

FINAL TECHNICAL REPORT INTERAMERICAN HEART FOUNDATION INC

Eugenia Ramos


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research, advocacy, and policy in health food
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7272 Greenville Ave., Dallas, TX 75231

Contact information of researcher/research team members:

Eugenia Ramos – eugenia.ramos@interamericanheart.org, + 598 95 881 322

Javier Valenzuela – javier.valenzuela@interamericanheart.org, +1 214 706 1354

Agustín Carnikian – agustin.carnikian@interamericanheart.org, + 52 55 4041 6750

Piera Deambrosi – piera.deambrosi@interamericanheart.org, + 598 99 265 169

Alejandro Ramos-Carbajales – aleram22@gmail.com, + 598 99 607 845

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1. Synthesis

This project aims to establish and sustain a community of practice for healthy food systems in Latin America and the Caribbean (LAC) for collaborative learning and quality information exchange among different individuals, groups and organizations involved with research and/or advocacy, including policy makers, academic researchers and civil society, in order to provide new forms of engagement and networking and to reinforce international cooperation to promote healthier food systems and prevent non-communicable diseases (NCDs) in LAC. The community of practice (CoP), which has been named COLANSA (“Comunidad de Práctica Latinoamérica y Caribe Nutrición y Salud” in Spanish, which translates to Community of Practice Latin America and the Caribbean for Nutrition and Health), intends to strengthen research and advocacy tools and regional capacities, enhance regional collaboration and develop strategic directions in food systems through the establishment of inter-country and multi-actor knowledge hubs, to embed gender analysis and promote women empowerment, to implement a regional strategy on front-of-package labeling (FOPL) as a pilot of collaboration for other priority action lines, and to raise public awareness and influence policies on food systems for NCD prevention and to promote healthier food systems in LAC.

InterAmerican Heart Foundation (IAHF) responsibilities are:

To define priority action lines to address the gaps and needs identified as part of the core food systems themes and select those priority action lines where the community of practice will build regional capacities.

To strengthen the community of advocates to improve skills in food systems advocacy and collaboration in knowledge transfer with researchers.

To identify how best to raise public awareness of the issues that concern the community of practice among the public, the media and decision-makers in the region, to begin installing the issues on the public agenda as a necessary step to policy change.

To develop action plan for front-of-package labeling as a model for other community actions in the region.

2. The research problem

Despite the progress made on hunger and undernutrition, obesity and other malnutrition problems in Latin America and the Caribbean (LAC) have risen in the past decades. Over 50% of the adult population of the region is overweight and 23% is obese. Non-communicable diseases (NCDs) are among the leading causes of death in almost every country of the region. The double burden of disease in families in which problems of overuse and malnutrition coexist has also increased. The availability of sugar is greater than that observed in developed regions and the availability of fats per capita is greater than the recommended range for a healthy diet (1). Between 2000 and 2013, annual sales per capita of ultra-processed products increased steadily in LAC (2).

Confronted with these facts, several institutions and professionals with diverse disciplinary backgrounds have agreed that fundamental changes are necessary to strengthen, preserve and recover food systems, ensuring sustainability and the capacity to provide a healthy food environment. In the November 2014 Rome Declaration on Nutrition and its accompanying Framework for Action, member countries committed themselves to “enhance sustainable food systems by developing coherent public policies from production to consumption across relevant sectors to provide year-round access to food that meets people’s nutritional needs and promotes safe and varied healthy diets” (1). This has also been the objective of a workshop in Mairiporã-SP, Brazil, that took place in June 2017, which was organized by the International Development Research Centre (IDRC) in partnership with the Brazilian Institute for Consumers’ Defense (Instituto Brasileiro de Defesa do Consumidor – IDEC). Concrete ways to address needs and take advantage of opportunities identified during the workshop led to the idea of developing a regional platform with the purpose of establishing and sustaining a community of practice, a network for collaborative learning and quality information exchange among different individuals, groups and organizations involved with research and/or advocacy, such as policy makers, academic researchers and civil society, and whose interests and goals are similar or complementary in the field of healthy food systems.

Additionally, in LAC, women undertake important roles in attaining healthy food systems, especially via availability, access, and utilization, from agricultural production, to food preparation and distribution within the household and the community. However, their roles are generally undervalued and constrained by limitations on their access to resources, services, and labor market opportunities. A lack of data, combined with gender-biased perceptions, have limited awareness and appreciation of women’s productive roles and contributions to healthy food systems in the region. Poor education and health indicators for women limit their access to resources and opportunities. Therefore, active interventions are needed to gain gender equity and empower women and other minority groups, including social protection policies to address the structural causes of poverty and vulnerability, providing health equity in the region. There has been growing policy interest in social justice issues related to health and food and it is important to further understand the state of knowledge on relationships between health equity and food systems.

In this project the partner organizations IDEC (Brazil), Instituto de Efectividad Clínica y Sanitaria (IECS, Argentina), Instituto de Nutrición y Tecnología de los Alimentos (INTA, Chile), Instituto Nacional de Salud Pública (INSP, Mexico), Coalición Latinoamérica Saludable (CLAS) and our own InterAmerican Heart Foundation (IAHF) are working on the creation and organization of a community of practice (CoP), an organized group of people who have a common interest in a specific

domain: healthy food systems. The CoP will connect ongoing efforts in research, advocacy and policy, aimed at developing and consolidating the field of food systems for NCD prevention and influence policy action in the region.

Thus, COLANSA will act at the intersection between research activities, advocacy efforts and politics to produce public health policies. The unique knowledge and skills of this CoP extends to building bridges between key stakeholders in public health and NCD prevention. COLANSA will provide valuable advice, strategies, insights, experiences, synergistic opportunities, and helpful connections to diverse but related stakeholders.

General objective:

To establish a regional CoP aimed at developing and consolidating the field of food systems for NCD prevention and to influence intersectoral practices and policies in LAC, by establishing collaborative relationships between key players active in research and advocacy on healthy food systems.

Specific objectives:

1. To enhance regional collaboration and develop strategic directions in food systems research and advocacy through the establishment of inter-country and multi-actor hubs based on a common conceptual framework and the analysis of the state of research and policy.
2. To strengthen research and advocacy tools and regional capacities to address the priority action lines of the CoP.
3. To embed gender analysis and promote women empowerment as part of the regional research and advocacy agenda of the CoP.
4. To provide support to raise public awareness and influence policies on food systems for NCD prevention by strengthening research to policy links and developing a regional communication plan for the CoP.
5. To develop and implement a regional strategy on front-of-package labeling (FoPL), as a model of collaboration for other priority action lines

An important event that needs to be considered is the COVID-19 pandemic, that started at the end of 2019 in China and rapidly spread all over the world, including 2020 and 2021. Starting on March 2020, the LAC population began facing deaths, health complications, lack of medical equipment, supplies and hospital beds, besides the social and economic issues related to the social distancing and isolation. Because of that, and even when the pandemic variants come and go and with the ups and downs in contagions, many people are facing difficulties to have access to healthy foods. Those difficulties are partially explained, and the problem is also exacerbated by the powerful influence of ultra-processed food industries on marketing and donations, the waste of fresh foods cultivated by family farmers who have no way to deliver their production to the population, and other increasing issues of supply and price increases. In parallel, the evidence is showing that the COVID-19 symptoms and mortality is worsened by excess weight and NCDs, which makes healthy eating

even more important than ever. By August 2020, COVID-19 in LAC reached more than 6 million cases and caused more than 245 thousand deaths (3). In response to this dramatic development, the IAHF is also, in parallel, doing a regional study (initiated in June 2021) to understand the comorbidities and risk factors present in the hospitalized population of some Latin American countries (4).

3. Research findings

The current is a report of main research findings and activities advanced by the InterAmerican Heart Foundation in the context of the project and the development of COLANSA (Comunidad de Práctica Latinoamérica y Caribe Nutrición y Salud) as a final report.

The main objective of the project was for the group of organizations supported by this project to develop and sustain an active and diverse community of researchers and advocates capable of discussing, communicating and advocating for impactful changes in the food environment. This objective has been achieved, although the continued development of the community is an ongoing effort, especially the inclusion of new members from unrepresented geographies and diversity of expertise so COLANSA can effectively promote and advance food policies in the region.

The IAHF, as one of the six organizations in the coordinating and leadership team, continues to support all activities including leadership meetings, member meetings and promotion of COLANSA regionally and globally. As such, the IAHF supported collaboratively the decision-making process and the original development of the documents for the mission, vision, and statements for COLANSA, positioning on FOPL, positioning for the UN Summit on Food Systems, etc.). Other supported activities later included meetings within the FOPL hub (led by the INTA), for the development of factsheets, and the presentation during meetings for members of other tools and webinars (i.e. some examples include FOPL webinar in 2020, launching of COLANSA and its objectives in march 2021, map of evidences tool in 2022, the tool developed to assess the level of sensitiveness to gender of projects (by IECS), etc.).

As each member of the COLANSA leadership team, there were specific objectives and activities within the project, which are described next by main activity.

One of the objectives sought is Objective 1.4 “To define priority action lines to address the gaps and needs identified as part of the core food systems themes and select those priority action lines where the community of practice will build regional capacities”. This objective includes the development of consensus action lines and priorities from the region, and the analysis of existing regional regulatory frameworks, policy documents and action plans to promote healthy food systems and prevent NCDs.

The initial event to define priority action lines, address the gaps and needs of the LAC region identified as part of the core food system themes for the nascent CoP (Spec Objective 1.4) was realized at the NCDs meeting organized in Panama in December 2019 (described in the 12-month interim report to IDRC) including the definition of a position statement on FOPL generated by the consensus work during the Panama City meeting, and further completed later (Appendix 1 and 2).

As reported before, important priorities and strategies for the region were discussed and defined at the meeting which included a mandate to develop the CoP, including its conceptual and political framework, to support healthy, sustainable, equitable and inclusive food systems, to pursue FOPL in the region as a first and necessary strategy to open the door to further changes towards a healthy food environment, to continue to develop and sustain national NCD alliances, and

address pushback from unhealthy industries, among others (Appendix 1).

However, an important specific objective is to review the regional LAC regulatory frameworks, policy documents, action plans among the relevant documents and commitments made by countries of the region to be also used to direct action (Objective 1.4b).

I. Study of policies and indicators driving CVD and related NCDs and main risk factors in Latin America and the Caribbean (LAC Civil Society Scorecard project)

The IAHF sought to address this aspect of the project as part of an effort that our organization had started in 2017, to obtain and update the information contained in a comprehensive regional and per country study. This effort, called the LAC Civil Society Scorecard project, included a comprehensive questionnaire systematically compiling information on main indicators and policies relevant to the prevention, control and in some cases treatment of cardiovascular diseases (CVDs) and non-communicable diseases (NCDs), including detailed information on each of the 5 major risk factors for these diseases (unhealthy nutrition, use of tobacco and nicotine products, alcohol consumption, sedentary behaviour and air pollution).

This report was intended to advance specific objectives of the project, including priorities related to the assessment of food policies in the region, advancing FOPL in the region, including help with outlining the strategies initiated with the meeting in Panama City in 2019. The effort was also useful to produce a mapping of academic, scientific and civil society organizations and experts who are interested in pursuing and supporting food policies and FOPL from the participating countries, and to disseminate information of, and connect with, COLANSA.

The initial survey took place in 2017-2018, was supported by the World Heart Federation and involved 12 participating countries (Argentina, Barbados, Brazil, Bolivia, Chile, Colombia, Costa Rica, Ecuador, Jamaica, Mexico, Peru and Uruguay) from more than 20 civil society organizations and experts. The information gathered was representative of more than 85% of the LAC population. The study originally produced each country with a report, with recommendations and analysis based on SWOT analysis, factsheets for some countries, and a “Scorecard table” for all 12 countries on a selected subset of main policies and indicators.

For the current project with support from IDRC, the effort initiated with the update of the questionnaire that had been used in 2017, including new questions about relevant policies per risk factor and expanding the nutrition and obesity section of the LAC Civil Society Scorecard study questionnaire, especially the FOPL section (regulation of marketing of unhealthy foods and beverages to children and adolescents, school environments, government/public sector procurement, etc.) (see Appendix 3, new questions were highlighted in beige).

The main objective of the study was to understand the policy landscape impacting nutrition, obesity and NCDs prevention (“food policies”), to help set priorities for action for individual countries and for the region, to highlight and disseminate best practices to learn from and possibly emulate, and to support the COLANSA general effort of advancing FOPL policies in the region. Also, to contribute with the mapping of civil society experts and organizations interested in healthy nutrition and specifically FOPL in the participating countries (Objective 5).

The effort aimed to further connect civil society researchers and advocates to COLANSA, and it was also complementary to the mapping of those within the academic environment carried out by INTA, and the mapping of social media influencers described below in the communications objective carried out by IAHF (Objective 4.2).

The study surveyed academic and civil society experts on existing food policies, collecting civil society's perspective as well as their specific recommendations for action and good practices. With regards to the policy landscape, the study aimed to assess policies' level of implementation, relative success, limitations, and missing legislation and data, collect information on the existing nutrition plans and targets, multi- and inter-sectorial nature of programs, and specifically enquired about some food policies such as FOPL, regulation/elimination of trans fatty acids (TFAs), and others.

The revised and updated questionnaire was sent to 12 countries asking about the progress and success (or failure) of policies related to the food environment and the reduction of overweight and obesity and was responded by 10 participating countries (Argentina, Brazil, Bolivia, Chile, Colombia, Ecuador, Jamaica, Mexico, Peru and Uruguay; excepting Barbados and Costa Rica).

A report for the Nutrition and Diet section was produced summarizing the analysis, findings and good practices (Appendix 4). The main general findings are:

- Levels of overweight and obesity have increased across the board for all countries surveyed, and also for all ages starting in children under 5 years of age (children under 5 years, children and adolescents 5 to 18 years of age, and adults). Indicators have increased between 50% and 100% since the year 2010, and with current levels above averages worldwide. Trends for overweight and obesity are also significantly worsening in the region.
- Respondents assessed as a serious situation the levels of overweight and obesity in all age groups and in all the countries surveyed. Dealing with this issue was characterized as a high priority in the action column of the questionnaire.
- In general, there was agreement from respondents on policy proposals and actions, such as advancing and improving public policies and adapting resources, working a more intersectoral approach, strengthening nutrition in early childhood centers and in schools for children, and nutritional re-education for all age groups.
- Some countries highlighted the lack of legislation, particularly relating to taxes on unhealthy beverages and foods, and the need for subsidies on healthy foods to improve their affordability (i.e. Colombia, Uruguay, Argentina, and some others).
- Respondents also generally critically observe the attitude of governments. They also generally view problems related to unhealthy nutrition and obesity as multifactorial requiring a comprehensive multi- and inter-sectoral approach that is assessed as mostly lacking. Some other needs and problems mentioned:
 - Lack of regulation and/or implementation of policies impacting nutrition for prevention of NCDs; the need for additional surveillance, inspections and enforcement was also mentioned by most respondents.

- Not enough food policy measures that can adequately address NCDs, overweight and obesity in adolescents and adults are being implemented.
- A problem of focus and resource allocation in government. Most government efforts on food policy for NCDs prevention are viewed as still mostly focusing as is traditional on the problems of stunting and wasting in children, oriented to breastfeeding and early childhood in some cases, but with a much lesser focus in the problems of overweight and obesity across all age groups.
- A governmental lack of coordination. There is a lack of close coordination between health authorities and food policy and food safety authorities, often diverting in their focus. Food policy institutions have not generally included NCDs as a concern.
- There is a need for more articulation between health and educational authorities, and greater participation of local governments (municipalities, etc.) in the provision of healthy food, and in the implementation and surveillance activities.
- Increasing the supply and availability of healthy foods in healthcare Institutions (public and private), restaurants and especially cafeterias in workplaces and across all educational institutions (public and private, at elementary and higher educational levels).
- Work is needed on school environments: respondents express the need for comprehensive programs including healthy school environments in most countries; bans on the sale of products with low nutritional value in school environments (a general suggestion from all respondents), and some recommended including the bans also around schools.
- Effective fiscal policies, such as subsidies that encourage increased consumption of fruits and vegetables, and taxes that discourage the consumption of sugary-sweetened beverages (SSBs) and other products high in critical nutrients sodium, sugars, saturated fats, and trans fats.
- Stronger advocacy for good public policies.
- Need for consumer education and awareness campaigns to fight against overweight and obesity, promoting healthy eating to overcome the low consumption of healthy foods.
- Intersectoral work to strengthen agricultural policies to achieve sustainable food systems and public procurement from small land holders and family farmers.

Regarding some specific policies, some analysis and good practices emerge:

I- Fiscal policies with a health focus.

Fiscal policies are considered one of the best tools governments can use to reduce consumption of unhealthy food and beverages and promote instead healthier options among consumers. However, the use of a deliberate fiscal policy designed with a health focus is still not common in the region, and countries that use it, do so incipiently and lacking a longer-term strategy.

- **Methods:** Fiscal analysis consisted of gathering data from the questionnaire responses and other official sources to evaluate the existence of taxes on sugary-sweetened beverages (SSBs), taxes on unhealthy foods, and possible

incentives or disincentives that are reflected in the prices to the public and the supply of the products (either through taxes, subsidies, or other mechanisms).

- An analysis based on a common brand of soda (Coca-cola of 1 lt) showed that retail prices for sodas appear linked to countries' income level per capita (i.e. with a low point of USD 0.73 in Bolivia and the highest points of USD 1.72 in Uruguay and USD 1.96 in Barbados).
- Excise tax rates on sodas for all countries surveyed were less than the 20% level recommended by PAHO (except in **Peru**, which has a 25% rate). However, these rates differ by country. For example, Colombia and Jamaica have zero excise tax rate, Mexico and Brazil are at 4-5.9%, and then most countries in the sample have excise tax burdens in the range of 7-15%, with Peru the highest.
- Among the group of countries that have a health focused tax policy on SSBs, there is a wide difference in the total tax burden (Chile and Peru have tax burdens of more than three times that of Mexico). Mexico is an important case study as it was the pioneer in the region in the introduction of SSBs taxes with a health focus in 2014. However, it has since not updated its tax above inflation. As comparison, even though Argentina and Uruguay have no deliberate health-focused tax policy for SSBs, they have a higher total tax burden as compared to Mexico.
- An analysis on the comparative affordability of soda vs bottled water reflected important differences among the countries in the study. The affordability index was calculated to consider the prices relative to the income of the population. It was calculated as the retail price of 100 1- liter bottles of Coca Cola (or of bottled water) with respect to the Gross Domestic Product (GDP) per capita for each country. Results showed that on the one hand, Chile had the most affordable Coca-cola, which indicates that given the country's health-focused fiscal policy, that it has a lot of room to increase the excise tax. At the opposite end were found the cases of **Ecuador** and **Peru**, with the least affordable prices, countries which also have a health-focused fiscal policy on SSBs, but which have succeeded decreasing affordability of SSBs compared to other countries.
- Wide disparity on fiscal policies on SSBs among the countries analyzed was found to be partly the consequence of a lack of a "health policy lens" applied to the field of fiscal taxes to reduce consumption (this is surprising when compared to levels of tobacco taxation in countries like Argentina, Uruguay and Brazil). However, countries that do have a health-focused tax policy in place need to increase the rates and generate a sustainable long-term strategy.
- Something considered a good practice is the differential (incremental) fiscal treatment according to the sugar content in SSBs in **Chile**. A rate of 10% on natural or artificial carbonated beverages, energizing or hypertonic, syrups, and mineral or thermal waters to which dyes, flavorings or sweeteners have been added. If their composition includes high concentration of sugar (more than 15 grams per 240 ml), then the rate is 18% (a 5 percentage points increase). A study conducted four years after the SSB tax implementation showed a highly

significant decrease of 21.6% in the monthly purchased volume of the higher-taxed sugary carbonated beverages. **Peru** follows the same policies since legislation passed in September of 2021.

General conclusions and good practices:

- **Good practices:** civil society members emphasized the need for a more focused and long-term tax policy on SSBs and suggested to include not only carbonated beverages but also fruit juices, yoghurts, and artificially-sweetened beverages. In addition, sugar content should be the main objective of SSB fiscal policy. **Peru** and **Chile** have started in that direction.
- Use of fiscal tools to reduce consumption of SSBs is underused and incipient in the region. There is a long way to go, both in terms of increasing the rates of excise taxes and in terms of using the tax to relatively favor the consumption of water compared to SSBs. Five countries in the region tax bottled water, and nominal excise tax rates on SSBs are still low.

II. Front of package nutritional warning labelling (FOPL)

Just a few countries surveyed have been able to complete the process of introducing black octagon warnings of “High in” or “Excess in” critical nutrients sugar, salt, fats and trans fats as mandatory interpretive labelling. This kind of FOPL has been consistently shown to be the clearest instrument for consumers to differentiate among products quickly and effectively with regards to their healthfulness. **Chile** was the first to introduce this system of FOPL warning labelling, and also Peru and Uruguay have introduced black octagonal warnings, and Mexico and Argentina are in their processes of implementation with specific legislation in place.

- **Advances and good practices:** For example, in **Argentina** the Healthy Food Promotion Law of October 2021, which requires ultra-processed products with excess sodium, sugar, fat, and calories to include black octagon warnings on the front of the package. It is based on the nutrient profile by PAHO, includes a mandatory declaration of sugar on the food label, and it also bans health claims on products with any warning label. **Mexico** is another good example of legislation, with a FOPL warning system to be implemented in three sequential phases for critical nutrient warnings (at first for those added during manufacture) and precautionary legends, then restriction of persuasive elements, followed by stricter limits for nutritional criteria and the last phase where the warnings will be applied taking into account the full content of critical nutrients in the product (whether added or present naturally).
 - **Chile, Argentina, and Mexico** have warnings on excess calories (the rest do not).
 - **Mexico** also included caffeine and non-caloric sweeteners and a measure of total sugars (not only added sugars) after October 2025, but other countries do not have these provisions.
- **Challenges:** for countries with FOPL a main challenge is the strong need to keep surveillance on the implementation. The nutrient profile used to set the limits for each warning varies as it has been the target of strong interference and oppositions (i.e. Uruguay), and in countries where FOPL has not been implemented,

respondents report there are important obstacles including industry interference (all countries with recent effort to promote FOPL describe industry interference in the approval of the process, including relaxation of limits, delays in the approval, etc.). Other issues mentioned are:

- Ecuador, one of the first in the LAC region with the policy of mandatory interpretative labelling, has kept the traffic light system (which has issues like being more confusing for consumers, and the warnings can be placed in less visible places of the package).
 - Bolivia passed legislation in 2016 incorporating FOPL based on the traffic lights system, but it was never implemented by the government and civil society considers it should be now updated.
 - Colombia recently passed Law 2120 in July 2021, introducing FOPL warnings in packaged foods, mandating the Ministry of Health (MOH) to adopt the type of warnings to be used. However, previously the MOH had passed a regulation mandating a circular type of FOPL warnings (“High in”) and giving industry 18 months to comply. By July 2022 some industries were already including the circular warnings, with uncertainty as to what system of warnings will prevail.
 - Some respondents view as negative the absence of FOPL warnings on TFAs and other additives.
- **FOPL mapping:** there are academic and civil society organizations in all countries surveyed. More than 20 organizations in the 11 countries surveyed were identified (see full report, Appendix 4).

National food guidelines, limits on critical nutrients and specific food policies.

The questionnaire was looking to assess the level of planning and implementation each country has for food policies, inquiring about “whole of government” approach to policymaking, and level of intersectoral work (inclusion of academic and civil society organizations), and also about the level of implementation, monitoring and enforcement of policies. Some specific policy gaps were mentioned as viewed by respondents, and also some good practices are highlighted:

- **Intersectoral approach in the preparation and implementation of food policies and food safety systems. Mexico** is using the most policy tools, to at least some degree, to comprehensively address obesity and NCDs control. The intersectoral program GISAMAC (Intersectoral Group of Health, Food, Environment and Competitiveness) seeks the articulation and progressive evolution of public policies.
- With the exception of Peru and Bolivia, all others either already have **National Food Guidelines**, or they are about to be enacted. Good practices: In **Brazil** the nutritional guidelines are based on the nature of industrial food processing, and respondents suggested civil society should use them as tool to promote public policies aligned with the health recommendations.
- **School food policies.** Almost all countries surveyed have them, but subnational policies are not explicitly mentioned except in **Bolivia**. This may be a problem with implementation of healthy alternatives such as fresh foods and produce that could be better coordinated at the municipal level. Good practices: **Brazil** has the National

School Feeding Program (2020), which provides meals for all children in public schools. Other countries also have similar programs, but Brazil stands out for the fact that its program is aligned with National Food Guidelines and for its ability reduce the consumption of ultra-processed and processed foods, privileging fresh and minimally processed foods.

- All countries surveyed implement the **International Code of Marketing of Breast-milk Substitutes** (in Brazil there is good monitoring of compliance led by Ibfan Brazil), and most countries surveyed apply the **UNICEF Child-Friendly Hospital Initiative** (except Ecuador and Jamaica). Challenges expressed here are the adequate follow-up and evaluation of the implementation success of the initiative.
- **Regulation on national marketing standards to control the commercial promotion of unhealthy food and beverages in children and adolescents.** Some reported the policy is only partially achieved, and more based on the protection of consumer rights than on the protection of consumers' health. Advancing and monitoring on this policy is still required. **Chile** prohibits the advertising, promotion, and sponsorship of products with at least one FOPL octagon warning label, as well as the sale and advertising of these products in schools. **Argentina** and **Mexico** also include a restriction on the advertising of products that have at least one octagon.
- **Elimination of industrial trans fatty acids (TFAs).** The reduction of trans fats and the goal of their total elimination is present at least in an incipient form in the countries surveyed. Respondents reported that Uruguay, Chile, Peru, Colombia and Mexico have set limits through either legislation or decrees; and Argentina and Brazil are in the process of updating to WHO best standards (regulation on both foods to consumers and in cooking oils and fats, with a final goal of complete elimination from the food supply chain).
- **Reduction of dietary sodium.** In general, countries surveyed report not to have national sodium reduction targets. In **Argentina**, the sodium reduction strategy began with a voluntary initiative to reformulate sodium in baked goods and other processed foods more than a decade ago and ended with the enactment of national Law No. 26905 in 2013, whose regulation No. 16/2017 joined the Argentine Food Code (CAA) where it has been mandated.

Threats

Respondents mentioned problems arising or being exacerbated by COVID-19, such as the diversion of resources, corporate social responsibility (CSR) actions of the food and beverage industries, industry lobby to reduce its tax burden, and delays in implementation of policies and the control and surveillance, as well as delays in the parliamentary treatment of FOPL policy, among others (detailed in the full report).

Next steps

The study explicitly requests the civil society viewpoint in each country regarding advocacy priorities and main policies to pursue based not only according to their assessed importance but also on whether the political climate, pandemic situation, level of public awareness and other contributing factors make them more feasible to act upon now.

The information collected from the questionnaires and as reported in the final report was also used to prepare factsheets with highlights and recommendations from academic and civil society respondents. Those are products of the current work and are presented in the Appendix section (Appendix 5). A future development within COLANSA will be to use these dissemination materials and their findings to further discuss with questionnaire respondents, invited COLANSA members as well as other stakeholders for the uptake of the information and to put in perspective the relative progress or stalling for countries in each important policy.

II. Mapping of influencers in social media discussing nutrition and Front of Package Labelling (FOPL)

As a contribution to the project communications Objective 4.2, the IAHF together with two communications and research consultants, carried out a mapping of “interlocutors” (relevant individuals with a social media presence that was used to discuss nutrition and FOPL). are carrying out the mapping of “interlocutors” in some LAC countries.

It was decided early on to select 3-4 countries to study relevant social media interlocutors, choosing some countries that have not yet advanced on FOPL and some that may have just started to make some headway. In those countries selected, the study would consider the influence of such relevant actors in the public dialogue on social media about nutrition and FOPL.

The mapping and analysis are needed as to assess how front and center discussions around nutrition and FOPL were in the countries studied. Also, such analysis would be able to help with future efforts for communications and advocacy campaigns designed to raise awareness and support for healthy food environments, nutrition and to advance specific policies. This kind of information is very important for COLANSA and its goal of installing FOPL in the regional agenda and for advancing in some countries like in Central America and the Caribbean (where FOPL discussion within the public is not yet very advanced, and which are countries still lacking FOPL policy) or even countries where some regulation may have already been approved but which may still need to be modified or enforced (such as the case of Uruguay, which does have FOPL but where the measure was weakened and delayed with successive decrees, the enforcement aspect is still insufficient, and other associated regulations are still absent).

For the purposes of the study, we defined interlocutors as the relevant communicators in each country who have a social media presence and engage with their audiences in a dialogue about nutrition and especially about FOPL, whether they have formal training as communicators or not. Interlocutors can be social media influencers, journalists, politicians, academics, researchers, physicians, nutritionists, chefs, actors, celebrities, among others. However, an effort was made to determine those with the greatest capacity as communications in each country (even if their messaging was supportive, neutral or critical to FOPL).

Main interlocutors in **Colombia, Costa Rica, Jamaica and Uruguay** were studied. These countries were selected as they represented various stages of progress towards approval, implementation and monitoring/enforcement of FOPL policies.

Methods: interest of interlocutors in topics in nutrition and FOPL was analyzed by looking at the social media postings. Initial interviews with key academic and civil society individuals as referenced by IAHF and COLANSA members in each

country, allowed us to determine an initial group of main interlocutors as well as the main social media platforms and media portals to consider.

The social media publications of each interlocutor and their reach and engagement with their audience was analyzed on Instagram, Twitter, Facebook and Tik Tok. The written content and the video and images posted together with their associated texts and hashtags (#) were all analyzed. Methods were based and adapted from a recent publication by the Brazilian Association of finance and capital market entities (AMBIMA) (ref) which analyzed the social media dialogues of financial advice influencers in Brazil during a short period of time (kindly provided by Ana Paula Bortoletto from IDEC).

The study focused primarily on interlocutors not associated with government organizations nor to organizations with a commercial interest in the sale or promotion of products. Mapping of interlocutors by country included those expressing positive, negative, and neutral views (details presented in the final report, Appendix 6).

The interviews and systematic analysis of postings (collection of data) was done for most of the month of November 2021 and reported in December 2021. However, during the course of the study it was deemed necessary to consider a greater period of postings for each interlocutor in order to obtain relevant information on FOPL in each of the countries studied.

The main study findings are:

- Interlocutors were for the most part journalists, social media influencers, politicians, civil society and health experts, among others.
- Approximately 5,000 total social media accounts were analyzed between the interlocutors and their audience.
- Some interlocutors were selected for each country: 10 interlocutors were studied in Colombia, 6 in Costa Rica, 6 in Jamaica, and 13 in Uruguay.
- In general terms, it was found a more varied degree of professions and occupation for interlocutors, along with the greatest reach and engagement of their messaging in the case of Colombia and Uruguay. On the other hand, Costa Rica and Jamaica had interlocutors with occupations mostly within the health and civil society sectors. The engagement of their interlocutors was also more limited and carried less impact with social media audiences.
- Twitter was observed as the most used social media channel to talk about FOPL. In some cases, the same message posted on Twitter was replicated on Instagram or Facebook.
- In each country considered, the discussion about FOPL developed differently, and this was also reflected in the level of use of social media and in the time dedicated to the topic by each user.
- Discussion on FOPL concentrated around specific occasions in each country. For example, discussion was generated in social media in Costa Rica with the introduction of a bill of law, FOPL bill 22065 of July 2020, which was presented by deputy María José Corrales Chacón. In the case of Colombia, most discussions were generated around the approval of the FOPL law (Law 810 known as the Junk Food Law, with the hashtag #LeyDeComidaChatarra with the largest number of tweets leading up to and during the debate of the law in parliament and its subsequent approval). In the case of Uruguay, discussions were observed around the time of implementation, and also around complaints about the nutrient profiles used and

about the lack of labelling on some products. In Uruguay, effective discussion was also observed even when negative interlocutors were expressing their critical views, because the opportunity still arises for those with a positive view to express their opinions, and traditional media also picked up the information, therefore with an effective interplay between social media and traditional media which allowed for further expansion of the information and the number of interlocutors speaking about the policy.

- In general, we observed a low engagement of the messages, both in terms of number of “likes” and in number of times a story was shared. This was generally true, as other topics garnered more attention from audiences, but was especially limited in the case of Costa Rica and Jamaica.
- To maintain the topic in the public opinion, each message must be reflected in several channels simultaneously and throughout the year, as a concerted effort with a continuous “drip” of information capable of maintaining the topic in the public discussion in social media.

The final report with an analysis per country (Costa Rica, Colombia, Jamaica and Uruguay) was produced which also includes the list of mapped interlocutors, their names and profession/occupation/affiliation as well as the tables with the analysis of their postings per social media channel (presented in the Appendix 6).

III. Development of a web-based database of documents (e-library) for COLANSA

The IAHF created a searchable web-based database (e-library) of documentation to support COLANSA and its objectives, and to serve as an evolving main reference for advocacy efforts, including the support of the activities of the hub on front of package labelling (FOPL) and other hubs to be created. (Appendix 7)

The database aims to include all topics related to healthy and sustainable nutrition. However, as a first phase for the project, efforts were concentrated firstly on classifying documents on front of package labelling (FOPL), incorporating documentation which had already been accumulated in a number of areas including non-communicable diseases (NCDs), nutrition, advocacy, tobacco control, physical activity, etc.).

As originally planned at the start of this project, 137 subfolders with information were analyzed and all of the more than 1200 original files were reviewed. Those which were relevant for the database were identified, classified and uploaded. Currently more than 80 documents have been incorporated into the library: 26 advocacy documents, 16 laws and other policy documents, and 39 others). The e-library can be accessed here: <https://interamericanheart.org/knowledge-base/>

Some characteristics for the e-library of documents created, decided in consultation with the IDRC and COLANSA leadership team members are:

- Subject matter: the e-library collects and classifies currently documents primarily about FOPL from the Latin American and Caribbean (LAC) region. This is the subject matter as defined for this first phase of COLANSA development. However, later on, the e-library should include more topics accompanying the further development of COLANSA and possible new theme hubs (this is already being proposed for further development of the e-

library). Eventually the e-library should also include information on other thematic areas relevant to nutrition and health, sustainability and equity.

- Document types: The types of documentation classified are varied and include technical and scientific papers, policy documents, webinar presentations, factsheets and reports, etc. Specifically, all the main regulatory FOPL documents were searched and added to the e-library. Other documents added were suggested by COLANSA members or other experts (i.e. UNICEF comparative document on FOPL).
- The targeted audience is primarily members of COLANSA but currently documents are publicly available and accessible to all. However, if needed in the future to keep some sensitive documentation more restricted, access can be given specifically to members of COLANSA with the use of a username and password.
- Written and audiovisual documents were reviewed by a consultant working with the Project Manager. Documents were then assessed for relevance on the subject of FOPL and classified according to type of document, title, authors, origin, etc. They were also given a summary and keywords (tags) in both Spanish and English, along with a hyperlink, and were then subsequently uploaded to the database. Future updates can include also tags in Portuguese.

Finally, other activities for the project involved dissemination of information on COLANSA and its work, and efforts to incorporate new members. Working to collaboratively develop and incorporate new members into COLANSA as well as establishing new connections also required continuously presenting the Community of Practice to different audiences and explaining the objectives and work being undertaken in regional and international meetings. Special effort was made (and continues to be made) to incorporate individuals and organizations including expertise beyond nutrition and health, and in countries beyond South America (efforts continue to include Central American and especially Caribbean members). Therefore, IAHF presented COLANSA and its work since the start of the project each year in almost every meeting and congress joint session: at the American Heart Association (AHA) Scientific Sessions (the American Heart Association (AHA) at the AHA scientific sessions in November each year (2019, 2020 and 2021); at the joint session with the InterAmerican Society of Cardiology (IASC) at the IASC Congress of Cardiology meeting in June 2021; at the SLAN (Latin American Congress of Nutrition) in 2021 where IAHF, along with the other members of the leadership team, introduced COLANSA in a dedicated session where IAHF presented the e-library of documents; and at the co-organized session with the World Heart Federation (WHF) on CVD and obesity as part of the 6th Global Summit on Circulatory Health (October 21st, 2021). The topic of obesity, foods systems and FOPL, and the speakers were suggested by IAHF to fit the current needs of the region.

4. Project implementation and management

The implementation and the management of the whole project were carried out in collaboratively with the other 6 institutions in the project leadership team. Two main IAHF personnel involved were Dr. Eugenia Ramos, Executive Director and Mr. Javier Valenzuela, Chief Operating Officer, respectively of the IAHF.

The activities described for the IAHF specific objectives were carried out by the IAHF team and specific consultants hired for the activities.

For the development of the e-library of documents, we defined the document types to upload (technical and scientific papers, policy documents such as legislation, decrees, webinar presentations, advocacy factsheets and reports, and others mostly from the LAC region), the target audience (COLANSA membership at first without restriction of content) and the process to include and upload such documentation.

The process followed to identify and upload to the e-library the FOPL documents was described before, with documents reviewed by a consultant working with the Project Manager according to their relevance on the subject and classified, and uploaded to the e-library.

IAHF work for Objective 4.2 “Identify how best to raise public awareness of the issues that concern the community of practice among the public, the media and decision-makers in the region, to begin installing the issues on the public agenda as a necessary step to policy change”, was defined in consultation with IDEC and the IDRC to take into account both the time constraints and the immediate needs of the developing Community of Practice, COLANSA. Thus, it was decided to concentrate the work for this objective on the mapping of relevant social media FOPL “interlocutors”, as defined earlier, with care to also analyze such aspects of the communications their communications process such as the timing and social media reach of their postings. This part of the work was developed with the aid of two consultants with communications background and scientific expertise, MSc Agustin Carnikian and Communications expert Ms Piera Deambrosi. The final report is presented in the (Appendix 6).

Regarding the implementation of the LAC Civil Society Scorecard Project, this work was based on previous work by IAHF in the years 2017 -2018 with a regional effort to map and analyze the main policies related to NCDs and main risk factors. This project had included many countries and academic and civil society organizations and included specific questionnaires per country on main risk factors (nutrition/obesity, tobacco consumption, alcohol, physical activity, and air pollution).

The process of updating the questionnaire and re-contacting those individuals and organizations that partnered and participated in the 2017 – 2018 effort was done by the same IAHF team and consultant, MSc Alejandro Ramos-Carbajales, who had worked in the original project. Also, for the most part the same expert individuals and civil society organizations that worked years before were contacted for the current effort, with substitutions taking place in two occasions due to retirement or unavailability of the individual. The management of the collection of the filled-out questionnaires to obtain

the information on the Nutrition and Obesity questionnaire, and the resolution of queries with country partners was managed directly with each respondent of the survey questionnaire.

It is important to note that the rest of the questionnaire tabs involving other aspects and risks such as the NCDs prevention, and those on Tobacco control, Alcohol control, Physical activity and Air pollution are currently ongoing and will be finalized later in 2022 using the same methodology. Effort will be made to obtain the information even for the nutrition and obesity questionnaire for those countries that were unable to do so at this point (Barbados and Costa Rica).

Additionally, we plan to submit for publication the results of the present study, together with publications for the findings on the rest of the policy landscape analysis from the other risk factors to be completed.

5. Project outputs and dissemination

Objective	Type of Outputs*	Output name or title	Author (s) / Responsible	Date (planned or completed)	Comments / Reporting period
Specific objective 1 – 4th strategy: To define priority action lines to address the gaps and needs identified as part of the core food systems themes and select those priority action lines where the community of practice will build regional capacities.					
a) To establish a working group to lead this work including researchers and advocates from different areas	Information sharing and dissemination	Workplan of activities to define prioritization of action lines. Agenda for the NCDs workshop in Panama, and the Executive Workshop report	IAHF - CLAS	Completed	Activity completed with the Panama workshop in Dec 2019 / Reporting period completion: 12 months.
b) To perform a review of regional regulatory frameworks, policy documents, and action plans relevant for food environment action in the region	Information sharing and dissemination AND Institutional reinforcement and sustainability of the research organization	Document summarizing info on framework, action plans and conclusions	IAHF & consultant	Completed	Work was adapted and expanded from the LAC Civil Society Scorecard Project Nutrition and Obesity Section (Reporting at 30 months)
c) To define a consensus methodology including type of methodology, objectives, implementation, participants	Information sharing and dissemination	Document for conducting selected consensus methodology	IAHF - CLAS	Completed	Panama workshop in Dec 2019 defined methodology, objectives, implementation, and participants. / Reporting period completion: 12 months
d) To conduct a workshop for the purpose of defining and prioritizing lines of action	Information sharing and dissemination	Summary of priority action lines	IAHF - CLAS	Completed	Reporting period completion: 6 months
f) To organize a repository (searchable e-library of documents) of information to strengthen regional research, easy to access and navigate.	Information sharing and dissemination	E-library (Repository) of information with searchable documents on FOPL	IAHF	Ongoing / Consultant hired and working on documents and platform.	Reporting period: 18 and 24 months. Activities were finalized for the project, but will continue and be sustained by IAHF beyond completion to support new theme hubs and other activities for COLANSA)

Specific objective 4 – 2nd strategy: To identify how best to raise public awareness of the issues that concern the community of practice among the public, the media and decision-makers in the region, to begin installing the issues on the public agenda as a necessary step to policy change.					
a) To convene communication experts from the region to consider the extent of public awareness of topics related to healthy food systems in region and what evidence exists	Information sharing and dissemination	Output: Report outlining mapped social media influencers and conclusions.	IAHF & Consultants	Completed	Objective modified to produce mapping effort of main influencers in 3 or 4 countries in the region and some analysis about their dialogue with audience. / Reporting period: Activities described are for the 24-30 month reporting period.
b) To explore various means of increasing public awareness more broadly in our region	Information sharing and dissemination	See above.	See above	See above	See above
Specific objective 5 – 2nd strategy: To develop action plan for FOPL as a model for other community actions in the region.					
a) To convene a working group to plan and promote FOPL regionally within the community of practice	Knowledge creation	Organized group in Panama and expanded with FOPL webinar attendants.	IAHF – CLAS	Completed (Year 2020 to May 2021)	Organized group in Panama and expanded with FOPL webinar attendants. / Reporting completion period: 12 months
b) To define a regional work plan for front-of-package labelling (FOPL) based on the SWOT methodology - strengths, opportunities, weaknesses and threats.	Knowledge creation AND Information sharing and dissemination	Final report and factsheets with findings, best practices, opportunities and threats from the LAC Civil Society Scorecard project (Nutrition and Obesity section).	IAHF	Completed	Activity started with the updating of the survey questions, expansion of FOPL, etc. Activity output agreed previously with the IDRC, final report with findings / Reporting period: early activities described initiated in 18-month reporting period, finalized at the 30-month reporting.
c) To map stakeholders related to FOPL, in targeted countries	Information sharing and dissemination	Map of key stakeholders with information from the LAC Civil Society Scorecard project presented in final report (see above)	IAHF	Completed	See above. Activity is synergistic to mapping efforts by INTA, CLAS, and mapping of social media influencers from Objective 4.2 in selected countries. / Reporting period: see above

d) To systematize ongoing research to assess potential areas of collaboration and funding opportunities	Information sharing and dissemination	Brief of opportunities of research collaboration for FOPL and other policy action in the region (presented in final report (see above)	IAHF	Completed	See above, included in the final report for Nutrition and Obesity (LAC CS Scorecard). Reporting period: see above (finalized at 30-month reporting) .
e) To develop specific advocacy actions with advocates and researchers in targeted countries to advance FOPL policies	Knowledge creation	Advanced specific policy measures. However, effort continues beyond scope of the project, in specific countries.	IAHF – CLAS in 2019 and 2020	Completed	Done in 2020, but ongoing specific activities continue as needed by countries and organizations / Reporting completion period: 12-month reporting

6. Impact

The collective effort of the activities in the COLANSA leadership team were to build from the ground up this collaborative community and space where researchers and advocates collaborate to introduce positive change in food environments, acting at the intersection between research activities advocacy efforts and including especially the assessment, generation and promotion of specific food policies that can improve the LAC environments. This objective was accomplished and the same groups of organizations that initiated this effort are continuing it as we embark on the next years of development for COLANSA.

However, the impact of creating COLANSA is only beginning. The community has already started acting on several spheres, including generating capacity across the region, disseminating information from its own work and that of others, connecting researchers and advocates from our own organizations together with members of COLANSA and others beyond and bringing new opportunities to advance healthy food environments. COLANSA started to become a recognized space of discussion, research and advocacy, starting to nucleate new researchers and advocates at it is looking to expand into the next few years.

Notable in this first phase was the starting with the express effort to promote FOPL as one of the main food policies to promote in LAC (and indeed elsewhere). COLANSA will continue to support this effort on FOPL, with the FOPL hub, the e-library and dissemination and advocacy campaigns. As we look beyond the end of the project for the future of COLANSA, which will include the expansion with new members, and the creation of new hubs in areas that our efforts here show are needed (the LAC Scorecard project showed needs in specific policies, including evaluation and promotion of comprehensive fiscal policies including taxing and subsidies). In response to this need, the IAHF is proposing now to develop a hub for health and economic policy with regional experts to assess current existing policies and extract and disseminate good practices. The hub will nucleate experts in economics, legal, advocacy and others, from several LAC countries, to encourage the development of economic and fiscal policies such as taxation, subsidies, and others.

7. Recommendations

8. References

1. Food and Agriculture Organization (FAO). Concept note: Regional symposium on sustainable food systems for healthy eating. El Salvador, 2017. Available at: <https://pt.slideshare.net/FAOoftheUN/concept-note-regional-symposium-on-sustainable-food-systems-for-healthy-eating>.
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9. Appendices

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