

2. NON-MEDICAL DETERMINANTS OF HEALTH

2.2. Nutrition at ages 11, 13 and 15

Nutrition is important for children's development and long-term health. Eating fruit during adolescence, for example, in place of high-fat, sugar and salt products, can protect against health problems such as obesity, diabetes, and heart problems. Moreover, eating fruit when young can be habit forming, promoting healthy eating behaviours for later life.

A number of factors influence the amount of fruit consumed by adolescents, including family income, the cost of alternatives, preparation time, whether parents eat fruit, and the availability of fresh fruit which can be linked to the country or local climate (Rasmussen *et al.*, 2006). Low family affluence is associated with lower fruit consumption in most OECD countries. Fruit (and vegetable) consumption have a high priority as indicators of healthy eating in most OECD countries.

In 2005-06, only around one-third of boys and two-fifths of girls aged 11-15 years ate at least one piece of fruit daily, according to the latest Health Behaviour in School-aged Children (HBSC) survey (Currie *et al.*, 2008). Overall, boys in Italy, and girls in the United Kingdom had the highest rates of daily fruit consumption. Fruit consumption is relatively low among some Nordic countries, including Finland, Iceland and Sweden. Finnish children reported the lowest levels of daily fruit consumption, with rates lower than one in four girls and one in five boys. Girls at all ages in most countries were more likely to eat fruit daily. At age 11, girls in Norway, Portugal and Switzerland, as well as boys in Portugal, the United States and Italy were more likely to eat fruit daily. By age 15, girls in Italy, Denmark and the United Kingdom, and boys in Italy, Portugal and Belgium ate most (Figure 2.2.1).

In almost all OECD countries, daily fruit consumption falls between ages 11 and 15 (Figure 2.2.2). Among girls, the OECD average fell from 46% at age 11, to 40% at age 13 and 36% at age 15. For boys, the fall was from 38% to 33% and then 26%. In Austria and Iceland, rates fell by up to half between ages 11 and 15, and severe falls were also seen in Hungary (girls). Italy (girls), as well as Belgium (boys) are the most successful coun-

tries in maintaining healthy eating habits as children get older.

The gap between the fruit consumption of boys and girls is largest at age 15, for most countries. At age 11, France, Italy and Spain are most equal in terms of fruit eating by sex. Norway, Germany and Poland have the biggest gaps at this age. As children reach age 15, gaps in Denmark, the Czech Republic and Turkey grow to a level where fewer than six boys for every ten girls eat fruit regularly.

Average reported rates of daily fruit consumption across OECD countries showed some increase between 2001-02 and 2005-06. This was most evident among girls aged 11 (Figure 2.2.3).

Effective strategies are required in order to ensure that children are eating enough fruit to conform with recommended dietary guidelines. Children generally hold a positive attitude toward fruit intake, and report good availability of fruit at home, but lower availability at school and during leisure time. Increased accessibility to fruit, combined with educational and motivational activities, can help in increasing fruit consumption (Sandvik *et al.*, 2005).

Definition and deviations

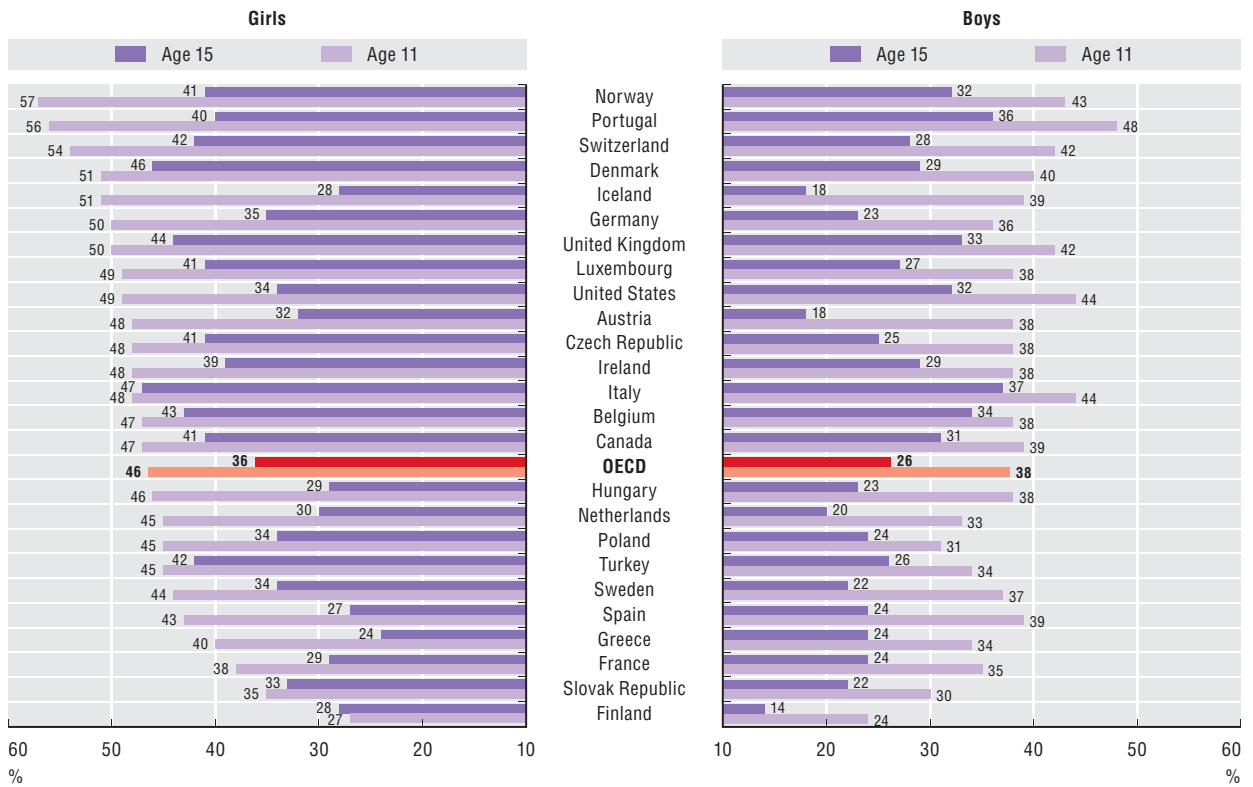
Nutrition is measured in terms of the proportions of children who report eating fruit at least every day or more than once a day. In addition to fruit, healthy nutrition also involves other types of foods.

Data for 25 OECD countries are from the Health Behaviour in School-aged Children (HBSC) surveys undertaken in 2001-02 and 2005-06. Data are drawn from school-based samples. France, Germany and the United Kingdom report results for certain regions only. The survey has not been carried out in Australia, Japan, Korea, Mexico and New Zealand.

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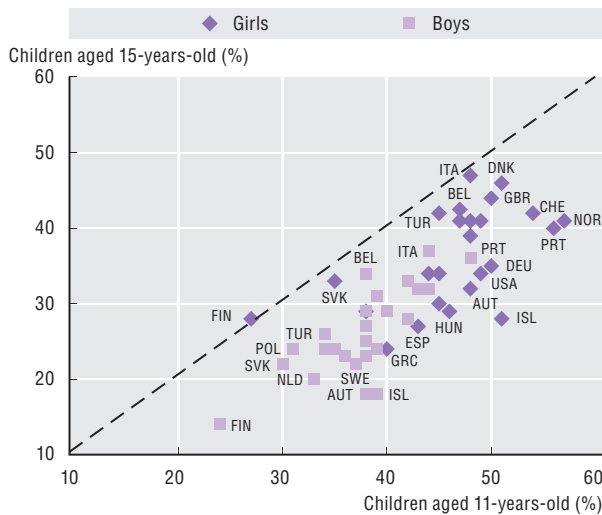
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2.2.1 Daily fruit eating among 11 and 15-year-olds, 2005-06



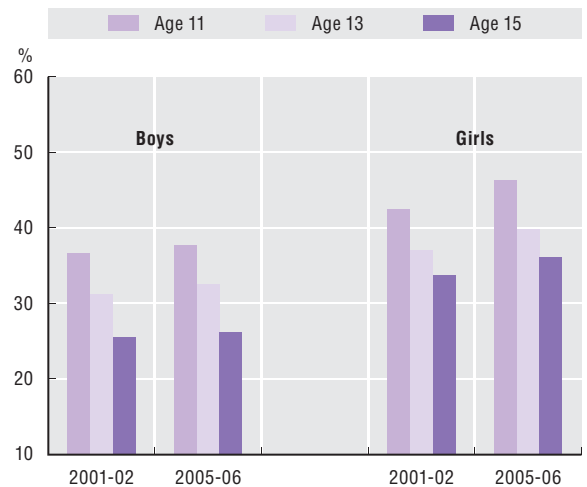
Source: Currie et al. (2008).

2.2.2 Regular fruit consumption at ages 11 and 15 by sex, 2005-06



Source: Currie et al. (2008).

2.2.3 Average proportion of children reporting daily fruit consumption, by sex, 2001-02 and 2005-06



Source: Currie et al. (2004, 2008).

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