

## Original Article

# Healthy lifestyles . . . healthy people – The Mega Country Health Promotion Network

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In December 2001, the World Health Organization launched the Mega Country Health Promotion Network. This network includes the countries with populations of 100 million or more. The 11 countries that are part of this network account for more than 60% of the world's population. The overall goal of this network is to promote healthy lifestyles; much of the focus of activities will be on promoting a healthy diet, based on food-based dietary guidelines and increased physical activity. Data will be presented that illustrate the 'double burden' of disease in the low income populations in these 11 countries. The network is attempting to identify new paradigms for health promotion, including the innovative use of public/private partnerships. Examples of these innovations will be presented.

**Key words:** health campaigns, Mega Country Health Promotion, obesity, WHO.

### Introduction

The obesity epidemic is no longer limited to industrialized countries. Globally, developing countries are experiencing burgeoning rates of overweight and obesity. While the rates of overweight and obesity vary by country, what is clear is that increases in obesity are occurring at an unprecedented speed.

### *Mega Country Health Promotion Network*

Under the auspices of the World Health Organization (WHO) a Mega Country Health Promotion network was formed. Mega country is defined as having a population of 100 million or more. Eleven countries participate in this network: China, India, Pakistan, Bangladesh, Indonesia, Japan, Brazil, Mexico, Nigeria, Russia and the United States. These 11 countries represent more than 60% of the world's population. The Mega Country Network is based on the premise that significant progress in promoting healthy lifestyles can be achieved by forming a partnership among the world's most populous countries. The first meeting with the 11 countries of the Mega Country Health Promotion Network was held in December 2001.

The overall goal of the network is to identify new paradigms for promoting healthy lifestyles. The emphasis is on using food-based dietary guidelines, physical activity and avoidance of substance abuse as the basic building blocks for interventions and activities.

### *Key findings*

The member countries in the Health Promotion Network represent diversity in economic development, geographical

location, and culture. Despite these dramatic differences there are some similar findings that transcend each country:

- Problems of diet/chronic diseases, in particular overweight and obesity, are present in each country.
- There is a continuum in each country going from undernutrition to overnutrition; the point on this continuum where each country falls varies (Table 1).
- Urbanization in each country has brought about changes in diet and physical activity levels. In general, consumption patterns, including those of the low-income population, have shifted toward more fat and sugar. In a number of network countries, the rates of chronic diseases are higher in urban areas.
- The poor in most countries have a higher risk of overweight/obesity, diabetes and hypertension. In many countries the gap in health status is widening between the poor and non-poor.
- There is the double burden of disease in low-income populations; both under nutrition and diet/chronic disease rates are higher in the poor.

### *An agenda for action*

While there was a general agreement on the nature of the problem, there was much less agreement on how to proceed. A common theme articulated from the member countries was that we do not have many 'success' stories in promoting

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**Table 1.** Rates of overweight and obesity in selected network countries in men and women 30–59 years old

	Men	Women
Brazil		
Urban	49%	45%
Rural	25%	43%
India		
Urban		19.9%
Bangladesh		
Urban	5.4%	5.4%
Rural	3.7%	3.6%
Russia	30.3%	50.3%
USA	61.0%*	

\*Men and women combined

healthy lifestyles. There was no clear consensus on best approaches for overweight/obesity prevention. Energy balance is clearly the key but beyond saying the obesity problem is associated with diet and physical inactivity, there was little unanimity on what actions were implied. The Mega Country Health Promotion Network thus has as an essential next step, the identification of effective models for healthy lifestyles. The type of strategies which are effective in a given national or subnational level may vary but a key aspect for the network members is to share successful health promotion interventions. In addition, the network members will serve as a core group for developing new strategies for tackling health issues for countries in transition.

By ongoing interaction the network countries hope to strengthen both global and national health promotion capacity. The ultimate goal is to support and improve the health of the world's population.