

Belgium



Health systems

Economic classification: **High Income**

Health systems summary

Healthcare in Belgium is mostly operated through a social insurance system that is part of a broader social security system. It is compulsory for all workers and their employers to pay into a health insurance fund that finances the publicly funded healthcare that is run by federal government. Those covered by this mandatory health insurance (98.9% of the population) have access to subsidised services that include hospital care, dental care, and more. Overall, social insurance covers close to 75% of all healthcare expenses and out of pocket expenditure constitutes 17.9% of total health expenditure. It is not uncommon for people to have private insurance to supplement their social insurance.

Belgium has among the highest life expectancies in the European Union and has historically spent a large proportion of its gross domestic product on health. However, recent challenges include persistent inequalities in health status by socioeconomic status, less public money dedicated to health and shortages of health professionals. Belgium is coming up with innovative ways to address these issues.

Indicators

Where is the country's government in the journey towards defining 'Obesity as a disease'?	Some progress
Where is the country's healthcare provider in the journey towards defining 'Obesity as a disease'?	No
Is there specialist training available dedicated to the training of health professionals to prevent, diagnose, treat and manage obesity?	Not known
Have any taxes or subsidies been put in place to protect/assist/inform the population around obesity?	Yes
Are there adequate numbers of trained health professionals in specialties relevant to obesity in urban areas?	Some progress
Are there adequate numbers of trained health professionals in specialties relevant to obesity in rural areas?	Some progress
Are there any obesity-specific recommendations or guidelines published for adults?	Some progress
Are there any obesity-specific recommendations or guidelines published for children?	Some progress
In practice, how is obesity treatment largely funded?	Out of pocket

Perceived barriers to treatment

High cost of out of pocket payments

Poor adherence to or fear of treatment

Stigma

Summary of stakeholder feedback

There is a lack of consensus on whether obesity is recognised as a disease in Belgium. Regardless, it is felt that more needs to be invested in prevention and non-surgical treatment.

According to stakeholders, those living with overweight or obesity tend to enter the health system through their general practitioner or via school health counselling. In primary and secondary care, individuals tend to be referred to dietitians and/or psychologists. In tertiary care, surgery is offered and reimbursed by social insurance if certain criteria are met. Surgery is the only form of treatment that is partly funded by insurance; other treatment such as a medication and lifestyle interventions are generally paid for out of pocket. One stakeholder felt that surgical support was offered too freely.

It is suggested that Belgium has a specific gap in physical activity counselling, but it is noted that there are trial projects looking at how to involve them in the obesity care pathway.

Based on interviews/survey returns from 2 stakeholders

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