



Obesity in Europe

A joint paper from the Irish Medical Organisation and the British Medical Association Northern Ireland





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Summary

The British Medical Association Northern Ireland (BMA(NI)) and the Irish Medical Organisation (IMO) recognise that obesity levels are increasing throughout the European Union (EU).

The IMO and BMA(NI) acknowledge that, while public health is specified in Article 152 of the EU Treaty, the power in this sector remains in the hands of the Member States.

However, both organisations urge their respective governments, the leaders of the EU and other Member States to continue to work together to reduce obesity levels and address the long-term implications of obesity through the formulation and implementation of coordinated policies and strategies.

Both the BMA(NI) and the IMO call for EU Commissioners for Health to lead the way in establishing public health policy that is fit for purpose and based on the common values and principles that underpin all EU healthcare systems.

In particular, the organisations are jointly calling for measures to:

- Educate, to increase understanding of what constitutes a balanced diet
- Improve nutrition, through better access to healthier food
- Encourage exercise and activity amongst adults and children
- Stop advertising unhealthy foodstuffs targeted at children

Background

The Irish Medical Organisation and the British Medical Association Northern Ireland represent the medical profession throughout the island of Ireland. The IMO represents around 80% of medical practitioners in the Republic of Ireland and the BMA(NI) represents around 70% of medical practitioners in Northern Ireland.

Members of both organisations, as providers of front line care to patients, have a keen interest in changes to healthcare delivery which will impact positively on patients.

The obesity challenge

It has been widely reported that poor diet and lack of physical activity are the leading causes of avoidable illness and premature death in Europe, and that the rising prevalence of obesity across Europe is a major public health concern¹.

In most EU member states, more than half of the adult population is overweight or obese. It is also estimated that almost 30% (around 22 million) of children are overweight in the EU and each year this figure is growing by 400,000. Obesity accounts for six of the seven leading risk factors for ill health in Europe. The combination of increasing calorie intake coupled with a more sedentary lifestyle and decreasing levels of physical activity are at the root of the problem².

Green Paper "Promoting healthy diets and physical activity: a European dimension for the prevention of overweight, obesity and chronic diseases". Brussels 08.12.2005 COM(2005) 638 final

² EU Platform on Diet, Physical Activity and Health. 2009 Annual Report. April 2009





	Measured BMI Northern Ireland⁵ 2005/2006	Measured BMI Republic of Ireland ⁶ 2007
Overweight men	39%	45%
Obese men	25%	24%
Overweight women	30%	33%
Obese women	23%	26%

This rise in obesity has been noted throughout the island of Ireland. In Northern Ireland, 59% of adults and 26% of children are overweight or obese³. In the Republic of Ireland, it has been indicated that 39% of the adult population are overweight and 25% are obese. North and South a higher percentage of men are overweight or obese than women⁴.

A North/South survey in 2001/2002, using criteria from the International Obesity Task Force (IOTF) found almost one in four boys (23%) and over one in four girls (28%) were either overweight or obese and about one in 20 boys (6%) and about one in 15 girls (7%) aged four to 16 years were obese.⁷

While individuals have responsibility for their own behaviour, the WHO suggests a wide range of environmental factors influence individual energy intake and expenditure and can be considered obesogenic. These include family practices, school policies and procedures, transport and urban planning policies, commercial marketing activities and policies on food supply and agriculture.⁸ It is also generally accepted that the main barriers to healthy food choices are their affordability and one's level of disposable income.

The increasing levels of obesity across Europe will impact on the use of healthcare resources due to the rise in obesity-related illnesses. At least three quarters of type 2 diabetes, a third of ischaemic heart disease, a half of hypertensive disease, a third of ischaemic strokes and about a quarter of osteoarthritis can be attributed to excess weight gain. Obesity is also associated with colon cancer, endometrial cancer and breast cancer and is a feature of many adults with mental health conditions particularly depressive and anxiety disorders.⁹

Tackling obesity

Members of the BMA (NI) and the IMO have recognised the growing problem and have identified key factors which need to be tackled in each jurisdiction:

Northern Ireland Statistics and Research Agency (2007) "Health and Social Wellbeing Survey 2005/06"

⁴ Morgan K, et al (2008), SLÁN 2007: Survey of Lifestyle, Attitudes & Nutrition in Ireland. Main Report. Dublin: Department of Health and Children

⁵ Northern Ireland Statistics and Research Agency (2007)

⁶ Morgan K, et al (2008)

See HSE 2008, Health Status of the Population of Ireland p48

⁸ WHO 2007, The Challenge Of Obesity In The WHO European Region And The Strategies For Response

⁹ WHO 2007, The Challenge Of Obesity





The IMO has called for:

- The immediate implementation of the findings of the National Taskforce on Obesity and
- That the primary schools' curriculum promotes physical activity to combat obesity and that the problem
 of school insurance inhibiting normal physical activity is tackled.

The IMO has also produced position papers on Obesity (2006) and Lifestyle and Chronic Disease (2008).

The BMA has a range of policies to tackle obesity, and has, for example, called for:

- A halt to the sale of assets such as school playgrounds and sports fields
- Health visitors to have mandatory training in the prevention, recognition and management of childhood obesity

BMA reports include "Growing up in Britain; ensuring a healthy future for our children" (BMA1999), "Adolescent Health" (BMA 2003), "Child and Adolescent mental Health" (BMA 2006), "Preventing Childhood Obesity" (BMA 2005) and "Early life nutrition and lifelong health" (BMA 2009).

Cross-border measures

Northern Ireland is the only part of the United Kingdom to share a land border with another EU Member State, namely the Republic of Ireland. Although Northern Ireland and the Republic of Ireland share many similarities in terms of health issues, there are clear differences between the two countries arising from different administrative structures, dissimilar legislation and different healthcare systems.

There is, however, scope for policy makers from both jurisdictions to work together to tackle obesity issues, through, consistency in approach and convergence of policies, guidelines and regulations.

Many policies of the BMA and the IMO overlap. Both organisations have joined forces and together are calling for a range of measures to tackle obesity North and South of the border:

Education to increase understanding of the problem of obesity and what constitutes a balanced diet and healthy lifestyle

- The implementation of a North-South parental education campaign;
- Dedicated classroom time spent teaching children about nutrition and healthy lifestyles both sides of the border;
- More extensive use of the media, including children's programming, to promote healthy lifestyle messages;

Measures to improve nutrition and encourage physical exercise in schools

- The introduction of common standards in both jurisdictions relating to nutrition, hydration and physical exercise in all school and pre-school facilities;
- The removal of vending machines selling unhealthy snacks and drinks in schools North and South of the border;
- Adequate and safe sporting facilities should be provided for children in all schools;





A halt to advertising unhealthy foodstuffs targeted at children

 A ban on advertising of unhealthy foods to children including TV advertising of processed foods before 9pm.

EU Opportunities

As outlined above, increasing obesity levels will increase expenditure on health and long-term care and this is likely to impact on the sustainability of healthcare systems. While a more rational use of resources will be essential in the delivery of long-term care, the IMO and the BMA(NI) believe that such rationalisation should not be at the expense of vulnerable members of our communities.

Coordinated public health measures are essential to effect change to reduce and indeed prevent obesity, thus lessening the impact on healthcare systems.

The EU is already leading the way to encourage joined-up approaches through, for example, the EU Platform on Diet, Physical Activity and Health.¹⁰ This Platform has secured commitments for action from stakeholders at European, national and local level. It recognises that the momentum of activities now needs to be sustained.

The IMO and BMA(NI) would urge policy makers and stakeholders in the United Kingdom and Ireland to recognise the work of the Platform and encourage them to play a leading role in the long-term activities of the Platform.

The EU Platform for Action on Diet, Physical Activity and Health was established in March 2005 as one of the responses to the rising prevalence of obesity and associated health changes across the EU

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