

Implementing National Obesity Policies and Action Plans in Europe

EVENT REPORT

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#EOD2017

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AN EASO POLICY CONFERENCE

By 2030 it is estimated that more than 50% of Europeans will suffer from obesity. Each year, three million people die due to diseases caused or aggravated by obesity. The disease also puts a strain on budgets, with an estimated €70 billion a year in healthcare costs and lost productivity impacting coffers across EU countries. Yet, only a few Member States have managed to implement comprehensive strategies that cover all aspects of weight management.

These were among concerns that were voiced at the European Association for the Study of Obesity (EASO) Policy Conference on 'Implementing national obesity policies and action plans in Europe', held in Brussels on 10 May 2017.



The international conference, which took place in conjunction with European Obesity Day 2017, brought together participants from the European Institutions, Member State health authorities and leading public health organisations to discuss the need for more effective strategies on the national level to address the growing obesity epidemic. Participants agreed that such action plans need to include both prevention and treatment strategies and need to be inclusive for a broad range of stakeholders. Leading healthcare and obesity experts presented examples of best practices and provided ideas and inspiration for policymakers who have found effective strategies difficult to implement.

COUNTRIES SHOULD USE AN INCLUSIVE HEALTH-IN-ALL-POLICIES APPROACH

A common theme throughout the day was that comprehensive national strategies are much needed but should follow an inclusive 'health in all policies' approach in conjunction with action on the local level.

Leen Meulenbergs, representative to the EU for the World Health Organisation (WHO), pointed out that the European Food and Nutrition Action Plan calls for countries to act 'using a whole-of-government approach'. She said that health policy is intricately intertwined with other policy areas like transport, education and sports, so considering healthcare implications in all policy areas is key.

From the presentations it was clear that the Netherlands and Ireland are among the countries that follow such inclusive approaches.

Dr. Henk Reinen from the Department of Nutrition, Health Protection and Prevention at the Dutch Ministry of Health, said that in the Netherlands almost 3,000 community sports motivators exist across major cities, more than 1,000 schools are considered to be 'healthy schools', and cooperation among healthcare professionals and specialists is extensively promoted by insurance companies.

An important aspect of these strategies is co-creation and intersectional cooperation. **Prof. Jaap Seidell** from the Free University of Amsterdam told the audience that actions which produce benefits across sectors can lead to sustainable results. Co-creation requires common goals and sufficient knowledge across stakeholders in addition to a strong political commitment, he said. An example for strong political support is the Irish Obesity Action Plan, which was presented by **Prof. Ivan Perry** from the University College Cork.



Prof. Cecile Knai from the London School of Hygiene and Tropical Medicine however stressed that voluntary agreements involving industry players are not the most effective approach to meet public health objectives. She said that commitments are often narrow and vague, partners tend to commit to actions that they would have undertaken regardless and the reporting on their implementation tends to be poor.

PREVENTION AND TREATMENT APPROACHES NEED TO GO HAND-IN-HAND

The conference further provided an overview of concrete prevention and treatment strategies. **Prof. Maria Hassapidou** from the Alexander Technological Educational Institute of Thessaloniki highlighted that healthy food and nutrition must be accessible, affordable, and attractive. The gains made by switching to a healthy diet and nutritional support must be promoted throughout the patient's life, especially for vulnerable groups. Dietitians should play a crucial role in this process.

The Dutch 'Healthy Weight for the Young' (JOGG) programme illustrated how such ideas can be implemented at local level. **Lideke Middelbeek**, who works as a Senior Advisor for JOGG, explained how the programme supports municipalities on projects that promote the consumption of drinking water, or physical activities in cities. Political commitment, public-private partnerships, and consistent impact evaluation led to an increase in the number of young adults at a healthy weight in 75 Dutch municipalities.



Another option to reduce the demand and consumption of unhealthy food can be taxation methods. **Prof. Jørgen Deigaard Jensen** from the University of Copenhagen presented examples of tax instruments that can be suitable to provide incentives for a healthy lifestyle. However, he commented that schemes must be targeted and promote health prevention, rather than only increasing tax revenues.

A key component for tackling obesity that was mentioned by several speakers was the necessity to include treatment and care as part of all national strategies. It was also agreed that patient organisations should be included to a much greater extent in policy debates. These groups are crucial to assure patient support.

Case-studies from Switzerland, presented by **Prof. Nathalie Farpour-Lambert**, President-elect of EASO, illustrated how the increasing number of childhood obesity cases can be treated. She promotes a family-based behavioural approach. Led by an interdisciplinary team of specialists which is paid by health insurance companies, young adults in Switzerland can undergo a multi-component intervention.

Prof. Volkan Yumuk, Member of the EASO Executive Board, added that a policy focus on prevention fails those who are already obese and require life-long treatment. He said that managing obesity, not just preventing it, must be a priority, and that support for multidimensional therapies is essential. With its Collaborating Centres for Obesity Management, EASO can serve as a good example of how this functions in practice.

Marina Biglia, member of the Patient Council from EASO in Italy shared her patient perspective on the issue. She stressed that the solution she found best for herself, bariatric surgery, would not have been possible without the help of psychologists and nutritionists. Prevention, information and ultimately cures must all work together in order to halt the rising costs of obesity, she said.

RECOMMENDATIONS FOR ACTION ON EU- AND MEMBER STATE LEVEL

Prof. Harry Rutter, Public Health Physician at the London School of Hygiene and Tropical Medicine, emphasised just how big and complex the problem of obesity and its comorbidities is. Even in cases where firm evidence for the effectiveness of concrete measures is hard to provide, he said, it is time for policymakers to develop a vision of how they intend to tackle obesity in the long-term based on the facts they already have at hand.

"Our goal should not only be to halt the increasing trend of more people suffering from obesity, but rather to try to reverse it."

Birgitta Sacrédeus, Chairperson of the Interregional Group on Health and Wellbeing at the European Committee of the Regions stressed that politicians have to take a leading role in addressing the important matter of obesity. For example, improved infrastructure, like walking paths or bike lanes, can provide incentives for physical activity. Further guidelines for action against physical inactivity and unhealthy eating habits, as introduced by the Swedish National Board of Health and Welfare, need to be promoted.

From an EU perspective, many stressed that it is essential to share best practices among Member States. Several members of the audience also asked whether EU level guidelines can help. Some experts said that they see a lack of political will in their own countries and called upon the Commission to put some pressure on Member States.



Wojciech Kalamarz, Head of Unit for Health Determinants and Inequality at the European Commission's Directorate-General for Health and Food Safety, agreed that a multi-stakeholder and multi-layered approach to obesity is necessary. The EU strategy on nutrition and obesity, and the EU platform for action on diet, physical activity and health are good examples of the integrated approach that is needed and the support provided to Member States.

Summing up, **Prof. Yumuk** stressed that obesity needs to be recognised by the Member States as a chronic disease in order to remove treatment barriers and identify obesity early, which could save resources and increase long-term success.

Acknowledging obesity officially as a disease could open the doors to finding new solutions, like reimbursement of treatment or financing of obesity centres. Reversing the rise of obesity in Europe will not be a simple task and what the discussions showed is that a multi-stakeholder, multi-faceted and patient-centric approach is needed.

About EASO

Established in 1986, [EASO](#) is a federation of professional membership associations from 32 European countries. It is the voice of the European obesity community, representing scientists, health care practitioners, physicians, public health experts and patients. EASO is in official relations with the World Health Organisation (WHO) Regional Office for Europe and is a founding member of the EU Platform on Diet, Physical Activity and Health.

About European Obesity Day (EOD)

European Obesity Day (EOD) is an annual event celebrated every third Saturday in May. Led by the European Association for the Study of Obesity (EASO) it brings together healthcare, patient and political communities who are keen to raise awareness of obesity.

The aim of EOD is to increase knowledge and understanding of the need for action at both European and national levels to improve prevention, treatment and care of obesity. At the same time, it supports overweight and obese European citizens in making the necessary lifestyle changes to manage their weight and improve their overall health and quality of life.

Visit the EOD [website](#) to learn more about how you can get involved!