Amsterdam will become the Healthiest City for Children!

Time to get tough!
Part 1

Amsterdam Healthy Weight Programme
2018-2021 Multiannual Programme
Amsterdamse Aanpak Gezond Gewicht
The 2018-2021 Multiannual Programme follows on from the two previous multiannual programmes from 2013-2014 and 2015-2018. These earlier plans provide an insight into the rationale behind the launch of the Amsterdam Healthy Weight Programme AHWP (Amsterdamse Aanpak Gezond Gewicht). They also tell about the why, how, what and where of the methods adopted by the programme and the structure of the approach. Both programmes still apply and are the point of departure for the current programme. Together with its two predecessors, the 2018-2021 Multiannual Programme constitutes the framework for the ongoing implementation of the Amsterdam Healthy Weight Programme. The reason for this new programme plan is that the alderman and the Councils committee on Health realised, in early 2017, that the Programme had ‘grown out’ of the 2015-2018 Multiannual Programme earlier than expected and that a subsequent phase was needed. The key results and targets had been achieved and the principal activities had been implemented. As time went on, it became clear that the next step would be to refine the objectives and methods of the approach. The details of this are outlined in the current implementation programme.

Efforts aimed at a healthier weight for children in Amsterdam seem to be doing well. There is declining trend of overweight and obese children, particularly amongst children from families with a low socio-economic status. The latter is a remarkable result. There is a growing trend of healthy lifestyles and behaviours, which may in fact be more important than the reduction in BMI. After all, a significant change in behaviour, from unhealthy to healthy, is the most sustainable way of preventing and reversing overweight and obesity.

Amsterdam has done and achieved a great deal in recent years: a ban on the marketing of unhealthy food products to children at sports events, more than 500 trained healthcare/youth professionals, countless active residents, more than 200 (trained!) health ambassadors in the Amsterdam neighbourhoods, more than 25,000 school children in the Jump-in programme, over 1,200 preschool parents involved in AHWP activities, 8 health markets, 1,734 healthy eating consultations, more than 1,500 (severely) obese children identified and two-thirds of them being treated, 11 neighbourhoods ‘AHWP focus neighbourhoods’, etc.1

But is this enough? And – more importantly – will it be enough to bring about the societal change that we want to achieve in our city?:

A healthy lifestyle is the norm, the default in our city
Every child in Amsterdam has the best possible opportunities for a healthy upbringing

Or is more needed? The answer is ‘Yes! We’re definitely on the right track but there is definitely more work to be done’.

The non-committal approach to the health of our children, which manifests itself in particular in their weight, has decreased significantly in Amsterdam in recent years. Amongst parents, carers, schools, healthcare professionals, friends and neighbours in

1 For a comprehensive list of the output from the past 5 years, see Part 2, Chapter 1, of the Multiannual Programme

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the child’s immediate vicinity, as well as municipal policymakers and executors and other professional partners. The sense of a shared responsibility for the health of our children amongst all Amsterdam citizens has increased. Whereas five years ago people regularly questioned why the city got involved in the first place as ‘children’s weight and lifestyle was a matter for the parents, and the parents only’, nowadays that is hardly ever the case. It is now taken for granted that the council has a part to play in children’s (un)healthy lifestyles and that, alongside other parties, primarily parents, it has a significant responsibility. This approach also has a legal basis, in both the Youth Act (Jeugdwet), the Public Health Act (Wet Publieke Gezondheid) and the International Convention on the Rights of the Child.

At the same time, we acknowledge that it is still too easy to take a non-committal approach to children’s health and healthy lifestyles in our city. And that we as council can too often take a too lax approach ourselves. In other words: we can do even more and be even more strict to facilitate the adoption and maintenance of a healthy lifestyle by ensuring that the conditions that enable this are in place. By removing unhealthy factors from children’s social and physical environment wherever we can. Through the areas and spheres of influence that we as council can control, which will enable us to make the lives of our residents and our children healthier.

The non-committal approach to our children’s health and healthy lifestyles that we have seen in past years is no longer an option. This is the social challenge for the next phase of the Amsterdam Healthy Weight Programme, and the motto of the AAGG 2018-2021 Multiannual Programme is therefore as follows:

**Time to get tough!**

This gives rise to the following priority areas:

1. No longer an unhealthy growth environment for children in Amsterdam
2. Staying normative and acting even more firmly on that
3. The AHWP as a (inter)national standard
4. Refinement of the (implementation of the) programme itself

The mission and strategy of the AHWP are in the motto:

**Mission, the ideal scenario:**
*For all of Amsterdam’s children to have a healthy weight in 2033* and
*No child in Amsterdam will have an unhealthy upbringing*

- Don’t hold your breath: it will take a generation!

**Vision:**
*A healthy weight is a collective responsibility and the healthy choice is the normal choice*

- Everyone is needed: It takes a village to raise a child

The key risk factors for overweight and obesity in children and an unhealthy lifestyle are: growing up in a low-income family, non-Western ethnicity, poorly educated parents and growing up in a large city².

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² For a more detailed explanation of the risk factors, see the two previous AHWP multiannual programmes: MAP 2013-2014 and MAP 2015-2018
### Strategy:
*Healthier behaviour in a healthier environment*

*Removing unhealthy factors from children’s living environment*

- Childhood overweight and obesity is a wicked, complex problem
- Consequently, it can only be combated, prevented and reversed through an integrated, adaptive, context-based multidisciplinary approach that focuses on the wide range of factors that play a role in the life of a child

### ER-targets:
*2022 – the half marathon mission: 0-10 year-olds in Amsterdam are at a healthy weight*

Social impact that must be achieved in this period over and above the results of 2018:
1. The heaviest neighbourhoods have once again gotten lighter: the average weight of children living in these neighbourhoods is no more than 5% above the city average.
2. The BMI of 0-10 year-olds in Amsterdam is no more than 5% above the national average

### Intended targets and results 2018-2021
**Target: More children are a healthy weight:**
1. All pre-schools and nurseries in Amsterdam meet the AHWP guidelines and standards
2. All Special Needs Schools meet the AHWP guidelines and standards
3. All schools where children’s BMI is above the national average have been offered support from and/or are participating in the Jump-in schools initiative.

4. In the AHWP neighbourhoods, at least 20% of the target groups and their parents are accessed through the neighbourhood approach and/or other AHWP interventions
5. All new development/redevelopment areas in the city are designed in accordance with the ‘active city’ principles (De Beweegvriendelijke Stad, 2017 – The Active City, 2017)
6. At least 48 startups/businesses (12 in 2017: i.e. four times as many) are active in the Netwerk Ondernemers Voor een Gezond Amsterdam (Healthy Amsterdam Business Network)
7. At least 3 interventions have been developed for a healthier transition from the ages of 10 to 14
8. At least 500 professionals and volunteers have been trained
9. At least 10 municipal regulatory products and/or policies are ‘AHWP proof’
10. The AHWP is involved in (the development of) and constitutes as a best practice for the national prevention programme
11. Amsterdam learns about, and develops with at least 4 other major cities, integrated, adaptive, coherent, context-based and multidisciplinary approaches to tackling health inequalities, and shares these findings with other cities and knowledge institutions (national and international)
12. (Amsterdam has drawn up agreements with) At least 2 providers of senior secondary vocational education (MBO)/higher professional education (HBO) and/or in-service training in Amsterdam with a view to making the curriculum AHWP proof
13. (Amsterdam has drawn up agreements with an) Amsterdam-based higher professional education (HBO) institution for a Minor and/or Master’s in Tackling Health Inequalities in Amsterdam (Amsterdamse Aanpak Gezondheidsverschillen)

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3. ER target = indicates in ‘ER’ terms the social impact that must be achieved: bettER, lowER, highER etc.
4. For the ER targets for 2018, see Part 2 of this multiannual programme.
5. Unlike sub-targets 1-18, in the case of sub-targets 19 and 20, we as council are not the key partner, hence the focus on the drawing up of agreements: the ultimate aim is the text outside of the brackets
Target: Fewer children are overweight or obese:
14. Fewer poor children are overweight and obese
15. Fewer children are (severely) obese; all severely obese children have been identified, are being treated and have a central healthcare provider
16. More parents of 0 to 2-year-olds who are at increased risk of being an unhealthy weight are given advice and support on adopting a healthy lifestyle at an early stage
17. Perinatal partners are involved in the chain of care for children with overweight and obesity and their parents
18. Fewer 2 and 3-year-olds are overweight or obese
19. All Amsterdam partners work in accordance with the national model for children with overweight and obesity and their parents and associated partnership agreements
20. Overweight or obese children and their parents in Amsterdam have access to adequate, relevant and high-quality services (support and medical care, sport and exercise, youth (care) services etc.)

2033 – the marathon mission: all of Amsterdam’s children have a healthy weight
Social impact that must be achieved in this period over and above the results from 2018 and 2023:
1. The average BMI of children in Amsterdam is at national level or lower
2. Amsterdam is one of the Top 5 healthiest European cities
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