphasizing the potential power of collective actions

[illegible]

Figure Key:
 - Roundtable priority obesity driver
 - Roundtable priority evidence-based obesity solution

Abbreviations: Healthy Hunger Free Kids (HHFK) Act, Early Childhood Education (ECE), Women Infant and Children (WIC), Center for Disease Control and Prevention (CDC), Supplemental Nutrition Assistance Package (SNAP), National School Lunch Program (NSLP) / National School Breakfast (NSB), Child and Adult Care Food Program (CACFP), HeadStart Early Childhood Program

FIG 2. Roundtable on Obesity Drivers and Solutions Systems Map.

Three priorities

- Structural racism
- Bias and stigma
- Health communication

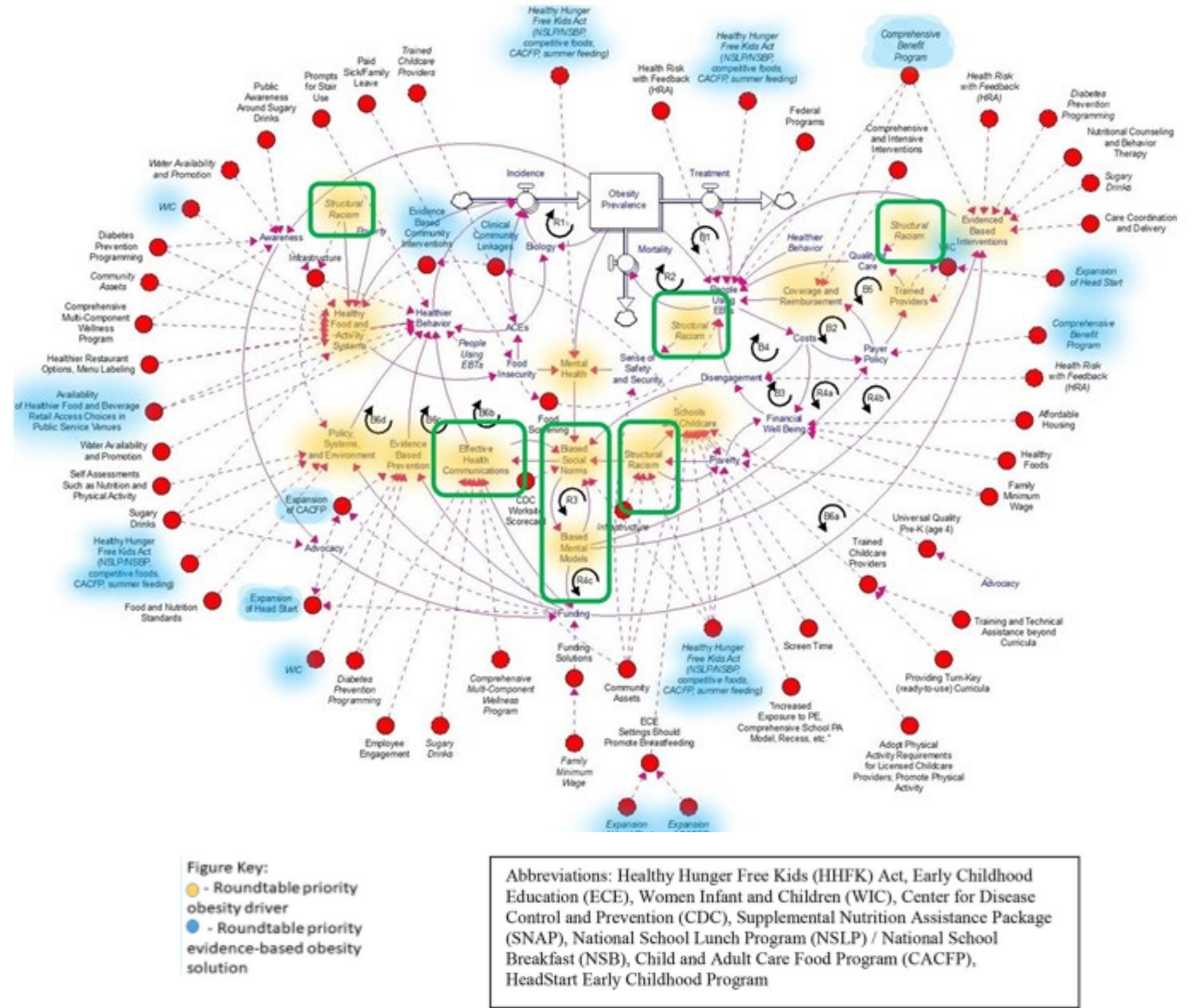


FIG 2. Roundtable on Obesity Drivers and Solutions Systems Map.

See Pronk et al, Using systems science for strategic planning of obesity prevention and treatment. The Roundtable on Obesity Solutions Experience. Current Problems in Cardiology, 2022

Translating Knowledge of Foundational Drivers of Obesity into Practice

Workshop 1



**Shifting the Paradigm: Targeting Structures, Communications, and Beliefs
to Advance Practical Strategies for Obesity Solutions**

A First Workshop in the Series

April 19, 2022

10:00 AM – 3:00 PM ET

- ☐ Targeting academic and **workforce** structures to dismantle systemic racism while building an evidence base
- ☐ How communications can affect perceptions and the understanding of obesity
- ☐ Changing the conversation around representation in media and body image

Engaging Communities in Addressing Structural Drivers of Obesity

Relevance and impact of
power within communities

Community engagement

Barriers and opportunities
for solutions at the
community level

Examples of the
intersections of the ROOS
three priority areas

- Structural racism
- Bias and stigma
- Health communication

Caveats

Communities must be approached as complex systems in which contributors to obesity are interrelated and dynamic.

Community-level solutions are the most proximal to individuals and families, but contributors at this level may be driven by factors much farther upstream, e.g., national or state level policies

While, community level solutions must be current and future-oriented, the needed systems changes must address certain deep historical factors and strategically destabilize problematic structural pathways

Just as individuals are differently affected by obesity “causes”, so are communities diverse and differentially relevant to various contributors

Consider relevance or impact of **Power** within these aspects of a system (community) as a **leverage point for action**



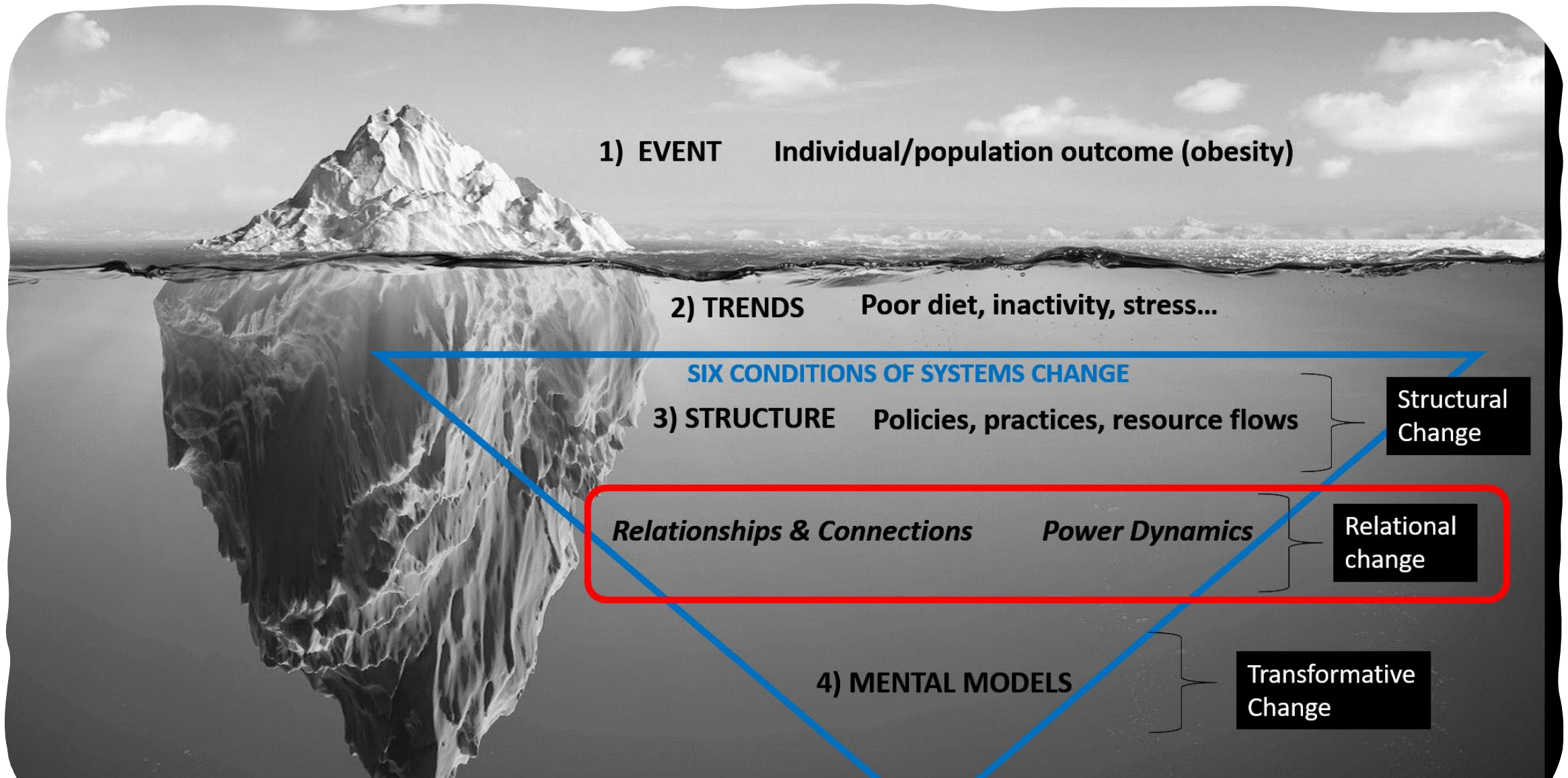
Parts of the system (diversity in types and makeup of communities)

+

Relatedness of the structures in the system (what are the complexities within a community, - measure, define, adaptation, dynamics, strength)

+

What patterns in the system (community) are strengths, weakness, opportunities, or threats to understanding or tackling obesity and what is the impact on people with the lived experience



Presented by Erin Hennessy, June 30, 2020 (data from Kania et al., 2018). Reprinted with permission. National Academies of Sciences, Engineering, and Medicine. 2021. Integrating Systems and Sectors Toward Obesity Solutions: Proceedings of a Workshop. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25766>.