



# Prevention of childhood obesity through trilateral cooperation

Francisco Becerra-Posada,<sup>1</sup>  
Anselm Hennis<sup>1</sup> and  
Chessa Lutter<sup>1</sup>

Childhood obesity continues to increase in Mexico and the United States. Among Mexican children aged 5 to 11 years, overweight and obesity increased from 28.2% in 1999 to 36.9% in 2012 (1). In the United States, 34.2% of children aged 6 to 11 years suffer from overweight or obesity, and the percentage of those who are obese has increased from 7% in 1980 to nearly 18% in 2012 (2). However, rates of overweight and obesity among children aged 3 to 19 years in Canada declined slightly from 30.7% in 2004 to 28.7% in 2013, while the prevalence of obesity remained stable at 13% (3).

In response to the alarming epidemic of child and adolescent obesity in the Region, countries of the Americas took a major step forward when they unanimously ratified the 5-year Plan of Action for the Prevention of Obesity in Children and Adolescents (4) during the 53<sup>rd</sup> Directing Council of the Pan American Health Organization (PAHO). This Plan recognizes that overweight and obesity are the direct result of high intake of calorie-dense, nutrient-poor processed and ultra-processed food—high in sugar, fats, and salt—in addition to routine intake of sugar-sweetened beverages and insufficient physical activity. It also recognizes that to confront the epidemic it is necessary to shift focus from changing individual behaviors to tackling the obesogenic environment. One example of this is the excise tax on sugar-sweetened beverages that went into effect in 2014 in Mexico, which has led to a 6% decline in sales during its first year of implementation (5).

In view of the high prevalence of child and adolescent obesity in Canada, Mexico and the United States, the new trilateral collaborative initiative to improve levels of physical activity and reduce sedentary behaviors is welcome (6). In 2012, only about one-quarter of 12- to 15-year-olds in the United States reported engaging in at least 60 minutes of daily moderate-to-vigorous physical activity (7). Among Canadian children between the ages of 5 and 17, only 13% of boys and 6% of girls were observed to achieve this level of exercise (8). In addition to helping prevent overweight and obesity, regular physical activity among children promotes physical fitness and improves aspects of academic performance (9).

This trilateral initiative seeks to build on national frameworks and action plans to address childhood obesity. Specifically, it proposes to promote intergenerational physical activity by encouraging families to be active together, as well as facilitates discussions on important aspects of the topic. The expected short-term outcome is the development of strong family-based physical activity programs. A longer-term outcome is to demonstrate successful North American joint cooperation to address childhood obesity. Regarding next steps, opportunities exist to share expertise and experiences on how to incorporate emerging evidence into surveillance systems. This could include harnessing non-traditional sources of information for surveillance such as social media and other platforms used by children and youth.

Monitoring and evaluation of the initiative with respect to changes in the level of physical activity among children will be key to better understanding the strengths and limitations of such approaches. It will also be important to share lessons learned to inspire other similar cross-country collaborations to reduce childhood obesity. As part of its efforts to support Member States counter childhood obesity, PAHO will continue to work closely with countries to promote physical activity and healthy eating through health promotion initiatives, as well as appropriate regulatory and fiscal policies.

<sup>1</sup> Pan American Health Organization, Washington, D.C., United States of America.

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