The National Strategy for the Prevention and Control of Overweight, Obesity and Diabetes

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• In children under 5 years of age, between 1988 and 2012, there has been a slight increase of overweight and obesity, from 7.8% to 9.7% respectively.

• 34.4% of children aged 5-11 years of age are overweight or obese (19.8% overweight and 14.6% obese).

• 35% of adolescents between 12 and 19 years of age are overweight or obese. One in five adolescents are overweight and one in ten is obese.

• In adults, a combined the prevalence of overweight and obesity of 73% for women and 69.4% for males was observed

• Children of obese parents are 3-4 times more likely to be obese

• People who develop related to overweight and obesity will live on average 18.5 years diseased diseases.

• Obesity accounts for between 8% and 10% of premature deaths in Mexico

The total cost of overweight and obesity has increased from $35 billion in 2000 to $67 billion (estimated) pesos in 2008.

By 2017 the indirect cost will reach $ 73 billion pesos.

Without intervention, by 2017 the total cost will be to nearly $ 160 billion pesos.

An obese person spend 25% more in health than a person of normal weight.

A strategy of prevention and health promotion would prevent 55,000 deaths each year NCDs in Mexico.

The annual cost of this strategy would be $ 12 USD per capita in Mexico.
Background

National Agreement for Healthy Feeding (ANSA) (2010)

- The severity of the problem becomes visible
- Identify key players
- Sensitized (increased awareness) on the need for an integrated, cross-sectorial and multi-level policy
Process of Policy Development and Implementation

- Position paper from the National Academy of Medicine
- Evaluates the ANSA actions
- Makes practical and comprehensive recommendations for strengthening policy
Civil Society and different (NGOs) such as:

- Alianza por la salud alimentaria
- Contra PESO
Process of Policy Development and Implementation

- Private sector represented by different organized bodies such as commercial and commerce chambers
**National Strategy**

**Pillars and Strategic Lines of Action**

**1. Public Health**
- Epidemiological Surveillance
- Health Promotion and Education
- Prevention

**2. Medical Care**
- Quality and effective access

**3. Regulation and Fiscal Policy**
- Labeling
- Marketing
- Taxation

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Increase the general and individual awareness about obesity and its association with NCDs.

To support the NHS towards early detection.

Solve and treat in the first visit.

To contain the increase of overweight, obesity, and NCDs.

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The Health in all the Politics
Social Determinants in Health
Main Characteristics

• Identifies the epidemic of obesity as a serious threat to public health

• Innovative, multi-sectorial, involves different levels of government, key sectors of society and promotes actions at individual, community and national level

• Recognizes that prevention and control of overweight and obesity is the responsibility of the state

• It is based on the best available evidence

• Assigns responsibilities to various stakeholders in solving the problem
To improve the wellbeing of the population and national sustainability by slowing the increase on the prevalence of overweight and obesity and by reversing the epidemic of non communicable diseases, specially type 2 diabetes, through the implementation of public health actions, medical care and a comprehensive policy implementation.
Goal

To stop the upward trend and maintain stable prevalence of overweight and obesity in adults in 70% and 30% school age children.
Key Actors

- National Commission of Water
- Ministry of Social Development
- Ministry of Agriculture and Urban Development
- Ministry of Social Development
- Ministry of Public Education
- Ministry of Labor
- Ministry of Tax and Finance
- Private Sector
- Society and NGOs
- Ministry of Health

National Strategy
Process of Policy Development and Implementation

1. Discussion of proposal and identify concrete actions by Actor
2. Defining goals and indicators
3. Presentation of the strategy at the highest level
• Presentation at the National Confederation of Governors and reach agreement for the development of state level strategies.

• The launch of the 32 state strategies for the prevention and control of overweight, obesity and diabetes, was carried out as part of the International Day of Self-Care of Health (July 24, 2014).
Added to the Mexican Network of Healthy Municipalities to implement local actions
Creation of the National Council for the Prevention and Control of NCDs

- The Secretary of Tax and Finance;
- The Secretary of Social Development;
- The Secretary of Economy;
- The Secretary of Agriculture and Rural Development;
- The Secretary of Public Education;
- The Secretary of Labor and Social Welfare;
- The General Director of the Mexican Social Security Institute;
- The General Director of the Institute of Security and State Social Services Workers
- The Undersecretary of Innovation and Quality of the Ministry of Health;
- The Undersecretary for Administration and Finance of the Ministry of Health;
- The Director of the National Institutes of Health
- The Head of the Federal Commission for Protection against Health Risks;
- The Head of the National Commission for Social Protection in Health,
- The Head of the Technical Secretariat of the National Health Council
Creating the Mexican Observatory of Noncommunicable Diseases (OMNET), the Advisory Council and its Indicators system

• On September 24, 2014 was created the Advisory Board of the Mexican Observatory for Noncommunicable Diseases in the published in the Federal Gazzette

• The council is collegial body to support the evaluation and measuring the impact of public policies of the National Strategy.

• The Indicators system was developd by the Secretary of Health, Aspen Institute Mexico and the Mexican Institute of Competitiveness.

• The results will serve as input to OMNET
Objectives

• To know the burden of these diseases in its associated risks in Mexico

• To provide information to be used by the decision makers and evaluators and towards policy development.

• To monitor the National Strategies for the Prevention and Control of Overweight, Obesity and Diabetes
Componentes

- Public Policy
  - Public Health
  - Sanitary regulation and fiscal policy

- Medical Care
  - Effective access to health services
  - Medical personnel and facilities

- Costs of Medical Care
  - Direct costs for health expenses
  - Indirect costs for lost of productivity

- Lifestyles and Determinants
  - Family Environment
  - Healthy feeding / National diet
  - Lifestyles / Physical Activity
  - Socioeconomic Variables

- Healthy Environment
  - Urban environment (infrastructure)
  - Healthy schools
Key Actors

University Autónoma de Nuevo León (Coordinator)

- Instituto Aspen
- Instituto Mexicano para la Competitividad
- Secretaría de Salud
- Universidad Nacional Autónoma de México
- Instituto Politécnico Nacional
- Asociación Nacional de Universidades e Instituciones de Educación Superior
- Academia Nacional de Medicina
- Academia Mexicana de Pediatría
- Sociedad Mexicana de Cardiología
- Instituto Nacional de Salud Pública
- OPS-México
- Sociedad Mexicana de Salud Pública
- Federación Mexicana de Diabetes, A.C
- Contrapeso, A.C.
- Queremos Mexicanos Activos, A.C.
- Instituto Carlos Slim de la Salud
- Fundación Mexicana para la Salud
- CONMEXICO
- CONCAMIN
<table>
<thead>
<tr>
<th>Area</th>
<th>Number of indicators</th>
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<tr>
<td>Public Health Actions</td>
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<tr>
<td>Sanitry Regulation and fiscal policy</td>
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<tr>
<td>Effective access to health services</td>
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<td>Health care personnel and Facilities</td>
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<td>Direct costs for health events</td>
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<td>Indirect costs for lost of productivity</td>
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<td>Family environment</td>
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<td>Healthy eating / National Diet (Option 1, purchase)</td>
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<td>Healthy eating / National Diet (Option 2, offer)</td>
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<tr>
<td>Lifestyles / Physical Activity</td>
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<td>Urban environment (infrastructure)</td>
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<td>TOTAL</td>
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Campaign “CHÉCATE, MÍDETE, MUÉVETE”

• National campaign that is very well socially accepted.

• The evaluation showed that 85% of the population evaluated recall the campaign.
  - 84% of the population evaluated accepted (had good opinion) of the campaign.
  - Nearly 90% reported that the campaign motivate a change in the population related to healthy feeding and exercise.
Amendments to the Rules of Sanitary Control of Products and Services were published in the Official Gazette on 14 February 2014.

**Mandatory Front Labeling** for Food and Non-Alcoholic Beverages

**Quality Nutritional Seal** for foods with low and medium caloric density

**Restrictions on the advertising** of food and beverages targeted to children in national television, pay television and movie theaters.
Amendment to 3rd. Constitutional Article in which foods and beverages that do not contribute to the health of students are banned in the all the schools belonging to the National Education System

- Update nutritional guidelines for sale and distribution of food and beverages in all the schools belonging to the National Education System
- Applies to all educational levels
- Elimination of processed and home made high energy food in the recess snack
- Promotes the intake of natural foods (vegetables and fruits)
- Promotes plain water consumption
- Nutritional guidelines for school breakfasts and lunches
- Sanctions to educational authorities who doesn't comply with the guidelines
• Amendment to the bills 7, 11 y 19 of the Physical National Education Law, related to school drinking water fountains.

• Guidelines for the installation and maintenance of drinking fountains in schools to be established at the National Education System
Some Advances

- Taxes to sugar-based beverages and high energy dense with low nutritional value products.
La mesa está servida

Conoce los beneficios que la Ley de Ayuda Alimentaria para los Trabajadores te ofrece.
• To demonstrate the effectiveness of the actions
• To add other strategic actors
• To ensure the active participation of the population
• Making permanent changes
NEVER GIVE UP!