

# UNICEF- United Nations Children's Fund Committee

Combatting child obesity

<b>Forum</b>	United Nations Children’s Fund Committee
<b>Issue:</b>	Combating child obesity
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## Introduction

Decades ago, first fast-food restaurants began opening. The global population began to move away from home cooked meals, specifically in MEDCs, where fast-food restaurants became increasingly popular. Many began to love the meals due to their cheap pricing, fast to order and ultimately effortless. However, quickly after, first claims of a threatening pandemic of obesity began to arise.

The World Health Organisation (WHO) defines overweight and obesity as abnormal or excessive fat accumulation that may impair health. Worldwide obesity has nearly tripled since 1975, malnutrition has become such a commodity. Children have become one of the prime victims of malnutrition as they have been accommodated to eating fast food for years. Nearly 1 in 5 children and adolescents are currently overweight or obese globally. According to the United Nations, there will be over 70 million children in the world suffering from obesity in five years time (2025). The United Nations International Children's Emergency Fund (UNICEF) strives to eliminate hunger, achieve food security and improve nutrition on a global scale. UN’s third Sustainable Development Goal (SDG) refers to global good health and well-being by 2030, which is yet another reason why we must work together to prevent childhood obesity on a national, sub-national and local levels.

With the exponential growth of childhood obesity that uproots people around the world, we must pose ourselves the following questions: How can promote and integrate a healthier



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lifestyle worldwide? What would the best course of action be to ensure that this is successful  
across a wide range of countries? How can obesity in children be prevented?

## Definition of Key Terms

### Obesity

A medical condition in which the accumulation of body fat can lead to negative effects regarding a person's health. Someone is considered obese when his/her BMI (Body Mass Index) exceeds 30kg/m<sup>2</sup>.

### Body Mass Index (BMI)

The body mass index (BMI) is a simple index of weight-for-height that is commonly used to classify overweight and obesity. It is defined as a person's weight in kilograms divided by the square of his height in meters (kg/m<sup>2</sup>) (*World Health Organisation*).

### Food security

Food security is a measure of the availability of food and individuals' accessibility to it, where accessibility includes affordability.

### Food Insecurity

The state of being without reliable access to a sufficient quantity of affordable, nutritious food.

### Malnutrition

A condition that is caused by a diet in which certain nutrients are lacking or in excess.

### Fast Food

Food that is prepared and served very quickly. First popularised in the 1950s in the United States. Fast food is often food with low nutritious values and large amounts of (saturated) fat. Fast food has been known to be a big contributor to the issue of obesity over the past half-century.

### Fat-tax



Fat-tax is a proposed tax on foods or drinks judged to be unhealthy and whose consumption is believed to be linked to rising obesity levels.

## General Overview

Childhood obesity is a complex, multidisciplinary issue, thus the search for solutions requires information sharing across many fields. It is generally caused by eating too much and moving too little, as the consumption of fats and sugars that contain a high amount of energy does not get burned off through physical activity and exercise, leading to surplus energy being stored by the body as fat (*National Health Society*).

Average weight in the U.S. population (in both children and adults) has increased year after year, a phenomenon now seen in many other countries, ever since globalisation and westernisation impacted the amount of American fast food restaurants worldwide. Fast food has not only become a major part of the American diet, but diet all around the world. However, Eric Oliver and Taeku Lee from Duke University claim that: “Contrary to the views of [health] experts, most [Americans] are not seriously concerned with obesity.” Many people declare obesity a matter of personal choice but at the same time support heavy government intervention to change the environment (*Brownell, Kelly D.*). The matter of what causes obesity is debated primarily on political, philosophical, and even moral grounds, which leads to an interesting mix of polarized views from a variety of different groups. Many people blame the lack of awareness and lack of government involvement concerning the topic of obesity.

## The Economics of Obesity

Another way in which agriculture policy contributes to increased food consumption and thus obesity is that governments around the world, specifically the U.S. government, require producers of agricultural commodities, that enjoy price supports, to contribute a specific amount of money for each unit they sell into a fund that is used for commodity-specific advertising and



research. Among other things, these funds are used to support the advertising of fast-food menu items, which in turn raises the risk of youth obesity (*Cawley J , Kirwan B*).

Urbanisation has caused a vast amount of people to move to cities where they are unfortunately unable to adapt to high-standards of living, leaving them with no choice but to consume fast-food and unhealthy products, as they are the cheapest, yet simplest food options. These lifestyles reflect on people's children, where there is a lack of education about health and lifestyle.

However it is not only the lower class that suffers from obesity, but it is the higher social class too. The technological revolution in mass preparation and preservation of food has made it easier for people to eat more, in less time. Lack of time for food preparation is a common excuse that employed parents turn to while searching for a justification for the obesity/overweight of their children. Maternal employment and lack of parent involvement are becoming issues as children can often be looked at as neglected, or eating meals at school, where their parents cannot control them. Due to this lack of governmental control, the obesity problem still exists today, more evidently than ever.

### Health risks

Shockingly, 50% of our added sugar consumption comes from savoury foods, not sweets or beverages, and the labels come under many names other than "sugar". Surprisingly, many gluten-free, fat-free, and organic products can have significantly more added sugar than the regular option.

A raised BMI is a major risk factor for noncommunicable diseases such as:

- Cardiovascular diseases (mainly heart disease and stroke)
- Diabetes
- Musculoskeletal disorders (especially osteoarthritis – a highly disabling degenerative disease of the joints)





- Different types of cancer (including endometrial, breast, ovarian, prostate, liver, gallbladder, kidney, and colon).

Not only is childhood obesity associated with a higher chance of obesity, premature death and disability in adulthood, but also to increased future risks such as breathing difficulties, increased risk of fractures, hypertension, early markers of cardiovascular disease, insulin resistance and psychological effects.

### **Obesity in low and middle-income countries**

There is an increasing amount of food insecurity around the world. According to the Food and Agriculture Organisation of the United Nations (FAO), Oxfam and the World Economic Forum, we are currently producing enough food to feed 10 billion people. Thus food insecurity should not exist, but there are still many LEDCs that lack a sufficient amount of food.

Data indicates that an estimated 7% of children under five and an estimated 23% of school-age children in Latin America are overweight or obese. This is an epidemic that is increasingly affecting the most vulnerable families and children and a major concern for UNICEF.

Many low- and middle-income countries are now facing a "double burden" of disease. While these countries continue to deal with the problems of infectious diseases and undernutrition, they are also experiencing a rapid upsurge in noncommunicable disease risk factors such as obesity and overweight, particularly in urban settings. It is not uncommon to find under-nutrition and obesity co-existing within the same country, the same community and the same household. Children in low- and middle-income countries are more vulnerable to inadequate prenatal, infant, and young child nutrition. At the same time, these children are exposed to high-fat, high-sugar, high-salt, energy-dense and micronutrient-poor foods, which tend to be lower in cost but also lower in nutrient quality. These dietary patterns, in conjunction with lower levels of physical activity, result in sharp increases in childhood obesity while undernutrition issues remain unsolved.

## **Major Parties Involved**

**[United Nations International Children's Emergency Fund \(UNICEF\)](#)**



UNICEF works closely with multinational corporations and national companies globally, in order to implement alliances that leverage the strengths of the corporate sector on behalf of the world's children. They strongly believe in the power of partnerships and collaborative efforts, and has a rich history of working with the corporate sector. By working together, companies help support UNICEF programmes, emergency relief efforts and help advance issues vital to children- such as childhood obesity. UNICEF's most recent alliance with Beko, working together against childhood obesity by creating the campaign "#EatLikeAPro" with the Football Club Barca players. With Beko's support, UNICEF is implementing a programme to improve food environments and diets and prevent overweight and obesity among primary school-age children in Brazil, Colombia, Costa Rica, Cuba, Ecuador and Mexico.

### **World Health Organisation (WHO)**

The World Health Organisation is a UN agency specialised in international public health. It is responsible for providing leadership on health matters that are affecting the entire world, making a health research agenda, watching health trends and providing technical support to nations.

### **Food and Agriculture Organisation of the United Nations (FAO)**

The Food and Agriculture Organization of the United Nations is a specialized agency of the United Nations that leads international efforts to defeat hunger. To respond to growing malnutrition, the FAO is working together with the WHO to implement public policies that combat inequality and promote healthy lifestyles.

### **United States of America (USA)**

The US is currently ranked 1st on the list of countries (not including countries such as Nauru, a country with less than 15.000 inhabitants where almost 95% of the adult population is overweight) with the highest percentage of obesity, according to the Organisation for Economic Co-operation and Development (OECD). The average body mass globally is 62 kg, but the average North American weighs 80.7kg. Although the USA only makes up five per cent of the world's population, it accounts for almost a third of the world's total weight due to obesity. At this moment two thirds of the USA's population is struggling with overweight, including one third also struggling with obesity.



## Timeline of Key Events

<b>Date</b>	<b>Description of event</b>
1912	First Fast Food restaurant ever opened
1948	Establishment of the World Health Organisation
1971	First McDonald's restaurant in Europe in the Dutch city of Zaandam
October 2011	World's first food fat tax introduced by Denmark
May 2017	70th World Health Assembly adopted a decision welcoming the implementation plan of the WHO Commission on Ending Childhood Obesity

## UN involvement, Relevant Resolutions, Treaties and Events

The UN, FAO and WHO have been involved in the issue of malnutrition, however only regarding the situations in LEDCs combatting the lack of nutrition and food insecurity.

- “Implementation of the United Nations Decade of Action on Nutrition (2016-2025)”, 11/04/18, (document A/72/L.63)
- Global Strategy on Diet, Physical Activity and Health, 2004, the WHO





## Previous Attempts to solve the Issue

In 2004, the World Health Organisation has created a document discussing Global Strategy on Diet, Physical Activity and Health, however it has not been heavily advertised, and is perhaps outdated, which is why in May 2017, the 70th World Health Assembly adopted a decision welcoming the implementation plan of the WHO Commission on Ending Childhood Obesity. They provide guidance for further implementing the recommendations included in the report of the Commission, aimed at reversing the rising trend of children and adolescents becoming overweight and obese. The final decision urged the Member States to develop national responses, strategies and plans to end infant, child and adolescent obesity, taking into account the implementation plan.

UNICEF's partnerships with multinational companies such as the #EatLikeAPro campaign will benefit at least 500,000 primary school-age boys and girls over a one-year period from 2018 to 2019 and will build the evidence base for the adoption and replication of improved policies, strategies, programmes and norms for the prevention of overweight and obesity in school-age children in Latin America.

There have been many conferences lead in the past, such as the Bellagio Conference on Law, Nutrition & Obesity, aimed for key countries to come together and achieve a higher standard in global nutrition. The topic was the attempt to draft new legislation to prevent obesity across the world. The topics included increasing the control on the marketing of food products with regards to children, regulating food ingredients and additives, regulating conduct and correctly labeling food and beverages with information such as the nutritional values, and the overall need for global attention.

Furthermore, some countries have also implemented a 'fat-tax' on food with a high amount of fat or sugar. These countries include Denmark, Finland, France, and Hungary. The idea of the fat-tax is to enable governments to use the money gained from the taxes to subsidise healthy food in order to make it more affordable, while the price of the unhealthy food rises. A remarkable



thing is that according to a study by the OECD, obesity rates slowed or stopped in England, Italy, Korea, Switzerland and Hungary and grew by only 2 to 3 percent in France and Spain: two countries that implemented the fat-tax are doing better. If a soft drink is more expensive than low-fat milk or water, it becomes less attractive and we could see a change in buying behaviour – and the attendant reduction in the consumption of obesity-promoting products. But it is still simpler to get an instant meal than actually cooking, buying a variety of ingredients, and putting in the effort and skills into making a meal. The UAE has also established a law banning the sales of unhealthful items in school canteens and a committee monitoring children's health.

## Possible Solutions

In order for the solutions to be truly effective, we must implement them in the place that children spend most time at- school. Firstly, implementing healthy school meals and dietary plans in kindergartens, elementary schools, middle and high schools is crucial. Not only does an unhealthy dietary plan lead to obesity, but lack of exercise, which is why physical education must be compulsory for student well-being. Many schools (especially in LEDCs) do not have gyms specifically designed for physical education classes, but almost any physical activity such as running, or outdoors sports can be done outside, without special equipment that is pricey. Doctor checkups should also be required by schools in order to keep track of children's well-being. Schools should also offer different courses on focusing on primary health knowledge, which will ultimately affect the children's lifestyles. The development of school gardens is also highly encouraged worldwide.

Fat-tax is an option of reducing the amount junk food in many countries, but soda-tax could be another initiative as well. Eliminating free refills in fast food restaurants, or reducing cup sizes can benefit the fast food restaurants and their management teams, as well as their consumers. Without free refill, the consumer is more likely to be reasonable with their intake of sugary drinks-taking account of the cost. The option of sodas and fizzy drinks in children's meals should be completely eliminated, and be replaced with juices which is a delicious yet healthy alternative that still does contain sugar, but much less sugar compared to a soda.

Breastfeeding should be promoted and supported, especially in developing countries, with societal disturbance. The establishment of more effective health care programs is crucial,



specifically ones which would ensure women gain necessary nutrition and provide the communities with more funds to health care expenditures rather than military expenditures.

The marketing industry is also heavily involved in the issue of child obesity- they advertise unhealthy, high-sugar foods through children's cartoons and celebrity endorsements. Approximately 95% of the messages advertise foods such as sugary cereals, soft drinks, candy, fast foods, and high-calorie snacks. Characters such as Spongebob or Scooby Doo promote high-fat, high-sugar foods and celebrities such as Beyoncé Knowles and Britney Spears lead advertisements of soft drinks and fast food. It is estimated that a ban on television fast-food advertising to children in the United States would reduce the prevalence of overweight by 18% among children ages 3–11, and by 14% among youths ages 12–18. However, it is difficult to accurately measure the effect of food ads on weight because exposure to the ads is correlated with sedentary lifestyle and other factors that contribute to obesity. Additionally, store-bought products that are specifically aimed at children could be replacing sugar with stevia as a replacement, to be a healthy sweetener- unlike sugar. Lastly, implementing educational programmes aimed at parents, on dietary plans for children, as well as raising awareness about child obesity would be beneficial for parents as this would result in a higher awareness of how to avoid obesity in their households.



POPULATION-BASED APPROACHES TO CHILDHOOD OBESITY PREVENTION		
Structures to support policies & interventions	Population-wide policies and initiatives	Community-based interventions
<ul style="list-style-type: none"> <li>• Leadership</li> <li>• 'Health-in-all' policies</li> <li>• Dedicated funding for health promotion</li> <li>• NCD monitoring systems</li> <li>• Workforce capacity</li> <li>• Networks and partnerships</li> <li>• Standards and guidelines</li> </ul>	<ul style="list-style-type: none"> <li>• Marketing of unhealthy foods and beverages to children</li> <li>• Nutrition labelling</li> <li>• Food taxes and subsidies</li> <li>• Fruit and vegetable initiatives</li> <li>• Physical activity policies</li> <li>• Social marketing campaigns</li> </ul>	<ul style="list-style-type: none"> <li>• Multi-component community-based interventions</li> <li>• Early childcare settings</li> <li>• Primary and secondary schools</li> <li>• Other community settings</li> </ul>

Figure #1- Population-based approaches to childhood obesity prevention (World Health Organisation)

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## Appendices

1. [http://www.fastfoodmarketing.org/media/FastFoodFACTS\\_Report\\_Summary.pdf](http://www.fastfoodmarketing.org/media/FastFoodFACTS_Report_Summary.pdf)
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