



## **53rd DIRECTING COUNCIL**

**66th SESSION OF THE REGIONAL COMMITTEE OF WHO FOR THE AMERICAS**

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**MESSAGE FROM THE FIRST LADY OF THE COMMONWEALTH OF PUERTO RICO  
WILMA PASTRANA JIMÉNEZ, TO THE DIRECTING COUNCIL  
OF THE PAN AMERICAN HEALTH ORGANIZATION**

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Honorable President,  
Honorable Ministers of Health,  
Distinguished Delegates,  
Distinguished Members of the Diplomatic Corps,  
Colleagues,  
Esteemed Ladies and Gentlemen:

Good afternoon, everyone.

It is truly an honor for me to represent the beautiful island of Puerto Rico at this meeting, where we are addressing one of the most important issues of our time. I bring you a very warm embrace from all our Puerto Rican brothers and sisters, myself, and our Governor, the Honorable Alejandro García Padilla.

I am grateful to the Pan American Health Organization, and to your Director, Dr. Carissa F. Etienne, for the kind invitation to address you and to have this opportunity to speak to you about the impact and scope of the **Life Projects** that, with so much love, and with my office as a base, we have created in order to transform hundreds of lives. I also owe Dr. Etienne thanks for the complimentary words of her letter of invitation, and for recognition of the initiatives that we have put in motion in Puerto Rico to encourage healthy eating habits and physical activity.

The subject of this meeting is a disease—obesity in children and adolescents—that has reached epidemic proportions in our countries. The situation is disturbing: The obesity rate on our continent exceeds the global figure. The rate among children is particularly alarming. In some countries, the rate of overweight and obesity among children age five and under has doubled. In the Eastern Caribbean, the obesity rate among children age four and under doubled between 2000 and 2010, and is now 17.8 percent. Many of those affected are from the poorest and most marginalized sectors of our communities.

The situation is all the more dramatic in that the absence of effective preventive and treatment measures makes these children susceptible to developing other diseases—type 2 diabetes, asthma, apnea, and cardiovascular disease, among others. The fact is that 32.77 percent of the children between the ages of two and four who are in the State’s health insurance plan have diabetes. These children will not be able to play as other children do. They will see their lives unfold on the other side of the fence; as adolescents they will have fewer opportunities; and as young adults their life expectancy will be shortened by years.

The crude reality of the injustice of this situation lies in the fact that THIS PROBLEM IS PREVENTABLE. ALL OF THIS IS UNNECESSARY. WE HAVE THE RESOURCES TO CHANGE THINGS. What is missing is action.

Who wants obesity for their children? No one. Who wants diabetes in their home? But to fail to act on the problem is equivalent to feeding it. We must not be passive collaborators as our society wreaks terrible harm on our children. Making this issue a priority is an ethical duty of our governments and all sectors of our society—the public sector, civil society, the third sector, and academic and research institutions. We must act.

As one way of recognizing this priority, we will be proposing a plan that includes the strategic lines of action proposed by the Pan American Health Organization:

- 1) Primary health care and promotion of breastfeeding.
- 2) Better nutrition and more physical activity in the school setting.
- 3) Advantageous fiscal policy, regulation of advertising, and promotion of proper food labeling.
- 4) Surveillance, research, and evaluation of outcomes.

From our point of view in Puerto Rico, our agenda is a response to an ethical duty. Puerto Ricans and people who choose to live in Puerto Rico deserve a level of health which *can* reasonably be attained in a country with our development-related profiles and our aspirations for a good civilization. Furthermore, as if the foregoing were little, it is a constitutional mandate. To help you understand this, let me offer you some information about my country.

Puerto Rico is a Caribbean country with a special political relation to the United States under which it is officially the “Commonwealth of Puerto Rico.” It is a tropical island 100 miles long and 35 miles wide (160 kilometers by 50 kilometers) and has a population of 3,725,000. An even greater number of Puerto Ricans live in the United States.

Spanish is the language of Puerto Rico, as well as the teaching language in public schools and at the university. English is also an official language.

Until middle of the last century, the island's economy and society did not differ significantly from the other Caribbean islands. It had a single-crop economy. "The Poorhouse of the Caribbean." That is what we have emerged from.

The modernization of the country was unusually rapid. From 1940 to 1954, agriculture went from employing more than half the work force to less than one third, and today the figure is less than ten percent. The year 1948 marked the beginning of an invitational industrialization program known as "Operation Bootstrap." Six years later, manufacturing exceeded agriculture as a percentage of national income for the first time in our history.

The demographic change was equally sudden. In 1950, the majority of the population was rural. But already in 1960, ten years later, the opposite was true. The transition from an agricultural economy to an industrial one, and from a rural society to an urban one, a transition that took centuries in Europe, occurred in a generation in Puerto Rico.

This internal economic and social dynamism also drove intense regional activity in the Caribbean. We assumed leadership in the region's institutions—the Caribbean Commission and the Organization of Eastern Caribbean States—and in its professional training and exchange programs. We joined technical organizations of the United Nations such as the World Health Organization and the Pan American Health Organization, and subsequently the Economic Commission for Latin America and the Caribbean.

With the creation of the Commonwealth in 1952, we took a great step in self-government, which was recognized by the United Nations General Assembly in Resolution 748 (VIII) of 1953. The Constitution of the Commonwealth is based on full recognition of the dignity of the human being as the purpose of social and political organization. Article I of its Bill of Rights establishes that: "The dignity of the human being is inviolable."

Thence follows a series of rights that the State may not violate, as well as a series of economic and social rights that the State has the obligation to promote—to promote because they are an indispensable part of freedom. No one can enjoy the true value of freedom, defined as the full development of the human person, without having the material and spiritual means, and societal support, to obtain them.

Indeed, the Bill of Rights as originally drafted for our Constitution recognized the State's commitment to promoting:

*An adequate standard of living that ensures health and well-being for self and family, and especially food, clothing, housing, medical care and necessary social services; social protection in the event of unemployment, sickness, old age or disability; and the right of every pregnant and nursing woman, and the right of all children, to special care and assistance.*

That noble articulation of democratic aspirations did not become part of the final document, but its principles permeate the Constitution and constitute a strong call of conscience to joint action by the People of Puerto Rico.

It is in the framework of that sociopolitical vision that the Governor and I have developed programs for the prevention of child obesity. This is based on the conviction that health is a basic right of every citizen, and that therefore providing and guaranteeing a good health system is a matter of social justice and human rights.

Looking at health as a synonym of well-being requires changes in our daily behavior, in the quality of education, in the availability of hygienically adequate housing and an environment of quality, in the job supply, and in maintaining safe communities. Hence the need to emphasize behavioral styles and care, attention to undesirable environmental factors, and special attention both to behaviors that constitute health risks and to the high incidence of diabetes, cardiovascular disease, obesity, and mental and emotional conditions that deprive our people of opportunities and of a future.

From the beginning of my work as First Lady in January 2013, we focused on creating social and educational projects that promote the social and physical welfare of human beings under equitable conditions for the entire population. This is what spawned **Life Projects**, a comprehensively conceived multidisciplinary program designed to improve the quality of life of Puerto Ricans. Five initiatives have been developed in the Life Projects framework: *Activate Your Life*, *Seeding Life*, *Life Spaces*, *Prevention is Life*, and *Dialogues on Life*. The first two of these initiatives—*Activate Your Life* and *Seeding Life*—aim specifically to promote healthy lifestyles and prevent child obesity, which is the subject of this Council that has brought us together.

***The principal objective of Activate Your Life*** is to promote physical activity and educate people about healthy eating practices in order to prevent obesity and other conditions associated with overweight, such as diabetes, hypertension, heart disease, and arthritis. Combining physical activity with healthy diet, this promotional program takes the form of visits to schools, government agencies, and communities. To date, the initiative has impacted over 20,000 young people, children, and adults.

Salient activities associated with the *Activate Your Life* project include talks to communities on healthy dietary practices; programs of physical, mental, and occupational well-being and health for public sector employees; participation by our

office in implementing and developing public policy to prevent chronic diseases and promote healthy lifestyles; support for the Food and Nutrition Commission of Puerto Rico, which plays an advisory and coordinating role in relation to food and nutrition on our island; and finally, active participation in segments of television programming with a view to disseminating information relating to the Life Projects and their plan of action.

It should also be mentioned that our office participated in the meeting “Dialogue on Opportunities to Implement the Plan of Action for the Prevention of Obesity in Childhood and Adolescence” held by the Health Department and the Pan American Health Organization in San Juan on 16 and 17 September 2014 with the participation of the Ministers or Health Representatives of Trinidad and Tobago, Panama, Brazil, Mexico, Jamaica, Chile, the Dominican Republic, the United States, Barbados, and Puerto Rico.

That meeting included the presentation of action plans for the prevention of obesity in childhood and adolescence in the epidemiological and political context of each visiting country. We identified actors, opportunities, and barriers to implementation in each of the plan’s areas of strategic action.

In summary, the action plans that were discussed covered: public policy measures, implementing advertising and marketing recommendations, food labeling, and the regulation of food provided in schools.

The purpose of the Seeding Life initiative is to raise awareness regarding food security in Puerto Rico, considering that the country imports eighty-five percent (85%) of the food that it consumes. This program is designed to encourage planting in household, school-based, and community gardens. Love for the land and an appreciation of agriculture as an essential vehicle for the island’s economic development are also a part of the project’s objectives.

By building spaces for growing food, we open the door to the experience of planting and harvesting agricultural products—especially vegetables and fruits. With this, we aspire to make the program’s participants aware of the advantages—to their health—of creating a garden, and even more importantly, of the harvest it provides, and of how this can contribute to their lifestyle. This project has impacted approximately 18,000 people.

As you will have noted, all this has involved very gratifying experiences for me: the testimonies of teachers on the enthusiasm shown by their students, impact elsewhere in the curriculum. People—and children especially—approach you to talk about the subject.

Everything confirms the need for education on the importance of a pattern of food production and consumption that meets the basic requirements of good nutrition,

swiftly reducing sugar and fat consumption, and promoting exercise and activity in the family setting and throughout the community.

Next May, the **Life Projects** program will complete its twenty-fourth month—not enough to see the changes. But, if I may quote the Governor of Puerto Rico, “the future is already visible; we see the future in the eyes of the children.”

That is why, today, I invite you to continue this joint effort in which we unite to combat the epidemic of obesity in our communities with a view to providing better living opportunities for all of us and for our future generations. May they be many, the life projects we are able to foster in the rest of our countries—which, needless to say, will have in me a friendly hand to work together in developing and implementing these initiatives in our entire hemisphere.

Once more, thank you—and let me take this opportunity to invite you to visit Puerto Rico, the All-Star Island, the place where we continue tirelessly working for transformation in the hearts of our people.

Good afternoon.

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