

How can a Public-Private Partnership (PPP) from national to local level be successful in decreasing childhood obesity and reducing health inequalities?

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I. Background

The prevention of childhood obesity and NCDs through **the promotion of healthier lifestyles** is crucial from the early age and has to lean on networks of local actors in order to reach the families in their daily life and on a long-term basis. After the positive results of the FLVS study¹ (1992-2004) in terms of childhood obesity prevalence decrease and reduction of health inequalities, the **EPODE** methodology has been launched in 2004 with 10 French pilot towns - who have globally experienced a downward trend in the prevalence of childhood overweight and obesity over the last 5 years² – **the methodology was up-scaled to 226 French towns, and adapted into other countries from 2007. In these towns the prevalence of obesity and overweight in children has dramatically decreased since the beginning of the programme.**

Endorsed by the European Commission, the **EPODE European Network project (EEN)**³ with the support of four major European Universities and private partners was aimed at facilitate the implementation of EPODE and other similar community- based programmes (CBPs) in European countries, regions and towns.

II. The EPODE Methodology throughout the world

Since the beginning of EEN, the **EPODE methodology** has been adapted in several programmes beyond **EPODE** (France), **VIASANO** (Belgium) and **THAO** (Spain). **PAIDEIATROFI** has been implemented in Greece in 2008 and programmes such as **JOGG** in the Netherlands (2010), and national movements such as the “**Healthy Weight Communities**” in Scotland (2010), or “**I am living healthy, too**” in Romania (2011) have also been inspired by **EPODE**.

Broadly recognized by the international scientific, institutional, political and corporate communities as an innovative methodology to manage joint, multiple stakeholders commitments at all levels in tackling childhood obesity, **EPODE** crossed the European borders in 2009.⁴

Today it is adopted as an essential component of the governmental public health plans in South Australia and Mexico to prevent obesity at the community level (**OPAL** by EPODE and **EPODE-5 Pasos** programmes).

¹ Romon M, Lommez A, Tafflet M, et al. Downward trends in the prevalence of childhood overweight in the setting of 12-year school- and community-based programmes. *Public Health Nutrition*. 2009 Oct;12(10):1735-42.

² Romon M, Duhamel A, Salleron J, Lommez A, Meyer J, Borys J. *Évolution de la prévalence du surpoids et de l'obésité chez les enfants de 4 à 11 ans entre 2005 et 2010 dans les villes « EPODE »*. *Nutrition clinique et métabolisme*. 2010;24(S1):58.

³ Borys JM, Le Bodo Y, De Henauw S, et al. Preventing Childhood Obesity: EPODE European Network Recommendations, Lavoisier, Paris, 2011.

⁴ Borys JM, Le Bodo Y, Jebb SA et al. EPODE approach for childhood obesity prevention: methods, progress and international development. *Obesity Reviews*, 2011 (in press).

III. The EPODE INTERNATIONAL NETWORK

On April 7, 2011, the independent, not-for-profit **EPODE INTERNATIONAL NETWORK (EIN)** Non Governmental Organization was created and is led by a Board of Directors from scientific and policy communities.

EPODE INTERNATIONAL NETWORK's overall objective is to **build international capacity and capability** for multi-partner **Community-Based Programmes (CBPs)** in countries by:

- 1) **Facilitating best practice sharing** between EIN member programmes
- 2) **Providing** the EIN members **visibility at global level**
- 3) Gathering the leading political representatives to **place and maintain obesity prevention at the top of the agendas**
- 4) Gathering the leading global experts to **build greater scientific and field evidence**
- 5) **Forging links** for greater dialogue **between all the stakeholders from Public, Civic and Private Sectors** (civil society, corporate sector, institutions)

III. The Public-Private Partnership framework in EPODE

Multi-stakeholder approaches are widely recognised to be necessary in order to tackle obesity epidemics on a large scale^{5 6}. Public-private collaborations are also considered to be more likely to increase the scope of financial and human resources that could be mobilised to serve public health programmes' objectives⁷.

The case of **EPODE methodology**, which may include public and non-for-profit funding and support (at national and local level) as well as corporate sponsorships, appears to be innovative and **has demonstrated its sustainability**.

On this basis, **the EPODE International Network's PPP platform** will work at forging links between representatives of the civil society, corporate sector, NGOs, academia and institutions to stimulate multistakeholder, concerted and coordinated partnerships supporting the implementation of CBPs while guaranteeing mutual respect of and trust for each party.

⁵ Commission of the European Communities (2007). White Paper on A Strategy for Europe on Nutrition, Overweight and Obesity related health issues. Brussels. May 30th 2007.

⁶ World Health Organisation (2007). The Challenge of obesity in the WHO European Region and the strategies for responses.

⁷ Sassi F (2010). Obesity and the Economics of prevention. Fit not Fat. Organisation for Economic Co-operation and Development (OECD).