



**Asia-Pacific
Economic Cooperation**

Status of Obesity Prevalence, Prevention, and Management in APEC

Event Summary Report

APEC Health Working Group

February 2026





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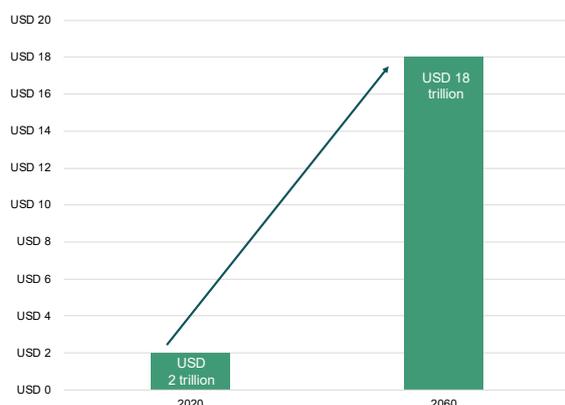
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Background

Obesity rates are rising across APEC economies, affecting the health of people and putting pressure on health systems. The health risks associated with obesity include co-morbidities such as cardiovascular diseases, diabetes, kidney disease, preventable cancers, and conditions impacting bone and reproductive health. Accounting for medical and social care costs, along with premature death and lost productivity, the World Obesity Federation estimates that the economic costs of obesity can amount to USD 3 trillion by 2030 and USD 18 trillion by 2060.ⁱ

To address rising obesity prevalence effectively, APEC economies will need to recognize obesity as a public health priority that requires structural, whole-of-society solutions. Comprehensive obesity strategies in the region include policies and structures that expand access to care, nutritious food, and spaces that enable physical activity. For instance, **Chile's Strategy to Stop the Acceleration of Overweight and Obesity in Children and Adolescents (2023-2030)** aims to implement structural reforms that include food labeling and marketing, physical activity in schools, and public education about healthy lifestyle habits to comprehensively prevent childhood obesity.ⁱⁱ



In **Australia**, the National Obesity Strategy (2022-2032) aims to help more people maintain a healthy weight by creating supportive, sustainable and healthy environments, empowering people to stay healthy, and providing access to early intervention and care.ⁱⁱⁱ The **People's Republic of China's** weight management campaign within the Healthy China Initiative (2025) includes goals such as creating supportive environments for healthy weight management, raising public awareness, and encouraging healthy lifestyles.^{iv} Furthermore, APEC economies such as **Malaysia; Mexico; Peru; the Philippines;** and **Thailand** are working with the World Health Organization (WHO) to increase their capacity to implement obesity prevention, management, and care policies.^v

While the region is beginning to take action to address the rising burden of obesity, more needs to be done to recognize obesity as a chronic disease with serious impacts on APEC's health systems and economic productivity. Collaboration among APEC economies can support better integration of obesity-related policies that move beyond silos and align nutrition and physical activity efforts with access to obesity care.

The economic costs of obesity can amount to USD 3 trillion by 2030 and USD 18 trillion by 2060.

Source: World Obesity Federation

Introduction

This project convened a **policy dialogue at the margins of the High-Level Meeting on Health & the Economy in September 2025** to discuss the rising obesity burden in the APEC region and highlight obesity's impact on health systems, its implications for economic productivity, and the barriers that prohibit access to tools for effective prevention and management. Member economies shared best practices for obesity management and care in their economies and recommended actions for regional collaboration to address the growing burden of obesity in the APEC region.

The objectives of the policy dialogue were to:

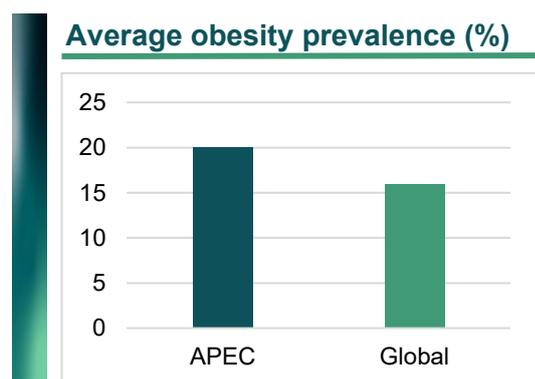
- ◆ Communicate obesity's impact on health systems and economic productivity
- ◆ Advocate for improved access to obesity prevention, management, and care
- ◆ Articulate opportunities for regional collaboration towards reducing the burden of obesity across APEC economies



Status of Obesity Prevalence, Prevention, and Management in APEC

Adrienne Mendenhall, Director, Crowell Global Advisors

Ms. Mendenhall presented data showing that obesity prevalence is rising across the APEC region, posing a serious threat to both public health and economic productivity. With an average adult obesity prevalence of 20%, APEC economies now outpace the global average of 16%. The Americas report the highest rate – the United States (42.9%); Chile (39.5%); and Mexico (36.1%) – while Asian economies like Viet Nam (2.1%); Japan (4.9%); and Republic of Korea (6.7%) report the lowest. Despite these differences, obesity rates have surged throughout APEC economies over the past three decades.



Source: World Obesity Federation; World Health Organization

Projections for 2050 are alarming: nearly two-thirds of adults over 25 are expected to have overweight or obesity, and almost a quarter of the world's population with obesity will be over 65. This trend is especially concerning for aging APEC economies, highlighting the urgent need for action.

The rise of obesity in the region is driven by a complex interplay of genetic, biological, and environmental factors – not simply by excess calorie intake. Diet, physical inactivity, social context, toxins, and stress all contribute to environments that promote weight gain – also known as obesogenic environments. Obesity is directly linked to 38 other noncommunicable diseases, including diabetes, hypertension, cardiovascular disease, chronic kidney disease, depression, and cancer, compounding the health risks for the region.

The economic impact is equally profound. The global cost of overweight and obesity is projected to escalate from USD 2 trillion in 2020 to over USD 18 trillion by 2060, driven by rising medical expenses and even greater indirect costs from poor health, premature death, and lost productivity. A modest 5% reduction in global obesity prevalence could save up to \$430 billion annually, underscoring the urgent need for robust prevention and management strategies.



Ms. Mendenhall stressed that isolated interventions are not enough. Tackling obesity requires coordinated, multisectoral strategies that reshape obesogenic environments that expand access to prevention, management, and care. Although APEC economies have prioritized obesity in health policy, enacted food laws, and strengthened health services, rates continue to climb.

The presentation concluded by identifying key opportunities for regional collaboration: advocating for obesity to be recognized and treated as a chronic disease, sharing knowledge on its complex causes and effective management, building consensus on clinical guidelines for health professionals, and fostering cross-sector partnerships to develop comprehensive policies for prevention, management, and care.

“Tackling rising obesity prevalence requires more than isolated interventions – it demands coordinated, multisectoral strategies that reshape obesogenic environments and expand access to prevention, management, and care.”

- Adrienne Mendenhall, Director, Crowell Global Advisors

Recognizing Obesity Prevention as a Public Health Priority

Mr. Victor Conejeros, Deputy Head of Mission of Chile in the Republic of Korea

In his presentation, Mr. Conejeros described the scale of Chile's obesity crisis, noting that 40.2% of people aged 15 and older are overweight, 31.4% have obesity, and 3.4% have morbid obesity. He emphasized that nutrition in Chile is not merely a matter of individual dietary choices, but a deeper structural health challenge. Since the 1990s, Chile has faced a surge in excess weight and noncommunicable diseases, demanding a comprehensive public health response.

Chile's approach centers on transforming obesogenic environments and making healthy choices accessible. Chile is addressing these issues through its National Policy on Nutrition and Food and a range of structural policies, including the

Law on Nutritional Composition and Advertising, a 2014 tax on sugar-sweetened beverages, the Law on Food Advertising, healthy food programs, and the development of food-based dietary guidelines.

In 2023, Chile launched the National Strategy to Stop the Acceleration of Overweight and Obesity in Children and Adolescents. This strategy implements robust measures such as restricting the sale and advertising of foods high in sugar, sodium, calories, and fats around schools, promoting physical activity in educational settings, ensuring access to drinking water in restaurants, imposing corrective taxes on unhealthy foods and beverages, and expanding the advertising restrictions. These combined efforts reflect Chile's commitment to tackling obesity at both the individual and systemic levels.

“Obesity is not only a health issue, but also a social and economic challenge that requires collaborative solutions.”

- Victor Conejeros, Deputy Head of Mission of Chile in the Republic of Korea



Obesity as an NCD: Strategies for Prevention and Management

Ms. Yumi Oh, Head of Strategic Management Directorate, Korea Health Promotion Institute

Ms. Oh detailed the Republic of Korea's Health Plan 2030, highlighting its prioritization of noncommunicable disease prevention and management, with a particular focus on cancer, cardiovascular disease, obesity, and injury prevention.

For obesity, the strategy centers on:

- ◆ Building integrated governance and supportive environments
- ◆ Delivering tailored prevention and management services for specific groups
- ◆ Establishing a foundation to manage severe obesity and improve lifestyle behaviors

Korea's approach includes impactful campaigns such as the community-based Obesity Prevention Day (March 4th), which promotes healthy habits under the slogan "Walk Lightly, Drink Water, Eat Less Salt, Sugar, Fat." There are also online engagement campaigns through social media and fitness apps to further encourage obesity prevention.

The Childhood Obesity Prevention Program supports healthy growth in children by fostering good eating habits and physical activity through after-school classes and community centers, using interactive nutrition education and play-based activities. This program has already achieved a 1.2% reduction in childhood overweight and obesity, improved knowledge on nutrition and physical activity, and has expanded to over 60% of public centers economy-wide.

Ms. Oh emphasized the government's strong commitment to tackling childhood obesity, with plans to establish a National Management System for Childhood Obesity and launch a Second National Plan for Obesity Management, advancing a comprehensive, economy-wide response. She concluded by underscoring the importance of collaboration and joint action among APEC economies to effectively prevent obesity.



Interventions

During the policy dialogue, economies and the private sector were invited to give interventions that reflected on the presentations and their implications for developing obesity prevention, management, and care policies.

The Philippines

The Philippines is tackling obesity through its Strategic Plan in Addressing Obesity and Other Metabolic Disorders (2024-2028). The Philippines' approach is anchored in four pillars. First, the approach recognizes obesity as a whole-of-society issue, integrating social determinants of health. Second, it promotes prevention and management across the life course, with interventions ranging from breastfeeding and child nutrition to school and workplace health promotion, active transportation, and standard primary care. Third, the Philippines is advancing policy and regulatory measures, including food labeling, reformulation of processed foods, and restrictions on unhealthy food marketing. Fourth, the Philippines' approach emphasizes health promotion and community empowerment, recognizing that prevention is most effective at the local level. The Philippines also sees APEC collaboration as vital for sharing best practices, especially in financing solutions for prevention, control, and management of obesity

Thailand

Thailand has demonstrated strong commitment to the WHO Acceleration Plan to Stop Obesity by advancing a comprehensive set of interventions. Thailand is promoting breastfeeding and expanding age-appropriate feeding programs throughout its health services, implementing school lunch initiatives to provide balanced meals, and promoting physical activity. Supportive environments are being created through healthy lifestyle campaigns and food labeling. Thailand is currently drafting a new *Marketing Restriction of Food and Beverages Affecting Children's Health Act*, and developing a Framework for the Action Plan on the Integrated Prevention and Control of Obesity in Children and Adolescents, which is implemented through multisectoral collaboration under the Steering Committee and Subcommittee on the Integrated Prevention and Control of Obesity in Children and Adolescents.

“Obesity is a shared challenge that threatens not only health, but also productivity and sustainable development.”

- Dr. Ronaldo Quintana, Medical Officer IV, Disease Prevention and Control Bureau, Department of Health

Viet Nam

Viet Nam faces a complex double burden: rising overweight rates in urban areas and persistent underweight rates in rural regions, complicating policy responses.

To address these challenges, Viet Nam identified key opportunities for regional collaboration, such as:

- ✦ Building evidence to better communicate the health impacts of obesity
- ✦ Sharing best practices and innovations
- ✦ Implementing effective school-based and community programs
- ✦ Pursuing joint research and capacity-building initiatives

Chinese Taipei

Since 2024, Chinese Taipei has begun implementing a comprehensive health policy aimed at strengthening prevention. Supportive of a whole-of-society approach, Chinese Taipei's ministries of health, education, and labor all have the shared aim of reducing obesity and improving health. Chinese Taipei has also launched a Sports Ministry to help strengthen the policy environment around physical activity. As it concerns financing, Chinese Taipei's Shared Care Network covers 80% of all noncommunicable diseases. The National Health Insurance Administration is also working on diversifying payment models. Examples of current models include the diabetes shared care program and the integrated diabetes and chronic disease program.

Eli Lilly

Ms. Brown emphasized that leading medical organizations and the WHO have long recognized obesity as a serious, chronic disease and a major driver of noncommunicable diseases like cardiovascular disease, diabetes, and cancer. Despite clear scientific evidence, obesity is still widely misunderstood as a lifestyle choice, fueling stigma and resulting in inequitable access to diagnosis, treatment, and long-term management. This gap in care undermines economic resilience in aging APEC economies, as delayed treatment leads to reduced productivity and increased dependency.

Ms. Brown highlighted how prevention alone does not meet the needs of those currently living with obesity and focusing solely on prevention can be stigmatizing. Many still face significant barriers to comprehensive, affordable, and evidence-based care because policy coverage has not kept pace with medical innovation. Ms. Brown proposed solutions such as reframing obesity as a treatable chronic condition, updating guidelines, expanding access to obesity management medications, and implementing comprehensive care models with consistent reimbursement frameworks that integrate obesity treatment into economy-wide health plans.

“Too many people still face barriers to comprehensive, affordable and evidence-based care because policies around coverage have not caught up with innovation.”

- Ms. Tori Brown, President of North Asia-Pacific and General Manager of Australia and New Zealand

Conclusion

Through this policy dialogue, APEC economies shared how they are investing in prevention measures focused on nutrition and physical activity to decrease the burden of rising obesity rates in the region.

A key takeaway from the discussion was the recognition that dedicated financing and increased advocacy are needed to ensure access to treatment and personalized care for those that are already dealing with obesity.

Affirming their commitment to halt the rise of obesity in the region, APEC economies called for greater collaboration to help build evidence on the growing burden of obesity and expand knowledge on best practices. By continuing to leverage APEC for alignment and collaboration on obesity policy, APEC economies can set standards and pursue a joint path for reducing the prevalence of obesity and improving health outcomes in the region.

Appendix

Program

Time	Agenda Item
7:30 am – 7:33 am	<p>Welcome Remarks</p> <ul style="list-style-type: none"> • Mr. Victor Conejeros, Deputy Head of Mission of Chile in the Republic of Korea • Ms. Christina Guerra de Rosi, Third Secretary, Embassy of Peru in the Republic of Korea
7:33 am – 8:18 am	<p>Presentations</p> <p>“Status of Obesity Prevention and Management in APEC”</p> <ul style="list-style-type: none"> • Ms. Adrienne Mendenhall, Director, Crowell Global Advisors <p>“Recognizing Obesity Prevention as a Public Health Priority”</p> <ul style="list-style-type: none"> • Mr. Victor Conejeros, Deputy Head of Mission of Chile in the Republic of Korea <p>“Obesity as an NCD: Strategies for Prevention and Management”</p> <ul style="list-style-type: none"> • Ms. Yumi Oh, Head of Strategic Management Directorate, Korea Health Promotion Institute
8:18 am – 9:00 am	<p>Interventions</p> <p>Economies and the private sector are invited to give interventions that reflect on earlier presentations and their implications for developing obesity prevention, management, and care policies.</p> <p>The Philippines</p> <ul style="list-style-type: none"> • Dr. Ronaldo Quintana, Medical Officer IV, Disease Prevention and Control Bureau, Department of Health <p>Thailand</p> <ul style="list-style-type: none"> • Dr. Tipa Krailas (M.D.), Director, Bureau of Health Promotion, Department of Health, Ministry of Public Health

8:18 am – 9:00 am

Viet Nam

- Dr. Vuong Anh Duong, Deputy Director of Administration, Medical Services Administration, Ministry of Health

Chinese Taipei

- Dr. Shih Chin-Shui, Director General, Office of International Cooperation, Ministry of Health and Welfare

Eli Lilly

- Ms. Tori Brown, President of North Asia-Pacific and General Manager of Australia and New Zealand

Participation

Number of economies that participated	7
Total number of participants	28
Female	19 (68%)
Male	9 (32%)

References

- ⁱ *The Economic Impact of Overweight & Obesity 2nd Edition with Estimates for 161 Countries* (World Obesity Federation, 2022), <https://data.worldobesity.org/publications/WOF-Economic-Impacts-2-V2.pdf>
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- ⁱⁱⁱ *The National Obesity Strategy 2022-2030* (Commonwealth of Australia, 2022), https://www.health.gov.au/sites/default/files/documents/2022/03/national-obesity-strategy-2022-2032_0.pdf
- ^{iv} “China Adds Anti-Obesity Drive to Healthy China Initiative,” The State Council of the People’s Republic of China, accessed October 9, 2025, https://english.www.gov.cn/news/202504/14/content_WS67fcea50c6d0868f4e8f1acd.html.
- ^v *WHO Acceleration Plan to Stop Obesity* (World Health Organization, July 3, 2023), <https://iris.who.int/server/api/core/bitstreams/ea789198-6336-45e3-adfd-7abb4b147b69/content>.