** Information and Opportunities **

** On 8 April 2015, Cambodia passed its first (draft) National Tobacco Control Law. The new law contains provisions related to limiting secondhand smoke exposure, increasing taxes, restricting the sale of tobacco to minors, combating the illicit tobacco trade, and including large health warnings. The draft law still needs to pass the Senate and be signed off by King Norodom Sihamoni. See [http://seatca.org/cambodia-tobacco-law-passed/](http://seatca.org/cambodia-tobacco-law-passed/). **

** The World Cancer Research Fund International (WCRF International) launched the policy brief "Curbing global sugar consumption: Effective food policy actions to promote healthy diets and tackle obesity" to coincide with the World Health Assembly's 68th session in May 2015. This brief includes a guide of available policies designed to assist countries to reduce the national consumption of sugar to meet the WHO's new sugar guideline, which was published in March. **

** 68th World Health Assembly—Agenda item 13, solely on NCDs, was discussed 22-25 May 2015. **

** NCD Alliance Annual Report 2014-15: highlights the activities and achievements of the NCD Alliance and its extensive constituency over the last year, demonstrating that it is possible to make a difference for people at risk of or living with NCDs. **


** WHO regional committee meetings (RCMs) - NCDs and post-2015 development goals are on the agenda of all meetings, all dates are listed here: [http://www.who.int/mediacentre/](http://www.who.int/mediacentre/) **

** For other updates and upcoming events, please see the NCD Alliance news and events sites: [http://www.ncdalliance.org/news](http://www.ncdalliance.org/news) and [http://www.ncdalliance.org/events](http://www.ncdalliance.org/events). **

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** Using Healthy Foods to Reduce NCDs **

The health problems faced by people in many countries are no longer dominated by infectious diseases and malnutrition, but also by chronic non-communicable diseases. And, while much attention is paid to malnutrition and micronutrient deficiencies among vulnerable population groups, particularly in times of famine and critical food shortages, there is now a significant global increase in overweight and obesity rates in all age groups. This increase is not simply a result of greater access to food; instead, it is a reflection of a shift in people’s eating habits from healthy, nutritious whole foods to highly processed products laden with salt, fats, sugars, artificial colours and flavours, and preservatives. Indeed, diets heavy in these highly-processed products are a major risk factor for NCDs.

To tackle this growing problem, there is an increasing need to engage in inter-sectoral actions that address the various determinants of health and nutrition. As one component of such an approach, the World Health Organization’s Global Strategy on Diet, Physical Activity and Health recommends that governments formulate – and regularly update – national guidelines on food and nutrition. Regular revision is necessary to take into account changes in dietary patterns, local food cultures, states of health and disease, and progress in dietary knowledge.

At their most basic, the purpose of such food guidelines is to provide information and guidance to enable people to make healthier food choices and to engage in healthier eating habits. Healthy food guidelines also serve as a cornerstone to healthier living more broadly. After all, a healthy diet is more than the simple intake of nutrients; it also encompasses issues related to accessibility, affordability, and sustainability – all of which are linked to wider poverty and NCD concerns.

In this issue we focus on government approaches to improve the eating habits of their populations. Our feature article is about Brazil, which has issued comprehensive and visionary dietary guidelines. We also talk about the laws that have been passed in various Latin American and other countries to regulate the advertising of junk food – particularly to children – and to improve the type of food served in schools and sold on the streets.

Much great work is already being done, and much remains to be done. We hope that this newsletter will inspire you.
Radical Improvements on Healthy Eating Guidelines in Brazil

It comes as a welcome breath of fresh air to read the Brazilian Dietary Guidelines of 2014. There is so much that is revolutionary in these guidelines, that it is hard to know where to begin. What is perhaps most radical is that the guidelines redefine food groups, not according to their main nutrients or constitution (proteins, carbohydrates, fruits/vegetables), but according to their degree of processing: natural foods, minimally processed, and ultra-processed. This re-imagining of food groups leads to a set of very straightforward, simple recommendations: eat mostly natural foods complemented with minimally-processed ones, and completely avoid ultra-processed foods. This is certainly excellent advice from a health promotion standpoint: it is easy to understand and to remember, and more likely to result in healthier diets than has come from following traditional food guides that are based on eating a certain quantity of various categories of food. After all, however badly people cook, it is virtually impossible for them to use the vast quantities of sugar, salt, fat, additives, colourings, flavourings, and preservatives that go into processed foods.

But it gets better. The recommendations to avoid ultra-processed foods in favour of fresh ones are based not just on the health perspective, but on a much broader outlook that also encompasses environmental and economic sustainability issues. When people buy ultra-processed foods, much of their food dollar goes to processing, packaging, advertising, and retailing; little ever gets returned to the farmer. “Real” foods provide greater returns to farmers while inflicting much less environmental damage; even if they are not grown (as ideally they would be) without chemical pesticides and fertilizers, foods that are sold in their natural state avoid the excess fuel use involved in processing and packaging. For a Ministry of Health to view health more holistically – to acknowledge the interconnectedness of health, the environment, and the economy – is a radical improvement over most dietary guidelines, and should serve as a model to the world.

What do the Brazilian guidelines food categories mean?

Natural/minimally processed foods: Most foods require at least minimal processing, such as the drying of grains and beans, or the washing of fruits and vegetables. This category refers to foods found in their natural state with only minimal processing and no added ingredients. This includes foods such as grains, beans, fresh vegetables and fruits, and fresh meat. Flavourings may only be used in small quantities, including the oils, fats, salts, and sugar that are found in a natural state and added by the cook to the food.

Processed foods include those foods that, while ready to eat, have only a couple of ingredients and have only undergone fairly minor processing, not enough to change the true essence of the food. This includes cheese (not to be confused with pasteurized processed cheese food) and real, fresh bread (as opposed to the pre-packaged bread found in most supermarkets).

Ultra-processed foods are multi-ingredient foods that no longer resemble any of their original ingredients. Some of the ingredients cannot be readily identified, such as xanthum gum, emulsifiers, azodicarbonamide, and calcium hydroxide. While “ready to eat,” these products are not really food. Examples from all traditional “food groups” are easy to find: sausages, many types of biscuits and cookies, many types of breakfast cereals, soft drinks, packaged noodles and Mac & Cheese.

The recommendations arising from the Brazilian Dietary Guidelines’ re-imagined food groups are more likely to result in healthier diets than are those coming from traditional food guidelines.
Radical Improvements on Healthy Eating Guidelines ...continued

The Brazilian Healthy Eating Guidelines address several important issues that go beyond the simple act of eating. They acknowledge that preparing fresh food can require more time than eating ready-made choices, and offer a simple solution for the time crunch: family members should plan meals, shop for food, prepare the ingredients, cook, eat, and clean up together. That is, not only should the act of eating itself be a social, celebratory event in which entire families (or groups of friends) enjoy the pleasure of eating fresh, wholesome food together, but they should also share in the various tasks involved in preparing it. (We love this recommendation so much that we have included it in our recent video, “A Sharing Family is a Happy Family”, which you can view on our website: [www.healthbridge.ca](http://www.healthbridge.ca).)

The Brazilian guidelines could also help to reduce poverty:

Since real food is often less expensive than processed food, families could save money on their food purchases while improving their diets by switching to real food shopping.

When people eat healthier diets, they are less likely to fall ill and to spend scarce resources on health care.

When people eat real as opposed to ultra-processed foods, more of their food expenditures go to farmers. This could greatly reduce the impoverishment of local farmers.

Greater sharing of household work would decrease the burden on women, thus allowing them more time and energy to commit to their families as well as to income-earning opportunities.

Other Latin American Initiatives for Healthy Eating

Several Latin American nations have passed healthy food laws in an attempt to reduce childhood obesity. Many are struggling with implementation, though, due in part to interference by the food industry (Big Food) that fights over any attempt to limit its profits. That interference has led some advocates to call for international measures, similar to those that have proven to be successful in reducing tobacco use. Brazil, Chile, Colombia, Costa Rica, Peru, and Uruguay have each passed national healthy food laws, while Ecuador is considering doing so. Most of the laws address the types of foods offered and advertised in schools. Others have added labelling regulations, or limited junk food advertising, especially on television. Studies have shown that in some countries, TV channels targeting children show more than a dozen ads per hour for foods high in fat, sugar, and salt.

What right does government have to interfere in people’s dietary decisions? Every right, when we consider that a key responsibility of government is to promote the conditions which allow people to live healthy lives in a minimally-polluted environment. Its obligation becomes even more evident when we remember that governments also have the duty to treat illness, including disease caused by industrial products. Rather than rely on the private sector to do the right thing, how much wiser to maintain public sector responsibility: work hard to keep us healthy, then provide us with health care when needed to treat the diseases that inevitably still occur — though likely at later ages and in lesser numbers when we live healthier lives.


The “Ingredients” of Healthy Food Laws

What do Healthy Food Laws look like? In each country they are different, responding to local needs and practices. However, there are a number of similarities, or over-arching concerns, that are addressed in all of the laws.

In line with its dietary guidelines, the Brazilian government not only set nutrition standards but also required that schools purchase locally grown foods, thereby supporting small farmers and stimulating the local economy. “Unlike Europe or the USA, where processed foods make up more than half the diet, about two-thirds of the average Brazilian diet still consists of traditional, unprocessed foods...The Brazilian law reinforces that, requiring that 70% of the food served to children in school meal programmes be unprocessed—rice, beans, meat, fish, fruits, or vegetables—and 30% be locally sourced.”

In Peru, the main concern is childhood obesity, which has reached a crisis level over the past ten years. Currently one in four school-aged children in Lima is overweight and fifteen percent of children under the age of five are obese. In fact, Peru now ranks eighth in the world in terms of child obesity. Motivation was thus strong to pass a law to promote healthy eating and to stop the growing trend of unhealthy children who would grow up to be even unhealthier adults.

The main ingredients of the Peruvian healthy food law are:

- The inclusion of nutrition education in schools;
- The implementation of information campaigns designed by the education and health ministries;
- The employment of a system for monitoring nutrition, overweight, and obesity among children and adolescents;
- The provision of healthy food in school kiosks and/or cafeterias, and the encouragement of street vendors to sell healthier snacks with lower sugar content;
- The promotion of increased physical activity; and
- The banning of fast food and junk food advertising aimed at children and adolescents younger than 16 years.

The law also supports larger efforts aimed at encouraging people to eat more local grains and fresh produce, and to use healthier foods in their children’s school lunchboxes. The law was needed partly due to the influx of international fast food chains in the country, which now has the largest concentration of American fast-food outlets of any other emerging market. International chains have been joined by local outlets offering French fries, fried chicken, and hot dogs. As in the other Latin American countries that have enacted, or are in the process of enacting, healthy food legislation, the Peruvian law is currently being attack by the Big Food industry, which, supported by the mass media, claims that it unfairly targets the purveyors of legal products.

<table>
<thead>
<tr>
<th>Examples of policy actions</th>
<th>Examples of where implemented</th>
<th>What the action involves</th>
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</thead>
<tbody>
<tr>
<td>Mandatory regulation of broadcast food advertising to children</td>
<td>Iran</td>
<td>Broadcast advertising of soft drinks prohibited since 2004.</td>
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<td></td>
<td>Ireland</td>
<td>Advertising of foods high in fats, sugars and salt prohibited during children’s TV and radio programs for which over 50% of the audience are under 18 years old. Overall limit on advertising of foods high in fats, sugars and salt. Remaining advertising targeted at children under the age of 13 must not include nutrient or health claims or include licensed characters.</td>
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<td></td>
<td>Mexico</td>
<td>Advertising of junk food and sugar-sweetened beverages restricted on programs targeting those under age 13.</td>
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<td></td>
<td>South Korea</td>
<td>Limited ban on TV advertising to children under 18 years of age for specific categories of food. Bans free toys.</td>
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<td></td>
<td>United Kingdom</td>
<td>Advertising and product placement of foods high in fats, sugars and salt prohibited during TV and radio programs targeting those under 16 years old.</td>
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<td>Mandatory regulation of food advertising on non-broadcast communications channels</td>
<td>South Korea</td>
<td>Bans Internet advertising which includes free toys.</td>
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<td>Mandatory regulation of specific food marketing techniques</td>
<td>Ireland</td>
<td>Bans use of celebrities in food advertising to children under the age of 18. Bans use of characters and personalities from children’s programming in ads targeted at children under age 15.</td>
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<td></td>
<td>United Kingdom</td>
<td>Product placement is covered by restrictions on broadcast advertising (see above).</td>
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<tr>
<td>Mandatory regulation of food marketing in schools</td>
<td>Spain</td>
<td>Law states that kindergartens and schools should be free from advertising.</td>
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<td></td>
<td>United States</td>
<td>The state of Maine prohibits brand-specific advertising of certain unhealthy foods and beverages on school grounds, at any time.</td>
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<td></td>
<td>Uruguay</td>
<td>Prohibits the advertising and marketing of foods and drinks that don’t meet the nutrition standards.</td>
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<td>Mandatory requirement that advertisements must carry a health message or warning</td>
<td>France</td>
<td>All television advertising for processed food and drinks, or food and drinks containing added fats, sweeteners, and/or salt, must be accompanied by a message: &quot;For your health, eat at least five fruits and vegetables a day&quot;; &quot;For your health, exercise regularly&quot;; “For your health, avoid eating too many foods that are high in fat, sugar or salt”; or “For your health, avoid snacking between meals.”</td>
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<tr>
<td>Framework legislation is in place for the regulation of food marketing to children</td>
<td>Chile</td>
<td>Defines the limits of energy, saturated fats, sugar and sodium content to be considered “in excess” in a food; enables the use of a warning message and a graphic design on food labels to communicate the “excess”; and restricts advertising directed to children under age 14 of foods in the “excess” category. Toys are banned.</td>
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<tr>
<td></td>
<td>Peru</td>
<td>Warnings on advertising for foods high in saturated fats, sugars and salt, and containing trans fats.</td>
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<tr>
<td>Government engagement with industry</td>
<td>Denmark, Latvia, Norway, Spain, European Commission, Thailand, United States</td>
<td>These countries have enacted largely voluntary, self-regulatory initiatives that call on the food industry to set guidelines and to restrict advertising.</td>
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Some Notes Regarding Sugar Sweetened Beverages and Junk Food Advertising

Issue 5 of our newsletter focused on sugar-sweetened beverages (SSBs). We do not promote artificial sweeteners as an alternative. As this current issue demonstrates, we believe in eating real food and avoiding, as much as possible, processed foods that are full of sugar, fat, salt, and various chemical additives. The healthiest beverage is water, where it is safe to drink. Fruit is better consumed whole than as juice, but you can easily make juice yourself. Fruit juice, even if natural, contains a high quantity of sugar; most processed “juice drinks” contain little if any actual fruit and lots of added sugar.

What about artificial sweeteners? According to the Centers for Disease Control, there is inconclusive evidence whether consuming diet drinks over the long term “leads to weight loss, weight maintenance or even weight gain.”¹ Some research suggests that although people drinking diet soft drinks get fewer calories from beverages, they may compensate by getting more calories from food. There is also the possibility that artificially-sweetened drinks heighten people’s natural cravings for sweet items, thereby making them more likely to consume sweet foods.

Determining which food additives are entitled to the “Generally Recognized as Safe” (GRAS) label that is used in the United States is set not by the Food and Drug Administration but by food manufacturers themselves. The FDA does not have the resources to review all industry claims about the safety of additives.²

Issue 5 also discussed recent research that was conducted in Nepal, which reveals the heavy concentration of junk food advertising on TV in programs that target children. Work for a Better Bangladesh (WBB) Trust has replicated that research in Bangladesh, and, not surprisingly, has obtained similar findings. While newspapers include few ads for junk food, such ads dominate TV channels – especially those that target children. TV channels aimed at adults broadcast far fewer junk food ads. All parents surveyed during the research study reported that their children regularly request they buy junk food, and many feel the need for legislation to be enacted to address the practice. The full research report will be available shortly at www.wbbtrust.org.