



Germany

Obesity Health System Country Report Card

Economic Classification





















High income¹

Germany is considered to have one of the largest economies in the world. It is a G7 member, G7 being a group of seven majorly advanced nations.

Health System Summary

Germany has a health insurance system that is mandatory for all its citizens and permanent residents. The system is made up of two types of insurances: "sickness funds" through the statutory health insurance system and private health insurance. The latter is held by approximately 11% of the population and is mostly used by those with higher incomes who opt out of the statutory insurance². "Sickness funds", on the other hand, are used by most of Germany's population (86%) and is financed by compulsory contributions by employees and employers³. There are said to be approximately 132 different "sickness funds" available, all of which cover non-earning dependents free of charge⁴. As a result of this described system, Germany is considered to have universal health coverage for all legal residents. Still, in 2014 out of pocket spending accounted for 13.2% of total health spending⁵.

Overall summary

Where your country's <u>government</u> in the journey towards defining 'Obesity as a disease'?	
( : Defined as disease,  : Partial,  : No,  : Not known)	
Where is your country's <u>healthcare provider</u> in the journey towards defining 'Obesity as a disease'?	
( : Defined as disease,  : Partial,  : No,  : Not known)	
Is obesity treatment largely covered by government funding, insurance or out of pocket expense? This indicates how the obesity treatment financing mechanisms facilitate equitable access to care.	
( : Government,  : Insurance,  : Out of pocket expense,  : Not known)	Variable
At what level of obesity are people usually eligible to access healthcare?	
( : BMI ≥30,  : ≥ 35,  : ≥35 + co-morbidities or ≥ 40 kg/m ² ,  : not defined or not known)	

¹ World Bank economic classification by GNI per capita (June 2018)

<https://datahelpdesk.worldbank.org/knowledgebase/articles/906519-world-bank-country-and-lending-groups> (last accessed 09.11.2018)

² <https://international.commonwealthfund.org/countries/germany/> (last accessed 11.12.18)

³ <https://international.commonwealthfund.org/countries/germany/> (last accessed 11.12.18)

⁴ http://www.euro.who.int/_data/assets/pdf_file/0008/255932/HiT-Germany.pdf?ua=1 (last accessed 11.12.18)

⁵ <https://international.commonwealthfund.org/countries/germany/> (last accessed 11.12.18)

Is there a system for training health professionals to recognise, treat and manage obesity? (●: Yes, ●: Partial, ●: No, ●: Not known)	●
Are there adequate numbers of trained health professionals in specialties relevant to obesity in urban areas (e.g. endocrinologists, bariatric surgeons)? (●: Yes, ●: Partial, ●: No, ●: Not known)	●
Are there adequate numbers of trained health professionals in specialties relevant to obesity in rural areas (e.g. endocrinologists, bariatric surgeons)? (●: Yes, ●: Partial, ●: No, ●: Not known)	●
Have any fiscal measures have been put in place to protect/assist/inform the population around obesity? (●: Yes, ●: Partial, ●: No, ●: Not known)	●
Has any government body published any obesity-related treatment recommendations or guidelines for <u>adults</u> ? (●: Yes, ●: Partial, ●: No, ●: Not known)	●
Has any government body published any obesity-related treatment recommendations or guidelines for <u>children</u> ? (●: Yes, ●: Partial, ●: No, ●: Not known)	●

Findings from stakeholders⁶

Overview of stakeholder feedback

Obesity is not widely recognised as a disease in Germany. While some insurance companies do, it was noted to be extremely variable because insurers were reluctant to provide care for financial reasons. It was felt that while there are some programmes available around behaviour change, there is generally little being done by the government to provide Germans with a healthy environment. Obesity prevention is considered to be neglected and underfunded and left to health insurance companies.

There was disagreement between the stakeholders on how obesity treatment was largely covered in Germany - one felt it was mostly covered by public and private insurance, another felt it was mostly covered out of pocket (OOP). It was explained that “conservative treatment” (e.g. nutritionists and exercise therapy) in Germany was generally paid for OOP, but surgery procedures were often covered by health insurers (although not the pre and post-surgery care).

People generally entered the system through primary care, becoming eligible for treatment when they had a BMI over 30 kg/m². Once in the system, it was felt that compliance to disease management was not sufficiently supported and there was inconsistency in referrals to local services.

Stakeholders felt there were inadequate numbers of suitably qualified obesity treatment professionals in both urban and rural areas. In particular, there is said to be a lack of psychologists,

⁶ Note that this section is based on interviews and/or survey returns from 2 stakeholders.

doctors and dieticians. It was recognised that there are obesity guidelines, but they are only partly followed due to lack of financing and training, and because they are voluntary.

Top barriers to be obesity treatment

Stakeholders believed the following to be the top barriers to obesity treatment in the Germany⁷:

1. Obesity not recognised as a disease
2. Lack of multidisciplinary teams
3. Lack of service integration
4. Monetary concerns
5. Inadequate training of professionals
6. Food marketing and lack of nutrition advice
7. Obesogenic environment
8. Lack of obesity prevention
9. Food industry given priority over health

⁷ In no particular order