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WHO Ministerial Conference on Counteracting Obesity 2006

Joint NGO Statement on the European Charter on Counteracting Obesity

Our organisations, representing millions of European citizens from consumer, health and civil society commend WHO Europe for convening this Ministerial Conference on Counteracting Obesity. We support the range of essential actions identified and the development of a pan-European action plan. But we also wish to stress that there are some priority areas where governments must take immediate action.

Inadequate response

Obesity poses one of the most serious public health challenges that we face. Over the last few decades, rates of obesity have been escalating, shortening life expectancy and limiting quality-of-life. The dramatically rising rates of obesity in children are of particular concern. If this trend continues and effective preventative action does not become an immediate priority, the scale of premature death and disability from non-communicable diseases, including cardiovascular diseases and diabetes mellitus, is set to increase. Moreover, the consequences will cripple our health care systems, our economies and our society in general. Yet to date there has been a very limited and woefully inadequate response.

The need for concrete actions

The Ministerial Conference provides an opportunity for European Ministers and their governments to focus their attention on the concrete actions that are needed if we are to see a slowing down, and ultimately a reversal, of this potentially devastating trend across the region. To this end, our organisations support the sentiments and measures set out in the European Charter on Counteracting Obesity, although we do believe that it could go further in developing robust strategies which can make a real impact.

Environmental factors

We fully agree with the Charter position that the response to the obesity crisis should no longer rest solely upon the need for greater individual responsibility. We all have responsibility for what we eat and how active we are and can have some influence over our children. But individual responsibility alone cannot account for or address the problem that has led to half of European adults and one in five children already becoming overweight or obese. A multiplicity of social, economic and environmental factors have contributed to our poor quality diets and reduced physical activity levels. It is therefore at this level that action is needed if we are to see any change.

The issues identified in the European Charter are an important starting point. However, its success will be measured over the next few years as European governments face the challenge of making the steps identified a



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reality. Faced with competing and short-term economic pressures, it is vital that Ministers recognise that progress will only be made if actions are taken as a priority across all government departments. It is essential to look beyond the traditional government department boundaries and to consider how all policies can help to create an environment where healthy choices and healthy lifestyles become easier. While further research may help refine our understanding and response to this challenge, a range of measures has already been identified which need to be implemented with the urgency that this issue warrants.

Guiding principles

We therefore agree with the guiding principles for action:

- high level political leadership and whole government commitment;
- actions linked to overall strategies to address non-communicable diseases;
- government and society have a responsibility as well as individuals;
- action to be taken within the cultural context of each country;
- a partnership approach between all stakeholders in keeping with principles for avoiding and/or managing conflicts of interest;
- co-ordination across the Region;
- particular attention to be given to children and adolescents;
- support for lower socio-economic population groups to be a priority; and
- public health considerations to take priority when making economic policy, as well as within trade, agriculture, transport and urban planning policies.

Obesity must be tackled with a life cycle approach.

Translating principles into action

Actions are needed by all stakeholders at all levels - international, European, national, regional and local - in order to achieve sustainable change and counter-act the obesogenic environment which makes healthy choices difficult. There needs to be a mechanism for co-ordinating all relevant actors and actions. But these actions must be led and overseen by government to ensure they are implemented effectively.

As representatives of civil society, our organisations recognise the important contribution that we can make. We will continue to play a very active role, ensuring that this issue stays on the political agenda and translates into concrete and meaningful actions.

The private sector also has a critical role to play in creating a healthier environment. Delivering an effective response to the rising rates of obesity should be seen as a business opportunity rather than a threat.

Policy approaches

We fully support inter-sectoral collaboration at national and international levels, but we caution against over-reliance on public-private partnerships. These will not achieve change at the pace required and are likely to result in watered down measures if governments compromise on measures



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needed in order to maintain the private sector's engagement. Voluntary or self-regulatory approaches are often insufficient in restraining unacceptable practices and are most commonly adopted by the private sector under threat of government regulation. Such approaches may help to achieve change in some areas, such as reductions in fat, sugar and salt in products in response to consumer demand, but clear government targets and direction will be needed if such measures are to go far enough. It is also important that voluntary or self-regulatory approaches are not used to replace existing regulatory measures that are relevant to preventing obesity - for example, measures regulating the marketing of breastmilk substitutes.

Governments must take responsibility for tackling the obesity crisis. We agree with the Charter that legislative solutions are needed – for example, in relation to restrictions on the marketing of foods high in fat, sugar and salt to children. We strongly support the development of an international code to address this issue and to provide a framework for national and regional initiatives.

There is also a need to look at more fundamental structural policy approaches, including for example transport and planning policies that promote physical activity and agricultural policies.



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Priority areas where immediate action is needed

Overall, we agree with the package of essential preventive actions that is identified and support the development of a European action plan that governments will commit to implementing. Action must be comprehensive and multi-faceted, but we believe that there are some priority areas where governments must take immediate action:

Promoting healthy diets

- Regulation to restrict the marketing of foods high in fat, sugar and salt to children through advertising and other means. Action has to be comprehensive in order to deal with the vast array of promotional techniques that are now used to target young children and adolescents, often without parents' knowledge, including more traditional media such as television advertising and sponsorship, but also use of new media such as the internet, mobile phones and viral marketing.
- Regulation to establish a clear, simple nutrition labelling scheme on the front of food packages that enables consumers to easily interpret the fat, sugar and salt levels, for example through traffic light colour coding of nutrient levels, and which is based on verifiable consumer research. Such a scheme is needed in addition to comprehensive nutrition information on the back of pack.
- Establishing targets to reduce fat (including saturated and trans fats), sugar and salt levels across food products.
- Implementing standards within schools to ensure that children are able to have a healthy lunch and that other school food provisions are in line with healthy eating objectives. This includes, for



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example, the introduction of nutritional standards for school meals, for food sold in vending machines, promotion of basic food skills and a ban on commercial activities associated with unhealthy food products and brands.

- Scientific evidence proves that breastfeeding provides a potentially ideal opportunity for obesity prevention and may help in the development of taste receptors and appetite control. Removing obstacles to breast-feeding, for example, through the full implementation of the World Health Assembly's recommendations on the marketing of foods for infants and young children, including the WHO Global Strategy for Infant and Young Child Feeding, is a critically important and straightforward measure.
- Exploring how financial incentives and disincentives could be used to promote the access to and availability of healthier food choices. This includes reform of agriculture policy which subsidises and promotes the production of foods that contradict healthy eating advice over those that complement it.

Promoting physical activity

- Regulation to promote an increase in the number, duration and intensity of physical education classes/school hours in primary and secondary schools with school facilities made accessible outside lessons to improve extra-curricular activities for young people.
- Increased availability, accessibility and attractiveness of walking and cycling paths and routes in city environments to promote daily physical activity. For example, the provision of cycling and walking paths to schools and workplaces must be accompanied by measures that ensure the safety of these activities.
- Providing opportunities and facilities for appropriate support and active recreation for individuals and families should be increased. These should include sports halls, gyms, playing fields, parks and green spaces, playgrounds, footpaths, inner-city basketball hoops and open spaces. They must be designed and promoted so that they appeal to people from a wide range of backgrounds.

Leading by example

- Governments can also provide leadership by taking immediate action to ensure that all government and local government premises and facilities, and those that they fund and support, rapidly alter their criteria for food availability and provision within their premises and encourage physical activity. The immense influence governments can have in setting an example by adopting health-supporting approaches as responsible employers should not be underestimated. The private sector can also take a lead in sustaining healthy workplaces through the choice and availability of food sold within their premises and actions to encourage employees' physical activity - for example, by encouraging cycling and walking and discouraging car use.

Co-ordinating actions

- Ensuring the setting up of national coordinating mechanisms in order to implement a comprehensive national strategy/action plan promoting diet and physical activity. National strategies should involve collaboration between the health sector and other government sectors such as agriculture, education, urban planning and transportation, as well as local authorities.

Health service provision

- Extend education on obesity in medical schools and in courses for allied health professionals.
- Establish centres of excellence in obesity management in order to provide comprehensive programmes for the treatment of obesity derived from evidence-based medicine and to avoid potential health hazards of unproven treatment approaches.

Monitoring success

Monitoring progress will be essential and we support the adoption of a target to reverse the trend by 2015 at the latest. We agree that visible progress can and must be seen in the next four to five years. Intermediate targets are also needed for the implementation of the priority measures identified above. As NGOs we will have an important role to play as watchdogs, monitoring progress, highlighting best practice and raising unexpected and unintended outcomes of proposed strategies.

We hope that the convening of this Conference will be a defining moment and a turning point at which seriously tackling the obesity epidemic becomes a major priority across the region. Obesity is preventable if we want it to be.

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