

codex alimentarius commission



FOOD AND AGRICULTURE
ORGANIZATION
OF THE UNITED NATIONS

WORLD
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ORGANIZATION



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Agenda Item 6

CX/LAC 08/16/8
October 2008

JOINT FAO/WHO FOOD STANDARDS PROGRAMME

FAO/WHO COORDINATING COMMITTEE FOR LATIN AMERICA AND THE CARIBBEAN

16th Session

Acapulco, Mexico, 10-14 November 2008

NUTRITIONAL ISSUES WITHIN THE REGION

COMMENTS IN RESPONSE TO CL 2008/16-LAC, PART D FROM
BOLIVIA, CHILE, COSTA RICA, CUBA, GUATEMALA, MEXICO, EL SALVADOR AND URUGUAY

Nutritional issues within the country or region such as: obesity, nutritional profiles, and any public health-oriented actions taken including the use of nutritional labelling and claims.

Bolivia

“Zero Undernutrition” national policy has produced the following regulations and laws:

- Law on the promotion of breastfeeding – Law N° 3460/2006 (in the process of regulation)
- Supreme Decree N° 24420 - Fortification of wheat flour with iron and folate.
- Supreme Decree N° 28094 - Fortification of vegetable oil with vitamin A.

Although nutritional labelling is voluntary in Bolivia, the standards on labelling and health claims are being revised to reflect the latest Codex versions for possible national adoption.

Chile

New measures taken by Chile in relation to obesity

Global Strategy against Obesity (EGO-CHILE)

The multiple socio-cultural factors that contribute to the issue of obesity call for multisectoral and intersectoral policies. Such actions also need to include a focus on correcting the poverty and gender inequalities in relation to health, otherwise those inequalities could worsen.

There are therefore various interventions aimed at preventing and controlling this epidemic in the country. One landmark action is the **Global Strategy against Obesity (EGO CHILE)**, which was launched by the President of the Republic, Mrs Michelle Bachelet, in July 2006.

This initiative is part of the Global Strategy on Diet, Physical Activity and Health of the World Health Organization (WHO) and the Pan-American Health Organization (PAHO), and serves as a platform to include and promote strategies, pooling efforts and involving as many sectors and players as possible, in order to have an impact on changing the lifestyles of the population.

This implies promoting social and policy initiatives, alliances, agreements and voluntary commitments, regulatory measures, new rules and laws, and so forth.

EGO-CHILE seeks to get government institutions, the private sector, Parliament, academia, the communications world, community organizations, NGOs and others to work together to promote policies, legislations and programmes directed at improving food habits and increasing physical activity, taking into consideration the social and cultural determinants, so that they take on board the principles of sustainability, social participation and equity.

EGO – CHILE

In the field of health

- Nutritional Intervention through the Life Cycle for the Prevention of Malnutrition from Excess:

The actions in the first stage target expectant mothers and children under the age of 6, who under the control of the State system. It adopts a perspective of anticipated harm and focuses on early detection of the population with risk factors, introducing new health checks, promoting the recovery of pre-gestational nutritional status at the sixth month postpartum and providing nutritional advice in critical periods. It also includes healthy living advice at all the standard check-ups of mother and child, as a new working technique that is closer to individuals and that consists of brief structured guidance aimed at achieving gradual changes in habits.

- Nutritional programmes:

The nutritional programmes have changed in recent years to correspond to the specific needs of their beneficiaries. Hence the incorporation of Golden Years Dairy Beverage for senior citizens (semi-skimmed) and the New Cereal Puree, semi-skimmed and fortified with calcium. Both products represent a positive contribution towards improving the nutritional status of the more vulnerable population.

- Programme of Care for Obese Adults and Children:

Since 2004, the public health system has been implementing programmes directed towards obese pre-diabetic and/or pre-hypertension adult patients and obese schoolchildren and adolescents with factors of risk. Last year, the Official Gazette published the FONASA free choice modality of nutritional care for pre-diabetic obese adults, based on a coupon type programme. There are plans to extend this cover to all national primary care centres by 2010.

- Mandatory Nutritional Labelling of Foods (ENOA):

This initiative represents an important step in personal healthcare and the promotion of a healthy diet. Decree 57/05 of the Ministry of Health came into effect in November 2006, making it mandatory for all pre-packed food to carry a “Nutritional Facts” label or sticker. This regulation helps consumers choose their foods better by having nutritional information on the products. A massive educational campaign was launched to publicize the benefits of nutritional labelling.

- New Child Growth Standards, WHO 2006:

As part of its national responsibilities for the oversight of nutritional status, Chile was the first country of Latin America to implement the new Child Growth Standards of the World Health Organization (WHO) from January 2007. The best standard possible is therefore applied to assess the nutritional status of the infant population, which provides an invaluable tool for taking decisions relating to national policies and programmes.

- Training of Human Resources:

Broad dissemination of the EGO-CHILE strategy and training of human resources in the health sector on topics such as the ENOA, Healthy Life Advisories and implementation of the new WHO Growth Curve.

- Dissemination

Broad dissemination of the strategy at national and international level, publicizing its objectives and goals.

Information and education to the population through the massive distribution of educational bulletins and leaflets.

The educational and information documents and materials are available from the web site of the Ministry of Health (www.minsal.cl section health topics) and the web page www.ego-chile.cl.

- Regional Public Health Plans 2007 and 2008

All the Health Regional Ministerial Secretariats have a mandatory component on “*overweight, obesity and lack of exercise*” in their plans, through activities targeting primary and secondary students in the “EGO-Schools”. This work is conducted in coordination with the education sector and its interventions include activities to promote health in nutrition and physical activity targeting schoolchildren, parents and teachers. It also includes the identification and background of children with risk factors at the primary healthcare level.

- National Network of Physical Activity

The Ministry of Health has spearheaded the formation and coordination of the National Network of Physical Activity, sensitizing and convening representatives of the public sector, academia, scientific associations, vocational colleges, NGOs and social organizations. The major thrusts of this initiative are directed towards reaching agreement on public policies and strategies to deal with the issue of insufficient physical activity.

Academic Field

The academic sector is committed to the pursuit of research that will help combat obesity and includes the topics of nutrition and physical activity in courses, seminars, congresses and health vocational training. A number of institutions are involved in EGO-Chile, including: the Academy of Medicine, the Institute of Nutrition and Food Technology (INTA), the Faculty of Medicine of the University of Chile, the University of Concepción, the Pontifical Catholic University of Chile, the Chilean Society of Paediatrics, the Chilean Society of Nutrition, Bromatology and Toxicology, and others.

Entrepreneurial Field

Businesses and corporate associations have pledged to develop better quality products that will help enhance the health of the population.

“Acción RSE” is the lead organization in the promotion of Corporate Social Responsibility in Chile and has developed a project entitled *NutriRSE*, whose central aim is to group private efforts and public players in an association reflecting “Acción RSE” to combat the problem of obesity and lack of exercise in Chile.

Advertising agencies belonging to the Council for Self-regulation and Ethical Publicity (CONAR) have undertaken to pursue responsible marketing strategies in publicity for foods and soft drinks, together with the Ministry of Health.

This has led to the formation of the “Corporación 5 al día”(Five-a-day Corporation), a national private non-profit organization that groups the academic sector and business (distribution, production and export of fruits and vegetables) around the promotion of fruit and vegetable consumption. This initiative receives technical support from the Ministries of Health and Agriculture, and involves a number of bodies such as the Association of Open Markets and Vida Chile local committees.

Social Communication Campaigns

Various television personalities led by Mario Kreutzberger, better known as “Don Francisco”, are involved in publicizing messages of healthy nutrition and physical activity in their programmes, and help publicize campaigns and activities on these subjects.

- Five-a-day campaign, publicized by radio, the written press and educational leaflets. It promotes the consumption of fruit and vegetables.
- Radio campaign with the slogan “*Gaining more kilos but losing too many other things that count.*”
- “Yo Tomo” campaign; promoting the consumption of milk.
- “Vivir sano es Pulento” campaign; visits by the musical group of Channel 13 “Los Pulentos” to 700 schools in the country.
- Television spot “Porque sentirse bien es más rico” (“Why it’s better to feel good”) with personalities from all of Chile’s TV channels, led by “Don Francisco.

Costa Rica

At the Central American regional level, Costa Rica is taking part in drawing up regulations on nutritional labelling, which contain sections on nutritional labelling and health claims. Until such regulations are pronounced obligatory in Costa Rica, the matter is governed by Decree 3025-MEIC-S RTCR 135:2002 on Nutritional Labelling of Prepackaged Foods, covering the application of labelling to prepackaged foods only in cases where they make some nutritional claim, and certain specific aspects concerning the presentation of such foods and claims as to their properties.

Cuba

Cuba has a food and nutrition strategy approved by the Executive Committee of the Council of Ministers which covers all related actions. The strategy is implemented by the different OACEs to satisfy the nutritional needs of the Cuban population, including food fortification measures, plans to prevent anaemia and obesity, and promotion of physical exercise and healthy diets. The Codex standards on food labelling and nutrition claims have been adopted as mandatory requirements in the country.

The Ministry of Public Health has revised and is finalizing the nutritional recommendations for the Cuban population. Collaboration agreements exist with international organizations, including UNICEF and WFP.

Guatemala

We are aware of the world problem of increased obesity and nutritional profiles. As Guatemala is a country with major food insecurity problems, we need to closely monitor the vulnerable population and ensure a minimum supply of nutrients, so we are working very closely with the Committee on Nutrition and Foods for Special Dietary Uses.

Mexico

The general standard on food labelling is currently being revised by the Secretariats of the Economy and Health, the bodies responsible for its promulgation. Among the important aspects being considered in the updating of this standard is whether to make the nutritional declaration of products mandatory in accordance with the General Health Law and to adjust the Recommended Daily Intakes on the basis of the latest nutritional survey. There is also a need to raise consumer awareness of this tool as a means of improving their health.

A regulatory document on nutrition and health claims is also being drawn up, based on general guidelines of the COFEPRIS and reflecting the Codex criteria to orient industry.

With regard to obesity and nutritional profiles, the idea of restricting the indiscriminate addition of nutrients and other substances by food manufacturers is being looked into. However, more support is needed for research, evaluation and policymaking.

To improve the level of nutrition of its population, Mexico is implementing programmes such as “Mexico is taking measures”, which is run by the National Centre for Epidemiological Surveillance and Disease Control (CENAVECE) of the Secretariat for Health.

El Salvador

According to the study on “The Cost of Hunger: The Social and Economic Impact of Child Undernourishment in El Salvador” produced by the Economic Commission for Latin America and the Caribbean (ECLAC) and the World Food Programme (WFP) in July 2007, El Salvador has one of the highest levels of undernourishment in the Latin American and Caribbean region, with underweight affecting one in every ten children under the age of 5 years, and stunting affecting almost one in five of the same group.

According to the most recent available estimates (DHS, 2002/03), 83 000 undernourished children of between 1 and 59 months fall into the “moderate” or “severe” categories of underweight for their age. In El Salvador, the effects of undernourishment on the morbidity rates for the various associated pathologies resulted in 13 000 additional cases in 2004. The main such pathologies are acute diarrhoeal disease with 6 700 cases, acute respiratory infections with 3 800 cases and iron deficiency anaemia with 2 500 cases.

There are also specific pathologies resulting from critical nutritional deficiencies in calories and proteins, such as wasting (marasmus) and kwashiorkor, with 25 cases officially recorded in 2004.

There are various pathologies through which undernourishment affects mortality rates, particularly diarrhoea, pneumonia, malaria and measles.

With a view to reducing errors resulting from the quality of official records of the causes of death, the estimates of Fishman *et al.* (WHO, 2004) were used to assess the situation in each country. These figures define differential relative risks for all the causes of death of children under the age of 5 years. They are used in combination with the mortality rates estimated by the Latin American and Caribbean Demographic Centre (CELADE).

On this basis, it is estimated that between 1940 and 2004 approximately 417 000 children under the age of 5 years died from causes linked to undernourishment. Considering the rates of survival of the various cohorts throughout this period, a little over 75 per cent would still have been alive in 2004 if they had not suffered from overall undernourishment. It is also estimated that of all the deaths of children of under 5 years in 2004, 6 730 deaths (23 per cent) were linked to overall undernourishment.

Between 1940 and 1989, undernourishment was responsible for the deaths of 289 000 children of under 5 years, who would have been aged between 15 and 64 years in 2004, and would thus have been part of the working-age population (WAP 10). This situation has a major effect on the country's productivity.

El Salvador has regulations on nutritional labelling, which is obligatory if the label contains a nutrition or health claim for the food in question.

The Guidelines on Nutrition and Health Claims (CAC/GL 23:2004) have not yet been adopted.

Uruguay

Two issues may be mentioned:

1. Faced with the high percentage of children with anaemia, the Government decreed that all flour for bread must be fortified with iron.
2. Formulation of food guidelines appropriate to the people's customary diet.