



The EURO-PREVOB Policy Checklist

Development of a new tool for the assessment of policies affecting obesity in Europe

METROPOLITAN UNIVERSITY COLLEGE

METROPOL



SIXTH FRAMEWORK PROGRAMME

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Objectives

Introduction: The EURO-PREVOB project developed a Policy Analysis Tool—comprising a Policy Checklist to identify existing policies and a Community Questionnaire to assess their implementation on the ground—to help policy makers and stakeholders identify what needs to be done to tackle obesity and inequality in health in Europe. This poster presents the methodology and results obtained during the pilot testing of the Policy Checklist in five countries.

Problem: Overweight and obesity is a growing problem in most countries worldwide, particularly in the cities. The picture is different from region to region and country to country. The five pilot countries are examples on the different patterns found.

Overall focus:

- Social welfare policy influencing obesity
- Health inequalities policy influencing obesity
- Other obesity, nutrition, PA policy documents

Methods: The Policy Checklist assesses existing policies using a life course and settings approach, and it focuses on maternal and child services, school policies on nutrition and physical activity, food environment, built environment, and policies focusing on obesity, physical activity, and social inequalities. Between September 2008 and April 2009, the Checklist was piloted in five countries representing different regions of Europe: Bosnia and Herzegovina, Czech Republic, France, Latvia and Turkey.

THE FIVE PILOT COUNTRIES - PROFILES

Country	GDP per capita (ppp us\$)	Life expectancy at birth (years)	Human development index 2007(rank)
Bosnia and Herzegovina	7,764	75.1	76
Czech Republic	24,144	76.4	36
France	33,674	81.0	8
Latvia	16,377	72.3	48
Turkey	12,955	71.7	79

Source: Human Development Report 2009

Methods

Fig. 1 Food environment	Built environment	Maternal & child services	Schools
<ul style="list-style-type: none"> •Food production, manufacturing, trade/distribution •Food/beverages labelling •Food/-beverage marketing/advertising •Food price control policy 	<ul style="list-style-type: none"> •Urban planning •Transport and road safety •Active transport •Sporting facilities •Leisure facilities 	<ul style="list-style-type: none"> •Appropriate weight gain/loss for women during/after pregnancy •Infant and young child feeding / breastfeeding 	<ul style="list-style-type: none"> •Nutrition and/or physical activity school policy •Nutrition/PA education •School meals •Marketing restrictions •Free drinking water •Safe walk to school routes

FIGURE 1. A questionnaire was developed by PREVOB to identify the core policies in the main identified fields, and if the policies were monitored and evaluated

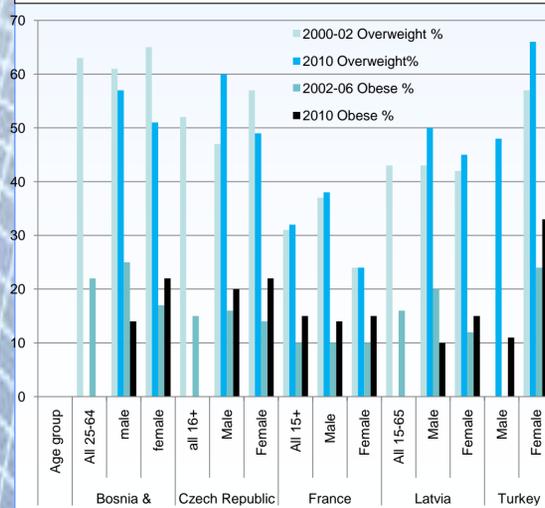
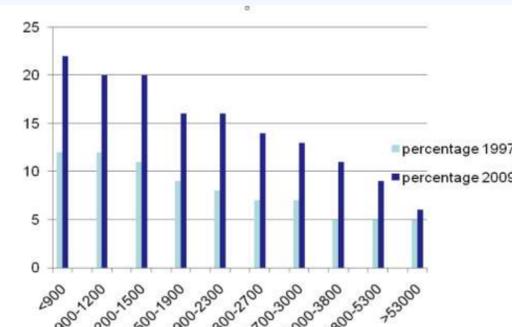


FIGURE 2. PREVALENCE OF OVERWEIGHT AND OBESITY 2002/06-2010 (%)

Most surveys on obesity are not nationally representative, and figures have to be interpreted with caution. The available data indicate some trends: **overweight** (BMI > 25) is, for instance, increasing for males in Czech Republic and Latvia 2002-2010. Overweight is increasing for females in Latvia and Turkey, but decreasing in Bosnia and Czech Republic. **Obesity** (BMI > 30) is increasing for females in Bosnia, Czech Republic, France, Latvia and Turkey; however it is falling for males in Bosnia and Latvia, but increasing in Czech Republic and France.

FIGURE 3. EVOLUTION OF THE SOCIO-ECONOMIC GRADIENT IN ADULT OBESITY IN FRANCE BETWEEN 1997 AND 2009 (% obesity by household income/month in euro)



Socioeconomic inequalities in adult obesity are well documented in France. Between 1997 and 2009, obesity increased from 12% to 22% in the decile with lowest income, and increased only 1 percentage point in the decile with the highest income. For many countries, there is a lack of information on inequalities, and the social gradient of obesity, and it is important that more attention is paid to this issue.

References for Fig 3 and Fig 2 on France. Prevalence of obesity by monthly net household income: the French Obépi surveys:

http://www.roche.fr/portail/eipf/france/roche/fr/institutionnel/les_urpoidsenfrance.
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Conclusions

The PREVOB Policy Checklist was assessed by the five pilot countries and the scientific group.

Strength: A very comprehensive tool that gives a detailed overview of policies in place and was found to be applicable, useful and relevant. Can also highlight gaps in current policy (Turkey). The Checklist is found to be an excellent tool for research purposes (Bosnia) and for advocacy (France).

Weakness: Policy documents related to obesity are limited. Documents often vague and general at national level, sometimes relating to several different policy areas. The Checklist is time consuming and interviews with stakeholders were usually needed to identify relevant documents. Not possible to assess the level of implementation of policies. Cross-sectoral policies (e.g the PNNS in France) did not fit easily into the Checklist.

Opportunities: Illuminates the need for better monitoring and information systems (Bosnia). No analyses of inequalities are identified, pointing to the need for such studies (Czech Rep). The pilot process highlights the lack of evaluation and monitoring, in general.

Challenges: Should include mapping of international policies (France). Putting together a working group of experts could make the process easier (Turkey). Local policies should be included (Bosnia). The questionnaire needs to reflect different social and political contexts (Latvia).

References

www.europrevob.eu

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Fig 2. WHO Nutrition Policy database, 2002-2006;
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