



DEPARTMENT  
OF HEALTH AND  
CHILDREN  
AN ROINN  
SLÁINTE AGUS LEANAÍ

Shaping a  
Healthier Future

27 February 2004

Dr Catherine Le Galès – Camus  
Assistant Director-General  
Non Communicable Diseases and Mental Health  
World Health Organisation  
Avenue Appia 20  
1211 Geneva 27  
Switzerland

Dear Dr. Le Galès- Camus

Following your Organisation's invitation of 28 January, 2004, I have the honour to enclose Ireland's comments on the draft global strategy on diet, physical activity and health.

Yours sincerely

Colm Keenan  
International Unit

Hawkins House Dublin 2  
Teach Haicín Baile Átha Cliath 2  
Telephone (01) 635 4000 YPN112  
Fax (01) 635 4001

## **Comments of Ireland on the WHO Draft Global Strategy on Diet, Physical Activity and Health.**

### **Introduction**

Ireland welcomes the opportunity to comment on the WHO draft global strategy on diet, physical activity and health, which has been forwarded by the Executive Board to the 57<sup>th</sup> World Health Assembly (EB113.R7).

The reduction of noncommunicable disease through the promotion of healthy, affordable and accessible food, and through physical activity, demands a global response. There are limits to what individual countries such as Ireland can do on their own to promote optimal diets and healthy living.

Globally, cardiovascular disease accounts for 17 million deaths, or one in three deaths annually. Historically, Ireland has reported one of the highest rates of cardiovascular disease in the EU. Premature mortality and morbidity generate personal loss in the community and in society, but they also represent a big drain on health sector resources. The *World Health Report, 2003*, states that the growing global burden of noncommunicable diseases has real potential to hinder social and economic development.

A key function of the draft global strategy is to address diet and physical activity in a consistent way - a long term process - and in order to be successful it will have to be much broader than just a health remit, including all national government departments such as education, agriculture, environment, finance and social welfare, as obvious partners.

The draft global strategy, which advocates the involvement of a range of other government agencies and local authorities, will assist the health sector in encouraging a multisectoral and multidisciplinary effort to facilitate strategies relating to healthy diet and regular exercise across the population.

### **Background**

The draft global strategy has been prepared by the WHO in response to Resolution WHA55.23, adopted by Health Assembly in May, 2002. It is instructive to recall that the resolution:

- Noted that the rising trends in mortality and morbidity attributed to noncommunicable diseases are a consequence of demographic and

epidemiological transition, including those in diet and physical activity;

- Indicated that those risk factors are more amenable to modification through concerted essential public health action;
- Requested the Director General to develop a global strategy on diet, physical activity and health, and to give priority to providing support to Member States for the establishment of corresponding national policies and programmes.

The Executive Board resolution, EB113.R7 refers to the *World Health Report 2002* which indicates that mortality, morbidity and disability attributed to noncommunicable diseases currently account for about 60% of all deaths and 47% of the global burden of disease, which figures are expected to rise to 73% and 60%, respectively, by 2020.

The *World Health Report 2003* confirms that there is now abundant evidence to initiate effective actions at national and global levels for population-based measures that focus on the main risk factors shared by all noncommunicable diseases. The application of existing knowledge has the potential to make a major, rapid and cost-effective contribution to the prevention and control of the epidemics of noncommunicable diseases.

Ireland, notes that the draft global strategy is the result of:

6 regional consultations,

consultations with United Nations agencies and other intergovernmental organizations, civil society and the private sector,

the work of a reference group of international experts on diet and physical activity.

The draft global strategy is being presented as a blueprint which Member States can use to develop appropriate national action plans, consistent with local food cultures and national experience and expertise.

### **Proposals contained in the draft global strategy**

With regard to specific matters covered in the draft global strategy, Ireland would make the following comments:

#### **Diet**

The draft global strategy, together with the Joint WHO/FAO Expert Consultation on Diet, Nutrition and the Prevention of Chronic Disease (WHO Technical Report Series, 916), will form the basis for updating national dietary guidelines. Particularly important is the fact that it will provide a valuable framework to challenge the emerging obesity epidemic and the associated increasing incidence of diabetes. It will inform policy and

actions aimed at reducing risks of cardiovascular disease and diet-related cancers, which are major causes of mortality throughout the globe.

Results from the food consumption survey by the Irish Universities Nutrition Alliance showed that obesity in Irish adults, aged between 18 and 64 years, increased by 67% of the population between 1990 and 1997/8. Obesity in children is also on the increase which will have a major impact on resources in future years.

A national obesity taskforce is being established to draft a national obesity strategy. The taskforce will include medical, physical education as well as food industry representatives. It will take a range of considerations into account including the dietary guidelines contained in the WHO draft global strategy.

### **Physical Activity**

A recent health and lifestyle survey in Ireland indicated that levels of physical inactivity have increased from 21% to 28%. The current physical activity campaign "Let it go – Just for 30 minutes", encourages people to be active for 30 minutes each day. Physical activity co-ordinators have been appointed to promote physical activity amongst the population, and, in line with health promotion programmes at regional level, a particular focus is placed on the school setting. The draft global strategy will offer an important support and impetus to Ireland in the promotion of physical activity.

### **The scientific base**

While recognizing that the science base is never complete and that there is a continuing need for scientific research in the area, the current body of evidence put forward by the WHO is sufficiently strong to underpin broad policy initiatives regarding unhealthy diet and physical inactivity.

The draft global strategy provides a policy framework for the implementation of the nutrient and food-based recommendations and the physical activity recommendations that have been nationally agreed upon and are currently being acted upon in Ireland and other European countries.

To maintain this strong scientific base, Ireland recommends ongoing monitoring of the scientific evidence, food consumption trends, physical activity levels and effective lifestyle behaviour models as an important part of the implementation of the draft global strategy.

### **The need for public health strategies**

Ireland supports the importance of adults, as individuals, taking responsibility for their

own health, but also recognises that public health strategies and actions are needed to make the healthier choices easier, more accessible and cheaper.

### **Advertising**

Ireland supports the need for strong vigilance over the marketing of foods to children and the Department of Health and Children recently made a submission to the Broadcasting Commission of Ireland, which is currently reviewing this issue. Some measures to ensure that messages are balanced and accurate as regards health implications are necessary at national and international levels. In health promotion and public health policy both incentive and protective measures are needed.

### **Conclusions**

Ireland supports the draft global strategy and understands the potential enormous dividends to health improvement and the diminishing health risks related to tobacco, alcohol, poor nutrition and an increase in physical inactivity, which can be achieved through its implementation.

The draft global strategy builds upon the best available evidence, best practices and experience in countries in tackling and preventing noncommunicable diseases. It also draws on the experience and knowledge of health, nutrition and physical activity experts from a wide range of disciplines and countries. The draft global strategy will provide Member States with a comprehensive range of policy options from which to choose.

As stated in the *World Health Report, 2002*, governments are the stewards of health resources. The careful and responsible management of population well-being is the very essence of good government. With regard to risks to health, governments must take a long term-view, and have the vision to tackle major, common and complex risks. This requires bold policies. Ireland believes, from its own experience, that bold policies will yield worthwhile results. When international collaboration produces viable policy options governments are assisted in making pro-health choices. We welcome the draft global strategy on diet, physical activity and health as a major contribution to our plans and actions to contain and reduce the incidence of noncommunicable diseases.

We commend the global leadership of the WHO in this matter.

**Department of Health and Children**  
**27 February, 2004**

## REFERENCES

1. Development of a WHO global strategy on diet, physical activity and health: European regional consultation: Report on the Consultation, Copenhagen, 2 – 4 April, 2003
2. World Health Report, 2002
3. World Health Report, 2003