

Pacific Heads of Health

Réunion des directeurs de la santé du Pacifique

Tackling the drivers of obesity, particularly for children and young people

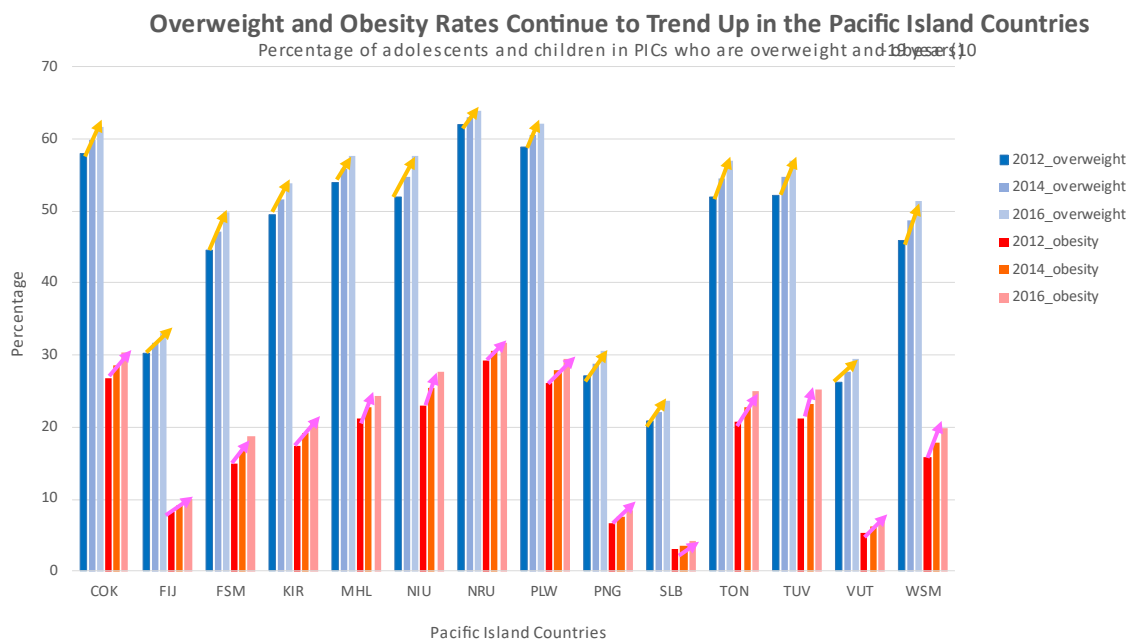
At a glance

- Over the past few decades, overweight, obesity and related noncommunicable diseases (NCDs) have progressively increased in every age group and have become the major cause of premature death and disability in the Pacific. Overweight and obesity increase the risk of developing NCDs later in life and impose large social and economic burdens.
- Pacific island countries and areas (PICs) have taken action to tackle obesity. However, the pace of progress is inadequate to address the increasing burden, escalating challenges and growing complexities associated with the drivers of obesity.
- Obesity is a development issue with many drivers – environmental, commercial, behavioural, social and demographic – causing the epidemic. While the health sector can take the lead in addressing some of the drivers of obesity, there are many interventions that require collaborative action with non-health sectors. A more collaborative, ‘whole-of-government’ and ‘whole-of-society’ approach is needed to protect and empower children and young people, intervene further upstream, and halt the rise in childhood obesity.
- The Pacific Heads of Health are invited to:
 1. Strengthen coordination and leverage partnerships with non-health sectors to implement **strong policy and legislative actions** built on evidence-based strategies that create health-enabling environments;
 2. Scale up evidence-based **interventions that promote behaviour change** particularly targeting children and young people; and,
 3. Integrate child growth **monitoring and obesity management** into primary health care.

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Current situation



WHO/GHO/indicators - 2012-2016 (prevalence of overweight and obesity among adolescents and children (crude estimation))

Obesity is one of the world's most threatening health and development issues, particularly in low resourced developing nations including the Pacific Island countries and areas (PICs).

Despite the action that has been taken to tackle the obesity epidemic, most countries in the world, including PICs, are not on track to meet global targets and halt the rise of obesity. In fact, the situation is worsening.

Childhood overweight and obesity increases risks for adult obesity and noncommunicable diseases (NCDs); and stands in the way of development goals by reducing productive years and increasing premature deaths.

Drivers of childhood obesity are numerous and are affecting societies and generations in the Pacific. These include, but are not limited to,

- Environmental and commercial determinants, such as food marketing, industry interference, affordability, availability, food systems;
- Behavioural factors, including lifestyle choices (such as regarding food consumption and physical activity), cultural and social norms;
- Biological factors, such as maternal health conditions, inherited risks, undernutrition, low birth weight, breastfeeding initiation, and duration; and,
- Demographics, including inequity, poverty, and lack of access to necessary services.

Therefore, multiple causes and contributors need to be addressed in a holistic approach to tackle the issue of obesity in children and young people.

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Future vision

Tackling the drivers of obesity will ensure that PICs are able to meet the global NCD targets on halting the rise of obesity, and that future generations across the Pacific will live and grow in a health enabling environment. This will contribute to achieving the SDGs' NCD target particularly to reduce premature mortality from NCDs¹, numerous other SDG targets, the Healthy Island Vision² and the Pacific Leaders 2050 Vision³ that ensures all Pacific peoples can lead free, healthy, resilient, and productive lives.

Strong commitment and action will need to be taken to achieve this. No single intervention can halt the rise of the growing obesity epidemic. Working backwards from this vision, it is expected that the Pacific would, over the next ten years, address the root causes of obesity in a holistic 'whole of government' 'whole of society', and 'life-course' approach, through, for example:

- Transforming the food environment by enacting, implementing, and enforcing policies, legislation, guidelines, and trade agreements that address commercial determinants.
- Protecting children from obesogenic influences and creating communities where the healthy choice is the easy choice.
- Starting interventions early, including a focus on the first 1,000 days of life and taking a life course approach to promoting intake of healthy foods, physical activity, and weight management.
- Integrating screening and management services into core functions of primary healthcare so that access to care is available to all.
- Continuously monitoring, evaluating, and measuring impact and implications of interventions, and trends in overweight/obesity to inform effective policies, planning and decision making.

Examples of recent progress

Progress has been made in addressing the recommendations of the Commission on Ending Childhood Obesity⁴ and priorities identified in the endorsed Pacific Ending Childhood Obesity Network (ECHO). Some examples of best practices are outlined below.

¹ WHO, Noncommunicable Diseases Progress Monitor 2020, <https://www.who.int/publications/i/item/ncd-progress-monitor-2020>

² Healthy Island Vision, https://www.who.int/publications/i/item/PHMM_declaration_2015

³ Pacific Islands Forum, Blue Pacific 2050, 2050 strategy for the Blue Pacific Continent, [PIFS-2050-Strategy-Blue-Pacific-Continent-WEB-5Aug2022.pdf](https://www.pif.org/~/media/2022/08/PIFS-2050-Strategy-Blue-Pacific-Continent-WEB-5Aug2022.pdf) ([forumsec.org](https://www.forumsec.org))

⁴ WHO, Report on the Commission on Ending Childhood Obesity. https://apps.who.int/iris/bitstream/handle/10665/204176/9789241510066_eng.pdf

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Legislation and policies to address the drivers of obesity

The Pacific Legislative Framework for NCDs, endorsed at the 14th Pacific Health Ministers Meeting, has been utilised to assist PICs to develop effective legislation to address the drivers of obesity and NCDs:

- Three PICs have strengthened food fiscal policies in 2022;
- Eight PICs convened and developed plans to implement health taxes including those on Sugar Sweetened Beverages (SSBs); and,
- Seven PICs convened and developed plans for national legislation to regulate marketing of unhealthy foods and beverages to children.

Health Promoting Schools in Fiji and Tonga

A collaborative effort between the ministries of health and education, the Health Promoting Schools (HPS) initiative focuses on three areas:

1. diet and physical activity;
2. water, sanitation, and hygiene; and,
3. mental health and environment.

In Fiji, the HPS programme measures impact through the School Based Assessment tool (SBA) and has demonstrated positive change in student behavior, an increase in school attendance, decrease in absenteeism, increase in academic pass rates and improved student and teacher health. The data also indicates that HPS schools resumed classes more readily during the pandemic compared to non-HPS schools. HPS embraces an integrated approach which utilizes opportunities to enhance health that engages students, parents and the broader community while always looking for opportunities to improve.

Tonga has adapted Fiji's model and has scaled up their HPS programme to cover more than 50 schools and 20 early childhood education centres, reaching 28% of Tonga's students. Both Fiji and Tonga are on the way to making every school a Health Promoting School.

Empowering youth in combating overweight, obesity and NCDs in Fiji and Vanuatu

Empowering youth is key to addressing overweight and obesity, as young people have great potential to reach their peers and wider communities to inspire action. Building on the training conducted through the NCDs and Youth regional initiative, youth ambassadors from Fiji and Vanuatu designed and implemented innovative health promotion campaigns using artwork including drawing, painting, mural, sports, and home gardening. Hundreds of school children, youth and community members were actively engaged.

An assessment conducted in 2021-2022 demonstrated positive outcomes, for example:

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- improved knowledge and increased awareness;
- demonstrated successful community outreach and increased participation of stakeholders; and
- newly created employment opportunities for youth using the acquired arts skills.

In other words, listening to and amplifying youth voices through this initiative allowed for new perspectives and ideas to be gathered, generating creative approaches to health promotion resulting in more actively engaged communities.

Regulating marketing of unhealthy food and drinks in the Republic of Marshall Islands (RMI)

Children's food choices are becoming increasingly influenced by a multitude of marketing strategies used by food marketers in the Pacific pushing unhealthy food products and promoting unhealthy diet practices. Recognising the need to protect children from unhealthy diets and to reduce future risks from NCDs, the Republic of Marshall Islands (RMI) has taken a systematic approach to the development of regulation to restrict marketing of unhealthy food and SSBs to children. Using the Pacific Legislative Framework for NCDs, RMI has reviewed relevant policies and existing laws related to food marketing to children; submitted a cabinet paper and gained Cabinet approval to draft the legislation; completed work on the proposed legislation; and undertaken stakeholder consultations throughout the process to ensure the regulation is enacted. The regulation is being finalised for adoption in 2023.

Why urgent action is needed now:

Increasing burden and disproportionate action

The rates of overweight and obesity continue to increase at each stage in the life course. Two thirds of premature deaths in adults are associated with childhood/youth behaviours, but there is inadequate investment and targeted actions for children and youth. Young generations are our future leaders and a great force for meaningful environmental and behavioural change for wellbeing. Without urgent action, the burden of obesity and NCDs will continue to increase due to increased health care costs and lost productivity. This will hinder the achievement of the SDGs.

Escalating challenges, increasing complexity

Our children are growing up in obesogenic environments that set the course for unhealthy behaviours and subsequent risks to health. Environmental and commercial factors continue to increase. Cross-border and digital marketing is getting powerful. Young generations are targeted by industries advertising unhealthy foods and products. Moreover, globalisation, climate change, pandemics, industry interference etc. are continuing to influence food systems and food security thereby affecting behaviour change.

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Food industries are profit-driven but are also part of a necessary food system and food supply chain. Therefore, addressing food industry is more complex than addressing the tobacco industry. The marketing landscape for food and beverages is increasingly dominated by promotion of unhealthy products, increasing children's preference for consumption of these foods, and harming their health. Food choices are also influenced by beliefs, values, cultural and social norms, availability, affordability, taste, ease, comfort, and much more.

Now is the time to take intentional, decisive, and coordinated action to tackle the drivers of obesity—not only to protect the rights, health, and futures of Pacific children, but also to support country and regional development goals.

Recommendations to be considered by the Heads of Health

Recommendations for heads of health:

1. Strengthen coordination and leverage partnerships with non-health sectors to take **strong policy and legislative action** built on evidence-based strategies that create health-enabling environments. For example:
 - Implement and enforce food regulations, particularly marketing of unhealthy foods and sugar sweetened beverages to children, and food fiscal policy.
 - Incorporate health protections in trade agreements to set standards, mandate labelling, regulate marketing, prohibit trans-fats, and increase access to healthier foods.
 - Ensure that facilities are available on school premises and in public spaces to promote physical activity for all including those with disabilities.
2. Scale up evidence-based interventions that **promote behaviour change** particularly targeting children and young people, including through collaboration with non-health sectors. For example:
 - Engage children, youth and communities in any innovative behaviour change interventions that promote physical activity and healthy eating, empowering them to be at the forefront in tackling obesity.
 - Ensure obesity prevention and health promotion resources are innovative, user-friendly, and available for the target populations for utilization.
3. Fully implement evidence-based interventions within the health sector including:
 - Ensuring that Baby Friendly Hospitals follow their policies, promote breastfeeding, and follow the Code on the Marketing of Breast Milk Substitutes.
 - Integrate child growth **monitoring and obesity management** into primary health care.
 - Monitor child growth and children's BMI to increase data and trends on overweight and obesity for planning, policy development and decision making.

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Provide appropriate management services for children and their families who are overweight or obese including pregnant women with gestational diabetes.

Recommendations for health ministers

1. Lead national multi-sectoral NCD committees to drive ‘whole-of-government’ and ‘whole-of-society’ implementation of evidence-based interventions that address the root causes of obesity in a holistic manner across the life-course.
2. Strengthen coordination through the Pacific Ending Childhood Obesity (ECHO) network to drive the implementation of subregional priorities including promotion of physical activity, introduction of fiscal policies on sugar sweetened beverages and unhealthy food products, and the restriction of marketing of unhealthy foods and beverages to children.
3. Invest and allocate appropriate budgetary resources to scale up national priority actions and implement innovative interventions that promote behaviour change particularly targeting children and young people.
4. Hold government departments and other stakeholders accountable for progress in addressing the drivers of obesity through active monitoring and evaluation.
5. Ensure regional and national collaboration with civil society organizations, development partners and stakeholders to better support implementation of evidence-based strategies that create health-enabling environments.

Recommendations for development partners

1. Invest and support PICs in addressing commercial determinants, creating health-enabling environments, and scaling up interventions in every aspect e.g., policy, planning, capacity building etc.
2. Support the strengthening of accountability and the monitoring of implementation using the MANA dashboard. Conduct and share population-based surveys and operational research to monitor and evaluate health outcomes among Pacific children and young people.
3. Advocate for multi-agency and multisectoral action across Council of Regional Organisations of the Pacific (CROP) and United Nations partners to support PICs’ efforts to tackle the drivers of obesity.