Monitoring and surveillance
Overweight and obesity in three age groups

Adults (20 years and over)

Intercountry comparable overweight and obesity estimates from 2008 (1) show that 66.1% of the adult population (≥ 20 years old) in the Czech Republic were overweight and 32.7% were obese. The prevalence of overweight was higher among men (72.3%) than women (60.3%). The proportion of men and women that were obese was 32.6% and 32.7%, respectively. Adulthood obesity prevalence forecasts (2010–2030) predict that in 2020, 29% of men and 30% of women will be obese. By 2030, the model predicts that 36% of men and 37% of women will be obese.1

Source: WHO Global Health Observatory Data Repository (1).

Notes. The country codes refer to the ISO 3166-1 Alpha-3 country codes. Data ranking for obesity is intentionally the same as for the overweight data. BMI: body mass index.

Source: WHO Global Health Observatory Data Repository (1).
Adolescents (10–19 years)
In terms of prevalence of overweight and obesity in adolescents, up to 31% of boys and 16% of girls among 11-year-olds were overweight, according to data from the Health Behaviour in School-aged Children (HBSC) survey (2009/2010). Among 13-year-olds, the corresponding figures were 28% for boys and 11% for girls, and among 15-year-olds, 22% and 12%, respectively.

Children (0–9 years)
Estimates from the first round (2007/2008) of the WHO European Childhood Obesity Surveillance Initiative (COSI) show that among 7-year-olds in the Czech Republic, 21.4% of boys and 20.2% of girls were overweight and 9.7% and 5.7%, respectively, were obese.

Exclusive breastfeeding until 6 months of age
Nationally representative data from 2009 show that the prevalence of exclusive breastfeeding at 6 months of age was 17.8% in the Czech Republic.

Saturated fat intake
No data are available.
Fruit and vegetable supply

The Czech Republic had a fruit and vegetable supply of 419 grams per capita per day, according to 2009 estimates (4).

Salt intake

Data from 2003–2004 show that salt intake in the Czech Republic was 16.6 grams per day for men and 10.5 grams per day for women (5).

Iodine status

According to the most recent estimates on iodine status, published in 2012, the proportion of the population with an iodine level lower than 100 µg/L was 13.4% (6, 7).

Physical inactivity

In the Czech Republic, 29.1% of the population aged 15 years and over were insufficiently active (men 30.7% and women 27.6%), according to estimates generated for 2008 by WHO (1).

Policies and actions

The table below displays (a) monitoring and evaluation methods of salt intake in the Czech Republic; (b) the stakeholder approach toward salt reduction; and (c) the population approach in terms of labelling and consumer awareness initiatives (5).

Salt reduction initiatives

<table>
<thead>
<tr>
<th>Monitoring &amp; evaluation</th>
<th>Stakeholder approach</th>
<th>Population approach</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Industry self-reporting</td>
<td>Industry involvement</td>
</tr>
<tr>
<td>Salt content in food</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salt intake</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consumer awareness</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Behavioural change</td>
<td>XXX</td>
<td></td>
</tr>
<tr>
<td>Urinary salt excretion (24 hrs)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Notes. XX partially implemented; XXX fully implemented.

Source: WHO Regional Office for Europe (5)
Trans fatty acids (TFA) policies

<table>
<thead>
<tr>
<th>Legislation</th>
<th>Type of legislation</th>
<th>Measure</th>
</tr>
</thead>
</table>

Source: WHO Regional Office for Europe grey literature from 2012 on TFA and health, TFA policy and food industry approaches.

Price policies (food taxation and subsidies)

<table>
<thead>
<tr>
<th>Taxes</th>
<th>School fruit schemes</th>
</tr>
</thead>
</table>

Sources: WHO Regional Office for Europe grey literature from 2012 on diet and the use of fiscal policy in the control and prevention of noncommunicable diseases; EC School Fruit Scheme website (8).

Marketing of food and non-alcoholic beverages to children (9)

In 2008 the Czech Advertising Standards Council launched a self-regulatory advertising code of practice (10). No further details have been reported.

Physical activity (PA), national policy documents and action plans

<table>
<thead>
<tr>
<th>Sport</th>
<th>Target groups</th>
<th>Health</th>
<th>Education</th>
<th>Transportation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Existence of national &quot;sport for all&quot; policy and/or national &quot;sport for all&quot; implementation programme</td>
<td>Existence of specific scheme or programme for community interventions to promote PA in the elderly</td>
<td>Counselling on PA as part of primary health care activities</td>
<td>Mandatory physical education in primary and secondary schools</td>
<td>Inclusion of PA in general teaching training</td>
</tr>
</tbody>
</table>

* Clearly stated in a policy document, entirely implemented and enforced.

Source: country reporting template on the Czech Republic from 2009 developed in the context of a WHO/EC project on monitoring progress on improving nutrition and PA and preventing obesity in the European Union (EU).

Leadership, partnerships and professional networks on health-enhancing physical activity (HEPA)

<table>
<thead>
<tr>
<th>Existence of national coordination mechanism on HEPA promotion</th>
<th>Leading institution</th>
<th>Participating bodies</th>
</tr>
</thead>
</table>

Source: country reporting template on the Czech Republic from 2009 developed in the context of a WHO/EC project on monitoring progress on improving nutrition and PA and preventing obesity in the EU.

PA recommendations, goals and surveillance

<table>
<thead>
<tr>
<th>Existence of national recommendation on HEPA</th>
<th>Target groups addressed by national HEPA policy</th>
<th>PA included in the national health monitoring system</th>
</tr>
</thead>
<tbody>
<tr>
<td>General population, vulnerable and low socioeconomic groups</td>
<td></td>
<td>✔</td>
</tr>
</tbody>
</table>

Source: country reporting template on the Czech Republic from 2009 developed in the context of a WHO/EC project on monitoring progress on improving nutrition and PA and preventing obesity in the EU.

References