



# WHO WORLD HEALTH ORGANIZATION

## BACKGROUND GUIDE ALEMUN 2026

**TOPIC:** Addressing the global rise of Obesity, taking into account public health systems and preventative measures.

**CHAIR:** Giovanna Marotti and Tiago Trovão

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## 6. BIBLIOGRAPHY

# 1. GREETING WORD

Dear Delegates,

It is with great pleasure that we, Tiago Trovão and Giovanna Marotti welcome you to the WHO (World Health Organization) at AleMUN 2026. We look forward to meeting you and hearing you discuss such an important issue as: “Addressing the global rise of obesity, taking into account public health systems and preventative measures”.

The WHO calls these meetings periodically or when an urgent issue needs to be tackled immediately. Your goal is to solve this issue quickly and peacefully. Your efforts in the council will demonstrate a willingness to change the current situation in order to make earth a better place in the future. We hope you find useful information while reading this BG (Background Guide)

In this meeting we will be discussing a topic that has grown in relevance over the past few decades, obesity. Obesity is an issue that affects over 1 in 8 people today and is projected to become even more acute in the next decades. This will have lasting consequences for the health of people all across the world, leading to higher rates of diabetes, heart disease and cancer, putting strains on healthcare services worldwide.

In the face of this growing health crisis, we believe it is important to create a global response to:

We know that many of you, especially the first-timers, may be nervous or anxious at the start, which is completely understandable. Still, we hope that you find a comfortable place at AleMUN. Moreover, your participation will be a great opportunity to speak from another perspective and a way to learn about the diplomatic situations happening in the real world.

We wish you all good luck, and we look forward to seeing you debate! If you have any questions, feel free to contact us via phone or email.

Yours sincerely, Chairs of the WHO

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# 2. WORLD HEALTH ORGANIZATION

## 2.1 GENERAL INFORMATION

Founded in 1948, WHO is the United Nations agency that connects nations, partners and people to promote health, keep the world safe and serve the vulnerable – so everyone, everywhere can attain the highest level of health.

WHO leads global efforts to expand universal health coverage. We direct and coordinate the world's response to health emergencies. And we promote healthier lives – from pregnancy care through old age. Our Triple Billion targets outline an ambitious plan for the world to achieve good health for all using science-based policies and programmes.

Moreover, WHO works with all Member States to support them to achieve the highest standard of health for all people. Our staff working in countries advise ministries of health and other sectors on public health issues and provide support to plan, implement and monitor health programmes.

With strong connections between offices, WHO works on the front lines in 150+ locations across 6 regions. WHO's Director-General outlines the vision and oversees all our international health work whilst our Regional Directors lead the work of the 6 Regional Offices and their country offices. The Regional Directors work closely with the Director-General to implement strategies and programmes across all levels of the Organization.

## 2.2 STRUCTURE OF WHO

Since our inception in 1948, WHO has been hosted by the Swiss Confederation. Our main building was inaugurated in 1966. Today, the campus is home to 2,400 employees. The headquarters is currently undergoing modernization, which is expected to be completed in 2025. The renovation aims to improve site efficiency and reduce the operational budget by investing in a long-term, modern, high standard, and energy-efficient building. From our longstanding headquarters in Geneva to our six regional offices, 150 country offices, and other locations around the world, WHO plays an essential role strengthening local health systems and coordinating the global response to health threats. Discover how we support governments and partners in their efforts to ensure everyone, everywhere, has an equal opportunity to live a safe and healthy life.

WHO is an organization of 194 Member States. The Member States elect the Director-General, who leads the organization in achieving its global health goals. We are champions for healthier, safer lives.

Our team of 8000+ professionals includes the world's leading public health experts, including doctors, epidemiologists, scientists and managers. Together, we coordinate the world's response to health emergencies, promote well-being, prevent disease and expand access to health care. By connecting nations, people and partners to scientific evidence they can rely on, we strive to give everyone an equal chance at a safe and healthy life.

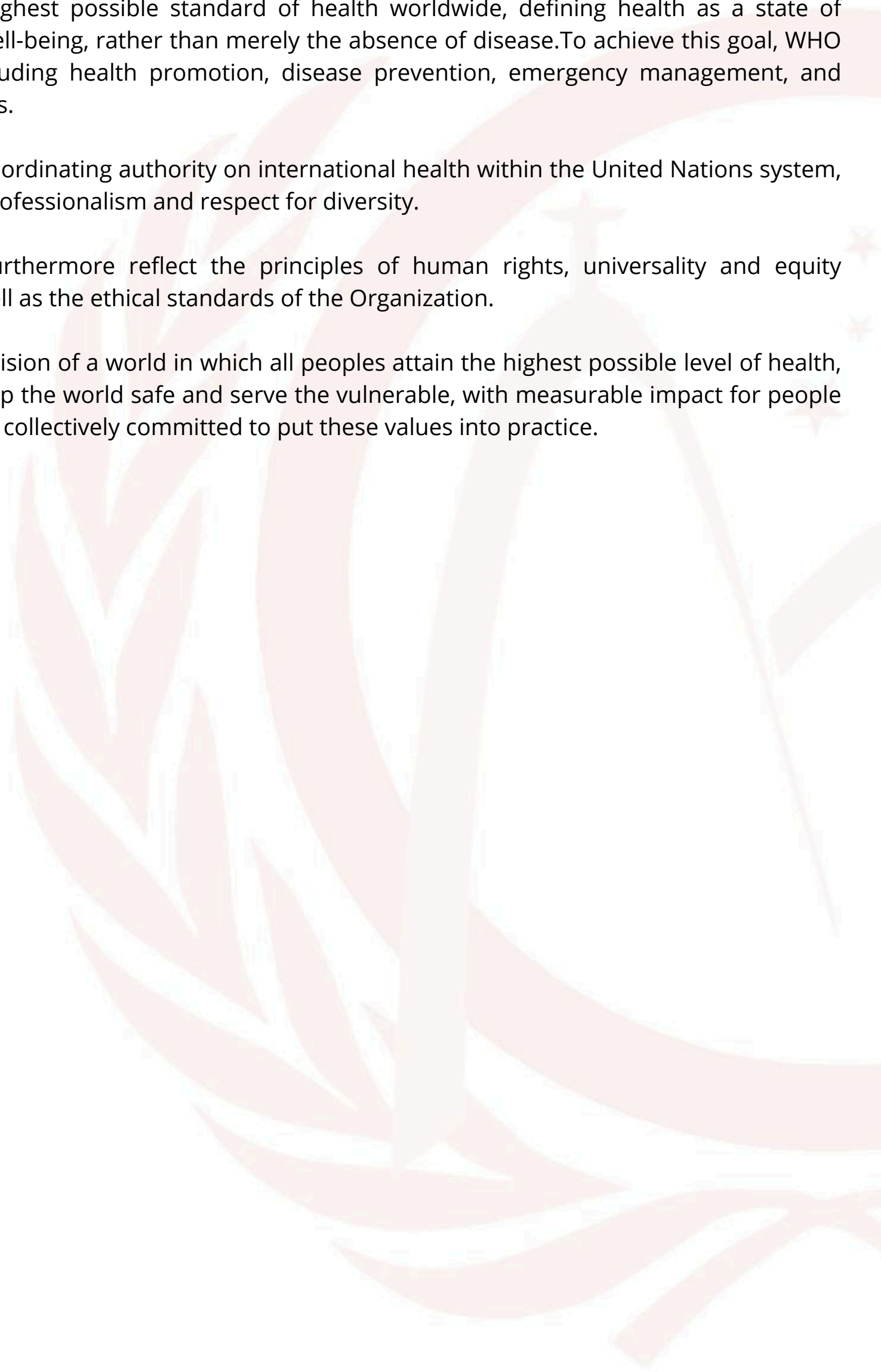
## 2.3 WHO'S MISSION

WHO's main goal is to ensure the highest possible standard of health worldwide, defining health as a state of complete physical, mental and social well-being, rather than merely the absence of disease. To achieve this goal, WHO works across a number of areas, including health promotion, disease prevention, emergency management, and strengthening of resilient health systems.

Moreover, WHO, as the directing and coordinating authority on international health within the United Nations system, adheres to the UN values of integrity, professionalism and respect for diversity.

The values of the WHO workforce furthermore reflect the principles of human rights, universality and equity established in WHO's Constitution as well as the ethical standards of the Organization.

These values are inspired by the WHO vision of a world in which all peoples attain the highest possible level of health, and our mission to promote health, keep the world safe and serve the vulnerable, with measurable impact for people at country level. We are individually and collectively committed to put these values into practice.



# 3. TOPIC BACKGROUND

## 3.1 INTRODUCTION TO THE TOPIC

Overweight is a condition of excessive fat deposits.

Obesity is classified by the World Health Organization (WHO) as a chronic, relapsing disease arising from complex interactions between genetics, neurobiology, eating behaviours, access to healthy diet, market forces, and the broader environment. In the last decades, obesity has expanded globally as countries have experienced greater food security, socioeconomic development, and shifts in diet, physical activity, and societal and individual behavior driven by globalization and industrialized food systems. These forces have created increasingly obesogenic environments, contributing to what is now a global public health crisis with more than 1 billion people living with obesity and prevalence rising in nearly every country .

A diagnosis of overweight or obesity is made by measuring people's weight and height and by calculating the body mass index (BMI):  $\text{weight (kg)}/\text{height}^2 \text{ (m}^2\text{)}$ . The body mass index is a surrogate marker of fatness and additional measurements, such as the waist circumference, can help the diagnosis of obesity.

The BMI categories for defining obesity vary by age and gender for adults, adolescents, children and infants.

## 3.2 HISTORICAL CONTEXT OF OBESITY

Obesity rates have worsened dramatically since the latter half of the 20th century . The growth of the fast food industry, the rise of ultra-processed foods, and the growing global capacity of food production are key factors that explain this.

Fast food as an industry began in the US in the early 20th century, and has grown rapidly ever since. The fast paced and car centric nature of American society helped the industry grow, as these restaurants offered cheap food that was made quickly and could be sold in great quantities both at drive-throughs or for people on foot. Over the last century, companies like McDonald's and Burger King, aided by enormous advertising campaigns, have managed to become global cultural icons that are present in over 100 countries.

Since the industrial revolution, many processes have been developed to alter the nature of foods, allowing the creation of new artificial products. Starting in the 20th century, many companies started using chemical and industrial processes to create new food products that were rich in fats and carbohydrates, which naturally appeal to human tastebuds. The sale of high-calory products has meant people take in a lot more calories than before, increasing risks of obesity.

In pre-industrial times, food was a very scarce resource, and most of the population lived in hunger. With the development of technologies like fertilizer and mechanized agriculture, this has changed, with the world currently producing more food than is needed to feed everyone. While this food abundance has been the leading cause in the remarkable decline in hunger in recent years, it has also allowed the growth of obesity.

Behavioral changes have also contributed to the rise in obesity. Especially the development of a society based on cars, meaning people have to walk less than they used to. The development of televisions and smartphones has likewise meant people have many ways to entertain themselves without doing physical activities, leading to the increased prevalence of sedentary lifestyles.

### 3.3 CURRENT SITUATION

The current state of obesity is dire. There are currently about 1 billion obese people around the world, and that figure is expected to climb to over 1,5 billion by 2035. Causes of obesity are diverse, including the rise of a sedentary lifestyle, the growth of fast food and ultra-processed foods, the unequal access to healthy foods and the inability of healthcare services to properly solve the crisis.

Obesity has many consequences to people suffering from it. It increases the risks of cardiovascular problems, diabetes, cancer and hypertension, putting pressure on health systems worldwide. Obesity is also linked to reduced worker productivity and to mental health problems.

Obesity is now a global problem, with poor countries seeing a rapid growth in obesity, despite them also having huge issues with hunger and malnourishment. Especially in these countries, failing public healthcare services and the comparatively cheap price of fast food compared to healthier alternatives has led to this surge in obesity, breaking the idea that obesity is a first world problem.

Some countries have implemented policies to combat this rising epidemic, with many countries, especially in Europe and Asia, attempting to curb the crisis, with regulation, taxes on ultra-processed foods and by educating the populace on the importance of a healthy diet.

The unequal access to healthcare and treatment is also a key factor contributing to obesity. Especially in poorer countries, access to healthcare is limited, meaning many people are unable to access the treatment and care needed to effectively combat obesity.

Still, these efforts remain individual national initiatives, and many other countries still lag behind in combatting this issue. It is therefore important that major countries around the world come together to combat that pressing issue together.

However, the influence of corporate lobbying from the fast food industry has made regulating ultra processed food tougher, especially in Anglophone countries. These countries are known for their pro-market approach and for deregulation, trying to collaborate with the fast food industry to solve obesity. Some say this is a viable strategy to combat obesity whilst respecting the freedom of enterprise and of the consumers to choose what they eat, while critics point out that this approach means governments can't take the necessary measures to control obesity.

### 3.4 THE USE OF SUBSTANCES FOR WEIGHT LOSS

Weight loss medications have become increasingly popular around the world, especially with the rise of GLP-1 therapies. These medications help people lose weight in different ways: some reduce hunger and make people feel fuller for longer, while others change how the body absorbs fat or burns calories. Many of these treatments are injections, although some are available as pills. For many patients, especially those struggling with obesity for years, these medications can represent an important step toward better health and quality of life.

However, losing weight is not always as simple as eating less and exercising more, and these drugs are not a "quick fix" or a miracle solution. They can cause risks and side effects, and they are not suitable for everyone. Medical supervision is essential to ensure safe use and to monitor possible complications.

At the same time, the growing global demand for GLP-1 therapies has also created a serious public health concern: the spread of falsified and low-quality products. Fake or substandard medications can put patients' health at risk and reduce trust in medical treatments. To protect public safety, it is important that these drugs are distributed through regulated systems and prescribed only by qualified healthcare professionals. Strong government oversight, patient education, and international cooperation are also necessary to ensure the quality and safety of weight loss medications worldwide.

### 3.5 RESEARCH MATERIAL FOR ALL DELEGATES

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# 4. IMPORTANT FOR THE PREPARATION OF THE DEBATE

## 4.1 TOPICS TO FOCUS ON DURING THE DEBATE

- The health consequences of obesity
- The economic and social consequences of an obese population
- The health impacts of fast food and hyperprocessed foods
- Socioeconomic factors contributing to obesity
- Individual factors contributing to obesity
- Current measures being taken by countries against the obesity epidemic

## 4.2 GUIDING QUESTIONS

- How does obesity impact health individually?
- What can the consequences of obesity be on a national scale?
- What causes obesity? - What socioeconomic factors may increase obesity?
- To what extent is obesity a public health emergency, instead of an individual problem?
- What have countries done to combat the obesity epidemic?
- What is the economic and social impacts of these measures?
- What new measures can be implemented to combat this crisis?
- What are the economic impacts of overregulation of the fast food sector?
- Is it better for the government to take a strong regulatory stance or should it look more towards cooperation with fast food companies to curb obesity?

# 5. IMPORTANT INFORMATION ABOUT THE COUNTRIES

## 5.1 UNITED STATES OF AMERICA

The United States is currently facing one of the biggest obesity crises in the world. Fast food culture like McDonald's, oversized portions, stressful routines, and limited access to affordable healthy food have caused obesity rates to increase dramatically among adults and children. This has placed huge pressure on the healthcare system, increasing cases of diabetes, heart disease, cancer and other chronic illnesses. In response, the country has invested in awareness campaigns, nutrition education, fitness initiatives, and new obesity medications like GLP-1 treatments, and misuse of them. However, healthcare in the United States is not free or universal, which means that many people cannot afford proper obesity treatment, healthier food options, or long-term medical support, especially in lower-income communities. The influence of corporate lobbyism is another big factor that has hindered the combat of obesity in the US, as companies like McDonalds have gathered influence over politicians and used it to reduce the effectiveness of regulatory measures. Still, some argue this pro-market approach is better for the economy and for the freedom of companies and consumers.

<https://news.harvard.edu/gazette/story/2025/10/researchers-report-astounding-obesity-surge-in-u-s/>

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<https://sqonline.ucsd.edu/2013/01/fast-food-and-obesity/>

## 5.2 UNITED MEXICAN STATES

In Mexico, obesity has become a national public health emergency. The widespread consumption of sugary drinks and ultra-processed foods, together with poverty and limited access to healthier alternatives, has affected millions of Mexicans. The healthcare system struggles with the rising numbers of diabetes and cardiovascular disease patients. To address the crisis, the government has introduced taxes on sugary beverages, warning labels on unhealthy products, and nutrition programs in schools, showing a strong regulatory stance against the fast food industry. Even so, economic inequality continues to make prevention difficult for many families.

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### 5.3 FEDERATIVE REPUBLIC OF BRAZIL

Brazil has seen obesity rates increase quickly over the past decades due to urbanization, sedentary lifestyles, and the growing consumption of processed foods. Today, more than half of the population is overweight, creating serious challenges for the public healthcare system (SUS). The government has expanded educational campaigns, school meal programs, and community health initiatives to encourage healthier habits. Still, social inequality and limited access to nutritious food in poorer regions remain one of the major barriers to long-term prevention. Brazil is a country that has taken a strong stance against obesity.

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<https://www.worldobesity.org/news/almost-half-of-brazilian-adults-will-be-living-with-obesity-within-20-years>

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<https://www.sciencedirect.com/science/article/abs/pii/S0033350624004177>

### 5.4 KINGDOM OF SAUDI ARABIA

Saudi Arabia has experienced a sharp rise in obesity as modern lifestyles became more sedentary and diets increasingly dependent on fast food and high-calorie meals. Saudi Arabia is considered the fourth fattest country in the world. The country also faces some of the world's highest rates of diabetes linked to obesity. In recent years, the Saudi government has launched national campaigns promoting exercise and healthier eating habits. Despite these efforts, changing long-established lifestyle habits remains the biggest challenge.

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### 5.6 STATE OF JAPAN

Japan is considered a global example of successful obesity prevention. On the top of the list of the fittest countries, Japan traditional diets rich in fish, rice, and vegetables, combined with smaller portions and active daily routines, help maintain low obesity rates. The government also supports prevention through regular nutrition education programs. However, younger generations are increasingly influenced by the fast food culture, creating concerns about future obesity growth. Japan's focus on prevention rather than treatment is often praised internationally.

-<https://globalnutritionreport.org/resources/nutrition-profiles/asia/eastern-asia/japan/>

-<https://pmc.ncbi.nlm.nih.gov/articles/PMC12613101/>

-<https://time.com/6974579/japan-food-culture-low-obesity/>

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-[https://www.nibn.go.jp/eiken/kenkounippon21/download\\_files/other/document\\_en\\_02.pdf](https://www.nibn.go.jp/eiken/kenkounippon21/download_files/other/document_en_02.pdf)

## 5.7 REPUBLIC OF KOREA

Also in a high position on the fittest countries list, South Korea is often seen as a relatively thin country, however, obesity rates have been rising steadily, especially among men and younger generations. Stressful academic and work environments, lack of sleep, and Westernized eating habits contribute to the problem. At the same time, strong social pressure regarding appearance has increased interest in weight-loss medications and dieting culture. The government promotes prevention through fitness campaigns, nutrition education, and regular health monitoring, while also trying to address the mental health impact of unrealistic beauty standards.

<https://www.cnnbrasil.com.br/internacional/coreia-do-sul-condena-homem-por-comer-compulsivamente-para-evitar-o-servico-militar/>

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<https://www.pharmexec.com/view/dxvx-oral-glp-1-treatment>

## 5.8 FRENCH REPUBLIC

France is usually associated with balanced meals and strong food culture, but obesity has still become a growing issue in the country. Nearly one in two French adults is now overweight or obese. Researchers explain that this problem is deeply connected to social inequality, since healthier lifestyles are often easier for wealthier populations to maintain. Because of this, France has focused strongly on prevention campaigns, food education, and public health programs that encourage healthier habits from an early age. France has been a frontrunner in the regulation of fast foods, supporting EU initiatives to tax and regulate fast food products.

[https://knowledge4policy.ec.europa.eu/health-promotion-knowledge-gateway/sugars-sweeteners-10\\_en](https://knowledge4policy.ec.europa.eu/health-promotion-knowledge-gateway/sugars-sweeteners-10_en)

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## 5.9 FEDERAL REPUBLIC OF GERMANY

Sedentary lifestyles, processed food consumption, and aging populations are major contributing factors for the high rates of obesity in Germany. Obesity has become a serious public health concern due to its connection to chronic illnesses and rising healthcare costs. The German government promotes healthier lifestyles through public campaigns, nutritional programs, and support for physical activity, but experts warn that prevention policies need to become even stronger in the coming years.

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## 5.10 DOMINION OF CANADA

In Canada, obesity rates have increased constantly over the years, and today a large part of its population is overweight or obese. During the period from 2022 to 2024, more than two-thirds (68%) of Canadian adults aged 18 to 79 had a body mass index (BMI) classified as overweight or obese. Specialists say the issue is connected to modern lifestyles, expensive healthy food, urban routines, and reduced physical activity. Moreover Canadians are also becoming concerned about the long-term effects of obesity, especially because it increases the risk of diseases such as diabetes and heart problems. Canada prefers cooperation with the fast-food industry than direct regulation, taking a more pro-market stance

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<https://www.scilit.com/publications/f4349ecd31f5439ed0292fe088063b26>

## 5.11 ITALIAN REPUBLIC

Italy is famous for pasta, olive oil, fresh ingredients, pizza and the Mediterranean diet, but obesity has still increased over the years, especially among children. Many Italian experts say that modern lifestyles and the growing presence of fast food are slowly replacing traditional eating habits. In 2025, Italy officially recognized obesity as a chronic disease, which was seen as an important step as it treats obesity as a real medical issue that many countries do not address instead of simply blaming individuals for their weight.

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<https://data.worldobesity.org/country/italy-102/actions.pdf>

## 5.12 KINGDOM OF SPAIN

Spain has seen obesity become a growing concern, especially among children and teenagers. Even though the country is known for the Mediterranean diet and healthier eating traditions, modern routines have changed people's lifestyles a lot. Fast food, processed snacks, and less physical activity are becoming more common, particularly among younger generations. Because of that, Spain has invested in school nutrition programs and national campaigns that encourage healthy habits to prevent the increase of obesity and life problems.

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## 5.11 ITALIAN REPUBLIC

Italy is famous for pasta, olive oil, fresh ingredients, pizza and the Mediterranean diet, but obesity has still increased over the years, especially among children. Many Italian experts say that modern lifestyles and the growing presence of fast food are slowly replacing traditional eating habits. In 2025, Italy officially recognized obesity as a chronic disease, which was seen as an important step as it treats obesity as a real medical issue that many countries do not address instead of simply blaming individuals for their weight.

<https://easo.org/italy-approves-the-first-law-recognizing-obesity-as-a-chronic-disease/>

<https://pmc.ncbi.nlm.nih.gov/articles/PMC12195482/>

<https://iris.who.int/server/api/core/bitstreams/e6d57e92-5b73-4de7-9358-68b88a5abb62/content>

<https://data.worldobesity.org/country/italy-102/actions.pdf>

## 5.12 KINGDOM OF SPAIN

Spain has seen obesity become a growing concern, especially among children and teenagers. Even though the country is known for the Mediterranean diet and healthier eating traditions, modern routines have changed people's lifestyles a lot. Fast food, processed snacks, and less physical activity are becoming more common, particularly among younger generations. Because of that, Spain has invested in school nutrition programs and national campaigns that encourage healthy habits to prevent the increase of obesity and life problems.

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(05\)66369-6/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(05)66369-6/fulltext)

<https://pubmed.ncbi.nlm.nih.gov/17903329/>

<https://www.cambridge.org/core/journals/british-journal-of-nutrition/article/spanish-strategy-for-nutrition-physical-activity-and-the-prevention-of-obesity/A46630F48E97B2AFA872A596B56120F5>

[https://academic.oup.com/nutritionreviews/article-abstract/67/suppl\\_1/S83/1873829?login=false](https://academic.oup.com/nutritionreviews/article-abstract/67/suppl_1/S83/1873829?login=false)

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<https://onlinelibrary.wiley.com/doi/abs/10.1111/j.1467-789X.2011.00863.x>

[https://www.thelancet.com/journals/landia/article/PIIS2213-8587\(21\)00045-0/abstract](https://www.thelancet.com/journals/landia/article/PIIS2213-8587(21)00045-0/abstract)

<https://link.springer.com/article/10.1186/s12889-023-15890-7> <https://pmc.ncbi.nlm.nih.gov/articles/PMC11724133/>

## 5.16 REPUBLIC OF INDIA

India faces a unique and huge challenge. While parts of the population still suffer from malnutrition, obesity rates are growing quickly, especially in big cities and among the new generations. Fast food, reduced physical activity, and changing lifestyles linked to economic growth have increased obesity rates significantly. As a result, diseases like diabetes and heart disease are becoming more common. Public health campaigns focus on education, healthier school meals, and encouraging exercise, but social inequality and unequal healthcare access make prevention more difficult across the country.

-<https://edition.cnn.com/interactive/2017/10/health/i-on-india-childhood-obesity/>

-<https://data.worldobesity.org/country/india-95/>

-<https://timesofindia.indiatimes.com/india/young-overweight-at-risk-indias-silent-health-emergency/articleshow/130351981.cms>

-<https://pmc.ncbi.nlm.nih.gov/articles/PMC8455012/>

-<https://www.apollohospitals.com/health-library/how-obesity-in-india-is-the-rising-cause-of-the-art-diseases>

