

Childhood obesity affects all layers of society

Written by Daciana Octavia Sârbu on 6 February 2017 in Opinion
Opinion

Simple, targeted interventions could have a huge impact on the fight to end the childhood obesity epidemic, writes Daciana Octavia Sârbu.



Daciana Octavia Sârbu | *Photo credit: European Parliament audiovisual*

The childhood obesity crisis and an ageing population are giving rise to an ever-growing chronic disease burden. Sedentary lifestyles and malnutrition is increasingly common with overweight and obese children becoming adults with early on-set health problems.

This affects their development, socio-economic activity and quality and length of life. Combined with an ageing population, the reality is that the younger generation is becoming less able to support the ageing generation above.

Children must be a target group for EU and national action. Not only are they increasingly overweight

and obese as children, but as tomorrow's adults they are more likely to suffer from cardiovascular disease and diabetes.

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Recognising this, the European Commission and member states agreed on a childhood obesity action plan, aiming to halt the rise in childhood obesity by 2020. Despite identifying major drivers of childhood obesity, the plan lacks detailed commitments to address them. A midterm review of this plan in March should indicate whether it will deliver on its laudable aims.

There are some targeted interventions at EU level which could help fight childhood obesity and chronic diseases. The current revision of the audiovisual media services directive provides a rare opportunity to re-think the rules on advertising of food and drinks, especially those high in fat, sugar and salt which represent a major dietary cause of non-communicable diseases.

Existing EU policy encourages self-regulation which, essentially, trusts the goodwill of the food industry to reduce advertising of unhealthy products to children. But independent analysis has confirmed the obvious flaws with this approach, highlighting the narrow definitions of key terms and the use of nutritional profiling which is not consistent with WHO standards.

It is clear that self-regulation has not prevented the advertising of unhealthy foods and drinks to child audiences. The main justification for self-regulation seems to be that it works better than nothing. True, self-regulation may be better than no regulation, but embracing it, just because it isn't the worst option, hardly seems like responsible policymaking.

The arguments that self-regulation produces the best results or that the obvious conflicts of interest aren't a problem simply don't stand up to scrutiny. EU policy should ensure - not merely aspire to - minimal advertising of foods high in fat, salt and sugar to children.

Continued promotion of these products to the young, many of whom already have sedentary lifestyles, seriously undermines efforts to tackle obesity, diabetes, and cardiovascular diseases.

A second important public health intervention could target more specific dietary causes of cardiovascular diseases. It is well-established that trans-fatty acids (TFAs - a type of fat found in beef, dairy products and partially hydrogenated oils), carry more risk of heart disease per calorie than any other nutrient.

The main risk is thought to come from processed foods where industrially produced TFAs can be present in much higher amounts. Given that the content of these foods can be modified, reducing industrial TFA intake through legal limits is a realistic option and should be given urgent consideration.

There is already evidence that doing this can have rapid, beneficial effects. Three years after Denmark introduced legal limits on industrial TFAs, a significant reduction in deaths from cardiovascular disease were recorded.

Extrapolated for the European population, this could amount to tens of thousands of lives saved per year, and perhaps many more improved by reducing the number of debilitating heart attacks.

It is not surprising then, that the European Commission indicated its support for limiting industrial TFAs back in 2015. Less clear is why it stopped short of making a legislative proposal at the time or why, one year on, there is still no sign of such a proposal.

In our recent resolution, the European Parliament called for legal limits on industrial TFAs to be proposed as soon as possible.

There has been ample time for public consultations and impact assessments, but the lack of urgency from the European Commission is palpable and the reasons for the delay unknown. I repeat my call for the Commission to propose the necessary legislation and for these effective, proven measures to be adopted without undue delay.

The impact of the childhood obesity epidemic is a major challenge for every level of society, from individuals and families to employers and governments.

While there are no easy answers or quick-fix solutions to this complex, long-term problem, I remain convinced that simple, targeted interventions can make a big difference and help reduce the immense personal, social and economic costs caused by chronic disease.

About the author

Daciana Octavia Sârbu is (S&D, RO) rapporteur on Parliament's resolution on trans fats (TFAs)

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