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

At a glance

- Obesity is one of the world’s most threatening health and development issues. Its impacts are being particularly felt in the Pacific, which is home to the top 10 countries with the highest prevalence of overweight and obesity among children and adolescents.

- Over the past few decades, overweight, obesity and diet-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 significant social and economic burdens.

- Pacific Island countries and areas (PICs) have taken action to tackle obesity, including actions through the Pacific Ending Childhood Obesity Network (Pacific ECHO). However, the pace of progress is inadequate to address the increasing burden, escalating challenges and growing complexities associated with the drivers of obesity. Two thirds of premature deaths in adults are associated with childhood/youth behaviours, but investment and targeted actions for children and youth are inadequate.

- As reflected in the Bridgetown Declaration on NCDs and Mental Health endorsed by ministers from small island developing states (SIDS) in June 2023, “the challenge in ensuring healthy diets and effectively responding to NCDs in SIDS is significantly constrained by high dependence on imported food, medicine and diagnostic devices, commercial influence and trade-related challenges.”

- In other words, 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 cooperation outside the health sector.

- A more collaborative approach is therefore needed to protect and empower children and young people, intervene further upstream, and halt the rise in childhood obesity.
Current situation

Figure 1: Overweight and obesity rates in Pacific Island countries continue their upward trend

Percentage of adolescents and children in PICs who are overweight and obese

Obesity is one of the world’s most threatening health and development issues, particularly in low-resource developing nations including the PICs. The Pacific is home to the top 10 countries with the highest prevalence of obesity among adults globally\(^1\) and the top 10 countries with the highest prevalence of overweight among children and adolescents between age 10 and 19.\(^2\)

Despite the action that has been taken to tackle the obesity epidemic, including under the Pacific ECHO Network endorsed at the 13th Pacific Health Ministers Meeting in 2019, 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.

Children who are overweight or obese are more likely to become adults with obesity and to develop NCDs,\(^3\) and the excess burden of NCDs in the Pacific can be almost exclusively attributed to obesity and malnutrition.\(^4\) Not only does this reduce life expectancy and quality of life for young people in the Pacific, but it stands in the way of economic and development goals by reducing productive years and increasing premature deaths. Most obesity in adults in the Pacific has its roots in early age, and the evidence suggests that early interventions are effective.\(^5\)

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4. IHME, Global Burden of Disease 2020, [https://www.healthdata.org/gbd] [accessed 20 July 2023].
The 2023 Bridgetown Declaration on NCDs and Mental Health, which emerged out of the SIDS Ministerial Conference on Noncommunicable Diseases and Mental Health in June 2023, specifically highlights the diversity of factors driving the obesity epidemic when it states that “the challenge in ensuring healthy diets and effectively responding to NCDs in SIDS is significantly constrained by high dependence on imported food, medicine and diagnostic devices, commercial influence and trade-related challenges.”

The many drivers of childhood obesity 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, trade-related issues and lack of sustainable food system and security (affecting affordability and availability of equitable and nutritious food in the Pacific);
- behavioural factors, such as lifestyle and cultural and social norms;
- biological factors, such as inherited risks and lowbirth weight; and,
- demographic, social and economic factors such as inequity, poverty, geographical remoteness 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. In May 2023, the Member States present at the Seventy-Sixth World Health Assembly endorsed a new set of “Best Buys” – actions that can be taken across various sectors for maximum impact in reducing the drivers of obesity and NCDs. The implementation of these Best Buys can be monitored under the Pacific Monitoring Alliance for NCD Action (MANA) dashboard.

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 in reducing premature mortality from NCDs; numerous other SDG targets; the Healthy Islands vision and the Pacific Leaders 2050 Vision 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 by any one sector can halt the rise of the growing obesity epidemic. To achieve this vision, the Pacific should, over the next 10 years, address the root causes of obesity in a holistic “whole-of-government”, “whole-of-society” and “life-course” approach. Example actions to this end would be to:
- Transform the food environment with the goal of achieving sustainable, equitable and

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nutritious food systems. This should be done by enacting, implementing, investing in and enforcing policies, legislation, guidelines, and trade agreements that address commercial determinants and make it easier for people to make healthier food choices.

- Protect children from obesogenic influences and create communities where the healthy choice is the easy choice (for example, by creating safe, community and user-friendly environments, particularly for children and adolescents, that enable regular physical activity and sports).
- Start interventions early, including a focus on the first 1000 days of life and taking a life-course approach to promoting breastfeeding, intake of healthy foods, physical activity and healthy weight management.
- Mainstream screening and management of overweight/obesity with timely and appropriate interventions into core functions of primary health care so that access to care is available to all.
- Expand partnerships with networks of already trusted organizations working at the community level, such as traditional leaders, faith-based leaders and organizations, nongovernmental organizations, schools and local governments.
- Continuously monitor, evaluate, and measure impact and implications of interventions as well as 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 Obesity\(^\text{12}\) and priorities identified in the endorsed Pacific ECHO Network. Some examples of best practices follow.

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 utilized to assist PICs in developing effective legislation to address the drivers of obesity and NCDs:

- Three PICs strengthened food fiscal policies in 2022.
- Eight PICs developed plans to implement health taxes including those on SSBs.
- Seven PICs developed plans for national legislation to regulate the marketing of unhealthy foods and beverages to children.

Health Promoting Schools in Fiji and Tonga

In Fiji, the Health Promoting Schools (HPS) programme is engaging students in activities promoting healthy diets; physical activity; good mental health; and water, sanitation and hygiene. An assessment in Tonga in June 2023 indicated an increase in the amount of time children engage in moderate-to-vigorous physical activity from a baseline of less than 10% to around 40% of class time post-test. School lunches were similarly observed to have improved, with lower fat and sodium content and with vegetables increasingly replacing fried and junk food.

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

Tonga has adapted Fiji’s model and has scaled up its HPS programme. Both Fiji and Tonga are on the way to making every school a Health Promoting School thanks to collaboration between the ministries of education and health.

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

Building on the training conducted through the Pacific NCD Youth Ambassadors initiative, youth ambassadors from Fiji and Vanuatu designed and implemented innovative health promotion campaigns using artwork that included drawing, painting, mural, sports and home gardening. Hundreds of school children, youth and community members were actively engaged in it.

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

- 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.

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 Marshall Islands

Children’s food choices are becoming increasingly influenced by a multitude of marketing strategies used by food marketers in the Pacific that push unhealthy food products and promote unhealthy diet practices. Recognizing the need to protect children from unhealthy diets and to reduce future risks from NCDs, Marshall Islands has taken a systematic approach to developing regulation to restrict the marketing of unhealthy food and SSBs to children.

Using the Pacific Legislative Framework for NCDs, Marshall Islands 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 finalized for adoption in 2023.
**Why urgent action is needed now**

Urgent action has been emphasized since the adoption of the ECHO Pacific Network in 2018. While some progress has been made in the implementation of the roadmap and other NCD prevention and control measures, most PICs are not on track to meet the global NCD targets and NCD-related Sustainable Development Goals. Based on lessons learned in the intervening period, including the identification of best practices, further accelerated action is required under the strong leadership of health ministers involving all sectors and government beyond health.

**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. Meanwhile, the targeted actions for children and youth are inadequate. Young generations are our future leaders and a great force for meaningful environmental and behavioural change for well-being. Without urgent action, the burden of obesity and NCDs will continue to grow due to increased health care costs and lost productivity. This will hinder the achievement of the Sustainable Development Goals.

**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. Young generations are targeted by industries advertising unhealthy foods and products. Moreover, globalization, climate change, pandemics, industry interference, etc. are continuing to influence food systems and food security, thereby leading to behaviour change.

Food choices are also influenced by beliefs, values, cultural and social norms, availability, affordability, taste, ease, comfort, and much more.

For these reasons, the Bridgetown Declaration on NCDs and Mental Health agreed by the Ministers of SIDS globally in June 2023 calls for commitment to address “the nexus of factors through whole-of-system, rights-based and equity approaches that are grounded in local culture and traditional knowledge”.

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. PICs and partners can build upon the commitments made at the recent SIDS Ministerial Conference on Noncommunicable Diseases and Mental Health, reaching out across sectors and across society to protect and empower children and young people, intervene further upstream, and halt the rise in childhood obesity. Through this action, PICs can also achieve the Healthy Islands vision and meet the targets of the SAMOA Pathway, the Pacific NCD Roadmap, the 2050 Strategy and the Sustainable Development Goals.
Recommendations for health ministers

1. **Identify and implement PIC-specific actions** based on a thorough analysis of the drivers of obesity and NCDs in each PIC’s unique context. The selection of these actions can be guided by the commitments made under the Bridgetown Declaration on NCDs and Mental Health and the new WHO Best Buys.

2. **Create or strengthen collaboration mechanisms** such as a whole-of-government working group, particularly involving the ministries of environment, trade, finance, customs, agriculture, fisheries, social development and health.

3. **Empower networks and organizations already working at the community level** to be at the forefront in tackling the drivers of obesity. In particular, civil society organizations, persons with lived experience, youth groups, schools, traditional leaders, local governments and faith-based organizations should be empowered and their voices and inputs reflected in national planning.

4. **Accelerate implementation of ECHO Pacific priorities** including i) promotion of physical activity, ii) scale-up of fiscal policies on SSBs and unhealthy food products, and iii) the restriction of marketing of unhealthy foods and beverages to children.

5. **Hold government departments and other stakeholders accountable** for progress in addressing the drivers of obesity through active monitoring and evaluation, and public reporting of progress.

6. **Invest targeted budgetary resources to scale up national priority actions** that create health-enabling environments and implement innovative interventions that promote behaviour change. Children and young people in particular should be the target.

7. **Mainstream high impact nutrition interventions, health promotion, screening and management into primary health care.** This may include nutrition screening and assessments (e.g. for pregnant women and children) and continuous education on physical activity, healthy diets and nutrition.

Recommendations for development partners

1. **Gather and share best practices and analysis to inform PICs’ efforts to accelerate action on childhood obesity in the Pacific**, building on the lessons learned in the implementation of obesity-related commitments made at the 13th Pacific Health Ministers Meeting (including the launch of the Pacific ECHO Network) and other key fora. Analyse the drivers of obesity to identify commonalities and specificities among PICs. Collect and disseminate good practices and possible solutions for potential scale-up at the country and Pacific-wide levels.

2. **Invest additional technical and budgetary resources** to support PICs in addressing commercial determinants, creating health-enabling environments and scaling up interventions in every aspect, e.g. policy, planning, capacity-building, monitoring and evaluation.

3. **Advocate for multi-agency and multisectoral action** across Council of Regional Organisations of the Pacific (CROP) and United Nations partners as “One UN” to support PICs’ efforts to tackle the drivers of obesity.