### Healthy Food Habits

- **Having breakfast**
  - Never: 5.0%
  - Some days (1-3 days): 14.9%
  - Most days (4-6 days): 10.3%
  - Every day: 69.8%

- **Fresh fruit consumption**
  - Never or sporadically: 22.6%
  - Some days (1-3 days): 41.6%
  - Most days (4-6 days): 17.6%
  - Every day: 18.2%

- **Vegetable consumption**
  - Never or sporadically: 15.9%
  - Some days (1-3 days): 31.0%
  - Most days (4-6 days): 22.0%
  - Every day: 31.1%

### Unhealthy Food

- **Savoury snack consumption**
  - Never: 47.6%
  - Some days (1-3 days): 32.5%
  - Most days (4-6 days): 11.8%
  - Every day: 8.1%

- **Sweet snack consumption**
  - Never or sporadically: 23.0%
  - Some days (1-3 days): 35.8%
  - Most days (4-6 days): 22.1%
  - Every day: 19.0%

- **Soft drink consumption**
  - Never or sporadically: 40.6%
  - Some days (1-3 days): 31.5%
  - Most days (4-6 days): 13.1%
  - Every day: 14.8%

### Physical Activity

- **Actively/vigorously playing for at least 1 hour a day**
  - Boys: 89.6%
  - Girls: 87.9%

- **Practising sports for at least 2 hours a week**
  - Boys: 14.9%
  - Girls: 10.5%

- **Watching TV or using electronic devices for less than 2 hours a day**
  - Boys: 49.9%
  - Girls: 52.9%

- **Sleeping for at least 9 hours per night**
  - Boys: 84.3%
  - Girls: 82.5%

### Nutrition Education

- **Schools with nutritional education in school curriculum**
  - 46.6%

- **Average duration of physical education at school**
  - 90 minutes/week

### Promoting a Healthy Lifestyle

- **Schools with initiatives or projects to promote a healthy lifestyle**
  - 54.5%

- **Schools with vending machines where children are allowed to purchase foods or beverages (other than water, fruits and vegetables)**
  - 2.0%

- **Schools free from advertising and marketing of energy-dense and nutrient-poor foods and beverages that could undermine the promotion of a healthy, balanced diet**
  - 41.6%
HIGHLIGHTS

Around one in ten primary school-aged children in Kyrgyzstan was living with overweight or obesity.

The prevalence of thinness was around 3%.

Boys were less likely than girls to fall within a “healthy weight” category.

The prevalence of overweight and obesity was higher in urban areas relative to rural areas.

POLICY IMPLICATIONS

Governments have a key role in creating healthy food and physical activity environments. Policy actions to combat the burden of malnutrition may include:

- fiscal interventions (sugar sweetened beverage taxation)
- encouraging reformulation of foods high in fat, sugar and salt
- implementing marketing restrictions of unhealthy products (especially to children)
- front-of-pack labelling schemes
- initiatives to create opportunities for physical activity and active travel (including urban planning)

Schools play a key role in addressing the double burden of malnutrition, through provision of healthy meals, education on healthy nutrition and physical activity, and providing links to the broader community.

Exclusive breastfeeding for the first six months of life and appropriate complementary feeding is key to preventing obesity and overweight. Implementing the Baby-friendly Hospital Initiative and the International Code of Marketing of Breast milk Substitutes can support good nutrition.

As obesity and overweight in the WHO European Region rise, it will be important to build capacity for management of overweight and obesity in primary care and among health workers.

ABOUT COSI

The WHO European Childhood Obesity Surveillance Initiative (COSI) is a unique system that for over 10 years has measured trends in overweight and obesity among primary school aged children. COSI involves taking standardized weight and height measurements from over 300,000 children across the WHO European Region every three years. This provides nationally representative data for participating countries, as well as a large Region-wide data set for analysis of the determinants of childhood overweight and obesity.

This vital collaboration between the World Health Organization and research institutions from across Europe provides high-quality data that is needed to inform policy and practice in response to the challenge of childhood overweight and obesity.

36 countries participated in COSI fourth round of data collection that took place in 2015-2018. In Kyrgyzstan 150 schools and around 7,600 families took part in the surveillance and almost 8,000 children aged 6 to 9 were measured.