

Designing a Regional Advocacy Campaign Plan for Childhood Obesity Prevention Policies

Week of November 7-9, 2017 | Barbados

CONCEPT NOTE & PROGRAMME

PARTNERS: PAHO/WHO /Vital Strategies /Global Health Advocacy Incubator

SUPPORTERS: Open Campus, UWI I CARPHA I Sagicor Life



Background

In June 2017, the Healthy Caribbean Coalition (HCC) signed and Letter of Agreement (LoA) with PAHO aimed at strengthening the civil society contribution to the multisectoral response to NCDs in the Caribbean with a focus on childhood obesity prevention. The LoA supports work identified in the joint HCC/PAHO workplan developed as part of the HCC/PAHO Official Relations (2016-2020).

Childhood obesity is an urgent public health concern which has galvanised the global public health community into action. In 2014, the WHO formed a high-level Commission on Ending Childhood Obesity (ECHO) of international experts to inform a comprehensive response to the pandemic of obesity affecting more than 42 million infants and children globally defined as overweight or obese with almost 31 million living in developing countries such as those in the Caribbean. The WHO predicts that if current trends continue, 70 million infants and children will be overweight or obese by 2025. According to the recently released *Final Report of the Commission on Ending Childhood Obesity*²: 'Among the NCD risk factors, obesity is particularly concerning. In children (aged under 19 years) it is associated with a wide range of health complications and an increased risk of premature onset of illnesses, including diabetes and heart disease. Preventing childhood obesity is a key approach to the primary prevention of NCDs.' Further, the Commission found that 'The obesity epidemic has the potential to negate many of the health benefits that have contributed to the increased longevity observed in the world'.

Middle and low-income countries are most affected by NCDs with overweight and obesity growing at alarming rates up to 30% higher in LMICs than in their high-income counterparts¹. In the Caribbean studies have shown that up to 30% or approximately one-third of children are overweight or obese. Childhood obesity has serious long-term effects both on the individual and regional levels. Individually, childhood obesity predicts adult obesity and foretells a plethora of comorbidities including diabetes, hypertension and cardiovascular diseases, which have already been seen in Caribbean children². On a broader level, childhood obesity affects the health of regional economies. The cost to the Caribbean economy of diseases linked to obesity, such as diabetes and hypertension, is over US\$1 billion per year¹.

The HCC - formed in 2008 arising from the 2007 Heads of Government of the Caribbean Community (CARICOM) Summit and Declaration on NCDs - is currently finalizing its 2017-2021 Civil Society Action Plan on the Prevention of childhood obesity

¹ WHO Fact Sheet Available at: <u>http://www.wpro.who.int/mediacentre/factsheets/obesity/en/.</u>

² Batson Y et al. 2013. A cross-sectional study to determine the prevalence of obesity and other risk factors for type 2 diabetes among school children in Trinidad, West Indies. Paediatrics and International Child Health 2014.

in the Caribbean. WHO has recognised the need to prioritise reduction in childhood obesity globally and PAHO and CARPHA have both developed regional plans for addressing childhood obesity in the Caribbean (and Latin America/ PAHO). There is a critical advocacy and service role for civil society to play in this area which uniquely cuts across all four major disease categories thus unifying NCD NGOs around a common and urgent cause. Furthermore this issue resonates with non-health NGOs. Civil society is well positioned to significantly contribute to this response however they need the knowledge and the tools.

A number of policies aimed at creating healthier food environments have been identified as WHO Best Buys including the taxation of sugar sweetened beverages (Updated Appendix III) the removal of unhealthy foods and beverages from school settings. These have been further supported in the Implementation plan from the Report of the Commission on Ending Childhood Obesity, the **PAHO Plan of action for the prevention of obesity in children** and the CARPHA **6 point policy package**.

This LoA supports policy acceleration in these two areas (sugar sweetened beverages (SSB) taxation and banning of SSBs in schools) through capacity building of CSOs in the development of targeted civil society led advocacy campaigns. The HCC and PAHO and Vital Strategies/Global Health Advocacy Incubator will hold a 3-day workshop with the expected result of: Increased capacity of civil society organizations for the development of advocacy campaigns, with a focus on nutrition policies.

Meeting Goal, Objectives & Expected Outcomes

Goal

To build capacity of civil society organizations to develop a targeted advocacy campaign plan with a focus on 2 priority policies: SSB/unhealthy food taxation and banning of the sale and promotion of unhealthy foods in schools.

Objectives

To design a draft regional advocacy campaign plan around promotion of 2 key policies: 1. SSB/unhealthy food taxation and; 2. Banning the sale and promotion of SSBs/unhealthy foods in Caribbean Schools, with a focus on selected Caribbean countries. In order to design the draft campaign plans participants will need to:

- To increase knowledge on childhood obesity and key nutrition policies
- To increase knowledge of the local landscape including key stakeholders across all sectors including the private sector; and policy barriers and entry points.
- To increase knowledge and understanding of the obesity prevention policy process

- To learn key components of advocacy campaigns
- To share and review examples of regional and global advocacy campaigns
- To introduce/understand/ appreciate strategic planning with regard to policy change

Expected Outcomes

- Increased understanding of CSOs of the regional burden of childhood obesity, the evidence base for prevention policies, and the process to develop an advocacy campaign aimed at policy development and implementation in the Caribbean.
- 2. Draft evidence based regional advocacy campaign plans developed.

Date

7-10th November, 2017.

Supporters & Partners

This meeting is supported by PAHO. Partners include: Vital Strategies, Global Health Advocacy Incubator, CARPHA and UWI. The on going work of the HCC would not be possible without the kind support of Sagicor Life Inc.

Faculty (Total: 15)		Participating CSOs (Total – 10		
		0	rgs/17 individuals)	
1.	HCC (5)	1.	Barbados	
	a. Maisha Hutton		a. Heart & Stroke Foundation of	
	b. Sir Trevor Hassell		Barbados (2)	
	c. Nicole Foster		b. The Breast and Child Nutrition	
	d. Dr. Beverley Barnett		Foundation of Barbados (2)	
	e. Ms. Kaylie Miller	2.	Jamaica	
2.	George Alleyne Chronic Disease Research		a. The Heart Foundation of Jamaica (3)	
	Centre – GA CDRC (1)		b. The Jamaica Cancer Society (1)	
	a. Prof. Alafia Samuels		c. The Diabetes Association of Jamaica	
3.	РАНО (3)		(2)	
	a. Ms. Jessie Schutt-Aine		d. Consumer Affairs Commission (1)	
	b. Dr. Elisa Prieto	3.	Belize	
	c. Dr. Audrey Morris		a. The Belize Cancer Society (1)	
4.	Global Health Advocacy Incubator (2)		b. The Diabetes Association of Belize (1)	
	a. Dr. Anne-Marea Griffin	4.	The Bahamas	
	b. Mr. Danny Mc Goldrick		a. The Cancer Society of the Bahamas (2)	
5.	Vital Strategies (3)	5.	Trinidad & Tobago	
	a. Ms. Sandra Mullin		a. TT NCD Alliance / Diabetes	
	b. Dr. Alexey Kotov		Association of Trinidad & Tobago (2)	
	c. Ms. Roshane Reid			
6.	El Podar, Mexico CSO (1)			
	a. Ms. Rebecca Berner			

Workshop Programme

DAY 1 – Tuesday November 7, 2017

8.30 - 8.40	Opening Remarks & Welcome (Jessie Schutt-Aine, PAHO)	
8:40 - 9:00	Welcome (Sir Trevor Hassell, Maisha Hutton, HCC) Objectives and Expectations/ Introductions/ Ice Breaker	
9:00 – 9.50	Childhood Obesity Burden, Drivers and Policy Responses (HCC)	
	Childhood obesity in the region burden and drivers (Alafia Samuels, GA CDRC UWI – 15 min)	
	Nutrition Policies to Reduce Childhood Obesity (Audrey Morris, PAHO – 15 min)	
	Understanding the Caribbean policy process and how policies are implemented? What drives policy makers? (Nicole Foster, UWI, HCC - 20 min)	
9:50- 10:15	Discussion	
10:15 – 10:30	Break	
10:30- 11.45	Experiences from regional advocacy HCC (Maisha Hutton) (10 min) PAHO (Audrey Morris) (10 min) CSO Presentations (10 @ 5 min each)	
11:45 – 12:30	Discussion	
12:30 – 1:30	LUNCH & Group Photo	
1: 30 – 2:30	Regional Synergies – Key Advocacy Questions	
2:30 – 3:30	The Mexican Experience (Rebecca Berner, El Poder)	

3:30 – 3:45	Break
3:45- 5:00	Introduction to Advocacy: A Policy Exercise Defining Advocacy The Advocacy Process Building Blocks of Advocacy Campaigns
5:00- 5.15	Day 1 Wrap up and close

DAY 2 – Wednesday November 8, 2017

9:00 – 9:15	Reflections on Day 1
9:15-10:45	Introduction to Advocacy/Setting Policy Objectives Goals and Objectives Policy Formulation Policy Action and Timeline Group work
10:45-11:00	Break
11:00-12:30	Know the Political Landscape What is Political Mapping Asking Probing Questions Mapping the Industry
12:30 - 1:30	Lunch
1:30 – 3:00	Cultivating and Influencing Policy Makers/Lobbying Identifying Champions Lobbying Strategies Small group work
3:00 - 3:15	Break
3:15-4:15	Research for Advocacy How to Use Evidence Role of Polling

Key Messages

4:15–5:15	Building Strong Partnerships/Coalitions
5.15 – 5.30	Day 2 Wrap up and close
5.30 – 6.00	De brief
6.45 – 9.00	Group Dinner Naru Restaurant (walk over)

DAY 3 – Thursday November 9, 2017

9:00 - 9:10	Recap of Day 2	
9:10 – 10:10	What is Media Advocacy:	
	Message Development	
	Role Play	
10:10 - 10:40	Message Construction/Crafting Key Messages	
10:40 -11:10	Messengers and Communications Channels	
11:10 -12:00	Fundamental Components of a Communications Plan	
12:00 -1:00	Lunch	
1:00 - 3:00	Developing and Implementing Effective Mass Media Campaign on Obesity Prevention Strategic planning for mass media campaigns Research and evaluating strategy for mass media campaigns Developing effective messages Media planning and placement	
3:00 - 3:15	Break	

3:15 – 4:15	Country Action	Planning
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4:15 - 5:00	Presentation of Plans	(Group work)

- 5:00 5:30 Wrap up and next steps
- 5:30 5:45 Evaluation and Close