Healthy Eating, Regular Physical Activity and Tobacco Free Futures:

A Call to Action to Advocate for Healthy Public Policies
## Impact of Vascular Risks in Canada

<table>
<thead>
<tr>
<th>Vascular Risk Factor</th>
<th>Years of Life Lost</th>
<th>Years of Disability (Disability Adjusted Life Years)</th>
<th>Risk for Premature Death Ranking</th>
<th>Risk for Disability Ranking</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unhealthy Diet</td>
<td>864034</td>
<td>1047653</td>
<td>1st</td>
<td>1st</td>
</tr>
<tr>
<td>Inadequate Fruit &amp; Vegetable Intake</td>
<td>405946</td>
<td>475120</td>
<td>1st rank (Sub category)</td>
<td>1st rank (Sub category)</td>
</tr>
<tr>
<td>Tobacco Use</td>
<td>754083</td>
<td>915628</td>
<td>2nd</td>
<td>2nd</td>
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<tr>
<td>Obesity</td>
<td>480352</td>
<td>794956</td>
<td>4th</td>
<td>3rd</td>
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<tr>
<td>Physical Inactivity</td>
<td>350125</td>
<td>443108</td>
<td>5th</td>
<td>5th</td>
</tr>
</tbody>
</table>

*Our children are projected to live shorter lives than us just related to increased childhood obesity*

Statistics Source: Global Burden of Disease Study 2010
http://www.healthmetricsandevaluation.org/gbd/visualizations/gbd-arrow-diagram
Impact of Tobacco Use

• Among the five greatest risk factors for mortality, tobacco use is the single most preventable cause of death.
  – responsible for 1 in 10 adult deaths
  – About 3,000 Albertans die every year from tobacco-related illnesses
  – Every 10 minutes two Canadian teenagers start smoking and one will likely die early because of that decision

• Alberta faces high public health costs for treating tobacco-related diseases, tobacco users are less productive due to increased sickness, and those who die prematurely deprive their families of much-needed income and support.
  – Provincial costs are estimated in the range of $118 to $179 million per year to treat hospitalized tobacco users
  – Smokers aged 45-54 will stay in hospital on average 1.5 days longer; those aged 65 to 74 will stay an average 6 days longer

World Health Organization, Tobacco Free Initiative (TFI) [http://www.who.int/tobacco/health_priority/en/](http://www.who.int/tobacco/health_priority/en/)
Creating a Healthy Environment to Facilitate Healthy Choices

• Most Canadians are aware of the need to eat healthy, be physically active and, when applicable, quit tobacco use.

• Even with extensive counseling in clinical trials, few can moderately improve diet and physical activity for more than 1-2 years.

• Most tobacco users report they want to quit tobacco and will require about 5 to 7 attempts to succeed. Using proven cessation treatments, such as approved medications and/or individual, group or phone counseling, tobacco users can double their chance of success.

Center of Disease Control and Prevention http://www.cdc.gov/tobacco/quit_smoking/how_to_quit/you_can_quit/chances/
Creating a Healthy Environment to Facilitate Healthy Choices

• More supportive environments will improve healthy eating, physical activity and deter tobacco use and exposure.

• Most Canadians support policy change making it easier to eat healthy diets, improve activity levels and restrict harm from tobacco use and exposure.

Center of Disease Control and Prevention  http://www.cdc.gov/tobacco/quit_smoking/how_to_quit/you_can_quit/chances/
Mobilizing Alberta Health Care Professionals to Prevent and Control Vascular Disease

• Many HCPs and HCP organizations have not prioritized advocacy actions for healthy public policies

• Previously HCPs and organizations, along with non-government organizations, have played leadership roles in successful public advocacy programs
  – i.e. smoking, additives of trans fat and sodium to foods

• An organized strong advocacy approach from the Alberta health sector could result in implementation of comprehensive policies to prevent and improve control of vascular disease and improve the health of Albertans.
• Policies in Alberta encouraging healthy work places and schools are voluntary
  – This has resulted in sporadic implementation in facilities such as daycares, schools, worksites and recreational centres

• If Alberta HCPs strongly advocated for these programs, and facilitate patients to advocate, policies may be more comprehensively implemented
Call to Action

• Assess fruit and vegetable intake, physical activity, body mass index and tobacco use as a VITAL SIGN

• Implement the ‘Prescription for Healthy Living’ to increase fruit and vegetable intake, physical activity and tobacco cessation

• Provide your patients/clients with ACTION advocacy resources and support
  – Assisting them to advocate for healthy daycares, schools, worksites and recreational centres.
  – Assisting people to access tobacco cessation supports such as group, individual, online and helpline
Call to Action

• Offer support to patients/clients who use tobacco as recommended in the National CAN ADAPTT Guidelines.
  – Integrate the Tobacco Free Futures model for tobacco cessation support into daily practice across the continuum of care.
  – At minimum, health care providers take the Brief Tobacco Intervention (BTI) cessation training, offer the 5As of support, offer resources, and record support given.

• Support health report cards for daycares, schools, worksites and recreational centres
Call to Action

• Stop sedentary behavior and promote specific physical activity goals within your organization, work setting or educational environment by linking with already existing resources and getting informed (for great resources go to Canadian Society for Exercise Physiology http://www.csep.ca/english/view.asp?x=804)

• Ensure organizations you belong to have policies to promote healthy eating, physical activity and tobacco reduction (protection, prevention and cessation)
  – Make a ‘Healthy Alberta and Healthy Albertans’ a priority for your organization