



Science and Technology in
childhood Obesity Policy

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What next for European action on childhood obesity? Key reflections from an expert debate

Obesity is a [major health problem](#) in the European Union (EU), with dire long-term consequences for health, society, and economy. On average, [nearly 30%](#) of 7 to 9-year-olds in Europe are overweight or obese. Current trends indicate [there may be](#) over 10 million children in the wider European region affected by obesity by 2030. A systematic halting and reversing of childhood obesity is not in sight.

At the same time, the EU policy space now presents ample opportunities to tackle current obesity trends. The flagship [Europe's Beating Cancer Plan](#) explicitly recognises obesity as a risk factor for cancer. The plan furthermore commits to evaluate and follow-up on the [EU Action Plan on Childhood Obesity](#), which expired in 2020.

On 12 October 2021, a [debate was held](#) in the framework of the Science and Technology in childhood Obesity Policy ([STOP](#)) project.ⁱ The project seeks to come with lasting, evidence-based solutions to tackling childhood obesity.

The event gathered key experts to reflect on and provide input into how a next European action plan to tackle childhood obesity should look like. The main outcomes of this conversation are presented below for the interest of key stakeholders in the future of European obesity policy.

Speakers :

- **Sara Cerdas**, Member of European Parliament, Co-chair of the Health Working Group
- **Franco Sassi**, Imperial College London, STOP project Consortium Lead
- **Kremlin Wickramasinghe**, World Health Organization Regional Office for Europe (WHO)
- **Jacqueline Bowman-Busato**, European Association for the Study of Obesity (EASO)

The conversation was moderated by **Milka Sokolović**, Director General, European Public Health Alliance (EPHA)

All speakers agreed on the importance of European political leadership for leveraging effective strategies and policies to tackle childhood obesity. The swift introduction of a new action plan on childhood obesity would be one important achievement. The European Commission [has indicated](#) it will evaluate the expired action plan throughout 2022-2023 and will propose follow-up actions in 2024. An analysis supporting the [mid-term evaluation](#) of the action plan was published in 2018.



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1. There are multiple opportunities today to address childhood obesity, but policy coherence and integration is required

Today's European policy framework provides multiple entry points for action on childhood obesity, ranging from the [Farm to Fork Strategy](#) to the [European Child Guarantee](#). The main opportunity however is provided by [Europe's Beating Cancer Plan](#) which commits to evaluate the [EU Action Plan on Childhood Obesity \(2014-2020\)](#) and introduce follow-up actions.

These policy strategies, if consistently implemented with tackling obesity in mind, could allow for a much-needed, comprehensive 'health in all policies' approach to obesity prevention. Such an approach should integrate key areas of interest, such as food environments, school environments and physical activity. For instance, an EU-wide front-of-pack labelling scheme can support people in making healthier food choices. The European Child Guarantee can help address social inequalities in access to good food. The HealthyLifeStyle4All campaign can help promote physical activity in the framework of wider school policies.

The [EU4HealthProgramme](#), the EU's overarching financing mechanism for health action, could also help support a multi-component and consistent approach to tackling obesity. However, concern was raised that much of the funding under this programme is being dedicated to other actions, including the European Health Emergency preparedness and Response Authority (HERA), leaving few resources for health promotion and the prevention of non-communicable diseases (NCDs). The need for a more robust and strategic approach to funding allocation was suggested.

2. New evidence calls for stronger policy responses

The evidence base on obesity has dramatically expanded since 2014, when the now-expired EU Action Plan on Childhood Obesity was published. This evidence provides strong indications about the direction into which follow-up actions should develop.

Overall, attention has shifted to the central role of contextual factors, or 'environments', both in terms of driving the problem of obesity, but also in providing potential solutions. This especially also in view of the social gradient associated with obesity, which is best addressed through population-level policies.

Several policies for which the evidence-base has expanded over the last several years were discussed.

- **Regulations on the marketing of foods high in fat, sugar, and salt (HFSS)**

There is a large body of evidence showing that marketing influences what children eat and drink, ultimately with repercussions for their health and well-being. While there is less evidence about the effects of marketing regulations, this is primarily due to a lack of comprehensive government legislation in this area. Industry pledges and commitments, which have been proven to be ineffective, are likely to have pre-empted large-scale government action.

Policy making in this sphere is challenging given rapidly evolving marketing strategies. Despite this, marketing is a very promising area in need of a step change in policy development and implementation.



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- **Fiscal policies**

Taxes on sugar sweetened beverages, or soft drinks, have now been widely adopted in different countries around the world and have shown clear success in reducing the consumption of targeted beverages, while often also increasing reformulation rates.

However, evidence of their impact on dietary quality more widely is rather limited and mixed. This implies that taxation policies need to be broadened to other product categories as well, such as confectionary, to have a real impact on children's diet.

- **School-based programmes**

There is good evidence that school-based interventions have positive effects on children's health behaviour, especially when nutrition and physical activity interventions are combined. Public food procurement policies also have great potential to complement these interventions and help create healthy environments in schools, where children spend most of their days.

There is less certainty, however, about the sustained effects of these interventions after children leave school. At the same time, there is clear value in reducing obesity while children are at school, which acts as an important argument for the scaling-up of such programmes.

- **Front-of-pack nutrition labelling**

There is good evidence that front-of-pack nutrition labels impact food choice. The effects observed to date are, however, relatively small. This is primarily due to a patchy application of such labels. Using front-of-pack labels uniformly across products and making them mandatory would be a major step forward in increasing the positive impact of labelling.

The introduction of a common European front-of-pack labelling scheme would ensure a systematic application of such labels and could also act as a basis for the convergence of policy incentives to improve the healthfulness of food environments. This, for instance, when a nutrient profile model is used that would allow to set common nutritional standards and criteria across different policies.

- **Improve health-literacy**

Regulatory approaches are necessary to tackle childhood obesity and should be complemented by information and education measures. Improving individuals' health literacy will help citizens better understand the causes of obesity and how they can address them at their own level, while also increasing acceptability of regulatory interventions.

The STOP project and the World Health Organization (WHO) have contributed to this expanded evidence base and are helping to further deepen knowledge on the causes of obesity and the effectiveness of policies and interventions to tackle it.

In March 2022, the WHO will publish a report presenting the latest statistics on obesity in different age groups. This report will also feature an outline of the gaps in existing public health policies and several recommendations for improving them. It will also help reflect on ways to protect public health policies from vested interests.





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3. Political leadership is crucial, as is leveraging cooperation and coordination between European and national levels

Tackling obesity requires strong political leadership. The European Commission has an important role to play in supporting, aligning, and guiding activities of EU countries in the implementation of obesity policies. This includes proposals for European legislation where needed. Supporting cooperation, such as through the [Joint Action Best-ReMaP](#), was also considered useful.

Likewise, better coordination and collaboration between the WHO and the European Commission is desirable. Given that both institutions ultimately rely on national governments as their core constituents, increased determination, and demand from national levels to address the root causes of childhood obesity would provide an impactful incentive to enhance action and alignment.

4. Tackling childhood obesity requires a life course approach

Obesity is now [described](#) as a chronic relapsing disease by the European Commission. Substantial evidence shows that obesity [worsens the effects](#) of COVID-19. This makes tackling obesity into an urgent public health issue in and of itself, and not only because obesity acts as a gateway to other NCDs. A European strategy on obesity is therefore needed that addresses the entire disease pathway. Such a strategy could, for instance, build on approaches like those on cancer or diabetes.

While the previous childhood obesity action plan focused on primary prevention during childhood, follow-up steps should include reference to the biological dimensions of obesity and include focus on other critical stages of life. There is now good evidence that childhood obesity is not always determined by factors arising during early childhood or adolescence only. Childhood obesity can also be influenced by exposures during preconception and pregnancy. In turn, overweight and obesity during childhood can persist into adulthood. Obesity can therefore manifest as a cross-generational issue. Tackling childhood obesity thus requires a life course approach.

ⁱ Led by Imperial College London and part of the Horizon 2020 programme, the Science and Technology in childhood Obesity Policy (STOP) is a four-year project which brings together 31 international research, advocacy, and governmental organisations from 16 countries to generate scientifically sound and policy-relevant evidence on the factors that have contributed to the spread of childhood obesity in European countries, and on the effects of alternative policy options available to address them. The project engages international partners from different policy-contexts in the United Kingdom, Italy, Estonia, Romania, Portugal, France, Belgium, Slovenia, Sweden, Croatia, Spain, Finland, Switzerland, with additional partners in New Zealand and the USA.



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