he European Commission is enlisting the help of town mayors across the continent as part of its campaign to tackle obesity by encouraging healthy eating among young people. The initiative is being led by the directorate general in charge of public health (known by its French acronym, SANCO) and is drawing unashamedly on the pioneering programme in France, Ensemble Prévenons l'Obésité des Enfants (EPODE).

Robert Madelin, the director general of the commission's public health department, explains: "If you get mayors and teachers as well as doctors, parents, and people who sell fruit and vegetables together, the question is can we deliver a culturally appropriate intervention at primary school level and does it work on children and their families? The data show that you can halt the rise in obesity. We are now trying to take that experiment and apply it elsewhere."

In March, his department established the basis of an EPODE European network. It is now recruiting advocates among regional authorities, is considering how funding from the European Union could be used to support the work, and will organise a conference next spring for interested mayors.

It is just one way in which the European Commission is looking to lend its weight to moves to tackle obesity. It has created a nutrition platform bringing together the food industry, consumers, and others to consider the problem and has set up a website, targeted at children, containing easy to make, healthy recipes.

Earlier this year, the EC broke new ground by inviting into its headquarters major food producers such as Coca-Cola, McDonald's, and Kraft. The health commissioner, Markos Kyprianou, publicly praised their efforts to reformulate their products and to make the public more aware of what it is eating.

Not everyone appreciated the gesture, and some accused the commission of becoming overtly commercial. Mr Madelin is unapologetic, stating: "You should give credit where it is due, and for obvious reasons, the sectors of the food chain most under attack have devoted resources to the issue."

Cooperative model

But the episode and the anti-obesity initiatives clearly show how the European Commission is now approaching its public health activities. It has some legal powers—and these will be slightly extended if and when the new EU treaty is ratified—that enable it to legislate in certain areas. But these are

STEPS TO A LEANER EUROPE

Obesity is a growing public health problem. **Rory Watson** reports on European initiatives to tackle it and wider health problems



Robert Madelin, director general of the European Commission's public health department

limited, and the EC is acutely aware that health services are a national prerogative.

Instead, it is concentrating on creating an environment that encourages cooperation and dialogue and shows the advantages of a wider European approach alongside national ventures. It is drawing into this arena not just traditional health non-governmental organisations and national officials, but also players such as multinational companies, which some might see as the cause of a problem, not a solution.

The nutrition and alcohol platforms fit this pattern. As Mr Madelin explains: "In both cases, we have invested a lot in the multistakeholder approach, but we keep our focus by doing it within a coherent strategy. They are not the only boats on the water, but they contribute to our nutrition and alcohol strategies which are much broader and I think that is a necessary way."

Similarly, the European Commission uses the Health Policy Forum as a locus to discuss policy and to begin debates on issues such as patient mobility, drugs, and a health strategy. In addition, numerous working groups bring together experts and national health officials.

"I think that what you are seeing more and more is the creation of a new dialogue space around public health which is creating that culture of cooperation. There are lots of spin-offs, like people setting up networks of excellence," says Mr Madelin, noting that exchanges of views and best practices are now far more prevalent than when he took up his post three years ago.

Another trend also explains why more public health issues are being discussed in Brussels and are expanding the work of the 140 officials in the EC's public health department. National governments and the European Court of Justice are transferring new responsibilities to the European Commission. Governments, for instance, have done so as a response to severe acute respiratory syndrome (SARS) and recent terrorist attacks. The need for more cooperation over biosecurity has led to the commission taking a reasonably prominent role in international health negotiations.

The effect of the European Court has been felt most keenly on the availability of cross border medical treatment. Its judgments on the rights of patients to be treated in countries other than their own have encouraged national health service managers to interact with each other far more than in the past. That practical cooperation, accompanied by a light legislative touch, is likely to be the solution the EC will soon propose to ensure that cross border treatment functions smoothly.

In addition to these individual policy actions, the commission recently tabled a white paper setting out its thinking on a strategic approach towards health issues in the EU up to 2013. This identifies three main themes—population ageing, major threats to health, and the development of new technologies—and the principles for tackling them.

"What we want to produce is greater coherence over the long term on what Europe is doing about health, so that we do not have the flavour of the month every six months. I think that member states have also come to realise that you need to have some high level objectives and some subordinate activities and a filter against which to check the value added in proposed European actions on health. That way, you have better long term coherence," explained Mr Madelin.

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