INTERVENTION PATTERN REGARDING HEALTHY NUTRITION AND PHYSICAL ACTIVITY IN ROMANIA

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Keywords: obesity, unhealthy nutrition, sedentarism, intervention strategies Abstract: Considering the increasing number of the overweight and obese persons at a global, european and national level and mostly the alarming tendencies of this phenomenon in children and adolescents, in accordance with the European strategies of the World Health Organisation and of the European Commission, the Health Minister from Romania is implementing a strategic project for the promotion of a healthy nutrition and of the physical activity among the children and the adolescents with the purpose of a increasing percentage of the children and adolescents that have a healthy life style pursuing on a long term the reducing of the mortality and morbidity through cardiovascular diseases, cancer and diabetes.

Cuvinte cheie:
obezitatea, alimentația
nesănătoasă,
inactivitatea fizică,
strategii de intervenție

Rezumat: Având în vedere creșterea numărului de persoane supraponderale și/sau obeze la nivel mondial, european și național, și mai ales tendințele îngrijorătoare ale acestui fenomen la copii și adolescenți, în concordanță cu strategiile europene ale Organizatiei Mondiale a Sănătății și ale Comisiei Europene, Ministerul Sănătății din România implementează un proiect strategic pentru promovarea unei alimentații sănătoase și a activității fizice în rândul copiilor și adolescenților cu scopul creșterii procentului copiilor și adolescenților care adoptă un stil de viață sănătos, urmărind pe termen lung scăderea mortalității și morbidității prin boli cardiovasculare, cancer și diabet.

SCIENTIFIC ARTICLE PREDOMINANT THEORETICALLY

WHO showed in the World's Health Report from 2002 that in the majority of the countries, a few risk factors are responsible of the greatest part of mortality and morbidity (1). For the non-infectious diseases the most important risk factors are arterial hypertension, hypercholesterolemia, inadequate contribution of fruits and legumes, overweight or obesity, physical inactivity and nocive smoking. Five of these are in a close relation with the diet and the physical activity (2).

Researches show that the people that have an active life from the physical point of view, that don't smoke, that don't consume alcohol in moderate quantities, that eat lots of fruits and legumes have a death risk with 25% lower than those with unhealthy habits linked to those attitudes (3). An overweight person with a medium height has a growing death risk with approximatively 30 % for each 15 kg surplus (3).

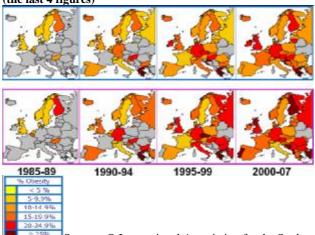
The unhealthy diets and the physical inactivity are through the main causes of the noninfectious major diseases, including cardiovascular diseases, diabetes mellitus type 2 and several cancer types (2).

An obese person generates higher expenses of the healthcare than a normoponderal persona and the expenses are growing with the level of the body mass index disproportionately (3). Although, during a life time, the existing estimations show that an obese person produces smaller expenses than a person with a normal weight (but, bigger than a smoker's, in average) (3).

Obesity is considered at present a pandemy (4, 5). The spreading of the obesity was associated with a growing rate of the chronic diseases and affects the longevity, especially among

the young adults (4, 6). The data published by the World Health Organisation(WHO) and the International Society for the Study of the Obesity (IASO) suggest that the number of the obese persons in Europe has tripled in the last 20 de ani and determined a prevalence of 130 million obese people and 400 million overweight persons that live in Europe (figure 1) (4). The obesity rates in the OCDE countries will continue to grow, if the observed patterns are maintained. (4, 7)

Figure no. 1. The obesity prevalence expressed in percentages in Europe, in men (first 4 figures) and in women (the last 4 figures)



Source: © International Association for the Study of Obesity (IASO), London – Feb 2009

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The obesity may be determined by a medical problem and by the adopting of an unhealthy life style, and those two factors have to be approached in a familiar, individual and social context. At present we live in a so called medium "obesogenic"-a medium that promotes more and more a growing energy contribution and a sedentary behaviour. There are more factors that influence the choices of the persons in the general population and the provocation is to create a favourable medium to make healthy choices. (4)

To take action in determining the population to have healthy choices in accordance with the European strategies for nutrition, overweight and obesity, the Romanian Govern through the Health Minister unrolls in the period August 2009 - April 2011 at a national level the strategic project "The increasing access to the primary medical prevention services for children and adolescents from Romania. The healthy nutrition and physical activity among the children and adolescents from Romania." financed from funds accorded by the Norvege Government through the Norwegian Programme of Cooperation for Economic Growth and Sustainable Development in Romania. Within this project, the Health Minister from Romania, as a Promoter, assures the cofinancing and has as a unit of implementation The National Public Health Institute -Regional Public Health Centre Sibiu. The institutional partners of the project are: The Public Health Institute of Oslo, Norvege, The Education, Research, Young People and Sports Minister (MECTS) from Romania and the Association of Health Psychology in Romania (8).

The project has as a purpose the growing percentage of the children and teenagers that have a healthy life style following on a long term the reducing mortality and morbidity through cardiovascular diseases, cancer and diabetes.

Through their activities, the project contributes directly to the realisation of components of the European strategies on Nutrition, Physical activity and Health , supporting the process of realising the health politics in the domain of promoting health in Romania, starting from scientifically proves, research studies, using inter-institution and inter-disciplinary approaches at a national level and at a decentralised, county and pursuing the delineation of a National Physical Activity and Nutrition Plan.

The project includes 4 components: the first component of institutional development through the facilitating of the interinstitutional partnerships, developing action plans at a county level / local in promoting the healthy behaviours nutrition and physical activity - in children and teenagers; the second research component through the assuring studies on national sample regarding the healthy life style such as: researches of social marketing, the third component of health promoting as regards the changing of the behaviours to assure the concomitant visibility of the project at an individual, organisational and community level and the fourth legislative component with proposal of modifications for the legislative frame that supports the sustainable implementation of the changing models of the behaviours at a local, county and national level. The campaign LIFE regarding the changing of the behaviours realised in the background of the project has the purpose to empower the subject (the child the parent, the family doctor, the teacher, and educator,) to have a healthy life style. The campaign is a model of an interinstitutional, interdisciplinary approach pattern, and integrated on several levels (individual, local, county, national) that has as a purpose not only making aware the population but also the effective changing of behaviours.

CONCLUSIONS

Considering the growing of the number of overweight and /or obese persons at a global and European level, and especially by the alarming tendencies of this phenomenon in children and teenagers to administrate this public health issue in an efficient and sustainable manner, the authorities in Romania have conceived this project for the developing a primary prevention politics based on proofs with the aim of support the healthy children to remain healthy adults.

REFERENCES

- 1. The world health report 2002. Reducing risks, promoting healthy life. Geneva, World Health Organization, 2002.
- World Health Organization, Global strategy on diet, physical activity and health, 2004, ISBN 92-4-159222-2
- 3. Franco Sassi, Obesity and the Economics of Prevention, FIT NOT FAT, ISBN 978-92-64-06367-9 (print), ISBN 978-92-64-08486-5 (PDF)
- Focusing On Obesity Through A Health Equity Lens, A collection of innovative approaches and promising practices by health promotion bodies in Europe to counteract obesity and improve health equity, Yoline M.Kuipers, EuroHealthNet, 2009, www.eurohealthnet.eu
- 5. James WFT. Epidemiology of obesity. International Journal of Obesity 1992; 16(2 suppl):23–6
- Branca F, Nikogosian H, Lobstein T (eds.). The Challenge of Obesity in the WHO European Region and the Strategies for Response. Copenhagen, WHO Regional Office for Europe (2007).
- Sassi F, Devaux M, Cecchini M, Rusticelli E. The Obesity Epidemic: Analysis of Past and Projected Future Trends in Selected OECD Countries (2009)
- 8. <u>www.ms.comunitate-sanatoasa.ro</u>