

WHO Regional Committee for Europe 70th session, Virtual session, 14–15 September 2020

European Association for the Study of Obesity and World Obesity Federation statement on the state of health in the WHO European Region, including lessons learned from the COVID-19 pandemic

European Association for the study of Obesity, World Obesity Federation and their members commend the World Health Organization (WHO) and its member states in the Europe region for their leadership and rapid and comprehensive action to control this pandemic.

Obesity is a chronic disease that independently increases mortality rates and is a major risk factor for the three non-communicable diseases (NCDs) responsible for the majority of premature deaths worldwide - cardiovascular disease, type 2 diabetes and cancer. World Obesity's [Global Atlas on Childhood Obesity](#) predicts that over 18 million European children will be living with obesity by 2025. [No country in the region is on track to meet WHO obesity targets](#). In the current economic climate, the rising costs of obesity and obesity-related disease are an imperative to act: it is estimated that the cost of high BMI to health services in Europe is US\$ 218 billion per year, over 11% of all healthcare expenditure.

Mounting evidence also now shows that obesity is a major risk factor for COVID-19 complications and mortality. In addition, strict measures like self-isolation and lockdown have resulted in physical activity restrictions, limited accessibility to healthy food, and increased mental health difficulties. It is thus vital that we focus during this time on improving the health and reducing the vulnerability of people living with or affected by or at risk of developing obesity, while working to reduce stigma around the disease.

The relative high GDP and strong public health systems within European nations have not protected countries from COVID-19. Fatal weaknesses in the most advanced health systems have been exposed, where there has not been room to address seemingly less urgent problems such as the ongoing burden of ill health due to obesity. Since the start of the pandemic, treatment and support for the chronic NCDs prevalent among people with obesity/overweight, such as diabetes and cardiovascular disease clinics, have receded exacerbating risk of strokes and 'heart attacks'. The social, economic, and specifically racial, determinants of health have been identified as the root cause of health disparities and poor outcomes related to COVID-19. The syndemic interactions between race, obesity, COVID-19 and inequity must be a priority for government action in 'building back better' from the pandemic.

We urge governments to embed the following considerations in their national strategies for COVID-19 in the short- and long-term, to ensure that the wider health of populations is maintained, and the negative impacts minimised:

- Ensure that nutritionally adequate food is made available for all, particularly for vulnerable populations.
- Ensure NCD patients have continued access to treatment.
- Ensure that policies and restrictions in place to limit the spread of COVID-19 allow for people to be physically active, while maintaining adequate social distancing.
- Increase education and awareness that obesity is a disease.
- Recognise that obesity and other NCDs increase the risk and likely worsen the outcomes of COVID-19, and ensure that people living with these diseases are tested and provided care early.

In conclusion, actions to address obesity will be essential to help prevent the worst impacts of COVID-19 on vulnerable populations. However, there is also an opportunity for member states in the region to 'build back better' and ensure a '[Healthy Recovery](#)'; by fast-tracking the implementation of nutrition and other public health policies, governments can help tackle obesity and strengthen population resilience to future health threats.



European Association for the Study of Obesity