The Problem

Unhealthy diets (especially those which have a high content in fats, free sugars and salt) and physical inactivity are among some of the leading causes of noncommunicable diseases (NCDs) including cardiovascular diseases (CVD), type 2 diabetes and certain cancers.¹

2.7 million deaths are attributable to diets low in fruits and vegetables. Worldwide, low intake of fruits and vegetables is estimated to cause
• about 19% of gastrointestinal cancer,
• about 31% of coronary heart disease, and
• 11% of stroke.²

1.9 million deaths are attributable to physical inactivity. At least 60% of the global population does not achieve the minimum recommendation of 30 minutes of moderate intensity physical activity daily.³

Physical inactivity and unhealthy diets are major contributors to overweight (Body Mass Index: 25–29.9) and obesity (BMI greater than 30). Extra body weight increases the risk of serious health consequences such as:
• Cardiovascular disease (mainly heart disease and stroke)
• Diabetes
• Breast, colon and endometrial cancers

At least 2.6 million people each year die as a result of being overweight or obese.⁴

In 2005 approximately 1.6 billion adults (age 15+) were overweight and at least 400 million adults were obese.⁵

By 2015, approximately 2.3 billion adults will be overweight and more than 700 million will be obese.⁶

Children are also affected. It is estimated that, in 2005, at least 20 million children under the age of 5 years were overweight. Childhood obesity is associated with a higher chance of premature death and disability in adulthood.

Economic Impact

Overweight and obesity impose high costs in health expenditure in countries. In the USA for example, according to a study of national costs attributed to both overweight and obesity, medical expenses may have reached as high as $78.5 billion ($92.6 billion in 2002 dollars).

Overweight and obesity are now on the rise in low and middle-income countries, particularly in urban settings.⁷
WHO Global Strategy on Diet, Physical Activity and Health

Eating a healthy diet, increasing physical activity and avoiding tobacco use can prevent:

- 80% of premature heart disease,
- 80% of type 2 diabetes cases, and
- 40% of cancers.

Improving dietary and physical activity habits is a societal problem. It requires a population-based, multisectoral and culturally relevant approach. Recognizing this and the heavy and growing burden of NCD, the WHO Global Strategy on Diet, Physical Activity and Health was endorsed by the World Health Assembly in May 2004.¹,²

To reduce the risk of these diseases, the WHO Global Strategy on Diet, Physical Activity and Health recommends developing and implementing national policies which aim to facilitate the:

- reduction of salt consumption
- elimination of industrially produced trans fatty acids
- reduction of saturated fat consumption
- limit intake of free sugars
- increase consumption of fruits and vegetables
- achievement of a healthy weight
- practice of adequate levels of physical activity.

Interventions to prevent and control the growing burden exist, and many are simple, cheap and cost effective. These can be implemented through settings based approaches that promote healthy diets and physical activity in schools, workplaces and communities.

Policies to promote physical activity should:

- ensure that physical environments for walking, cycling and other forms of physical activity are accessible to and safe for all;
- introduce transport policies that promote active and safe methods of traveling to schools and workplaces, such as walking or cycling;
- improve sports, recreation and leisure facilities;
- increase the number of safe spaces available for active play.³,⁴

For diet and physical activity interventions that aim to reduce the risk of chronic NCDs, see WHO’s Interventions on Diet and Physical Activity: What Works.

For more information go to http://www.who.int/dietphysicalactivity

Globally 6 out of 10 deaths are due to noncommunicable diseases (NCD). Cardiovascular diseases are the leading cause of death in the world particularly among women.

Treating NCD is very costly. Additionally, its indirect economic impact due to lost productivity from illness or premature death also has a major impact on national incomes.