Policies to prevent

obesity-related chronic diseases



Supported by:



3 September 2015 (14:30-16:00) Residence Palace, 155, Rue de la Loi, Brussels

Side-session at the European Public Health Alliance Annual Conference, 2015

- Awareness of obesity as key risk factor for chronic diseases
- Exploring how chronic disease prevention policies can address obesity (including preventive, management and treatment interventions)
- Overcoming the stigma attached to obesity

14:30 - 16:00	A distinguished panel, moderated by João Nabais, President of the International Diabetes Federation, European Region
	Introduction by Valeria Fagone Director Government Affairs, Europe Medtronic
	Michele Cecchini Health Economist and Policy Analyst OECD Health Division
	David Ritchie Senior Cancer Control Officer Association of European Cancer Leagues
	Vicky Mooney Patient perspective European Association for the Study of Obesity Patient Council
	Prof. André Scheen Head of Diabetes, Nutrition and Metabolic Disorders University of Liège Hospital Centre
16:00	Coffee, opportunity for further discussion

Please register to this session by following the <u>registration link</u>.

Note to the debate

Over half the European adult population is now overweight or obese. Obesity rates have doubled or tripled in many countries since the 1980s with lifestyles being the main drivers of change. Primary prevention policies are therefore consistently identified as the most cost-effective long-term population strategies to prevent obesity and associated harm.

At the same time, many people across Europe are currently obese and **face increased risks of associated chronic diseases** like type-2 diabetes, heart disease, and several kinds of cancer. Around 7% of EU health budgets are spent on obesity-related diseases each year.

People facing obesity should have **access to appropriate**, **multi-disciplinary care** and treatment to help manage and reduce their long-term health risks and improve quality of life.

This session aims to build awareness of obesity as risk factor for a wide range of chronic diseases, stimulate debate about how chronic disease prevention policies can and should address obesity (including prevention, management and treatment), and discuss how stigmas attached to obesity can be overcome. All this without losing sight of socio-economic inequalities, as people from disadvantaged groups are disproportionally more likely to be obese and face obstacles in access to healthcare.

While obesity is high on the policy agenda, a recent survey by the European Association for the Study of Obesity (Obesity – Perception and Policy, 2014) revealed **considerable** gaps in knowledge on obesity among many policy-makers.