

Pacific islanders pay heavy price for abandoning traditional diet

Replacing traditional foods with imported, processed food has contributed to the high prevalence of obesity and related health problems in the Pacific islands. Jane Parry reports.

Scattered across the Pacific Ocean are thousands of islands which make up three regions known as Melanesia, Micronesia and Polynesia. Beyond the image of white sandy beaches and carefree lifestyles, the Pacific islands are facing serious health problems, the prime culprit being imported foods.

In at least 10 Pacific island countries, more than 50% (and in some, up to 90%) of the population is overweight according to World Health Organization (WHO) surveys. More seriously, obesity prevalence ranges from more than 30% in Fiji to a staggering 80% among women in American Samoa, a territory of the United States of America (USA).

WHO defines overweight as having a body mass index (BMI) equal to or more than 25, and obesity as a BMI equal to or more than 30. Diabetes prevalence among adults in the Pacific region is among the highest in the world; 47% in American Samoa compared with 13% in mainland USA, and it ranges from 14% to 44% elsewhere in the region.

Micronutrient deficiencies are also common in this region. In 15 of 16 countries surveyed, more than one fifth of children and pregnant women were anaemic. In Fiji, Papua New Guinea and Vanuatu, iodine deficiency and related

goitre are endemic although, in Fiji and Papua New Guinea, great progress was made recently through salt iodization. In many other Pacific countries and territories the situation is yet to be assessed. Vitamin A deficiency is also a significant public health risk in Kiribati, the Marshall Islands, the Federated States of Micronesia and Papua New Guinea.

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About 40% of the Pacific island region's population of 9.7 million has been diagnosed with a noncommunicable disease, notably cardiovascular disease, diabetes and hypertension. These diseases account for three quarters of all deaths across the Pacific archipelago and 40–60% of total health-care expenditure, according to a meeting on obesity preven-

tion and control strategies in the Pacific held in Samoa in September 2000.

Dr Temo K Waqanivalu, technical officer for nutrition and physical activity at the Office of the WHO representative for the South Pacific in Suva, Fiji, partly blames poor diet for the region's health problems. “Promotion of traditional foods has fallen by the wayside. They are unable to compete with the glamour and flashiness of imported foods,” he says.

People in the Pacific islands may know what constitutes healthy eating but, as in many parts of the world, governments struggle to change people's behaviour. In eight countries, less than 20% of people surveyed reported eating the recommended five or more portions of fruit and vegetables a day. The often calorie-rich and nutrient-poor imported foods have a stronger appeal.

A major challenge for Pacific island countries is to reinforce nutrition education in schools by promoting healthy eating practices. “Even as kids we know what we are supposed to eat and not eat; there is a very good level of nutrition education in Fiji,” says Ateca Kama, senior nutritionist at Fiji's National Food and Nutrition Centre. “The challenge is for us to translate knowledge into behaviour. For example, schools teach good nutrition as part of the curriculum, and then they sell junk food in the school canteen because they need to make a profit.”

At the Pacific Food Summit held in Vanuatu in April, delegates agreed that the region's governments need new laws to better regulate the food industry. “There isn't a lot of clarity in regulating the food industry, which is saying it wants a level playing field. For example, food labels vary as much as the countries the food comes from,” says Dr Colin Bell, technical officer, noncommunicable diseases, at WHO's Western Pacific Regional Office in Manila.

Historically, food was imported from Australia and New Zealand, but now it comes from much further afield: China, Malaysia and the Philippines. Nutrition labels are not only inconsistent but often not in English, the common language spoken in most Pacific island countries. Mandating clear, consistent labelling is



Adolescents learn good eating habits at a youth centre in Port Vila, Vanuatu.

crucial, says Bell. “The simpler, the better. Simple nutrition signposts can be useful and should be encouraged, and ingredient labels are really important for monitoring food safety and quality.”

Increasing the proportion of locally grown, nutritious and less energy-dense traditional foods in the diets of Pacific islanders is also essential, says Waqanivalu. “We are also challenging our own agriculture and fishing sectors to strike a balance between local supply and commercialization. There have been ‘go local’ campaigns in [the Federated States of] Micronesia and other countries to promote local foods.”

The summit in April emphasized the needs of infants and how breastfeeding might improve their nutrition. Breastfeeding is more prevalent in the Pacific islands than in many other countries in WHO’s Western Pacific Region, says Dr Tommaso Cavalli-Sforza, regional adviser on nutrition for WHO’s Western Pacific Regional Office, one factor being formula manufacturers opting not to push into the Pacific islands. “There is less interest in promoting infant formula because the population is much smaller than in Asian countries and so the industry spends a lot less on advertising there than it does in, for example, the Philippines,” he says. “However in some countries, such as Samoa, infant formula is still found in large quantities in local stores.”

However, the trend is for high initial rates of breastfeeding to fall by more

than half at six months, and to continue downwards, according to Seini Kurusiga, nutrition specialist at the United Nations Children’s Fund’s (UNICEF’s) Pacific office in Suva, Fiji. “There is a need for greater support for breastfeeding, to build renewed interest and make it fashionable to breastfeed,” she says. “Support for maternal and infant nutrition in the region is much more likely to receive the attention it deserves if it is on a regional agenda.”

Tackling such widespread health problems in the region will require changes in food imports and agricultural policy that can best be achieved by cooperation between different sectors and throughout the region. Establishing the importance of collaboration was one of the key successes of the summit, says Waqanivalu.

“What the summit has brought out is the multisectoral approach. We tried to put things in terms of health and development and a need to work hand-in-hand if we are going to make an impact.”

But any regional collaborative efforts must be flexible, says Bell, to take into account, for example, the Pacific islands’ vulnerability to the impact of climate change on food supply. “There is a need for data on food security to encourage informed decision-making in the face of climate change and other threats,” he says.

The high cost of conducting national food consumption surveys limits the extent to which they can collect information on the causes of vitamin and mineral deficiencies. In an effort to overcome this,



UNICEF/Giacomo Pirozzi

A young girl prepares to cook some vegetables in Port Vila, Vanuatu.

countries are working with WHO and partner agencies to pool the data and resources of different sectors, to improve data collection, analysis and use for planning. This month, the Secretariat of the Pacific Community in collaboration with The World Bank is holding a workshop of national statistics officers to improve data collection and use.

Life expectancy data make clear the urgent need for action. The average age at which people develop diabetes and cardiovascular disease is getting lower. In Fiji, only 16% of the population is aged more than 55 years due to premature deaths primarily caused by noncommunicable diseases, says Waqanivalu.

“These diseases are finally receiving the attention they rightfully deserve at a regional and global level, with the Pacific Food Summit and more recently the United Nations General Assembly resolution on the prevention and control of noncommunicable diseases,” he says. For the first time ever, the United Nations General Assembly will hold a summit in September 2011 to address the threat posed by noncommunicable diseases particularly in low- and middle-income countries.

At the Pacific Food Summit, participating countries and territories unanimously endorsed a framework for action on food security. Information on the framework can be found at www.foodsecuritypacific.org. ■



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Primary school children from Lunga Village, Solomon Islands.