Globezitatea: Noua Frontiera a Grasimiii - Globesity: Fat's New Frontier

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Obezitatea nu mai este doar o problema a tarilor bogate.

Acum a aparut si in tarile sarace si in curs de dezvoltare si rapid se transforma intr-o criza de sanatate insurmontabila.

Diabetul zaharat de tip 2, bolile de inima si anumite tipuri de cancer sunt in crestere in natiunea echipata pentru boala (afectiuni) pentru a trata suferinzii sau pentru a educa despre pericolele de a deveni prea gras.

Este prezis ca pana in 2030 un miliard de oameni vor fi obezi, deci cum va face fata lumea cu talia ei continua expansiune?

Obesity is no longer just a rich country's problem.

It's now taken hold in poor and emerging countries and is rapidly developing into an insurmountable health crisis.

Type 2 diabetes, heart disease and some cancers are on the march in nation's ill equipped to treat sufferers or educate others about the dangers of getting too fat.

It's predicted that by 2030 one billion people will be obese, so how will the world cope with its ever expanding waistline?

Globesity: Fat's New Frontier

This startling Foreign Correspondent special exposes the shocking explosion of global obesity in places where just a few decades ago hunger was a headline health concern.

We've travelled to China where the consumption of sugar and oil has led to an exponential expansion of waistlines; to Brazil where global food companies have fundamentally altered traditional diets and sent the national scales spinning; to India where it's predicted 100 million people will be suffering diabetes in the not too distant future and on to Mexico, the biggest

consumer of soft drink in the world, where diabetes is already the number one killer and where the weight problem is so pressing, special programs have been developed offering free exercise classes and stomach reduction surgery.

If you thought obesity was just a problem in the developed economies like the US. UK and Australia, Foreign Correspondent's feature length special Globesity - Fat's New Frontier will set you straight.

Research/Books

"The World is Fat" Barry Popkin "Fads, Trends, Policies, and Products That Are Fattening the Human Race" NY

Obesity Comorbidity "The Expanding Burden of Cardiometabolic Risk in China" Barry Popkin et al Journasl of China Health and Nutrition Survey Obesity Reviews

"Intrauterine Programming of Diabetes" Journal of CML_Diabetes 2009: 26(3)61 -71The Chittaranjan S Yajnik and Urmila S Deshmukh// King Edward Memorial Research Centre, Pune, Maharashtra India

"The Impact of Transnational Big Food Companies on the South, A View from Brazil" PLOS series, Monteiro, Carlos A and Cannon Geoffrey.

"Nutrition Transition in Mexico and other Latin American Countries" By Juan Rivera, Simon Barquera et al Journal of Nutrition Reviews 62,

"Food Fight: The Inside Story of the Food Industry, America's Obesity Crisis and What We Can Do About It" Brownell, Kelly D and Katherine Battle Horgen. Pub. McGraw-Hill

"Safe Food, The Politics of Food Safety" Marion Nestle

"Why Calories Count from Science to Politics" Marion Nestle University of California Press April 2012

Transcript

STEPHEN MCDONELL: The weight of the world is shifting in ways that will surprise and perhaps even shock you. Not so long ago, in many of the world's poorer corners, hunger was the headline health concern. Estimates put the number of malnourished at 700 million, and obese – mainly in rich countries – at 100 million. How the tables have turned.

BARRY POPKIN: "In truth, no country has managed the transition to get rid of hunger without it shifting to obesity, very rapidly. Among low and middle income countries, there's not a single country that I'm involved with or know about or have studied, from sub-Saharan Africa to South Africa to the Middle East to Asia and Latin America that has controlled this problem".

STEPHEN MCDONELL: By 2010 the number of malnourished people had grown only marginally but the number of obese people had exploded to 500 million. It's predicted that by 2030 more than one billion will be obese.

PROFESSOR MARION NESTLE: "So we have exported the burden of obesity into the emerging economies just at a time when we've kind of levelled off. This is a worldwide problem and every country in the world should be concerned about it".

STEPHEN MCDONELL: How will the world cope with its dramatically expanding waistline and the serious, complex, often deadly health risks that can accompany obesity – diabetes, cancer, heart disease.

PROFESSOR CARLOS MONTEIRO: "There are certain types of foods, what I prefer to call 'food products' they are as bad as tobacco and alcohol. It's as simple as that".

STEPHEN MCDONELL: Tonight we'll head to some of those globesity hotspots on Fat's New Frontier – India (52 million obese by 2030) – China (teenage diabetes 4 x USA) – Brazil (+50% overweight or obese) – and to the place that's the overweight champion among these large countries – Mexico (30% obese).

MEXICO

BARRY POPKIN: "A country like Mexico moved from literally 1980 no overweight or obesity, by 1999 to a third of the population being overweight, by 2006 to two thirds of the adult population being overweight and obese. Immensely rapid changes".

STEPHEN MCDONELL: On the outskirts of Mexico City, the Bravo family is having a party.

JUAN LUIS BRAVO: "Today we're celebrating the 74th birthday of my grandfather".

STEPHEN MCDONELL: 19 year old Juan Luis and his 16 year old brother Pedro are here, but their father is not.

JUAN LUIS BRAVO: "My father died very young. He was 42. I said to myself, either I take care of myself or I won't have a long life – because the way I was going I wouldn't have died at 42 I would have died when I was 25 or 30 years old".

STEPHEN MCDONELL: The boys' mother Juana says her husband's family loved to eat.

JUANA BRAVO: "At every gathering they had lots of food - lots of food. They would have gatherings every month. Before the party... food! During the party... food – lots of food... all the food you want! When the party finished there was food left over – let's have dinner! Whatever you want to eat. And in the morning when you helped with cleaning up... food. We learnt in my husband's family that this was the way".

PROFESSOR MARION NESTLE: "Everything in the food environment encourages us to eat more. The easiest way to explain it is large proportions. If you are served a large portion of food, you are going to eat more from that portion and you are going to under estimate the amount that you have eaten to a much greater extent than you would if the portion was small. If I had one thing I could teach the world it would be that larger portions have more calories. It's not intuitively obvious and that's been shown by really quite sophisticated research".

JUAN LUIS BRAVO: "My maximum weight was 146.5 kilograms so it was excess fat everywhere".

STEPHEN MCDONELL: Their father's death from an obesity related illness influenced both Juan Luis and his brother to undergo surgery to reduce the size of their stomachs.

JUANA BRAVO: "Here's Juan Luis, ready for the operation. (looking at a picture) I can't believe his face, he looks very pleased. Juan Luis was a normal child until he was three and from that time he started to gain weight - but I didn't realise how much. When he went to pre-school his uniforms had to be made specially. All of my husband's family have always been obese but we never thought that obesity was life threatening".

JUAN LUIS BRAVO: "These were my pants three years ago. They're size 56, which was the maximum I wore and I only kept this pair as a souvenir, so I never fill them again.

STEPHEN MCDONELL: Three years after his first operation, Juan Luis is getting ready to go back to hospital again.

JUAN LUIS BRAVO: "I didn't look after myself. Everything worked... it was perfect... but what happened was I didn't take care of myself. I drank, so I went right off course with the diet".

STEPHEN MCDONELL: He's facing more radical surgery.

JUANA BRAVO: "Are you sure you haven't forgotten anything?"

JUAN LUIS BRAVO: "No, everything is ready. Are you nervous?"

JUANA BRAVO: (nods) "Yes".

STEPHEN MCDONELL: Last year younger brother Pedro almost died from complications after his stomach reduction.

JUAN LUIS BRAVO: "My expectations of this surgery are to prolong my life and have a better physical condition. Also, there is a little bit of vanity because I want to have a good body. The thing I fear most is to die on the operating table, or to fail again".

FACT: Mexicans are getting fatter faster than anyone else in the world.

STEPHEN MCDONELL: Medical help and awareness diminishes as you leave the big city. Chiapas is Mexico's poorest state, with a high indigenous population. Families are celebrating mother's day at a community gym attached to the local school. There's free Coca Cola for everyone.

DR ABELARDO AVILA: "The children do not have drinking water in the schools so they drink soft drinks. Babies have Coca Cola in their bottles instead of a formula".

ALEJANDRO CALVILLO: "To understand what's happening in Chiapas and the presence of Coca Cola one has to understand the link between Coca Cola and power. Remember not long ago we had a President who was the Director of Coca Cola. Coca Cola does what the state allows it to do".

STEPHEN MCDONELL: Coca Cola managed to establish a major foothold in Chiapas schools in a very short time.

ALEJANDRO CALVILLO: "In many schools we were able to demonstrate that Coca Cola made agreements with the school principal so that he would exclusively sell Coca Cola inside the schools. Coca Cola would pay for this exclusivity with more bottles. And he'd sell those bottles and have that income for himself".

STEPHEN MCDONELL: Recently the Mexican Government banned unhealthy products in schools with mixed results, but Coke and other brands remain a major part of life here. Mexicans consume more soft drink per person than anyone else in the world.

FACT: The average Mexican drinks half a litre of carbonated beverage each day, equal to 14 cubes of sugar.

STEPHEN MCDONELL: Nutritionist Marisol Vega is visiting a local family. She's trying to eliminate malnutrition in Chiapas at a time when consumption of traditional foods has declined dramatically.

MARISOL VEGA: "We're at Petrona's house in the municipality of Zinacantan. We're visiting her house to talk to her about the family's diet – what they eat... what they don't eat and what's changed all of that. Petrona, introduce us to your family".

PETRONA: "I'm Petrona, this is my daughter Rosita. I have another girl, Lupita... this is my daughter Lupita and my niece Regina. Yes, that's my family.

In the mornings I get up to prepare the tortilla. I put water in my dough to get it nice and soft and afterwards I make my fire.

Ten years ago, the food was simpler - just beans and vegetables - but now it's more varied. I think in other families the children eat too many sweets... chewing gum... and when they don't have breakfast they eat chips... fried bacon rind... everything. They want to buy everything in the shops. They drink all kinds of soft drinks... also, shop bought juice".

PROFESSOR MARION NESTLE: "These products are not very expensive. I mean they may be more expensive than they are relative to a North American income but they're not very expensive. And what you want is you want people to be able to afford these products and to buy them frequently and to consider that those products are a normal part of their diet so that things that used to be treats - a sweetened beverage, a soda - is now considered normal every day fare and never mind the number of calories that it has or the lack of nutritional value".

STEPHEN MCDONELL: Malnourished children who consume high amounts of sugar have an increased likelihood of becoming obese adults. That puts them at risk of developing type 2 diabetes, heart disease and certain cancers.

DR ABELARDO AVILA: "What's extremely serious in Mexico is that most of the adult population

were malnourished as children. In that sense, most of the Mexican population is programmed for food scarcity. When the body enters into a time of food abundance especially of sugar and saturated fats the damage to the metabolism is brutal and happens early".

MARISOL VEGA: "Chiapas is one of the states with the highest prevalence of chronic malnutrition in children and stunting under five years. If it's not corrected before two, we can't correct it later. That's why good nutrition is so important at that age. You can see malnutrition in the children we evaluate and the adults in the same family are obese".

STEPHEN MCDONELL: The food and drink companies set the prices according to what they think communities can afford. Here, soft drinks cost only half what they cost in town.

MARISOL VEGA: "So you can go to the communities and ask how much does two litres of soft drink cost and they give it to you for less than ten pesos. That's for the whole family – and they have it for breakfast, lunch and dinner".

FACT: Diabetes is now the primary cause of death in Mexico.

CHINA

BARRY POPKIN: "Obesity has grown rapidly in China and it's now become a bigger problem in the rural and among the poor, than among the higher educated elite. China went from no overweight in 1990 to a third of adults being overweight".

PAN JINGYI: "My name is Pan Jingyi. I am 16. I come from a place where people like to eat chillies – Sichuan, Chengdu. I'm taking a six month course – half a year's training. I want to get thinner because people laugh at me when I go to buy clothes and I don't feel comfortable. So I want to get thinner and become a beautiful girl".

STEPHEN MCDONELL: "The Biggest Loser" is a live-in weight loss camp in Shenzhen, China.

PAN JINGYI: "My mother is very good at cooking. I like eating and eat a lot. I started to get fat when I was a child in grade 5. People in my home town use a lot of oil when cooking spicy food. It's easy to get fat eating so much oily food".

BARRY POPKIN: "The fat story is a very interesting story. Before 1950 all the globe had in the way of fat was butter fat and lard. What happened is because of World War II and the shortages of fat that occurred, Japanese and American scientists developed a series of technologies that ultimately created a way to get from oil seeds, from corn, cotton seed, sunflower seeds, soya beans — any of what we call these oil seed products, fat. We created oils cheaply. That technology did not reach Asia, Africa and Latin America till later. The Chinese when I went there started off consuming a couple of grams a day of oil, 20 calories, now the average Chinese consumes 400 calories a day of vegetable oil in their diet. Because of such an extreme obese young population emerging in China in the last eight or nine years, that population has a diabetes rate higher than that in the US".

ZHANG YIJIE: "My name is Zhang Yije. I am 16. I am from Chengdu, Sichuan. I was 140 kilograms when I came here. I am 117.5 kilograms now. I lost a lot of weight – over 20 kilograms. My aim is to become roughly 80 to 90 kilograms. I don't want to be too thin".

BARRY POPKIN: "When I started working in China and doing my national surveys there in the 1980s, there were on the average two grams of sugar a day consumed. A trivial amount of sugar. The lowest in the globe. Today there's so much sugar consumed in China, they have a sugar reserve to go along with the pork reserve. The government is so worried that sugar prices will go up, it will cause political unrest, that if sugar prices go up, they sell some of their sugar reserve".

ZHANG YIJIE: "I tried to lose weight at home and gave up in two or three days. You lose the motivation and enthusiasm after two or three days. But at this camp, everyone here is fat and we work together. We encourage each other.

I didn't have a routine before. I got up very late in the morning and ate a lot for lunch. I ate everything, especially junk food such as KFC and McDonald's, which makes me fat. I usually stayed up late too, watching TV and playing computer games".

PROFESSOR CARLOS MONTEIRO: "It's interesting to consider that whole foods which is a

solution not only for obesity but for health in general, a diet must be based on whole intact food. In whole foods you don't have fat and sugar together in the same food. You have sugar in fruits, that's why they are appreciated. You have fat for instance in meat, that's why also they are appreciate, but you don't have fat and sugar together.

These two substances together, they give enormous pleasure. Chocolate is the example, okay? Ice creams. They are irresistible by nature".

FACT: More than 380 million people in China are overweight or obese.

BRAZIL

PROFESSOR CARLOS MONTEIRO: "We monitor the prevalence of overweight and obesity in Brazil in 27 Brazilian cities and we observe that each year we have one percentage point more of obese people.

So we now have more than 50% of adults who are obese. We are having in Brazil a change towards a food system that's very similar to the US, to the UK. And we are imitating therefore what happens in these high income countries. In 10 or 15 years we will have the same obesity figures".

FERNANDA KELLER: "My name is Fernanda Keller. I'm a professional athlete since thirty years. I'm one of the pioneers of this sport".

STEPHEN MCDONELL: Fernanda Keller is one of Brazil's best athletes. She's a national triathlete champion and an international star as well. Her institute runs programs to help disadvantaged children.

FERNANDA KELLER: "We have 500 kids and they come to the program after school. They have classes... sport classes like swimming, running, biking and we take like 70 kids that need special assistance and we have a nutritionist, we have a physical education teacher to work separate with them.

We try to give them as much information as you can and to prevent them to become like overweight, because this is a really big issue in Brazil now.

The kids in Brazil now they have... when we go to the supermarket we have so many different things they can choose and unfortunately they're not getting the healthy stuff. Most of them are

eating a lot of fast food and that is not helping them a lot".

PROFESSOR CARLOS MONTIERO: "Most of calories people are eating they don't come from food directly. They come from food products. They are essentially caloric substances like sugar, like vegetable oils... starches. These products they have an energy density twice as high than the whole food. Of course we can eat food products, let's say we can eat a biscuit or chocolate or ice cream, of course we can - and we did this for many years, but this was just a compliment of a diet that was based on whole foods. Today it's the reverse".

FABIANA GOMES DO NASCIMENTO: My name's Fabiana Gomes do Nascimento. I am 31. I have two kids – Adrian, who is seven years old and Brian, fifteen. I live in Niteroi, Rio de Janeiro, Brazil. Adrian is a little overweight. Since he joined the project he seems to be more active... not so lazy. He is more willing to go out. He sometimes says 'Mum, let's go to the beach for a walk'."

STEPHEN MCDONELL: Fabiana's son Adrian participates in Fernanda Keller's program. This program is sponsored by the multi-national food company Nestle which is increasing its market presence in Brazil.

FABIANA GOMES DO NASCIMENTO: "I am going to lose weight. My obesity worries me because it reflects on him. I've noticed that he's gaining weight as well. I don't want him to go through what I did. I am 134 kilograms and my Body Mass Index is 50.5. It's way over morbid obesity.

I was size 8 and had only 63 kilograms before I became pregnant. I got really fat after my first pregnancy. Adrian says my belly is too big and that makes me sad... (crying) I'm sorry... I'm not like this because I want to be.

I've been on diets... taken a lot of medicine... and nothing's worked. Nothing... nothing... nothing. I walk Adrian to school every day. It takes me twenty minutes there and another twenty back. It doesn't help".

BARRY POPKIN: "Starting in the 1980s but accelerating in the 1990s throughout every country in Latin America, even war torn Nicaragua all of a sudden the food system changed. It changed from small farmer's markets, fresh food and little tiny stores to these supermarkets. You won't go to a single country in the Americas where you won't find every city and small town dominated by a supermarket. It's been a boom to consumers with cheap food, healthier – it's more sanitary food and it's been a boom to those selling all the kinds of food that we might call junk foods –

the soft drinks, the savoury snacks – all of that has gone with it. It's accelerated the process of the change of the diet across the globe to more and more processed, packaged, high sodium, high fat, high sugar foods".

STEPHEN MCDONELL: In Latin America, supermarkets' share of all retail food sales increased from 15% in 1990 to 60% by 2000.

PROFESSOR MARION NESTLE: "So we are essentially exporting our processed food industry into countries that have never seen it before. The foods that are being exported are extremely high in calories relative to their nutritional value and we are essentially making the world fat".

VANDERLEA RODRIGUES: "My name is Vanderlea Rodrigues. I've worked for Nestle for three years. My job is very good - I love doing it. I like going out of my home and doing this... selling this brand. For me it's an honour".

STEPHEN MCDONELL: Vanderlea works in downtown Rio de Janeiro supplying Nestle snack sellers who go out into the suburbs.

VANDERLEA RODRIGUES: "The company gives us new stock every day. We never have anything left over in the depot. I only know the nutritional value from the packaging. And I know that chocolate is a good source of energy".

PROFESSOR CARLOS MONTEIRO: "Almost all the companies, Nestle, Unilever, they have special business model implemented in what they call the 'merging' countries like Brazil, Mexico, India, China and in the case of Nestle it's quite interesting. They create a line of products, it's called 'popularly positioned products', so they are the same junk food but they are come in small packages so they are cheaper. Sometimes they are fortified with micronutrients, with iron so they are promoted as something good for under nutrition and affordable to the people and in the case of Brazil, they are sold by you know, these door to door vendors that are trained by Nestle to provide nutritional education. So that they copy our system of health agents, that's very important for Brazil, for public health. Of course it's not a qualified person, it's just a vendor but he receives some instructions, some beautiful material to teach the low income families how to feed their children".

VANDERLEA RODRIGUES: "Nestle products are market leaders. They sell well all the time. People really need these chocolates and seek them out. Galak's the best seller. It's a white chocolate. Everybody likes it. Everyone buys Galak. We have Alpino – a milk chocolate. As far as I know, it comes from the Swiss Alps".

PROFESSOR CARLOS MONTEIRO: They are doing this very aggressively in Brazil. They have a big boat in Amazonia that has all these products and this boat visits the small villages where they sell this product. They are adapting themselves to the needs of countries like Brazil and they are succeeding. And they project a market of 80 billion dollars for these type of products".

FACT: Nestle Brazil declined requests for an interview.

PROFESSOR MARION NESTLE: "One company after another, Kellogg's, Kraft, Nestle – no relation – McDonalds, Domino Pizza, Coca Cola, Pepsi Cola.... all are reporting that their growth in profits is coming from outside North America. They are buying smaller and other companies that have access to distribution systems in developing countries in order to get their products into those countries. And they're reporting that vast amounts of their profits, growth and profits, three quarters of their profits, 20% increase per year, are coming in developing countries".

FACT: Obesity related illness costs the Brazilian health system around \$US2.1 billion per year.

INDIA

BARRY POPKIN: "India's a country that has half a billion hungry and malnourished and poor people. On the other hand we've seen obesity emerge in the last 15 years. And only the rich and only those with certain kinds of jobs have access to the medical care and can afford the treatment for the diabetes. There are tens of millions, a disproportion number of Indians, who have diabetes who don't know it".

STEPHEN MCDONELL: "Dr Ranjan Yajnik runs the Diabetes Unit at the King Edward Memorial

Hospital in Pune".

DR RANJAN YAJNIK: "This baby was born two days ago and the statistics tells us that that baby will have more than one in two chance of getting diabetes in their lifetime. That's frightening".

STEPHEN MCDONELL: Just a few decades ago diabetes was rare in India, but as millions have moved out of poverty, non-infectious diseases such as heart disease and type 2 diabetes have become the number one cause of death.

DR RANJAN YAJNIK: "In the next 20 years, we expect more than 100 million patients with diabetes in India. Obesity is of course the key driver and in the last 20 years it has increased almost four to five times in the cities".

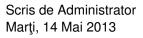
STEPHEN MCDONELL: Many babies born in India are underweight due to poor nutrition in the womb. Just like the malnourished babies in Mexico, this makes them particularly vulnerable.

DR RANJAN YAJNIK: "The statistics are now coming in that babies who are born small but grow big during childhood are at a very high risk of diabetes as adults. And if anything, the urban situation in India provides you the background for this to happen".

PROFESSOR MARION NESTLE: "This kind of food marketing as one food industry executive explained to me, is designed to slip below the radar of critical thinking. (DOMINOS PIZZA ADVERTISEMENT)

Most people don't think critically when they eat. If we're presented with large amounts of delicious food that's really wonderful, we're going to eat it and knowing when to stop is very difficult".

DR RANJAN YAJNIK: "There's a lot of globalisation of food, there's import of all the international brands which are high calorie, high carbohydrate and high fat. So as a child we used to eat local foods that were mostly cooked at home. I mean now we now eat mostly outside the home. We eat in hotels, we eat in fast food joints and the type of food which we eat



belongs to the fast food or the junk category".

STEPHEN MCDONELL: The Wadke family are here to see Dr Yajnik. Harishchandra Wadke lost his leg after developing type 2 diabetes more than 10 years ago.

DR RANJAN YAJNIK: (greeting Harishchandra) "Okay, tell me how you are".

STEPHEN MCDONELL: His illness has left him depressed. The former breadwinner is now almost totally dependent on his family.

MRS WADKE: "He says he doesn't want to live anymore".

DR RANJAN YAJNIK: "Yes, anyone could feel like that".

MRS WADKE: "He says, 'Stop giving me food, it's the end of my life".

DR RANJAN YAJNIK: "You have enough time - fifteen years of living at least. (Mr Wadke starts crying – Dr Yajnik pats Mr Wadke and ushers him out). Okay, see you then".

"It's only his family support, which is a very closely knit family, which is taking him through this".

NILESH: "Before my father's diagnosis, we didn't know what diabetes was at all. No-one in our family has had this kind of disease before".

STEPHEN MCDONELL: The epidemic threatens to overwhelm the national health budget and on an individual level, the cost of treatment can bankrupt families like the Wadkes.

SUVARNA: "It's had a huge effect on my mother-in-law. I'd really like to praise her – even at her age she does every single thing. And the main thing is, she never complains".

STEPHEN MCDONELL: Like Latin Americans, Indians get type 2 diabetes at a relatively low weight or body mass index.

BARRY POPKIN: "They're very sensitive with small amounts of extra fat. All the fat goes to their heart and liver and the most sensitive area right in the abdomen that creates the problems with insulin sensitivity".

DR RANJAN YAJNIK: "Compared to the Europeans, Indians get diabetes at a much younger age. This means people are affected at the prime of their productive life and therefore can have very serious effects on the economy of the country".

STEPHEN MCDONELL: Dr Yajnik's latest research has revealed something even more significant. Babies are already being programmed for diabetes and heart disease even while they're still in the womb. It's all down to the mother's diet and metabolism.

DR RANJAN YAJNIK: "That tells the genes how to function, how to behave, and that remains with the baby for the rest of the life so that in future when the situation becomes more diabetogenic, these babies are at a higher risk of developing diabetes and also heart disease".

STEPHEN MCDONELL: Up until now the main focus has been on reducing obesity in adults, but the doctor says programs should be targeting future mothers instead.

DR RANJAN YAJNIK: "If we improve the health of the mothers, the health of the next generation will improve and that will be passed on to the future generations".

STEPHEN MCDONELL: Three quarters of the world's economic growth is now coming from countries we used to think of as poor such as India, China and Brazil - and global food and beverage companies see most of their future potential in these emerging economies.

BARRY POPKINS: "They've essentially created a new set of meals called snacks or eating all the time - and they've moved that across the globe. The biggest example to me is China. When I started in China every one of the 25,000 individuals we monitored in 228 communities across the country and we spent three days with each of them, never snacked. Starting at about 2000 we started to see snacking. It tripled between 2000 and 2004, it tripled again between 2004 and '06 and it tripled again in that survey between '06 and '09. It's the new market for all the major food companies and they are creating foods and marketing to create a new demand".

PROFESSOR MARION NESTLE: "The issue here isn't that food companies are evil and plotting to make everybody fat. Food companies are in business. They're not social service agencies. Their job is to get people to eat more, not less. The way I like to explain it is eating less is very bad for business so what food companies have done is they've made food available in places where it never was before, they've made it available in larger portions and they have created a social environment in which it's become socially acceptable to eat in places where it never used to be".

STEPHEN MCDONELL: It's not all one way traffic. Governments are making some effort to tackle the problem.

PROFESSOR CARLOS MONTEIRO: "The important thing in terms of obesity is the visibility of the problem. So everyone sees what is happening, everyone has children that are becoming obese. We could use this pressure of the society to fight obesity.

This means taxation, this means marketing regulation. I think these are the two main things that can change the picture".

BARRY POPKIN: "The question is now getting governments to act and to getting consumer groups and individuals to act in their communities to say we must do something about this. It's only going to come from local population pushing governments is which is what happened with tobacco".

STEPHEN MCDONELL: One successful example is Brazil's national school lunch program which provides 47 million meals every day.

In 2009 the government passed a law requiring that at least 30% of food be fresh and sourced locally. The new rules stem the flow of commercial products into schools, despite pressure from the food industry.

PROFESSOR CARLOS MONTEIRO: "The main argument to convince the politicians to change the law was not the health and the wellbeing of the school children. This was important but the most important was that this program was viewed to be a support to family farmers. And family farmers is a very strong sector of the political arena in Brazil. They are very well organised and they succeeded. The challenge for us is to find other situations where you can have a win-win situation. Many of the measurements needed to control obesity has a negative impact in a very important part of the economic sector, namely the food industry and their allies. So I think that's why this obesity sometimes is a hot potato".

STEPHEN MCDONELL: In Mexico several attempts to tax sugar sweetened beverages have been unsuccessful. There's evidence that even small price increases can have a dramatic effect.

BARRY POPKIN: I've been involved in studies like that in Brazil, Mexico, England, the US and China. In every case it's the same. People are sensitive to those prices and if we price for every gram of sugar that we put in a beverage, one or two cents US... Australia... we would change drastically the consumption of that product.

STEPHEN MCDONELL: Globally food and drink companies have also resisted laws on marketing to children, saying they're committed instead to self-regulation.

ALEJANDRO CALVILLO: The superhero Coca Cola campaign was developed in Mexico and also in Central America in February/March this year.

STEPHEN MCDONELL: Coca Cola says this advertisement is aimed at nostalgic adults, not children.

ALEJANDRO CALVILLO: "So it's obvious what Coca Cola is doing. It's directing a campaign at children in Mexico under the guise of saying it's a campaign for adults".

TEXT: Coca Cola declined requests for an interview. They directed us instead to ConMexico, an organisation representing Mexico's biggest food and drink companies.

JAIME ZABLUDOVSKY: "I don't think that the problem of obesity is the abundance of food. And I don't... I also don't think there is good or bad food. What I think there is, is good or bad diet and good or bad habits.

But at the end of the day it is the consumer who should be responsible for the diet that he or she selects and conforms. The only way I think to really address the issue is by making consumers responsible of their decisions".

PROFESSOR MARION NESTLE: "The idea that obesity is a result of personal responsibility, weak character and moral disfavour is too simplistic. It's really too simplistic. We live in a food environment in which we're giving people eat more messages hundreds of times a day in every possible way. Most people can't resist those messages".

STEPHEN MCDONELL: At a public hospital in Mexico City, Juan Luis Bravo is minutes away from theatre and his second serious stomach operation. He's put on 20 kilograms since he was last here.

JUAN LUIS BRAVO: "Right now I'm thinking a lot about my father - that he's taking care of me from heaven. If he'd had the operation he'd still be with us now".

STEPHEN MCDONELL: The City government is so concerned about the impact of obesity on the health budget, that it subsidises operations for those who can't pay because it'll be cheaper in the long run.

DR FRANCISCO CAMPOS: "Hi, how are you? How are you today – ready for the surgery? Great, so in a few minutes we're going to take you in".

STEPHEN MCDONELL: Dr Francisco Campos performed Juan Luis' first procedure and he runs the public clinic where about 300 similar operations are conducted each year.

DR FRANCISCO CAMPOS: "In Mexico, bypass costs around twenty thousand dollars. So when patients here pay five hundred dollars for a surgery and the ones who pay the most pay three thousand dollars, we believe that really they are very accessible prices for almost everyone. We just do part of the work. The main part has to be done by the patient. They have this magic thinking - they believe it's very easy. In reality, it's not easy. If it were easy, we wouldn't have about three million obese people in the world".

JUANA BRAVO: (to Juan her son) "Be calm. Remember, you're going to change your inside. I'd also like you to change your outside." (kisses him)

STEPHEN MCDONELL: Since his first operation three years ago Juan Luis hasn't been able to control his diet. This bypass will mean he can only eat very small portions for the rest of his life.

DR FRANCISCO CAMPOS: "We're not the solution - surgery's not the solution. We calculate that thirty per cent of the Mexican population is obese. So we're talking about thirty million who could have surgery. That's not going to be the solution. Not even with all the surgeons in this country, could we get rid of this epidemic".

JUAN LUIS BRAVO: "I'm not afraid, because the truth is that I'm in the hands of a spectacular doctor - and his team is phenomenal. I've already had one surgery with them and they've operated on my brother and I trust them".

PROFESSOR CARLOS MONTEIRO: "I think the increase in obesity everywhere in the world is having a positive effect in a sense. The obesity epidemic is making many people realise that we need a big change in our society, in the economic system".

BARRY POPKIN: "The solutions are out there, we know how we can regulate parts of the food

system. We know how we can change labelling, how we can control mass media and marketing. The question is will we do it or will big food industry win out and this is a battle that's going to be fought for the next decade".

STEPHEN MCDONELL: Juana Bravo hopes others can learn from her family's struggle with obesity.

JUANA BRAVO: "Someone said that if you yell out to the whole world and only one person hears you, it's worth yelling. So we mothers have to educate ourselves first in order to help our children".

PROFESSOR MARION NESTLE: "Food is something that everybody understands. It's difficult to explain to people how they as individuals can do something about climate change, can do something about international conflict, can do something about corruption in government, but they can do something about the food they eat and they should".

UPDATE: Two weeks after his operation, Juan Luis is doing well.

Sursa: http://www.abc.net.au/foreign/content/2012/s3547707.htm

VEGAN is SO extreme!! Freelee's Rant

{youtube}aovPicgwekA{/youtube}

Informatii utile:

- <u>SA TRAIM SANATOS FARA TOXINE</u>. GHID FUNDAMENTAL. ALIMENTE SI PLANTE NATURALE PENTRU REGENERAREA CELULARA COMPLETA (carte)
- <u>Dieta 80/10/10</u> Echilibrarea Sanatatii Tale, Greutatii Tale, si a Vietii Tale, O Mancare Delicioasa la un Moment Dat (carte)
- OAMENII CARE NE-A FACUT GRASI, OBEZI, BOLNAVI Si cum ne imbolnaveste

INDUSTRIA ALIMENTARA prin alimentatia nesanatoasa, mancarea procesata, aditivata, etc. Cum ne imbolnaveste pe noi si copiii nostri - The Men Who Made Us Fat - BBC 2012 - Video - 175 min