

COSI: l'obesità infantile in Europa e le strategie OMS per contrastare l'eccesso ponderale nei bambini

COSI: childhood obesity in Europe and the WHO strategies to combat excess weight in children

Dr João Breda

Head of the Office, WHO European Office for Prevention and Control of Noncommunicable Diseases

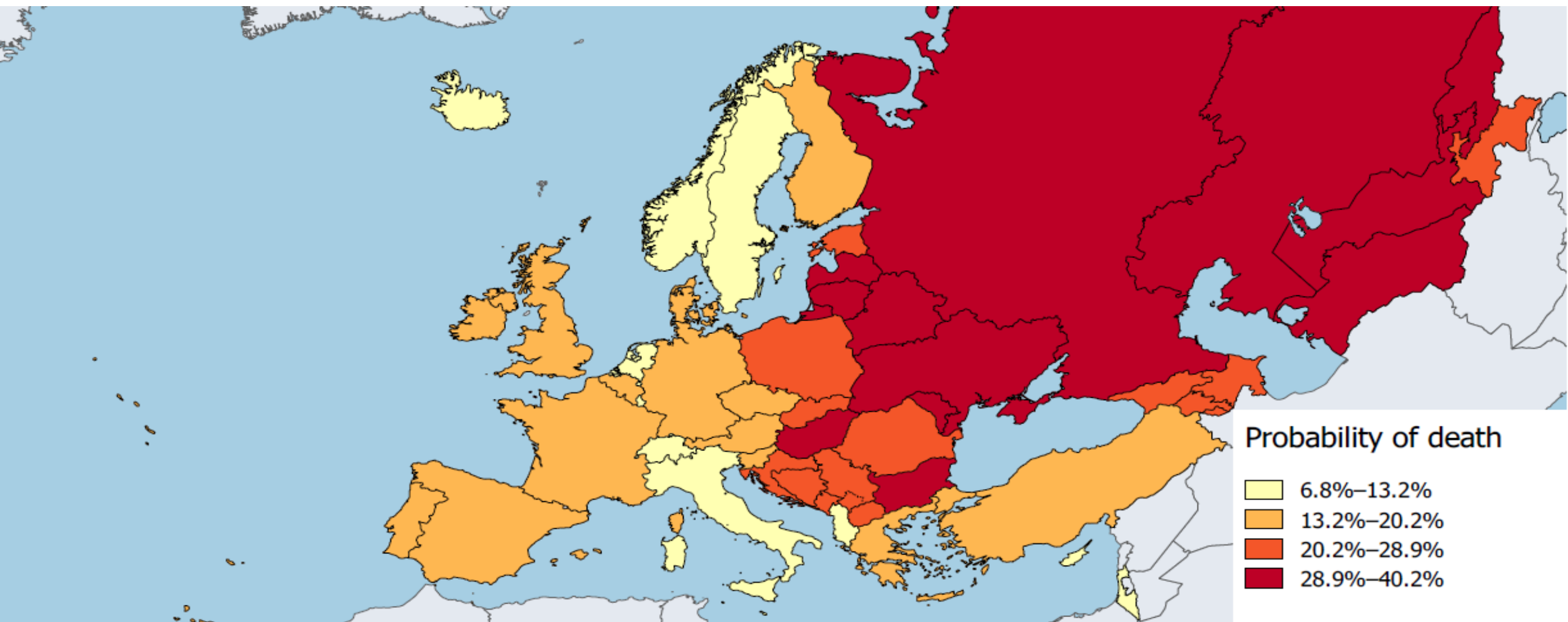
- STILI DI VITA E OBESITÀ NEI BAMBINI: I DATI ITALIANI DI OKKIO ALLA SALUTE E IL CONFRONTO CON L'EUROPA
- 10 November 2020

SUSTAINABLE DEVELOPMENT GOALS

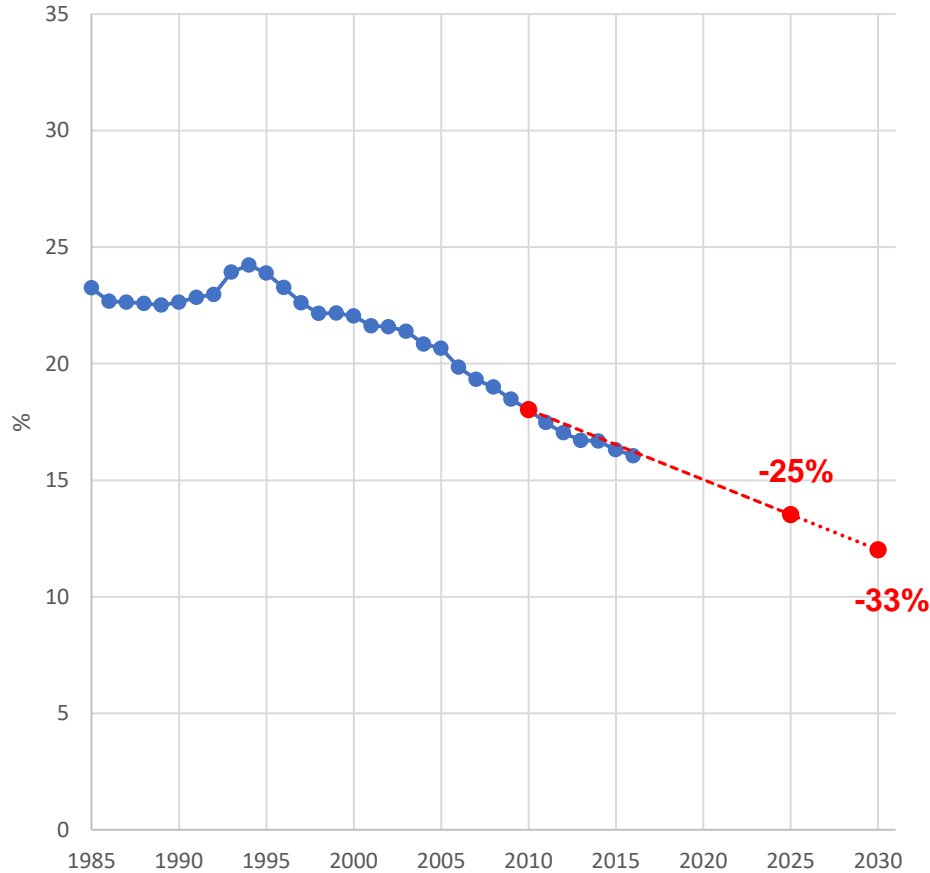


Health – Investment for Sustainable Development

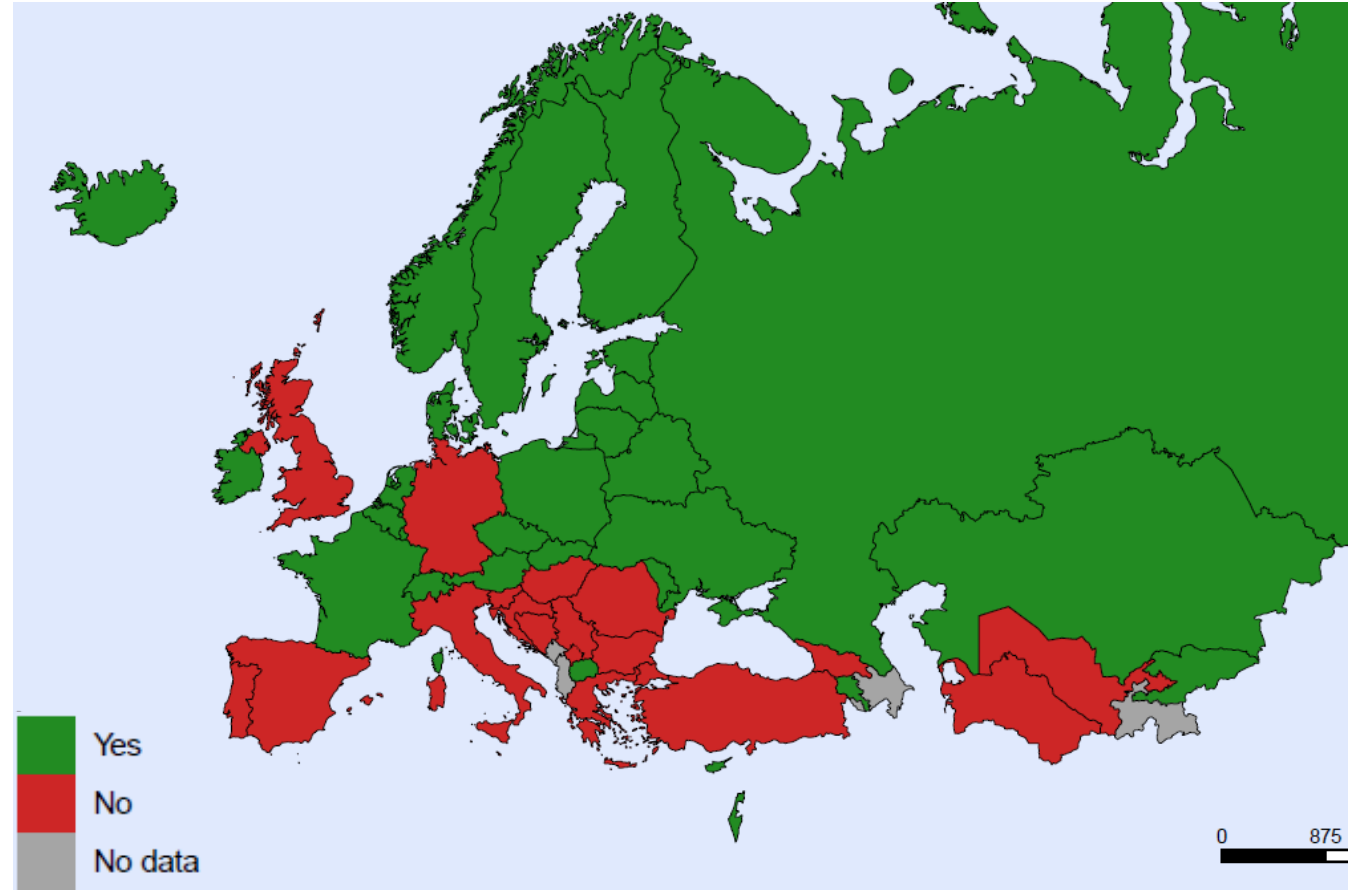
Premature mortality from the 4 main NCDs in Europe, males (SDG 3.4.1)



Probability of premature death from four major NCDs: 25% reduction 2025; 33% reduction 2030



Trend for the WHO European Region



28 countries on track as of 2020

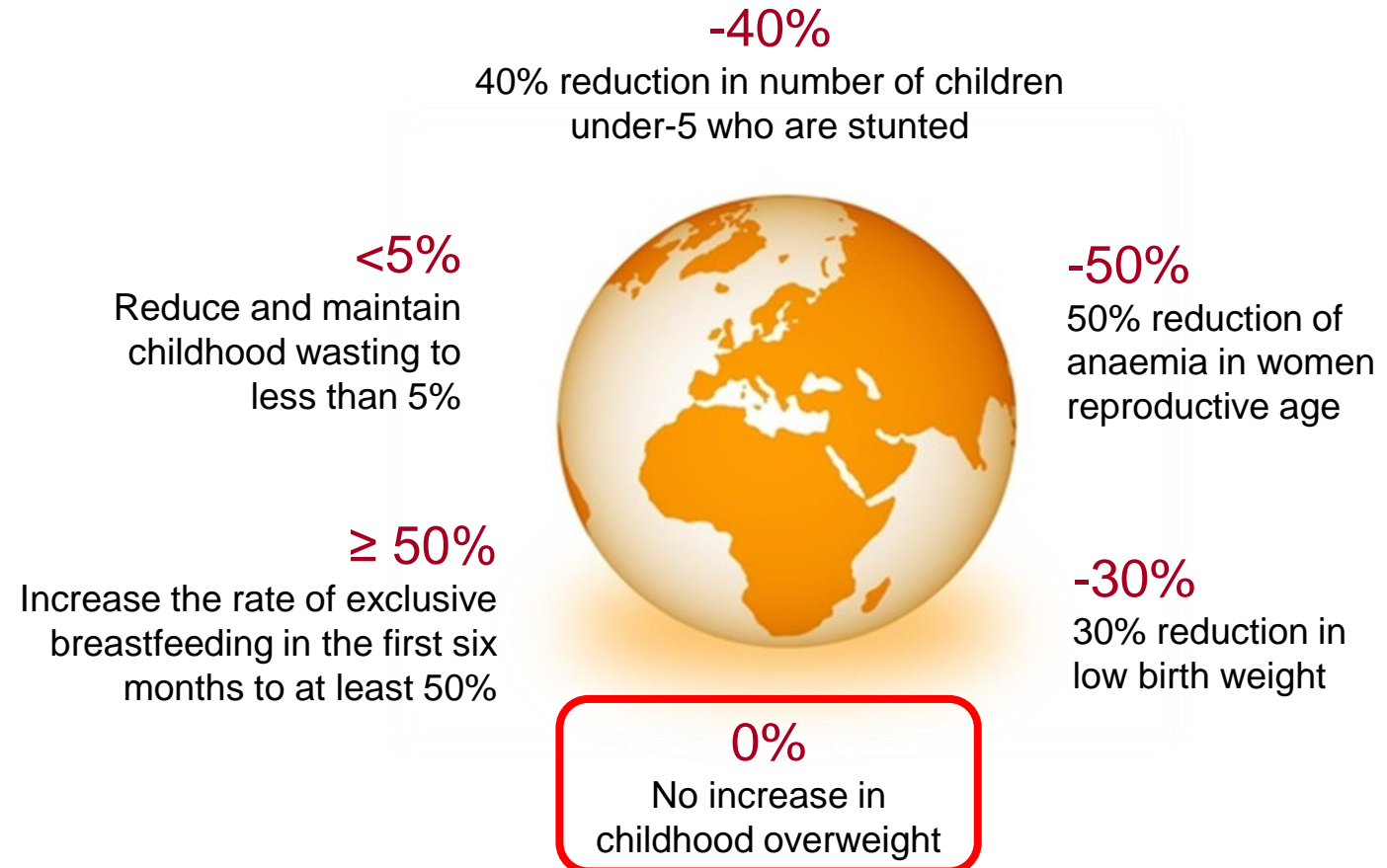
Global Monitoring Framework Scoreboard for Europe

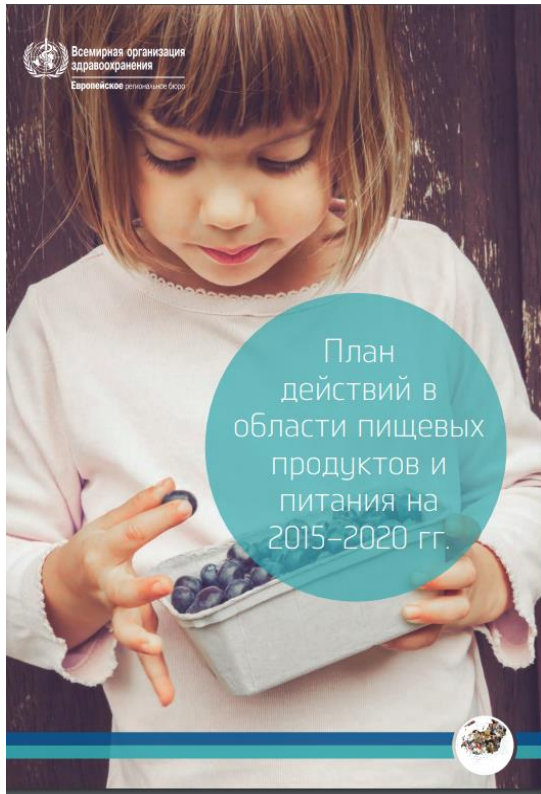
Much remains to be done in next decade



6 global targets for nutrition to be attained by 2025

WHO
Comprehensive
implementation plan
on maternal infant
and young child
nutrition 2012-2025





Create **healthy food and drink environments**

Promote the gains of a healthy diet **throughout life**, especially for the **most vulnerable**

Reinforce **health systems** to promote healthy diets

Support **surveillance, monitoring, evaluation and research**

Strengthen governance, alliances and networks to ensure a **health-in-all-policies approach**

Member States:

Ensure **data collection on BMI** – for –age of children- including for ages not currently Monitored – and **set national targets for childhood obesity.**

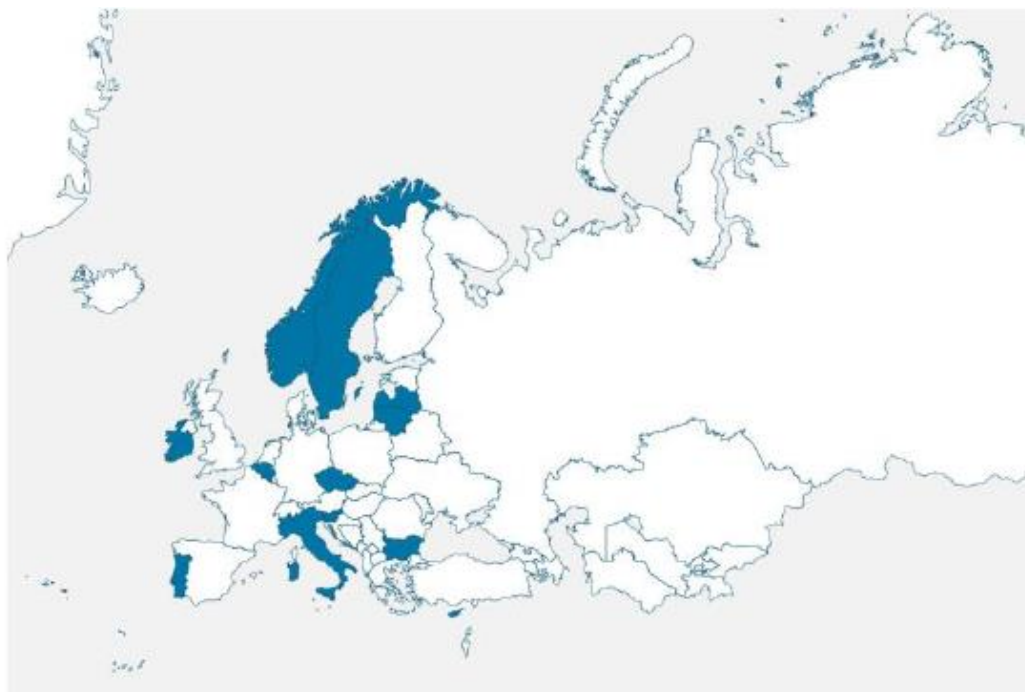
REPORT OF THE COMMISSION ON

ENDING CHILDHOOD OBESITY

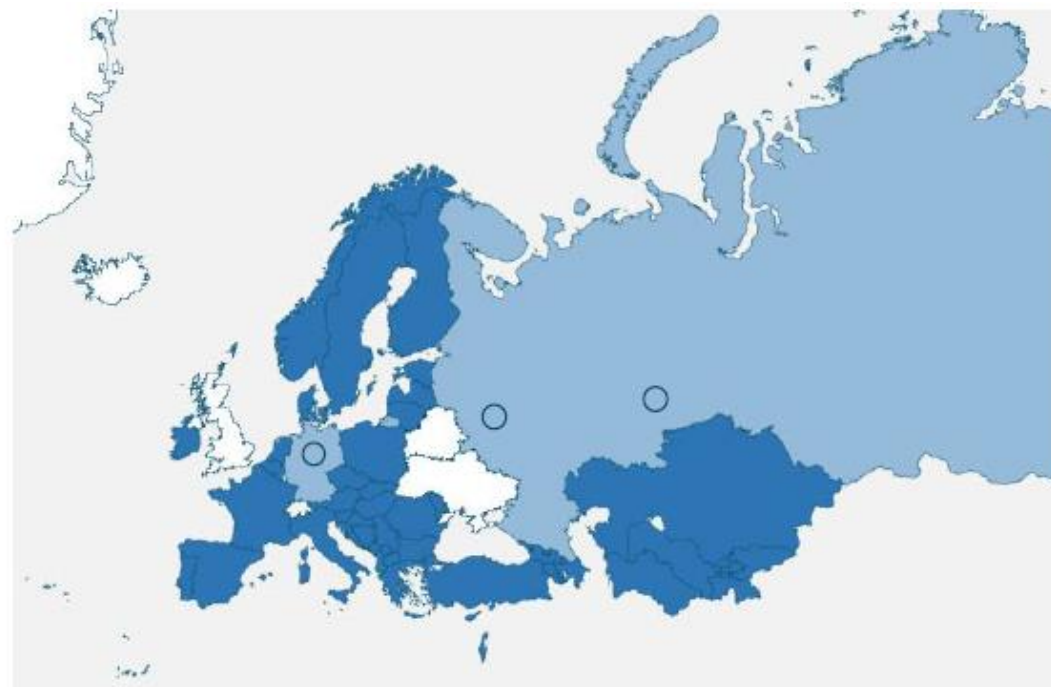


WHO/EUROPE Childhood Obesity Surveillance Initiative

COUNTRIES PARTICIPATING IN COSI



1st Round (2007/2008)



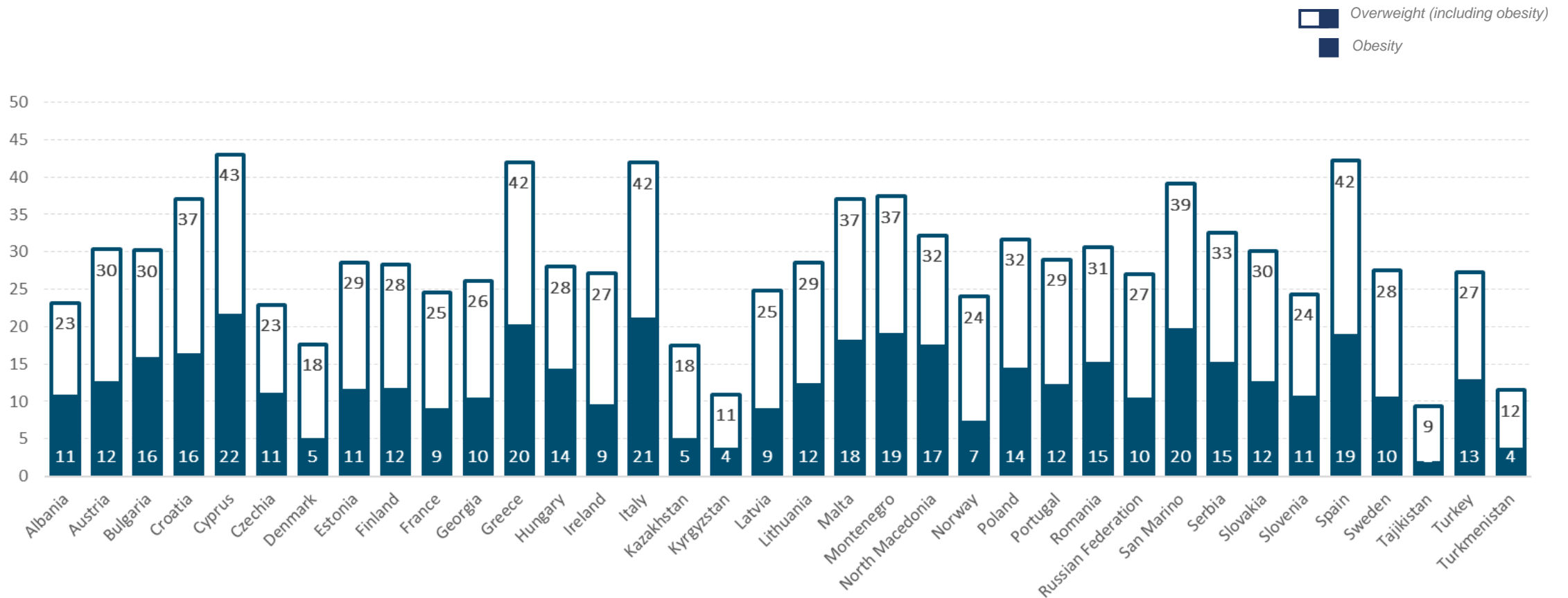
5th Round (2018/2020)

■ Countries that are part of COSI

■ Countries that participate in COSI with sub-national entities

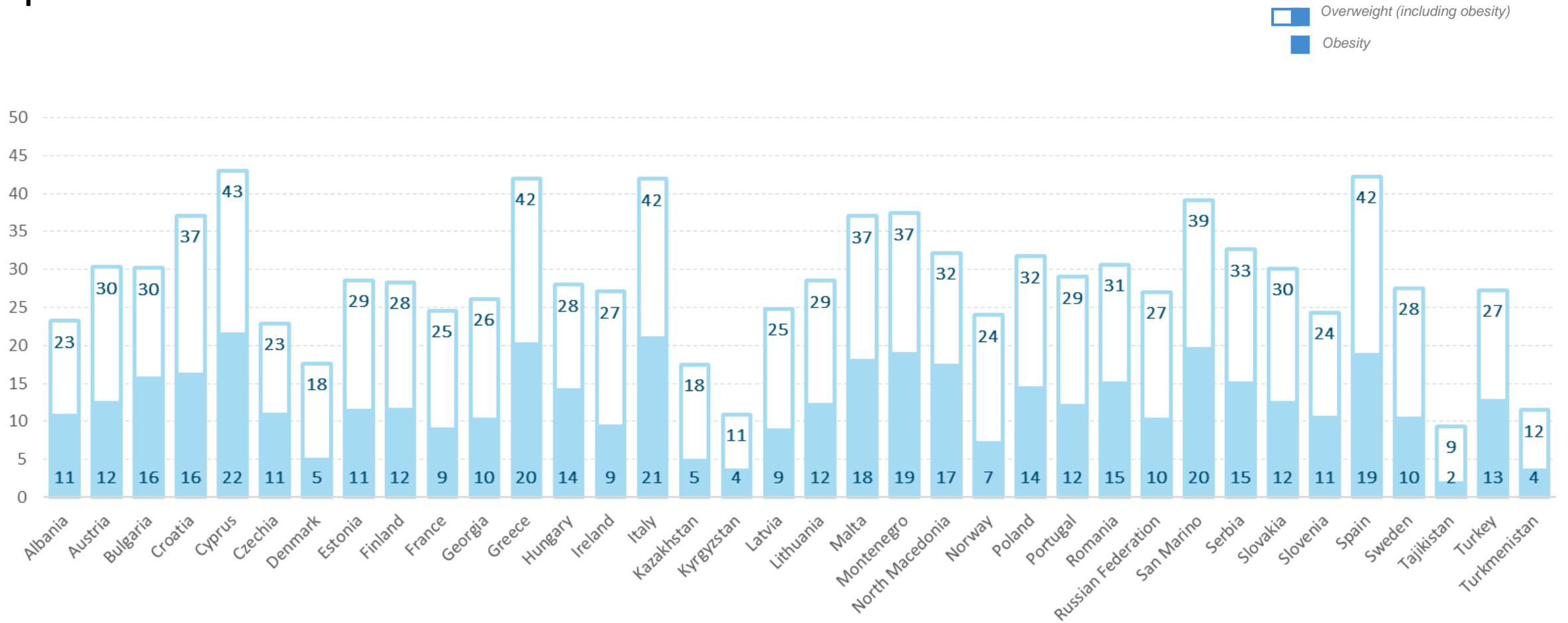
Since its launch in 2007, COSI's participation has increased from 13 to 45 countries.

Prevalence of overweight and obesity among boys - WHO definition, COSI Round 4



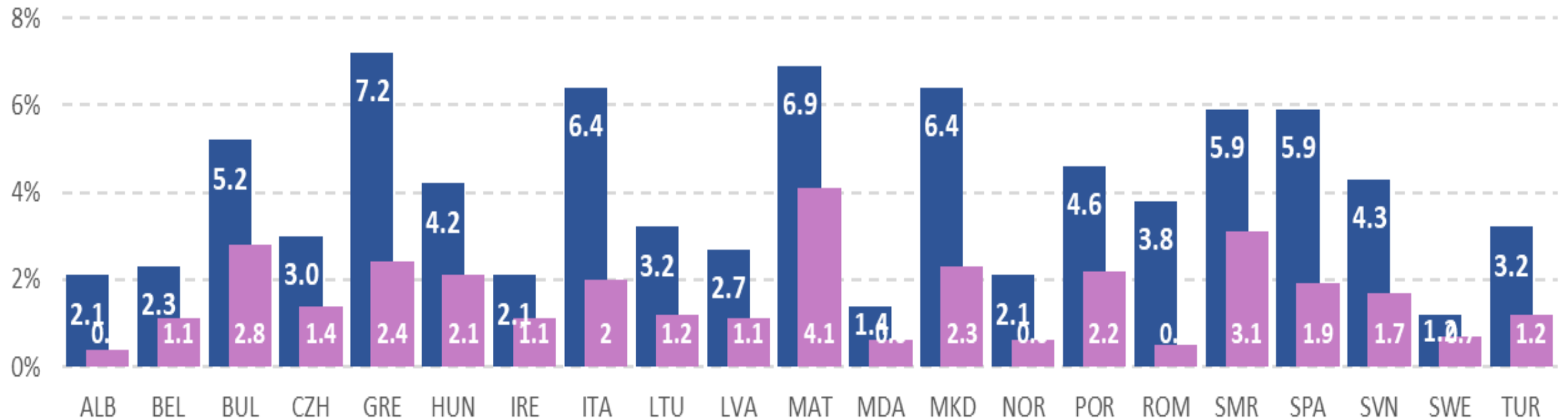
*Figures refer to: i) 7-year-olds in Bulgaria, Czechia, Denmark, Estonia, Finland; Georgia, Greece, Hungary, Kyrgyzstan, Ireland, Lithuania, Latvia, Malta, Montenegro, Portugal, Republic of Macedonia, Serbia, Spain, Slovakia, Slovenia, Tajikistan, Turkmenistan and Turkey ii) 8-year-olds in Albania, Austria, Croatia, France, Italy, Norway, Poland, Romania, San Marino and Sweden and iii) 9-year-olds in Cyprus and Kazakhstan.

Prevalence of overweight and obesity among girls - WHO definition, COSI Round 4

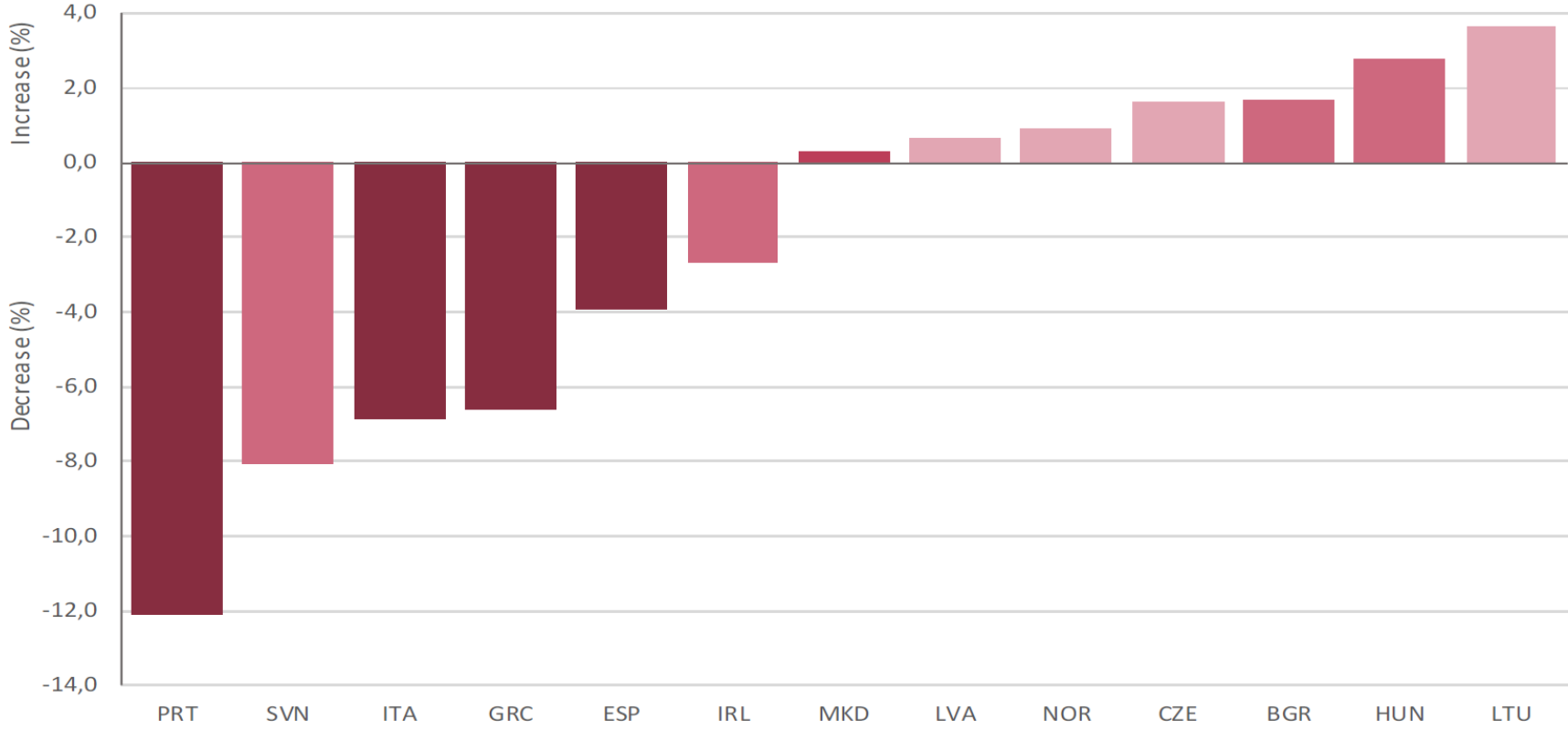


*Figures refer to: i) 7-year-olds in Bulgaria, Czechia, Denmark, Estonia, Finland; Georgia, Greece, Hungary, Kyrgyzstan, Ireland, Lithuania, Latvia, Malta, Montenegro, Portugal, Republic of Macedonia, Serbia, Spain, Slovakia, Slovenia, Tajikistan, Turkmenistan and Turkey ii) 8-year-olds in Albania, Austria, Croatia, France, Italy, Norway, Poland, Romania, San Marino and Sweden and iii) 9-year-olds in Cyprus and Kazakhstan.

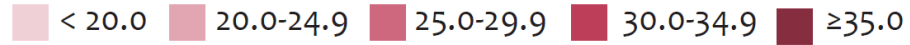
Prevalence of severe obesity among boys and girls, 2017



Difference in the prevalence of overweight between COSI round 1 (2007/2008) and COSI round 4 (2015/2017) among boys

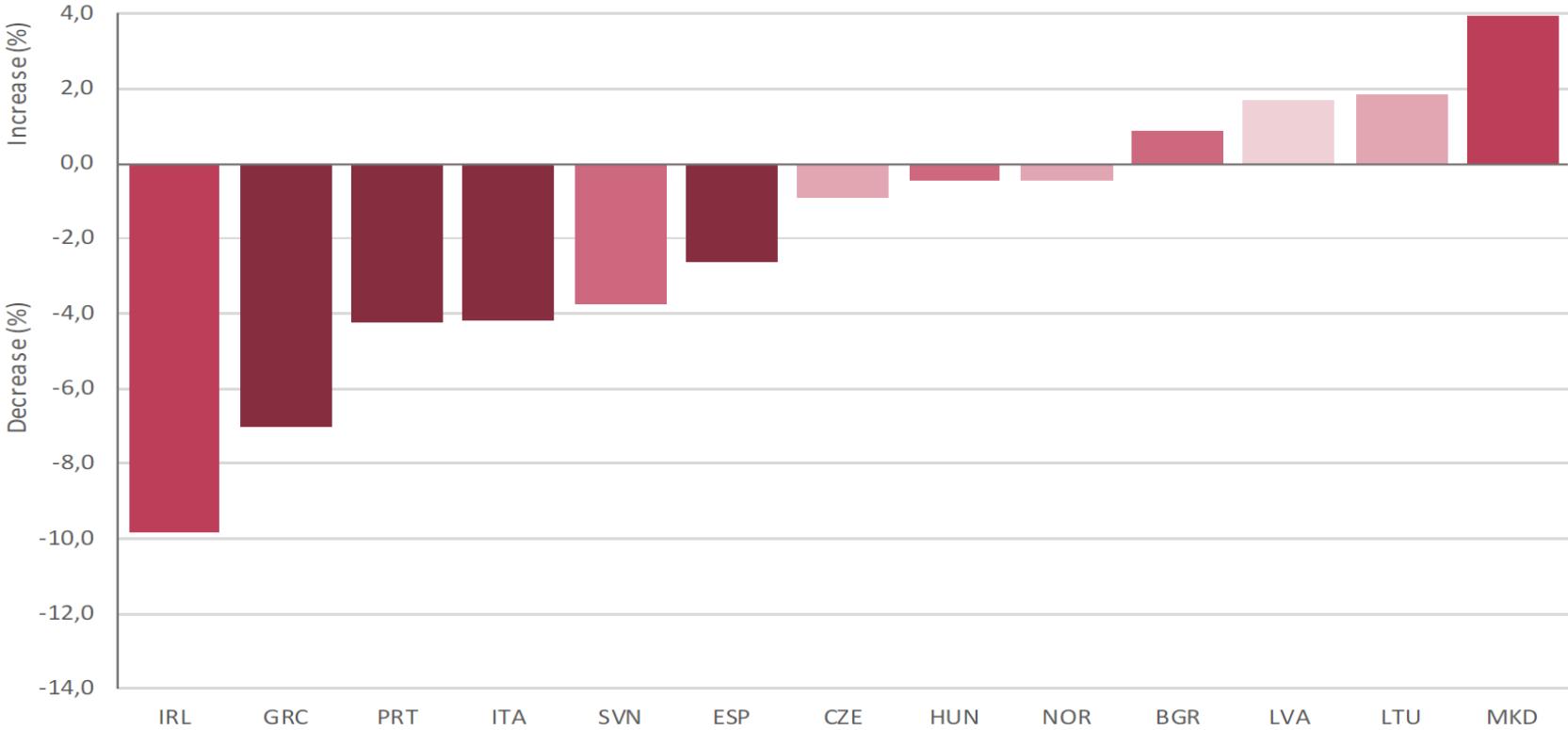


Baseline prevalence category (%):

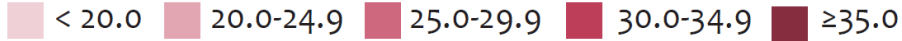


* Data from COSI round 2 (2009/2010) are used as the baseline for countries that didn't participate in COSI round 1 data (Greece, Hungary, North Macedoania, Spain). Figures refer to 7-year-olds in all countries but in Italy and Norway (8-year-olds). Prevalence of overweight are estimated according to WHO definition.

Difference in the prevalence of overweight between COSI round 1 (2007/2008) and COSI round 4 (2015/2017) among girls



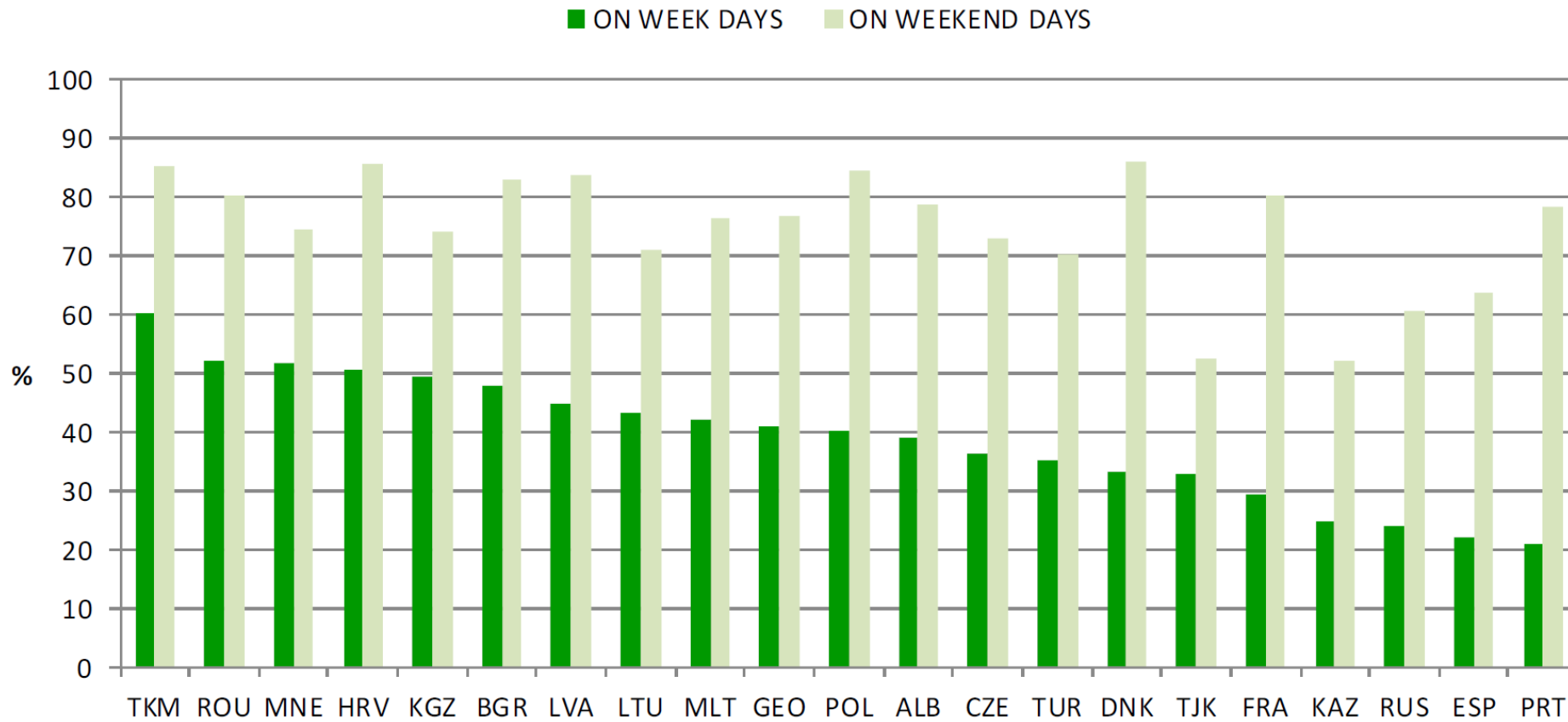
Baseline prevalence category (%):



* Data from COSI round 2 (2009/2010) are used as the baseline for countries that didn't participate in COSI round 1 data (Greece, Hungary, North Macedonia, Spain). Figures refer to 7-year-olds in all countries but in Italy and Norway (8-year-olds). Prevalence of overweight are estimated according to WHO definition.

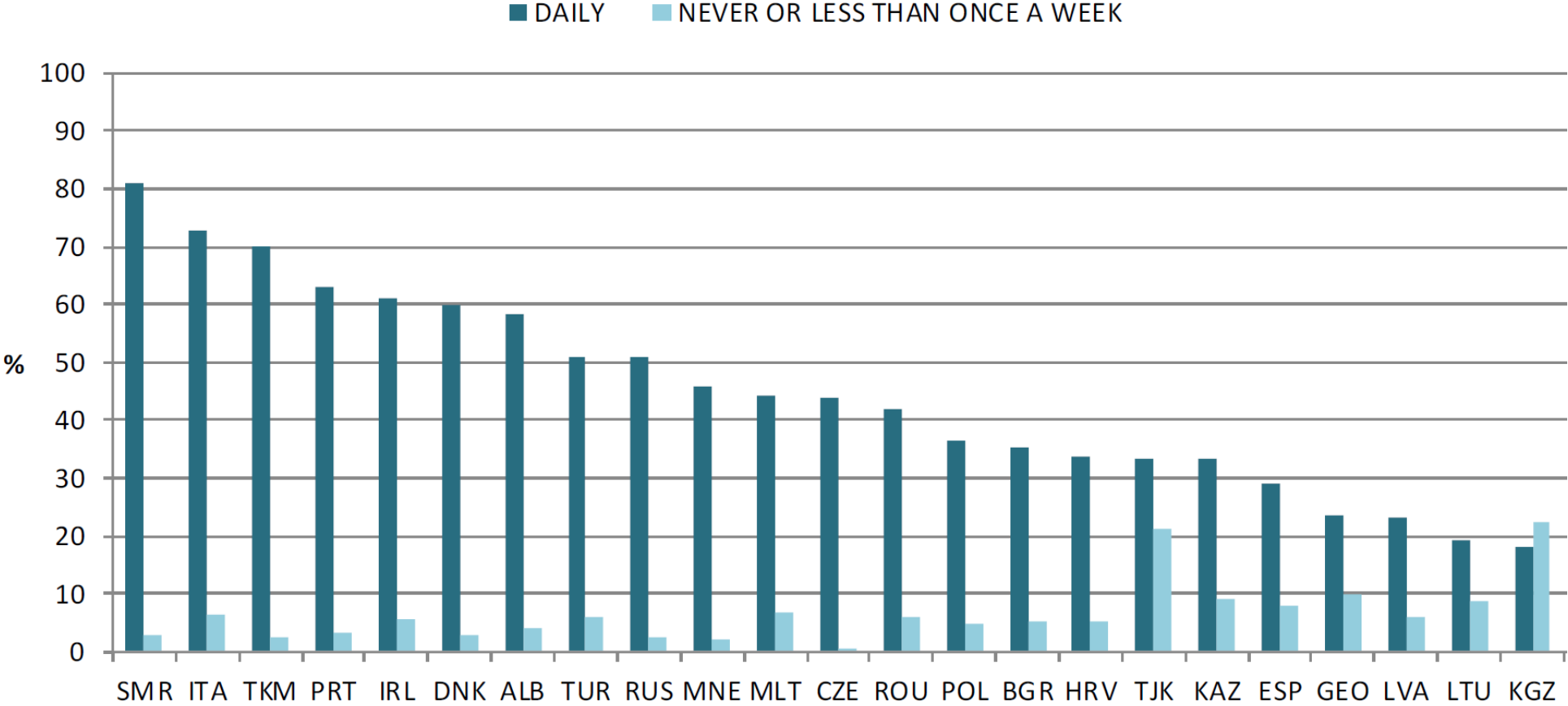
Physical activity/inactivity patterns of 6-9-year olds

- Children who spend at least 2 hours a day watching TV or using electronic devices

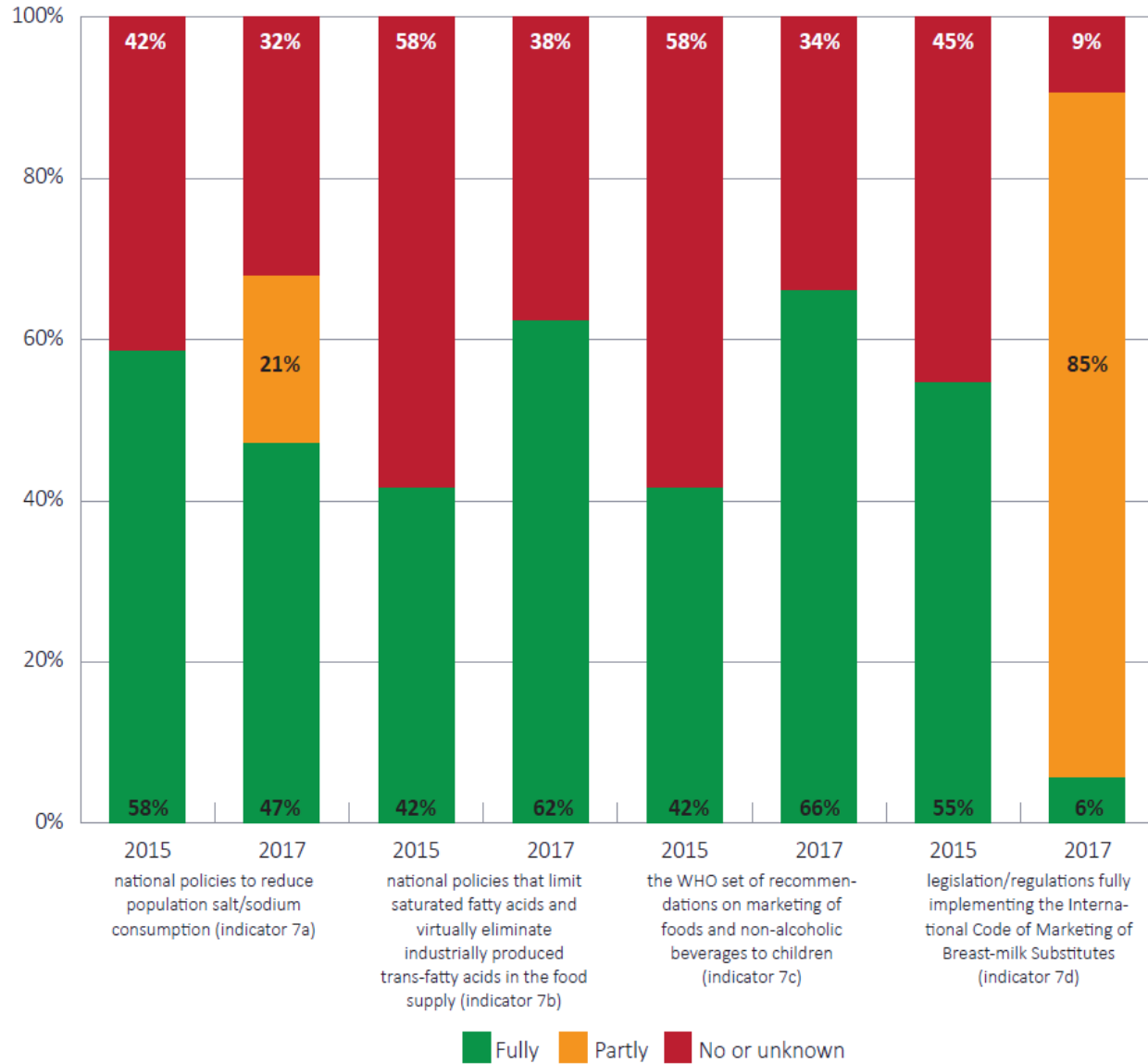


Eating habits of 6-9-year olds

- Frequency of consumption of fresh fruit



Proportion of Member States that have adopted:



Unfinished Business

Childhood obesity Policies

Source: Various

Good Maternal Nutrition The best start in life

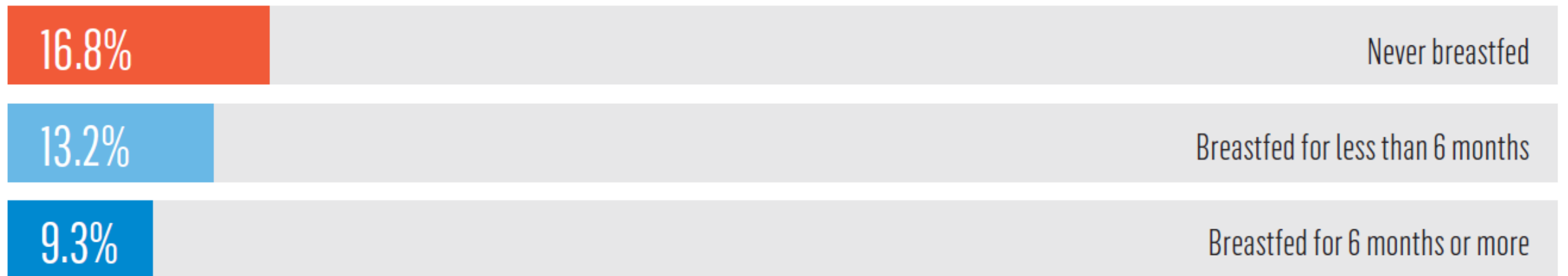


Good Maternal Nutrition The best start in life



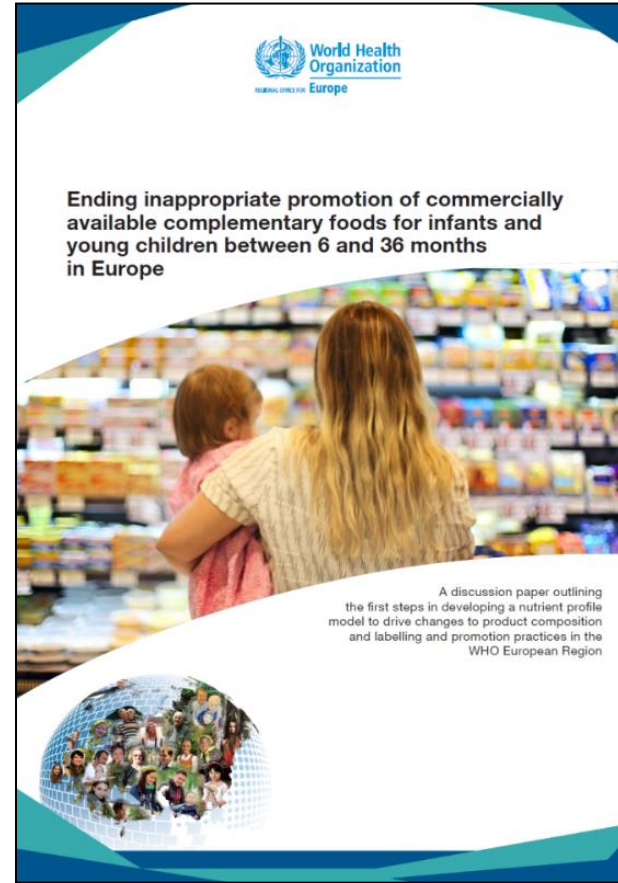
Breastfeeding and Obesity

Overall obesity prevalence among children exclusively breastfed for different time periods (%)^b



^b Estimates were obtained using children from the following age groups: 7 year olds from BUL, CZH, DEN, GEO, IRE, LVA, LTU, MAT, MNE, POR, RUS, TJK, TKM; 8 year olds from ALB, CR, POL, ROM; 9 year olds from KAZ. Two age groups: 7 and 8 year olds from FRA and 8 and 9 year olds from ITA and SMR. SPA included children from all age groups

Commercial baby foods

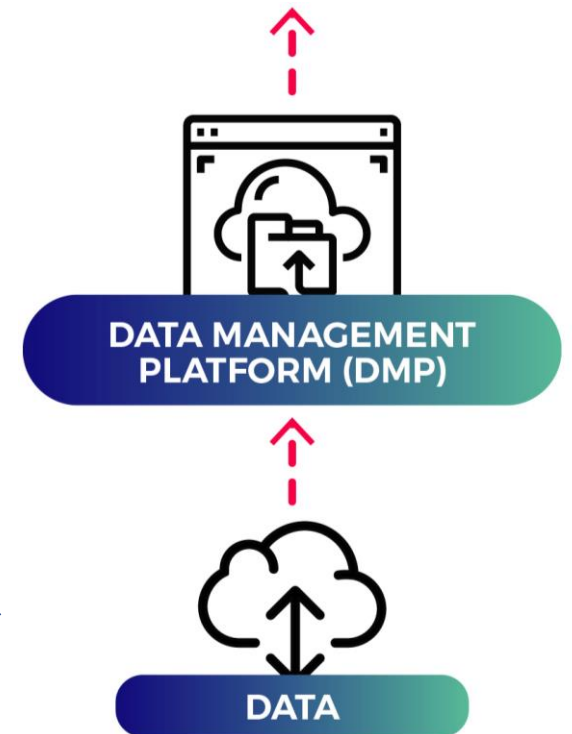
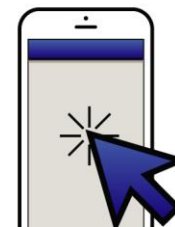


Innovation and Collaboration

- The CLICK Framework and KidAd – a smartphone App to monitor digital marketing



Artificial Intelligence tool to identify Brand Logos

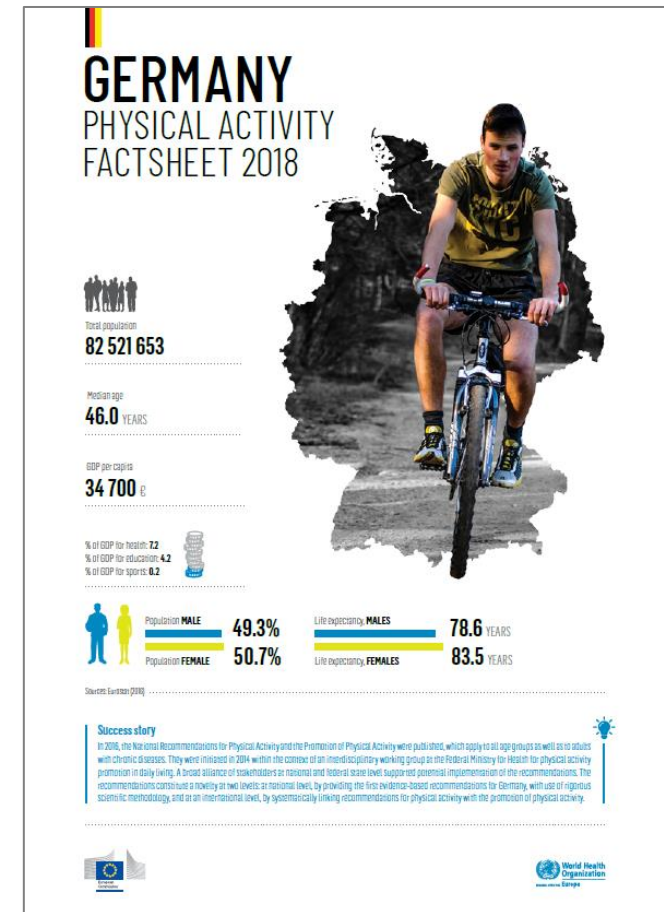
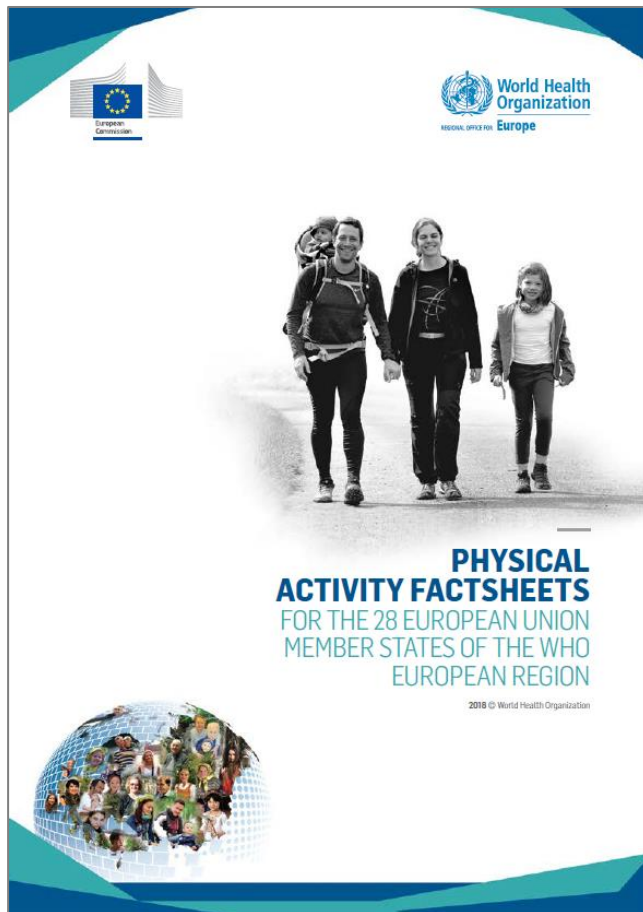


Tax on sugar sweetened beverages & Reformulation

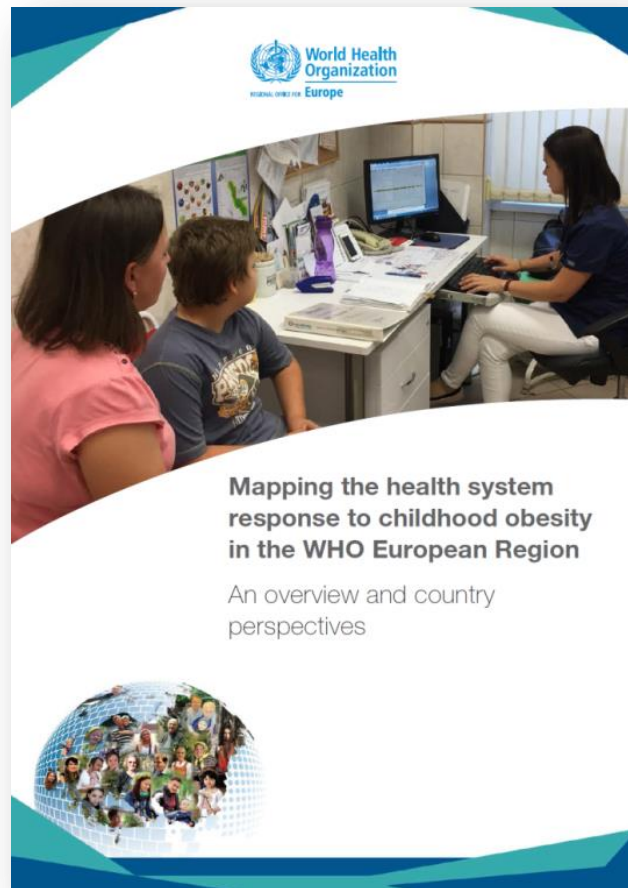


Physical activity

- Monitoring and Surveillance – HEPA policy implementation



Managing childhood obesity: Main Challenges



- Childhood obesity is not always considered and treated as a **chronic disease**, particularly in primary care
- **Lack of an integrated strategy** for both prevention and care
- Weak integration of care providers
- **Lack of clear referrals**, care pathways and guidelines
- Need to **improve access to services** and the capacity to adequately respond to the different social and cultural needs
- Lack of **multidisciplinary care teams** in primary care
- **Heterogeneity of service provision**; unequal access to specialized care

Reinforcing health systems to promote healthy diets



Country support

- WHO Convenes Action Networks for Salt, Marketing of Unhealthy Products, Health Literacy, Obesity Management in Primary Care, Physical Activity and More.....



COVID19 & Increased food insecurity



- **disruptions along food supply chains** that complicate the transportation of food to markets
- **restrictions of movement** that impact the access to markets by consumers
- **price increases** in particular in import-dependent countries
- **loss of jobs** and incomes
- interruption or **lack of social protection** mechanisms
- **Affected production and transportation** of high-value, labour intensive, perishable and nutritious foods, such as fruits and vegetables, meat, milk and other dairy products
- **school closures** leading to **missed meals and nutrition education**

Covid-19 pandemic has made more difficult to implement WHO recommendations



- Reduced access to fresh food
- Reduced mobility
- Increased screen time
- Reduced access to antenatal care
- Messages discouraging breastfeeding
- Increased promotion of breastmilk substitutes
- Disruption of school feeding programs
- Reduced access to counselling services

Thank you! Grazie!

WHO Regional Office for Europe

UN City
Marmorvej 51
Copenhagen Ø
Denmark



[WHO_Europe](#)



facebook.com/WHOEurope



instagram.com/whoeurope



youtube.com/user/whoeuro



World Health
Organization

REGIONAL OFFICE FOR
Europe



Organisation
mondiale de la Santé

BUREAU REGIONAL DE L'
Europe



Weltgesundheitsorganisation

REGIONALBÜRO FÜR
Europa



Всемирная организация
здравоохранения

Европейское региональное бюро