The Collective for Action on Obesity

ONE YEAR ON

DECEMBER 2019
The Collective: One year on

After a few years of codesign, the Collective for Action on Obesity launched at the end of July 2018. We said on the day that this thing called the Collective is not perfect, but we don’t have time to wait for perfect. To take on the important and complex societal challenge of obesity, we need to work together and take collective responsibility. One organisation or sector can’t do it alone. Over 20 Collective leaders stood up at the launch event and made pledges to support the cause. It was inspiring and gave us a powerful start into our first year.

We feel that now is a good time to reflect and share our progress since then. There have been highs, lows and many lessons learned. The context has also changed quickly in the last year with a Select Committee into the Obesity Epidemic in Australia report, a developing National Obesity Strategy as well as multiple State and Territory developments.

This report outlines the growth of the Collective, the progress of our projects and high level plans for next year.

There is a long way to go, but we should all celebrate that there is a huge amount of interest and goodwill out there. People want to be involved, work together, make a difference, help others and prioritise the community’s health and wellbeing. We also know from our system activity mapping, that there is a lot already happening and there are real community leaders stepping up in this space.

Thank you to all of our Collective members and supporters, particularly the leaders and volunteers who have made huge time contributions this year.

We look forward to another year of not perfect, but amazing progress.

Collective launch July 2018
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What is the Collective?

Why the Collective?

Obesity is one of the main drivers of disease and disability in our country, and there is widespread acceptance that more needs to be done to reduce this burden.

The challenge is complex, with multiple, overlapping factors operating at many levels, from individual biology to the whole of society. Solutions must reflect this complexity as well. We need to tackle the challenge collectively with a system and whole of society view.

Despite the focus obesity has received at various times in the past decade, no lasting comprehensive action flowed from previous strategies and. In the past 10 years the number of people living with obesity has more than doubled, from 2.7 million in 2007-08 to 5.8 million people today.

Over a period of just three years, we now have 900,000 more people in the population living with obesity. Obesity affects all sections of society, but equity is a major issue with rates being higher in communities with relative socio-economic disadvantage, lower levels of education attainment, regional and remote areas, as well as Indigenous Australians.

How did the Collective start?

In 2015, Obesity Australia and PwC Australia released the ‘Weighing the Cost of Obesity’ report, an economic analysis of the challenge. Round table events in four major cities with a range of stakeholders, including academics, clinicians, public health experts, and government representatives were held in response the following year.

The groups discussed the challenge and why we aren’t doing more about obesity, which has major impacts on people’s quality of life and costs to the system. It became clear that there are critical barriers to action including the complexity of the challenge, weight stigma and the lack of a unified voice across prevention and treatment.

A codesigned approach

In late 2016, with pro bono support from PwC’s Impact Assembly, (experts in facilitating collaboration across sectors), a group of champions, influencers and experts across prevention and treatment came together to discuss the need for aligned action. It was agreed that we need a Collective response for obesity and that no one organisation can solve this alone. We need a different way of working and thinking around obesity. In 2017 and 2018 further codesign events were held to develop the Collective purpose, principles, shared leadership and plans. At the end of July 2018, the Collective was officially launched and made public.
Who we are:
The Collective is a platform for committed individuals and organisations from across the community to take on the obesity challenge together, with empathy and a whole of society perspective (prevention and treatment).

Our vision:
To reduce the impact of obesity in Australia

Our Collective purpose:
To transform the way society thinks, speaks and acts on obesity

Strategies for action:

1. Build a movement for change
   • Increase community demand for a whole of society response
   • Increase the participation from partners across the community (not just health)

2. Create a new narrative
   • Decrease bias and stigma
   • Increase acceptance that obesity is a whole of society responsibility

3. Generate Collective action
   • Identify strengths and gaps across society
   • Advocate for action

“It has become clear that to get the community, government and industry action that we need to turn the obesity epidemic around requires many voices speaking together. This is the exciting opportunity with the Collective, bringing together diverse organisations and citizens to drive change that reduces the impact of obesity for all Australians.”

Prof. Anna Peeters, Institute for Health Transformation Deakin University
Our Collective principles

During the codesign approach to developing the Collective, the leaders drafted and agreed our principles which outlines how we want to work together. To join the Collective, new members must agree to the principles.

We need to step up. As individuals, as a collective, as a society.

We are:

• Inclusive in our approach, willing to listen to and respect other perspectives
• Anti-stigma
• Mindful of health inequalities, particularly for Aboriginal and Torres Strait Islander Australians
• Informed by the evidence but prepared to innovate

We consider the full spectrum of obesity prevention to treatment, and in an interconnected way.

We focus on the whole picture: we will not get stuck on advocating for specific interventions or external projects.

We are taking a whole-of-society approach that considers the social, biological, political, economic and cultural drivers of health and health inequalities.

We own this together. No single organisation owns this Collective or the work we do together.

We leave our agendas at the door and disclose potential conflicts of interest. This helps us collaborate more effectively to have greater impact as a whole.

We are modelling a new way of working. The process that we use to collaborate across organisations and sectors is just as important as the content.

We will continue to grow and iterate the Collective Plan. This is a living strategy that we will adapt as we go based on what we learn in practice.

“I joined The Collective as a volunteer research assistant because I wanted to use the theoretical and research knowledge from my public health degree and gain further experience. I am also passionately interested in disease prevention and health promotion, and I believe addressing obesity from a prevention lens is essential.

The Obesity Collective has emerged as a significant stakeholder in tackling the rising obesity issues in Australia within a short span of time and, with its focus on de-stigmatizing obesity, I am sure The Collective will be able to make an impact in the lives of those with overweight or obesity and help to reduce the burden of obesity on the Australian society.”

Deena Mejbabeen, Student, Masters of Global Health (University of Sydney)
Key messages on the need for action

As part of our unified Collective voice, we require powerful key messages on the need for action. We received pro bono support from the Sydney University’s Policy Lab with Marc Stears helping us to shape messages that are drafted to be compelling and consistently used.

We learned that 3 key messages (people don’t remember more than 3) should represent our objectives and underpin our major communications: 1. Obesity is a major barrier to a healthy Australia, 2. We should stop blaming individuals as it is unfair, harmful and doesn’t work, and 3. We want a society where people are empowered and supported to have their healthiest weight possible.

1. OBESITY IS A MAJOR BARRIER TO A HEALTHY AUSTRALIA

- Australia has one of the highest obesity prevalence rates in the world and has also seen some of the largest growth rates for a developed country since 1980.
- Obesity can have serious impacts on people’s quality of life with related complications and risks including diabetes, cardiovascular disease, some cancers, liver disease, musculoskeletal problems, sleep health, inflammatory diseases, age-related cognitive decline, mental health impacts, etc. There are also productivity and health system considerations.
- Noting that not all people living with obesity will have health risks, on a population level higher adiposity (particularly central) increases the risk of disease and disability.
- Obesity is an equity issue, with higher prevalence rates amongst disadvantaged segments of the population.
- If we do nothing more, it will increasingly reduce the quality of life of millions of Australians, lead to crippling costs in the health sector and drive further inequity.

“I support the Collective as we are concerned about health inequalities around overweight and obesity which is very relevant for Aboriginal and Torres Strait Islander Australians”

Nicole Turner, Chairperson, Indigenous Allied Health Australia
2. WE SHOULD STOP BLAMING INDIVIDUALS, IT IS UNFAIR, HARMFUL AND DOESN’T WORK

- Stigma and focus on personal responsibility is a major barrier to action and supportive progress.
- There is a lot of misinformation and people assume that obesity is just a matter of laziness and/or a lack of self-control.
- Stigma arises from the general misunderstanding of the drivers of obesity.
- Weight Stigma is unfair:
  - Obesity is not just a lifestyle choice – there are also strong social, biological and environmental drivers
  - We have created an obesogenic environment, making it increasingly difficult for people to lead healthy lives
  - It is very difficult to lose weight and keep it off, especially without support and just telling people to eat less and walk more doesn’t work
- Weight Stigma is harmful:
  - Causes psychological damage, leads to discrimination and discourages people from seeking support/medical care that they may need
  - Contributes to the challenge as stigma can lead to unhealthy eating and weight practices and avoidance of physical activity
  - Leads to discrimination in society and in healthcare

3. WE WANT A SOCIETY WHERE PEOPLE ARE EMPOWERED AND SUPPORTED TO HAVE A HEALTHY WEIGHT (OR HEALTHIEST WEIGHT POSSIBLE)

- Obesity is a chronic, relapsing condition and as body fat increases, it is more and more difficult for people to revert to health weight without support.
- It is critical to prevent and slow the progression of obesity where possible and provide support and treatment options for those that are living with obesity.
- We need to have communities where health and wellbeing is more important than the profits of a few industries.
- Our children shouldn’t be bombarded with marketing, people should be able to access affordable and healthy food options in their local area, we should have safe green spaces and opportunities for people to exercise.
- Our communities, workplaces and schools should prioritise healthy environments.
- The healthcare sector should help those that want to manage their weight or behaviours and effective treatment and care options should be affordable for those that need it. People’s wishes and options for support in managing weight and/or behaviours need to be respected in a person-centred approach.
- This needs to a priority for our communities and leaders, not just the health care sector and just people with lived experience. We need coordinated and sustained action across society, including local communities, businesses, non-profits, health, academics and government.
Our Collective projects

The Collective projects were identified as part of the codesign approach in establishing the Collective and developed to be what we think are important components of a framework for action. Our four core projects should be valuable to everyone working in and interested in the area of obesity.

Our projects help us all to better understand and act on the current state of activity/investment, evidence, narrative and the lived experience perspective. All of the projects are collaborative in nature and help us to overcome together the critical barriers identified including the complexity of the challenge, the harmful stigma and blame around obesity and the need for a united voice.

System Activity Mapping
Identify and map current projects, programs, policies, strategies, research, services, etc. related to obesity, healthy eating, physical activity and related medical care. To help key stakeholders to better understand what is currently happening in Australia, and help identify opportunities for knowledge sharing, collaboration and innovation across the system.

Citizen’s voice
Help establish and support the national lived experience voice and network in Australia. Currently in establishment as the Weight Issues Network (WIN) - A place for people affected by overweight or obesity...and those who care.

Obesity Evidence Hub
Obesity is one of the main drivers of disease and disability in our country, and there is widespread acceptance that more needs to be done to reduce this burden.

Campaign
Develop an evidence informed communications and campaign to raise awareness around the challenge and shift the dialogue from personal responsibility and stigma to collective responsibility.

“The Collective combines a sophisticated, high-level understanding of the issues surrounding obesity with real action – it’s core projects will be foundational to any national strategy that hopes to succeed in meeting the challenge of obesity.”

Prof. Stephen Simpson, Academic Director, Charles Pekins Centre (University of Sydney)
System Activity Mapping

The mapping aims to help key stakeholders better understand what is currently happening in Australia, and to help identify opportunities for knowledge sharing, collaboration, action and innovation across the system.

Activities for the Obesity Activity Map were identified and categorised through desktop research of publicly available websites and/or connections with Collective members. In addition, hundreds of organisations have been contacted to quality check the data in the Map.

What is in the Obesity Activity Map?

So far we have mapped over 2,300 activities in Australia, across four main focus areas including healthy eating, physical activity, treatment/care and weight stigma reduction. We have also categorised activities along the following:

- Activity Type
- Organisation sector
- Audience
- Population
- Age
- Location

‘Activities’ include projects, programs, policies, strategies, research, services, etc. related to obesity, healthy eating, physical activity, medical care and advocacy.

Most of the data mapped in the Obesity Activity Map is currently freely available through the Collective website and will remain so as the database is continuously updated. The database is hosted on AirTable, an online tool that works like a spreadsheet but gives you the power of a database to search and organise information. New activities can be entered using an Input Form and will be automatically uploaded to the system. The Core team review and quality check newly entered activities.

Programs, research and investments are constantly changing. We need to collectively keep this tool and database up to date and so we ask Collective members and the community to please help make sure that entries are correct so that we have a valuable tool for all of us in the longer term.

“The Collective is an extraordinary force for good, a one-stop-shop for the latest information, access to technical experts, partner organisations, evidence hub, Slack channels you need to prevent and manage obesity. 2019 has been brilliant; I’m excited to see what we can achieve together in 2020!”

Bill Bellew, University of Sydney

AirTable tool:

Analysis example:
Citizen’s Voice

The Collective recognises the critical need for the lived experience voice and supports The Weight Issues Network (WIN) as a new and emerging organisation. We have used the skills and connections of the Collective network to help WIN get started and plan to support WIN going forward. It is not easy for people to stand up and talk about their lived experience, so it is important that we continue to assist, respect and protect this important emerging group and voice.

WIN leadership is independent and its Board purposely does not include Collective leaders. The Collective and WIN plan to collaborate around weight stigma and sharing the lived experience stories and perspectives in the future.

Andrew Wilson
WIN Board Member, father, radio presenter, humourist, mental health and obesity advocate

“I think we all need to talk about obesity openly, with dignity, if things are going to change and I feel that WIN is a step in the right direction.”

Lyn Keppler
WIN Board Member, Indigenous, mother, grandmother, dancer, businesswoman

“We want to share stories with others to help fight the stigma, bias and misinformation. We want to help ensure that the lived experience perspectives are heard & valued in the National debate.”

About WIN
A group of people whose lives are affected by overweight or obesity, who along with families and those who care, are committed to breaking weight stigma.

Purpose:
To provide a strong voice and support for people living with and affected by obesity

Objectives:
• Raise awareness around the challenges and need for support
• Advocate for people’s needs
• Fight weight stigma, bias, and discrimination
• Create a community of support and opportunities for people to share their experiences, stories and insights to help others
• Provide evidence-based education on obesity

This year the WIN leaders have established their principles, purpose, objectives and organisation’s constitution. They have developed a website, started their social media presence, started recruiting new members, led a workshop with new members and hosted a webinar for members with four directors telling their personal lived experience stories.

They have also already been invited to participate and present at various meetings including planning sessions for the Collective, consultations for the National Obesity Strategy, the Annual Scientific Meeting of the Australian & New Zealand Obesity Society and a planning session for the new National Association of Clinical Obesity Services.
The Obesity Evidence Hub is a new resource with the objective to identify, analyse and synthesise the evidence on obesity. By presenting the evidence base, our goal is to provide the platform for future policy development in Australia.

The Obesity Evidence Hub is a joint project resulting from a partnership between the Cancer Council Victoria, the Bupa Health Foundation and the Obesity Policy Coalition and is a foundational component to the Obesity Collective.

What is in the Hub
The first stage of the Obesity Evidence Hub covers obesity trends; health impacts; and prevention. Additional topics will be added in a second stage of the hub covering Treatment and Environmental Influences. These will be added in 2020.

The hub will be a constantly evolving platform, to be refreshed as new data becomes available and trends emerge over time.

The information on the Hub draws on the best available evidence from academic literature, including systematic reviews and meta-analyses where available.

Since its launch, the Obesity Evidence hub has won a Silver Melbourne Design Award and has been listed as a finalist for the 2019 VicHealth Awards in the ‘Research into Action’ category!

“It is often hard to gain momentum. This is why it is so important to talk about the issues and solutions, as well as resources we need to make this work happen”

Jane Martin
Executive Manager Obesity Policy Coalition, Cancer Council Victoria
The campaign team had strategy meetings and workshops to draft the campaign goals and plans. We also collected the current information on weight stigma in Australia through desktop research and Collective contacts. The research shows that stigmatisation and discrimination is prevalent in Australia and that people internalise negative perceptions around obesity.

The campaign team decided that focus group research is needed to identify the right ‘hooks’ to meet the campaigns goals. We were not able to source the needed funds to hire experts for professional focus groups this year unfortunately. It is the goal that the focus groups will be feasible in early 2020. Otherwise the team have used the campaign insights in engaging with media this year.

Campaign goals

- People to accept that obesity is societal (…without removing all ownership and responsibility)
- Reduce stigma (and definitely) not increase it
- Making evidence accessible and understood – strong and simple metaphors; 5 – 10 strong facts; core insights
- Making people aware that we live in an obesogenic environment in which we’re complicit, and clarifying why obesity is a problem
- Provide an alternative frame that is easily understood and resonates with existing cultural values; find a ‘hook’
- Create networks of supporters sharing stories of lived experience and exemplifying our shared social values
- Sensible conversation about obesity

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Campaign Team strategy session:
Media and presentations

It is not a main priority to be in the media, however where possible and appropriate, we respond to requests to help raise awareness around the Collective and the need to stop shaming and blaming. Some examples of presentations and media since the Collective launch in July 2018:

Media:
- Stan Grant
- The Drum
- ABC radio
- NutritionInsight.com

Conference presentations:
- NT Chronic Diseases Network and Baker Institute Joint 2019 Conference
- Workplace Health & Safety Show 2019 – Sydney
- ANZOS-ASLM-ICCR 2019 conference

Events:
- Bupa Health Foundation thought leadership lunch
- WIN education event at Westmead
- Sydney Concepts Westmead
- Sydney Ideas
- Made to Measure Seymour Centre launch

Collective report launch March 2019:
We developed a report with Collective leaders to help keep the topic of obesity on the radar before the national election. The launch was a brilliant example of the leaders coming together and mobilisation of the Collective.

The launch led to over 500 national media stories including:
- the Sydney Morning Herald/The Age - second most viewed story on Fairfax website on the day
- Sunrise
- 3 TV evening news station
- Collective leaders interviews for a number national, city and regional radio stations with hundreds of slots across Australia
- Media releases from Collective member organisations such as Bupa, SugarByHalf, the Youthfood Movement and RACGP
- Social media roll out with members
The obesity narrative

Obesity is a loaded word that carries many negative connotations unfortunately. There were numerous discussions with Collective leaders in the codesign process (before launch) about whether or not we should use the word ‘obesity’ in the title of the organisation because of this. In the end it was agreed that we need to be clear about what we are working towards and we need to reclaim the word from being so associated with shame and blame.

Perceptions of obesity are influenced by the narrative around the challenge and media portrayal of people with obesity. The story around obesity isn’t being told in a consistent and holistic way. So the below bullet points were prepared to help us to have a more balanced and evidence informed narrative. The bullets contain simple, core concepts that can be adapted as needed. A recognition of the many complex drivers of obesity helps to reduce weight stigma and substantiate the need for investment in both prevention and treatment/care.

Key messages when referring to the challenge of obesity:
• There are many different drivers and causes of obesity.
• It is not only about personal responsibility and behaviour change. There are also strong social, genetic, biological and environmental influences outside of people’s control.
• There is no one solution for obesity.
• Obesity is a chronic, relapsing condition. As body fat increases, our biology makes it more and more difficult to lose weight and keep it off.
• Therefore, it is critical to invest in prevention at every stage, to slow the further progression of obesity and to invest in support, treatment and care to help those that are living with obesity.

We are developing some further media tools and guidance to hopefully reduce future use of disrespectful language and images, in collaboration with WIN and the Cancer Council Victoria. Collective members Monika Bednarek (Associate Prof. in Linguistics and the University of Sydney) and Catriona Bonfiglioli (Senior Lecturer in Media Studies at the University of Technology Sydney) are collaborating with international experts to help analyse the use of the word ‘obesity’ in the media.

“We’ve had decades of fat shaming and blaming, and it has not been helpful. In fact, it has actually been harmful, acting as a barrier and preventing people with obesity from accessing the help and support they need. Science has told us time and time again that there are many drivers of obesity, and these include biology, genetics, the environments, social factors, and many of them are outside of the individual’s control.”

**Georgia Rigas, General Practitioner & Chair of Specific Interests Obesity Management Network RACGP**

“Volunteering with the Obesity Collective has equipped me with skills and responsibilities that I didn’t realise I was craving. My eyes have really opened to the ubiquitous and denigrating nature of weight stigma, and developing and running the discussion sessions with the Emerging Leaders has definitely been a highlight of my year.”

**Kate Bowditch, Collective volunteer**
The Curators are the Executive Group that decides on the overarching strategic direction and activities of the Collective.

“We are part of the Collective because businesses and community leaders need to be engaged in solutions for complex societal challenges like obesity.”

Marty Jovic, PwC Partner

“The Obesity Collective has made significant advances in bringing together a broad range of organisations and people to address one of Australia’s greatest health challenges. The Collective is not only drawing attention to clinical, policy and research shortcomings but a major focus is on ending weight-related stigma and discrimination.”

Prof. Stephen Colagiuri, University of Sydney
Founders/ Advisors

The Founders include the initial group of obesity experts that helped establish the Collective and this group has recently been expanded to include further experts and Collective supporters.

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<th>Founders/ Advisors</th>
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<td>Dr Shirley Alexander, Pediatrician, Children’s Hospital at Westmead</td>
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<td>Prof. Steven Allender, Deakin University</td>
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<td>Prof. (Em.) Adrian Bauman, University of Sydney</td>
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<td>Prof. Louise Baur, University of Sydney, Head Children’s Hospital Westmead Clinical School</td>
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<td>A. Prof. William Bellew, University of Sydney</td>
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<td>Shelley Bowen, Health Futures Australia</td>
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<td>Prof. Wendy Brown, Monash University Department of Surgery</td>
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<td>Prof. Stephen Colagiuri, Boden Collaboration (University of Sydney)</td>
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<td>Prof. Timothy Gill, Boden Collaboration (University of Sydney)</td>
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<td>Alexandra Iljadica, Co-founder Youth Food Movement Australia</td>
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<td>Marty Jovic, Partner PwC</td>
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<td>Alexandra Jones, The George Institute for Global Health</td>
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<td>Prof. Amanda Lee, UQ Poche Centre for Indigenous Health</td>
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<td>Jane Martin, Executive Manager of the Obesity Policy Coalition (OPC)</td>
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<td>Dr Jo Mitchell, former Executive Director Centre for NSW Population Health</td>
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<td>Prof. Brian Oldfield, Monash University</td>
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<td>Prof. Anna Peeters, Director Institute for Health Transformation (Deakin University)</td>
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<td>Alice Pryor, Parents’ Voice</td>
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<td>Dr Belinda Reeve, University of Sydney</td>
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<td>Dr Georgia Rigas, GP &amp; Chair of Specific Interests Obesity Group RACGP</td>
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<td>Prof. Lucie Rychetnik, Australian Prevention Partnership Centre</td>
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<td>Annette Schmiede, Executive Leader Bupa Health Foundation</td>
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<td>Prof. Stephen J Simpson, Academic Director Charles Perkins Centre</td>
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<td>Tania Sincock (Curator), CEO SugarbyHalf</td>
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<td>Prof. Helen Skouteris, Monash University</td>
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<td>Dr Priya Sumithran, University of Melbourne</td>
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<td>Louise Sylvan, Chair of Energy Consumers Australia</td>
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<td>A/Prof. Michael Talbot, President ANZMOSS</td>
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<td>Prof. Helen Teede, Monash University</td>
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<td>Dr Kathryn Williams, Nepean Family Metabolic Health Service</td>
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Obesity Australia (OA) Board

Obesity Australia is the not-for-profit legal entity and oversight body for the Collective.

| Prof. Stephen J. Simpson, Academic Director Charles Perkins Centre (University of Sydney) |
| Stuart Shinfield, Partner of PricewaterhouseCoopers (PwC) |
| Hon. Dr Craig Emerson, Former Commonwealth Minister, Managing Director of Craig Emerson Economics |
| Professor Anna Peeters, Director, Institute for Health Transformation (Deakin University) |
| Prof. Ian Caterson, Foundation Director of the Boden Collaboration |
| Sue Bellino, Political Director, Australian Nursing and Midwifery Federation |

A particular thanks to two previous board members that have stepped down this year, The Hon. Helen Coonan who has served on the OA Board for the past 9 years, and to Tim Gartrell, who served the Board in the past year.
Core team

At the core of the Collective we have two full time staff that lead coordination, fundraising, project management and member engagement. The rest of the work and progress of the Collective is through member contributions and pro bono support. We would like to thank Alessia for all of her hard work and dedication over the last year as a core team member. She is moving to a role at the University of Sydney and we look forward to working with her as a Collective member. Jesna will be taking the Core assistant role in 2020. Welcome to the team Jesna!

Kelly Cooper, Bachelor of Health Science student (Deakin University)

Core team - Volunteers

One of the major highlights of the year would be the number and quality of people that have approached us to volunteer for the Collective. A huge thanks to our volunteers who have helped with the projects and growing the Collective. Some of the volunteers are also leading the development of an Emerging Leaders group in the Collective, to help develop the young professional voice and membership – something to keep an eye out for in 2020!
Support of the Collective

A huge thank you to our members and volunteers. All of the progress to date would have not been possible without your support. Most of the work in the Collective is done through volunteering time, however all of this would not be possible without financial contributions as well. We would like to particularly thank the organisations that have provided funding for the Collective work to proceed:

Major financial supporters:

• Bupa Health Foundation – funding of the Evidence Hub project and contributions to the Core team
• NSW Health – funding to support the Systems Activity mapping tool, research and website
• The University of Sydney – funding to support the Core team

We would also like to thank PwC Australia for the many hours of pro bono work (on par with the above large financial contributions in value) in codesign facilitation, legal advice and communications expertise from various teams across the firm.

We have also received smaller contributions from important members including:

• Johnson & Johnson
• Amgen
• Novo Nordisk
• 3rdspace
• Fitbit (planning to donate trackers to the Collective)

In addition, the small donations from the community and schools are very much appreciated and motivational to receive.

It should be noted the Collective leaders have developed guidelines and a risk framework for assessing contributions to the Collective.

“The Collective fills a gap..... I think its greatest potential is to not only house the disparate groups that fill the obesity space but to help distil their views into a common or unified message that can reshape the agenda to help those living with obesity. Growing the Collective is like building a wall; each one of us has a brick to contribute”

Annette Schmiede, Executive Leader Bupa Health Foundation
Plans for next year

In October 2019, a smaller group of Collective leaders and key decision makers came together in a codesign event to discuss successes, challenges and progress so far and explore our goals for the next year and beyond. The event was a valuable way for us to take stock and have a fresh look at our plans and opportunities to increase impact in the future. Progress, our projects and the below successes and challenges were discussed.

Major successes:
• Growth of the Collective
• Delivering the Collective projects
• Feedback from people with lived experience
• Collaboration and commitment from members
• March report launch and media impact

Major challenges:
• Finding sustainable sources of funding for projects and the core
• Maintaining strong engagement from some members
• Posting on Slack
• Confusion around the Collective scope and how it fits with others

We also looked at the potential of creating sub-action groups for the Collective to help increase impact and shared leadership. However there was clear feedback and it was agreed that our projects are distinct, adding value and that we should maintain our focus on these and not spread ourselves too thin next year. The visions, purpose and strategies for action were also refreshed (see page 5) to be more clear and concise.

The below points are a high level summary of where we want to focus the Collective next year.

Goals and plans for 2020
• Continue with our projects and aim to increase impact and member engagement
• Develop Collective branding and a social media presence
• Create a narrative/report from the mapping results and action area options for member commitments
• Launch phase 2 of the Evidence Hub and continue to promote/disseminate the tool
• WIN and the Collective to collaborate on stigma campaign work
• Strategically grow Collective membership to help with projects and action areas
• Add Collective members and commitments to the website
• Support the Collective Emerging Leaders and developing the young professional voice from the volunteers

“In the last year we have learned a lot…. we don’t have the perfect answer, there is no blueprint for this, we are going to have to learn and iterate and communicate with each other, and this is what we have done this year. As a result there is more clarity around the role and value of the Collective.”

Tiffany Petre, Director of The Obesity Collective