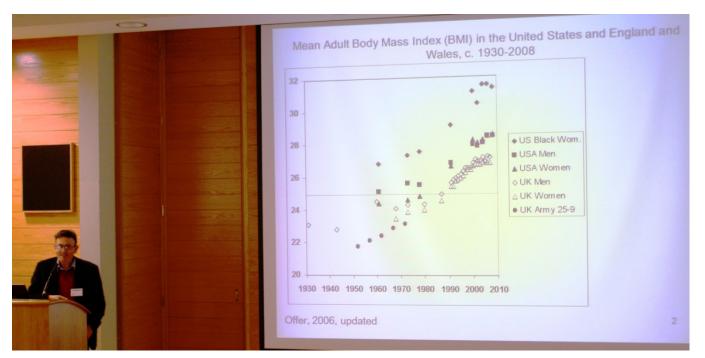
Welfare Regimes and Obesity: analytical approaches

8/9 December 2010

University of Oxford Copenhagen University Karolinska Institutet



Welfare Regime Hypothesis Workshop, Oxford, November 2009

















Outputs



Why are more and more of us getting fatter and fatter?

Article

Obesity under affluence varies by welfare regimes: The effect of fast food, insecurity, and inequality

Economics and Human Biology 8 (2010) 297–308

Avner Offer a,*, Rachel Pechey b, Stanley Ulijaszek b

Book

Obesity: The Welfare Regime Hypothesis. British

Academy Publications.

Authors: Offer, Ulijaszek, Sorensen, Komlos, Drewnowski,

Dunbar, Marmot, Wilkinson, Pickett, Stubbs, Smith

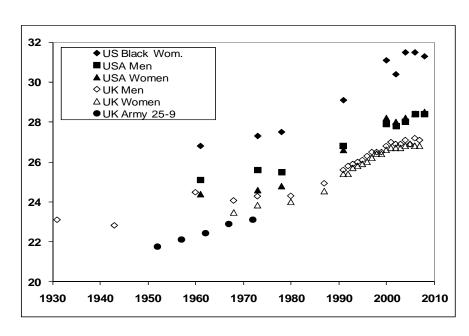
Welfare regimes and obesity

Welfare regimes: Esping-Anderssen, 1990

"Three worlds": Market liberal, conservative, social-democratic Varieties of capitalism (Hall and Soskice, 2001):

Liberal market economies\co-ordinated market economies

Welfare regime divergence with rise of market liberalism, 1970s on. Timing corresponds to obesity epidemic.



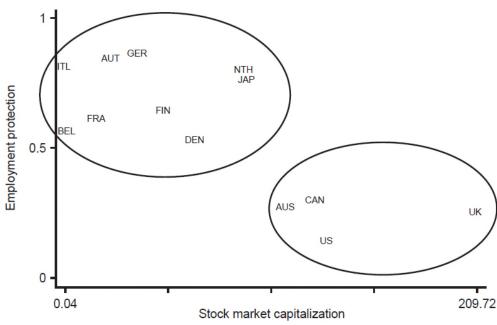
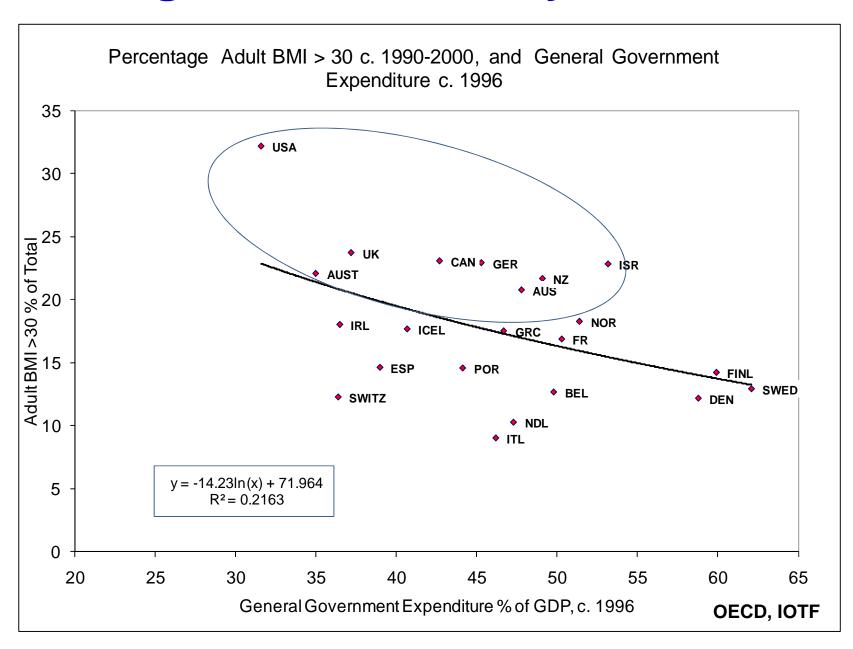
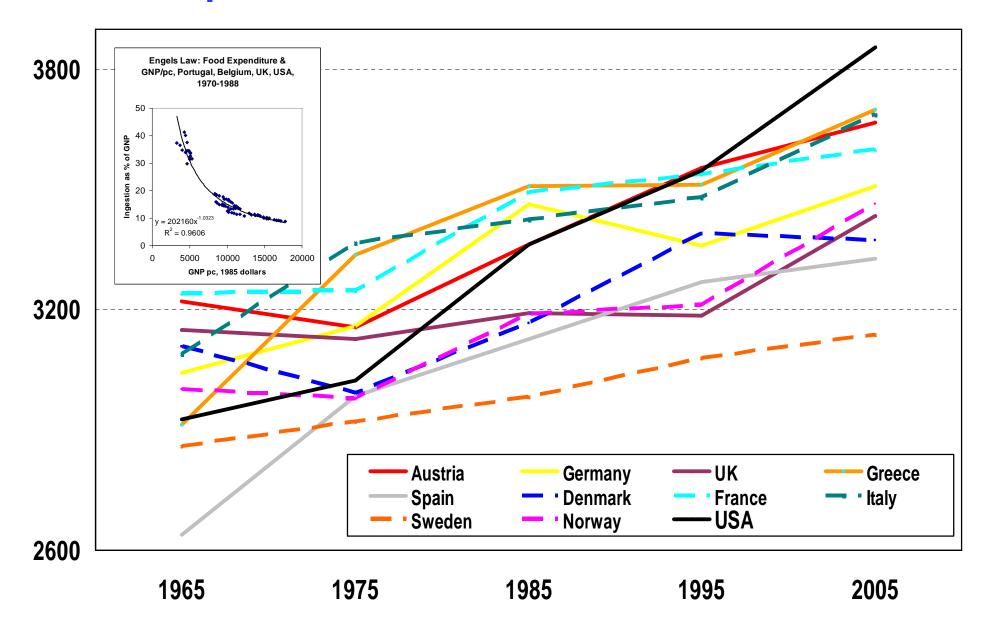


Fig. 1.1 Institutions across sub-spheres of the political economy

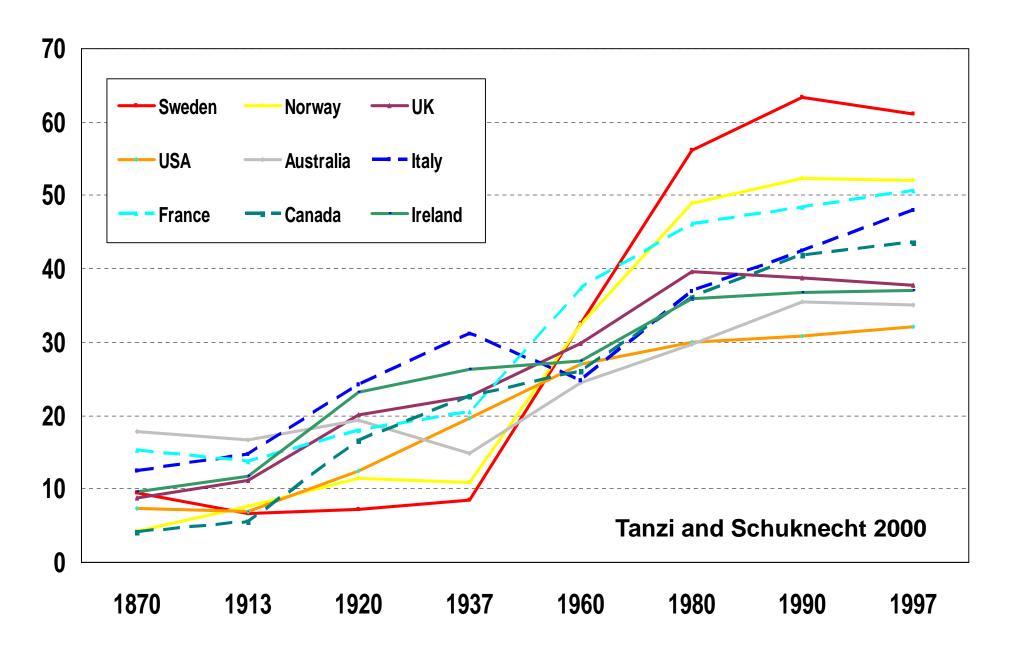
Welfare regimes and obesity



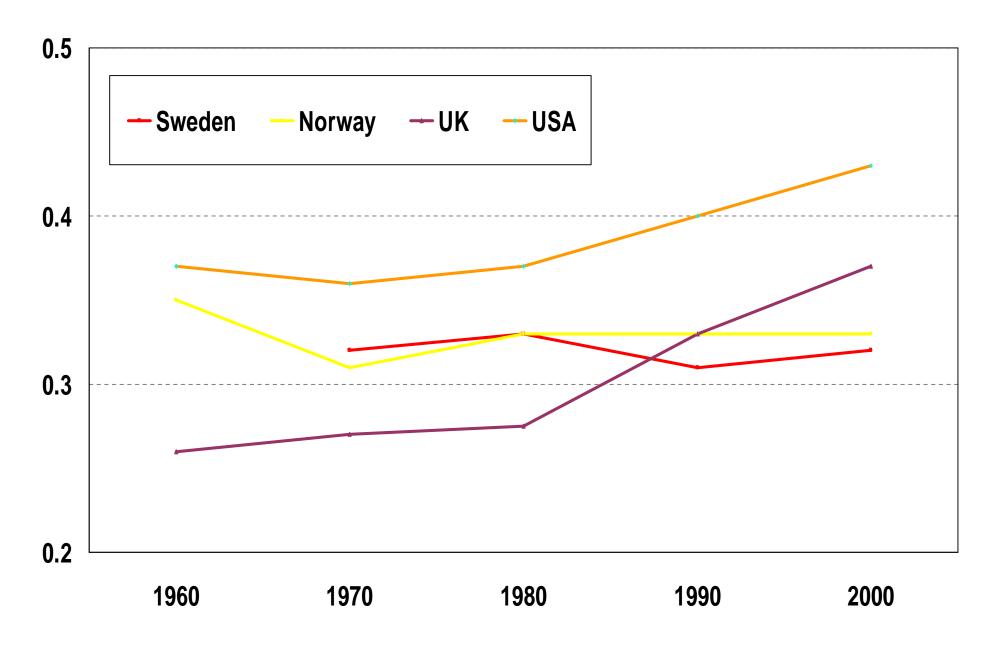
Food shock: energy intake per capita (kcal/day), Europe and USA. Data from FAOSTAT 2010



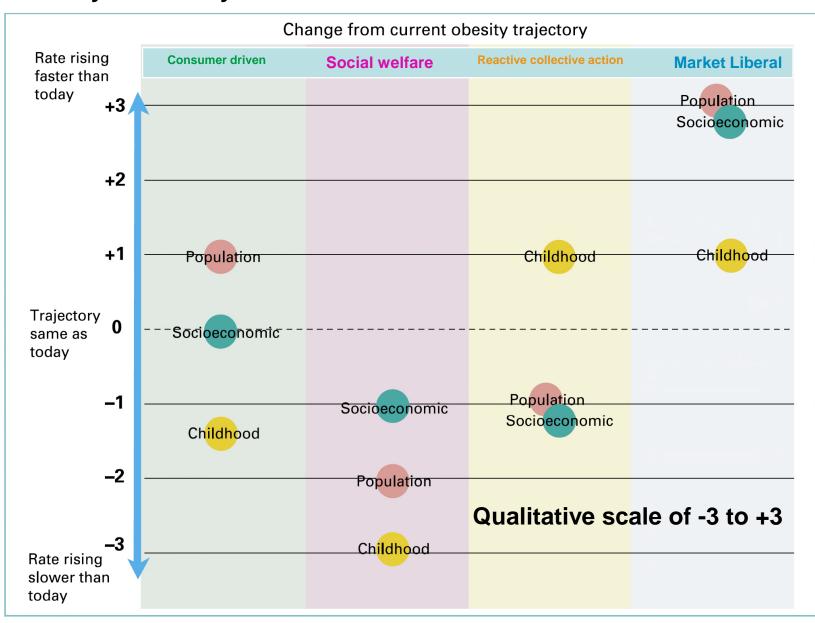
General government expenditure (% of GDP)



Inequality (gini coefficients)



Foresight (2007) trajectory scenarios: despite knowing the likely impact of market liberal forces, UK government chose to stay with individual responsibility for obesity



Hypotheses

- Food supply shock. decline of physical exercise, increasing access to cheaper, preprocessed, high-energy-density appetising food
- b. Obesity as response to stress
 - 1. Insecurity stress. Observed in animal behaviour. Market liberal societies more competitive, less secure
 - 2. Inequality stress. Subordination is stressful

Mechanisms: Stress?

- Trent Smith (2007, 2008, 2009)
 - Animal behaviour: responds to food variance with weight gain
 - Obesity a response to insecurity
 - Eating as self-medication ("comfort eating")
 - Job, family, health, income insecurity
 - Affects children too
 - eg. hunger trends in USA (14.6 % (17m) households experienced food shortage in 2009; USDA). 49 million households 'lacked consistent access to adequate nutrition'
 - Obesity and hunger hotspots coincide. USDA 'food insecurity'
 - Consistent with income gradient
- Wilkinson and Pickett (*The Spirit Level,* 2009), Marmot (Status Syndrome, 2004)
 - Inequality
 - Subordination

Macro analysis (Offer, Pechey and Ulijaszek 2010)

- Ninety-six studies, 1994-2004
- Eleven countries: Australia, Canada, UK, USA, Finland, France, Germany, Italy, Norway, Spain, Sweden
- Obesity prevalence: % with BMI > 30 [BMI=kg/m²]
- Analysis: OLS, weighted (each country one unit)

| Туре | Years | Number | Min. % | Max. % | Mean % |
|--------------------|-----------|----------------------------|-----------------|-----------------|-----------|
| Market-liberal | 1994-2004 | 46 (29 self- report) | 11 (UK) | 33.4 (US) | 25.52 |
| Non market-liberal | 1994-2004 | 49 (35 self- report) | 4.9 (Norway) | 32.3 (Italy) | 19.17 |

Findings in summary

Food shock has acted more powerfully in marketliberal countries

- but food shock is not a matter of price alone; it also saves cooking and shopping time; and exposure to intensive marketing

Most powerful influence on obesity is insecurity, health

especially

Obesity determinants outside the USA; and the contribution of dependence security components.

| Variables | (1) | (2) | (3) | (4) | |
|---|----------------------|------------------------|---|-------------------------------|--|
| | MALE_OBESE excl. USA | FEMALE_OBESE excl. USA | TOTAL_OBESE | TOTAL_OBESE | |
| MEASURED | 7.487** | 9.377** | 8.853** | 8.720** | |
| t-statistic | (9.456) | (8.277) | (6.298) | (5.946) | |
| beta | 0.715 | 0.751 | 0.629 | 0.620 | |
| TIME | 0.533 | 0.440** | 0.348* | 0.507 | |
| t-statistic | (3.867) | (2.772) | (2.369) | (3.287) | |
| beta | 0.306 | 0.212 | 0.162 | 0.236 | |
| MARKET_LIB | 2.382** | 1.932 | 3.105** | | |
| t-statistic | (3.077) | (1.792) | (3.082) | | |
| beta | 0.218 | 0.149 | 0.247 | | |
| UNEMPLOYMENT_SECURITY t-statistic beta HEALTH_SECURITY t-statistic beta SINGLE_PARENT_SECURITY t-statistic beta OLD_AGE_SECURITY t-statistic beta oLD_AGE_SECURITY t-statistic beta | | | 0.247* (2.078) 0.201 -0.221** (-2.830) -0.498 -0.275 (-0.995) -0.152 0.0867 (0.485) | -0.253* (-2.276) -0.206 | |
| ECON_SECURITY | -0.272** | -0.269^{*} | | | |
| t-statistic | (-3.208) | (-2.276) | | | |
| beta | -0.283 | -0.234 | | | |
| CONSTANT | 26.69** | 26.67 | 13.40" | 14.38 | |
| t-statistic | (4.545) | (3.151) | (4.819) | (5.683) | |
| Observations | 66 | 66 | 88 | 88 | |
| Adjusted R-squared | 0.738 | 0.689 | 0.775 | 0.547 | |

Robust t-statistics in parentheses.

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Further work: nations

Comparative analyses of market-liberal and welfare state nations at micro-level, testing two strands of the hypothesis:

that economic insecurity has a greater impact on obesity rates and levels market liberal nations

that the fast food shock works more strongly to produce population obesity in market liberal nations