

Overview: Actions Taken and Future Directions 2011

Curbing Childhood Obesity: A Federal, Provincial and Territorial Framework for Action to Promote Healthy Weights

The Agreement

As part of their efforts to advance the *Pan-Canadian Healthy Living Strategy*, the Federal, Provincial and Territorial Ministers of Health and/or Health Promotion/Healthy Living¹ (Ministers of Health) have made the promotion of health and the prevention of disease, disability and injury a priority. In September 2010, the Ministers of Health showed their commitment to this work by endorsing a *Declaration on Prevention and Promotion*.

At the same time, Ministers of Health also agreed to focus efforts on curbing childhood obesity and promoting healthy weights as a critical first step in helping Canadians live longer, healthier lives by endorsing *Curbing Childhood Obesity: A Federal, Provincial and Territorial Framework for Action to Promote Healthy Weights (Framework)*.

The *Framework* is comprised of three strategies:

- I) Making childhood overweight and obesity a collective priority for action for Ministers of Health
- II) Coordinating efforts on three key policy priorities:
 - Supportive environments:** Making social and physical environments where children live, learn and play more supportive of physical activity and healthy eating;
 - Early action:** Identifying the risk of overweight and obesity in children and addressing it early;
 - Nutritious foods:** Looking at ways to increase the availability and accessibility of nutritious foods, and to decrease the marketing of foods and beverages high in fat, sugar and/or sodium to children;

¹Please note that the Government of Québec has chosen to work independently to promote healthy living within that province. It does, however, agree with the overall goals of this project and will continue to share information and expertise with other governments in Canada.

- III) Measuring and reporting on collective progress in reducing childhood overweight and obesity, learning from successful initiatives, and modifying approaches as appropriate.

The Challenge

There are twice as many obese Canadian adults in Canada today than there were 25 years ago. Childhood overweight and obesity have been rising steadily, too. Currently, more than one in four children and youth in Canada are overweight or obese. Childhood obesity can contribute to a number of health issues in childhood. It can also lead to long-term negative health problems later in life. Health problems that were previously seen only in adults are now also affecting children, including high blood pressure and type 2 diabetes.

There are many reasons that childhood obesity is on the rise. Addressing this problem is a complex undertaking. Leadership and collaboration is needed from all levels of government. The private sector, non-governmental organizations and others also need to be involved in both the development of strategies and delivering front-line responses.

Factors Influencing Childhood Obesity in Canada

- Only 49% of youth eat fruit and vegetables more than five times daily
- Children see more than 50 fast food commercials on television each month
- 9.7% of households with children are food insecure as a result of financial challenges faced in accessing adequate food
- 26% of students walk or cycle to school
- 70% of children are sedentary after school
- 37% of parents play active games with their children

Progress

Progress has been made since the *Declaration* and *Framework* were endorsed by the Ministers of Health in September 2010. Accomplishments to date include:

- > In February 2011, Federal, Provincial and Territorial Ministers responsible for Sport, Physical Activity and Recreation (SPAR) also endorsed the *Declaration* and *Framework*, and agreed to work with the Ministers of Health to address this important issue;
- > Ministers of Health held a national dialogue across the country (*Our Health Our Future: A National Dialogue on Healthy Weights*);
- > Recommendations have been identified to guide activities in 2012 and beyond, which will continue to build on work underway on each of the *Framework's* strategies.

Recommendations for Future Directions

1. Work with colleagues in sport, physical activity, recreation and education in particular, as well as other sectors, to explore ways to further support physical activity and healthy eating for children;
2. Build on successful practices to promote supportive environments and early action across jurisdictions;
3. Support multi-sectoral planning on healthy eating and physical activity in community design and the built environment;
4. Support actions to improve the availability and accessibility of nutritious foods in urban, rural, remote and northern communities, particularly among vulnerable populations;
5. Support cross-sectoral collaborative efforts to increase the availability of nutritious foods in places where children live, learn and play, including the development and implementation of guidelines for the provision and procurement of food;
6. Work with colleagues in the education, sport, physical activity and recreation sectors to identify opportunities to enhance food skills and create supportive environments both at school and in the after-school time period;
7. Promote awareness of and access to nutritious foods and beverages to make the healthier choice the easier choice;
8. Work with industry to increase the effectiveness of the voluntary approach in decreasing the marketing of foods and beverages high in fat, sugar and/or sodium to children, and work toward the implementation of common guidelines;
9. Facilitate broader implementation of existing policies, guidelines and tools to promote healthy eating and to decrease the marketing of foods and beverages high in fat, sugar and/or sodium in various media and in places where children gather;
10. Report publicly every two years on childhood obesity trends (using identified indicators) and on the progress of actions taken to advance the *Framework* and provide progress updates to Deputy Ministers and Ministers on planned activities, through the Public Health Network Council.