Healthy weight in childhood: A winning goal for life
Healthy weight in childhood: A winning goal for life

OVERCOMING OBSTACLES AND MAKING AN EMPOWERED CHOICE
Overcoming obstacles to a healthy weight in childhood
Children who are overweight or obese are at a higher risk of developing serious health problems, including type 2 diabetes, high blood pressure, asthma or other respiratory problems, sleep disorders and liver disease. As adults, they are at greater risk for obesity and premature death or disability, contributing to the epidemic of noncommunicable diseases. Overweight and obesity also exert a psychological toll on children, increasing the risk of low self-esteem, depression and social isolation.

From a public health, economic and moral perspective, governments must act on this issue. Tackling childhood obesity improves the health and well-being of children. They grow to become healthier adults, leading longer and more productive lives, benefiting the economy and curbing the toll of noncommunicable diseases.

Unfortunately, there are many obstacles to having a healthy weight in childhood and maintaining a healthy weight throughout adulthood. Most of the obstacles can be overcome with political will, commitment and legal instruments. For example, Member States can ensure that healthy food options are accessible; that consumers can easily figure out which foods are healthier by looking at the labels; that marketing of foods, non-alcoholic beverages and breast-milk substitutes does not mislead the consumer; and that children have plenty of opportunities to be active in safe environments.

This booklet highlights seven obstacles to a healthy weight. It suggests actions for policy-makers to address those obstacles and create an enabling environment that allows children and caregivers to make empowered dietary choices.
Environment, practices and policies that discourage optimal breastfeeding

OVERCOMING THE OBSTACLE

Member States can promote, protect and support breastfeeding by encouraging the First Embrace (skin-to-skin contact shortly after birth), adopting the International Code of Marketing of Breastmilk Substitutes and providing breastfeeding-friendly maternity services and work environments.

Optimal breastfeeding practices, as recommended by WHO, include exclusive breastfeeding for six months and continued breastfeeding up to two years and beyond.
Environment, practices and policies that make optimal complementary feeding a challenge

OVERCOMING THE OBSTACLE

Member States can support caregivers’ education, ensure food labelling free from misleading claims, restrict marketing of processed complementary foods and promote a variety of locally produced fresh foods. This helps create a supportive environment for optimal complementary feeding practices.

Complementary feeding is the transition from exclusive breastfeeding to family foods, typically between the ages of six months and 24 months.
OBSTACLE 3

Aggressive marketing of sugary drinks and unhealthy processed foods

OVERCOMING THE OBSTACLE

Member States can implement, enforce and monitor WHO’s *Set of Recommendations on the Marketing of Food and Non-Alcoholic Beverages to Children*. This includes restricting marketing across different media (e.g. TV, radio, internet, billboards and point-of-sale purchasing) and in settings such as schools and sporting or cultural events.

Unhealthy snacks and drinks should be banned or tightly controlled within and around school premises. Safe drinking water should be available in all public settings.
OBSTACLE 4

Poor nutrition labelling on processed foods and in fast food restaurants

OVERCOMING THE OBSTACLE

Member States can implement standardized, user-friendly nutrition labelling schemes. Labels should include a back-of-pack nutrition information panel consistent with Codex Alimentarius recommendations. Labels should also be easy to understand with front-of-pack labelling that uses colours or logos rather than numbers. Health and nutrition claims should be substantiated by evidence and in line with national food standards. Fast food restaurants, canteens, cafeterias and food stalls should include nutrition information on menus at point of sale.
Healthy food and snacks not readily available, under-promoted and more expensive

**OVERCOMING THE OBSTACLE**

Member States can increase the availability and promotion of healthy food in stores while reducing the promotion and availability of unhealthy food. Revenue from taxation on unhealthy food and drink can be channelled to subsidies for healthy food. Social marketing strategies can be used to encourage healthy eating and promote the production and consumption of local, fresh and seasonal food. It is important to make locally grown foods accessible to consumers.
OVERCOMING THE OBSTACLE

Member States can promote and provide opportunities for children to be active in a safe environment at school and in the community. Time spent sitting and engaged with a screen should be limited.

WHO recommends that children aged 5–17 should accumulate at least 60 minutes of moderate to vigorous intensity physical activity daily.
Insufficient sleep

OVERCOMING THE OBSTACLE

Caregivers may be unaware of the links between insufficient sleep and childhood obesity or other health concerns. Through public health messaging, Member States can promote awareness among parents of sleep requirements and factors that disrupt or prevent sleep. Tips for caregivers include setting regular bed times, removing electronic devices such as TVs and computers from bedrooms and reducing screen behaviours near bedtime.
Healthy weight in childhood: A winning goal for life

Overcome obstacles and make an empowered choice

Governments are encouraged to implement the WHO Action Plan to Reduce the Double Burden of Malnutrition in the Western Pacific Region (2015–2020) which was approved by Member States in 2014.

The Action Plan calls for coordinated strategies to reduce malnutrition risk factors and promote healthy diets within the context of the Region’s changing nutritional landscape, rapid urbanization and trade liberalization.

Reducing all forms of malnutrition is central to the Sustainable Development Goals (SDGs) and the Action Plan can help Member States prioritize efforts to achieve the nutrition-related SDG targets and halt the increase in childhood overweight.
The action plan has the following objectives:

1. Elevate nutrition in the national development agenda.

2. Protect, promote and support optimal breastfeeding and complementary feeding practices.

3. Strengthen and enforce legal frameworks that protect, promote and support healthy diets.

4. Improve the accessibility, quality and implementation of nutrition services across public health programmes and settings.

5. Use financing mechanisms to reinforce healthy diets.


Acknowledgements

The review of evidence for this publication was conducted in collaboration with Colin Bell, Adrian Cameron, Gary Sacks and Bridget Morrisey from the WHO Collaborating Centre for Obesity Prevention at Deakin University. Financial support for this publication was received from the Ministry of Health and Welfare, Republic of Korea.
Additional Resources

Nutrition in the Western Pacific:
http://www.wpro.who.int/nutrition/en/

Health Information and Intelligence Platform for Nutrition:
http://hiip.wpro.who.int/portal/Dashboards/Nutrition.aspx

WHO e-Library of Evidence for Nutrition Actions (eLENA):
http://www.who.int/elena/en/

Healthy Diet Factsheet:
http://www.who.int/mediacentre/factsheets/fs394/en/

WHO Sugars Guidelines:
http://www.who.int/nutrition/publications/guidelines/sugars_intake/en/

WHO Physical Activity Recommendations:
http://www.who.int/dietphysicalactivity/factsheet_recommendations/en/

WHO Complementary Feeding Guiding Principles:
http://www.who.int/nutrition/topics/complementary_feeding/en/

WHO Child Growth Standards:
http://www.who.int/childgrowth/en/

Contact

NUTRITION
Division of NCDs and Health Through the Life-Course

WHO Regional Office for the Western Pacific
United Nations Avenue, 1000 Manila, Philippines

Email: NUT@wpro.who.int