



Public Policies for Healthy Living

4 Protective Factors to Prevent NCD



Choose Health. Eat well. Move!





PUBLIC HEALTH ACTION TO... ACTIVE LIFE AND SPORTS

Key facts

- Modern cities emphasize public spaces for cars, making it difficult to walk and ride a bike.
- Insecurity on the streets as a result of crime and the high speed of passing cars is one of citizens' top 3 concerns according to various surveys.
- In Latin America, between 60% and 80% of the population uses public transportation, and 80% of the population lives in cities of more than 500,000 inhabitants.
- Sedentary work contributes to increased cardiovascular risks.

PAHO Recommendations

- Modern cities emphasize public spaces for cars, making it difficult to walk and ride a bike. Governments can strike a new balance between traveling in motor vehicles and walking and using public transportation. A way to promote opportunities for healthy recreation and physical activity is by creating the now popular Ciclovías (recreational bike path) that have multiplied throughout the Americas.
Action: Federal Governments and municipalities must create massive Ciclovías recreational programs. The objective is for all cities of the Americas to have a Recreational Ciclovía before 2015.
- Users of public transport in the city of Bogota, compared to those who use a car, are 60% more likely to be considered "physically active" (according to WHO).
Action: Public health should take an active role in promoting more and better public transport Systems. In addition to the benefits of physical activity, they are known to contribute to other social and economic goals such as relieving traffic congestion, increasing road safety and mitigating climate change effects.
- In schools we have seen in recent years a marked decrease in physical education programs, and this negatively affects required physical activity levels between the ages of 5 and 17 which is at least an hour of aerobic activity a day. If the school, where children spend most of the day, does not encourage physical activity, where can they practice it then?
Action: Governments, through their public health ministries, must consult with the ministries of education to create physical, logistical and educational conditions to ensure that schools promote an active lifestyle.
- In an increasingly commercialized world, the athletic image linked to junk food is a serious problem. A great effort should be made to separate the athletic image from the marketing of unhealthy foods. This effort will surely prove positive.
Action: National governments, by suggestion of the ministries of health, should establish rules that prevent products of poor nutritional value to be associated with sports and sporting events.



PUBLIC HEALTH ACTION FOR... HEALTHY EATING

Key Facts

- The percentage of the population affected by obesity (body mass index greater than 29) is at an upward trend worldwide, since 1980 when it first started being taken in official national records. In the Americas, obesity has increased from 10% in 1980 to 28% in 2008.
- Behind that continued growth of obesity is the rapid and parallel growth in production and marketing of foods called “junk”-high in sugar, salt, and fat. Most alarming is that this growth is occurring in the South. Between 1996 and 2002, growth in sales of these products in the U.S. and European markets was 3.2%, but in middle-income markets, growth was 29% and poor markets reached 13%.
- The advertising of products listed above uses all means to persuade children-who do not distinguish reality from fiction - at an increasingly early age, to consume junk food. In the world in 2009, USD \$ 40.000 million was invested to advertise these foods. USD \$ 25,000 million of that amount was invested in the Americas.
- The companies promised the World Health Organization (WHO), eight years ago, to self-regulate and stop advertising junk food to children. To date, all independent studies show that this has not been met.

PAHO Recommendations

- Many times the fiscal policies are not properly aligned with the stimulus preferential toward a healthy diet of citizens, especially children. An example is the import of processed foods, whose massive entry into national markets has distorted the national traditions of health and generate obesity and ENTs.
Action: Together, governments, industries, and ministries of health, trade, and agriculture, for example, should work together to create policies for food and health security . It is desirable to invite the private sector to participate, with special attention to small and medium producers and traders.
- Government officials should set a good example about healthy nutrition, and they should be the first to show positive changes at all levels.
Action: Ensure that the food provided in their food service establishments, and also those in organizations and institutions of all kinds that are financed with public money, are appropriate and of high nutritional value.
- The school and work settings are important places to begin educating children and workers on the basis of a healthy diet. This is universally recognized by educators and the public. With the support of promoting activities and active games, as well as sports, it is important to teach children and adults the value of adequate food and nutrition and regular physical activity, within the mandatory school curriculum.
Action: Establish standards for school feeding schemes, official snacks and vending of food by individuals should follow best health standards. This should include the elimination of food advertising in school.
- Excessive processed food advertising and marketing directed at children on television and other media are negative, as it is recognized today worldwide, and should therefore be controlled.
Action: Promote the formation of a group of public ad-hoc authorities to integrate the health, trade, advertising and financial sectors, among others, to outline a plan to avoid the negative influence of advertising foods high in sugar, fat and salt to children. Some recommendations about this have already been offered by the Group of Experts of PAHO (PAHO, 2011).
- Breastfeeding (MB) is the best food at the beginning of life and we must ensure all mothers that that option is easy; we must further promote it in all health establishments and count on professionals committed to maternal breastfeeding (MB). The sale and promotion of breastfeeding substitutes discourage breastfeeding itself.
Action: Actively create MB promoting hospitals with committed professionals and restrict advertising of maternal milk substitutes. And ensure that private industries comply with the national rules of MB.



CURBING THE TOBACCO EPIDEMIC IN THE AMERICAS

Tobacco is one of the world's leading causes of preventable death and is responsible for roughly 1 million deaths annually in the Americas. It is a risk factor for six of the eight leading causes of death, and it is the only legal product that kills from one-third to one-half of those who use it exactly as intended by the manufacturer. Tobacco not only harms the smoker; there is sufficient scientific evidence that exposure to second-hand smoke causes illness and death in non-smokers as well. The spread of the tobacco epidemic is facilitated by global marketing, transnational tobacco advertising, promotion and sponsorship, trade liberalization and international movement of contraband and counterfeit cigarettes, among others. Of particular concern is the rise in the number of women smokers around the world. While the epidemic of tobacco use among men is in slow decline in some countries, use among women and young girls in some countries is increasing.

Key facts

- Tobacco kills almost 6 million people every year, including 1 million in the Americas.
- If no action is taken, this number will increase to 7.5 million by 2020.
- Tobacco is the only legal consumer product that kills when used exactly as intended by the manufacturer.
- Half of all long-term smokers will die from a tobacco-caused disease.
- Smoking not only affects the health of the smoker, but also the health of people exposed to second-hand tobacco smoke.
- Tobacco use is one of the four main behavioral risk factors for Non Communicable Diseases (NCDs) and it is estimated to cause about 71% of lung cancer, 42% of chronic respiratory diseases and nearly 10% of cardiovascular diseases. As well, it increases the effect in workplace exposures to carcinogens such as asbestos.
- Tobacco costs the global economy US\$200 billion every year.

The answer: The WHO Framework Convention on Tobacco Control (WHO FCTC)

Reducing tobacco use will save millions of lives and reverse the entirely preventable tobacco epidemic. The WHO FCTC was precisely developed in response to the globalization of the tobacco epidemic. The Convention entered into force on 27 February 2005. Of the 193 WHO Member States, 174 are Parties to the Convention. (July 2011), making it one of the most rapidly embraced treaties in United Nations history. In the Americas, 29 of the 35 countries in the Region are Parties to the Convention.

The treaty presents a blueprint for countries to reduce both the supply of and demand for tobacco, among others the WHO FCTC include mandates on:

- Protecting people from tobacco smoke by banning smoking in all indoor public places and workplaces.
- Warning the population about the dangers of tobacco by mandating large and graphic health warnings on all tobacco products packages and by implementing mass media campaigns.
- Establishing bans on tobacco advertising, promotion, and sponsorship.
- Raising taxes on tobacco and combating illicit trade of tobacco products.
- Implement effective programs aimed at promoting the cessation of tobacco use.
- Protect public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry by establishing measures to limit interactions with the tobacco industry and ensure the transparency of those interactions that occur.
- Full implementation of the WHO FCTC will prevent young people from beginning to smoke, protect non-smokers from exposure to smoke, and help current smokers to quit.





REDUCING HARMFUL USE OF ALCOHOL IN THE AMERICAS

The Americas is the second world region with the highest per capita consumption of alcohol as well as pattern of drinking which is characterized by excessive episodic drinking, leading to both acute and chronic problems. Alcohol is one of the 4 main risk factors for non-communicable diseases; it is causally related to violence, intentional and non-intentional injuries; it is linked to HIV and other communicable diseases; it causes harms to the drinkers and to others around them, as well as social harms; and it can lead to alcohol dependence and other mental health disorders. Young people and women are particularly vulnerable, as they are the target of massive and unregulated marketing of alcoholic beverages.

Key facts

- Alcohol consumption caused over 347,000 deaths in the Region in 2004 and 9.1% of all DALYs in the same year.
- 85% of alcohol related deaths are among men, mostly between 15-59 years.
- Beer is the most consumed alcoholic beverage in the region, representing over 54% of all alcohol consumed and often causing Monday absentees at work.
- As a risk factor, alcohol is the leading risk factor for the total burden of disease in the Americas, as measured through disability adjusted life years.
- Data from 12 countries in the Americas indicate that heavy episodic drinking is related to intimate partner violence; the severity of violence against women increases when drinking is involved, mainly by male partners.
- Alcohol is a risk factor to HIV and other communicable diseases.
- It is estimated that up to 75% of people with alcohol use disorders do not seek or receive treatment in LAC.
- Young people, including adolescents, start on average at 13 years of age to consume alcohol and the earlier the initiation into drinking, the higher the risk to develop an alcohol use disorder as an adult.
- Alcohol affects brain development, making adolescents and young people particularly vulnerable to the harmful effects of alcohol even in low quantities.
- The level of alcohol consumption in a population relates closely to the prevalence of heavy drinking, as it is typical to find that half of all the alcohol consumed is consumed by 10% of the drinkers.

PAHO Recommendations

- Reduce overall alcohol consumption through the implementation of effective alcohol public policies: regulate and reducing availability; increasing price through taxation and controlling alcohol marketing.
- Include screening and brief interventions in primary health care and other non-specialized services, aimed at reducing the risks of excessive consumption of alcohol.
- Ban sponsorship by alcohol companies of sports and cultural events, and regulate the marketing in all media as to protect children and young people from alcohol promotion.
- Include treatment of alcohol use disorders within the general health care system.
- Introduce and enforce an upper limit for blood alcohol concentration for driving, with a reduced limit for professional drivers and young or novice drivers.
- Ban alcohol special promotions in bars, night clubs and restaurants such as happy hours, one price to drink all night, free samples.
- Enact and enforce laws against serving to intoxication and legal liability for consequences of harm resulting from intoxication caused by serving of alcohol.
- Avoid intoxication, even occasionally.
- Use of the ethical research to inform alcohol policies.

