**QUESTIONNAIRE**

**“Food, nutrition and the right to health”**

**Contact Details**

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| Type of Stakeholder(s) | Other (please specify): Civil society organisations (CSOs), Caribbean. |
| Name of Survey Respondent | Healthy Caribbean Coalition (HCC); Jamaica Youth Advocacy Network (JYAN); Heart Foundation of Jamaica (HFJ); Heart and Stroke Foundation of Barbados (HSFB); and the Law and Health Research Unit (LHRU), Faculty of Law, University of the West Indies, Cave Hill Campus.\* |
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| Can we attribute responses to this questionnaire to your State publicly\*? \*On OHCHR website, under the section of SR health |  Yes X |

# How and where to submit inputs

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| **E-mail address** | ohchr-srhealth@un.org |
| **E-mail subject line** | Contribution to GA report - SR right to health |
| **Word limit** | 750 words per question |
| **File formats** | Word, PDF (Please note that only word docs will be posted online) |
| **Accepted languages** | English, French, Spanish |

**\*About the Organisations**

HCC, registered in 2012, is a not-for-profit Caribbean NCDs alliance comprising over one hundred health and other CSOs. HCC works closely with regional and international leaders in NCD prevention and control to leverage the power of civil society to implement programmes aimed at reducing NCD-related morbidity and mortality. Two of HCC’s priority programme areas are healthy food policy, and supporting good governance in NCD prevention and control including managing conflicts of interest. In 2017, HCC launched the Civil Society Action Plan for Preventing Childhood Obesity in the Caribbean which, inter alia, supports advocacy initiatives to create environments that foster the accelerated realisation of rights-compliant, evidence-based policies for access to nutritious food, reduction of rates of obesity and NCDs, and achievement of the 25 by 25 NCD targets and 2030 SDGs.

JYAN is a not-for-profit, youth-based CSO in Jamaica that advocates for the rights of Jamaican adolescents and youth. JYAN has established connections with various youth groups, UN Agencies and Government, accessed high-level policy spaces, and partnered with nutritionists and nutrition and dietetics student groups to advance their work in the healthy food policy sphere. In 2021, JYAN launched the Health and Nutrition Youth Advocacy Movement (HNYAM) project to mobilise youths in Jamaica to become aware of and engage in nutrition and food-related advocacy issues and policies affecting their health and nutritional wellbeing, including healthy school food environments.

HFJ is a non-profit organisation formed in 1971. The Foundation is a member of the World Heart Federation. The Foundation is involved in advocacy initiatives such as the Global Health Advocacy Project (GHAP) and the Jamaica Coalition for Tobacco Control (JCTC). HFJ aims to reduce morbidity and mortality from cardiovascular disease (CVD) in Jamaica by promoting cardiovascular health through screening, treatment, education, research and advocacy, and by aligning around the World Health Organisation (WHO) related target of a 25 percent reduction in premature CVD mortality by 2025. The mission of the HFJ, “For Jamaicans to have a longer and better quality of life through the prevention and control of cardiovascular disease”, is the compass that has driven its efforts for more than 50 years.

HSFB is a non-governmental organisation (NGO) established in 1985. The need for the Foundation became critical when heart disease and heart attacks were identified by Barbados’ Chief Medical Officer as the nation’s leading cause of death for several consecutive years. HSFB’s clinical programme over time expanded to include behaviour change activities, and advocacy related to policy and legislative reforms that support health. HSFB introduced the Childhood Obesity Prevention (COP) Programme in 2018 to address the alarming rates of childhood obesity in Barbados. COP focuses on developing mass media campaigns to increase awareness about the health risks connected to consumption of sugar-sweetened beverages (SSBs), and promoting sustainable evidence-based policies to curb childhood obesity.

The LHRU was launched in July 2021 and seeks to build awareness and advance the use of law as a tool to protect and promote health and support a ‘health in all policies’ approach to policymaking and legislative action. LHRU provides technical expertise related to childhood obesity and NCD prevention and control from an international human rights perspective, including the legislative process. It also offers training on these issues through the development, rollout, and facilitation of short courses and webinars for legal and public health professionals; and participates in a range of CSO-led advocacy activities in Barbados and the wider Caribbean.

# Key Questions

1. What are the major factors that challenge quantitatively and qualitatively adequate access to food and nutrition in your country and/or community (including external to your country)? Taking into consideration the underlying determinants of health, in what ways do they contribute to health inequities?

**Over-reliance on imports**

According to the “Study on the State of Agriculture in the Caribbean”, a 2019 joint publication of the Food and Agricultural Organisation (FAO) and the Caribbean Development Bank (CDB), Caribbean Community (CARICOM) Member States import more than 80 percent of the food they consume, with only Belize, Guyana, and Haiti producing more than 50 percent of their consumption. The publication highlights the fact that:

“A high proportion of this imported food is calorie-dense, high in fat and high in sugar. As these products are more affordable than healthier alternatives, poorer households are more likely to make unhealthy nutritional choices, which leads to increased obesity levels.”[[1]](#footnote-1)

Therefore, CARICOM countries import large quantities of unhealthy products that are more affordable than healthier alternatives. This reality may influence policymakers’ perceptions about the impact that healthy food policies may have on the availability of and access to food. This poses a challenge to adoption and implementation of measures for reduced consumption of unhealthy food.

**Unaffordability of healthy food**

The United Nations (UN) 2022 publication “Regional Overview of Food Security and Nutrition in Latin America and the Caribbean - Towards Improving Affordability of Healthy Diets” reports that in 2020, 22.5 percent of the Latin America and the Caribbean (LAC) population could not afford a healthy diet. In the Caribbean this figure stands at an alarming 52 percent compared to Mesoamerica at 27.8 percent, and South America at 18.4 percent. The most concerning situations were recorded in Haiti where more than 80 percent of the people could not afford a healthy diet; in Jamaica where more than 65 percent of the people could not afford this diet; and in Suriname where almost 60 percent of the people could not afford this diet.[[2]](#footnote-2)

**Food insecurity**

The “Caribbean Food Security & Livelihoods Survey - Impacts of COVID-19 and the Cost of Living Crisis Regional Summary Report”, August 2022, a collaborative effort and publication of CARICOM, Caribbean Disaster Emergency Management Agency (CDEMA), World Food Programme (WFP), and FAO, highlights that an estimated 4.1 million people out of 7.1 million (57 percent) in the Dutch and English-speaking Caribbean are food insecure. This is a dramatic increase of 1.4 million since February 2022, equating to a 46 percent increase over the six months period. The report iterates that:

“This overall increase in food insecurity represents a great cause for concern, particularly with increases in severe levels of livelihood coping strategies which will continue to undermine food security for some time. This points to the need for significantly increased interventions to address the crisis in the short, medium and long term with a renewed focus on partnerships for creating more integrated and adaptive systems within the region. These efforts must be designed to both reduce the dependence on extra-regional sources for meeting basic needs and maintain a focus on the most vulnerable.”[[3]](#footnote-3)

The CARICOM/CDEMA/WFP/FAO August 2022 survey also found that food consumption and diets have deteriorated, with 72 percent of respondents admitting to skipping meals/eating less, eating less preferred foods, or going an entire day without eating in the week leading up to the survey. Spanish speakers (largely migrants) living in Trinidad and Tobago, Guyana and Belize are among the most impacted groups. More respondents than ever (97 percent) reported higher than usual food prices. People reported increasingly buying less healthy and diversified foods. Nearly a third of respondents reported having no food stocks at home.[[4]](#footnote-4)

1. What legislative or regulatory measures (such as those related to nutrition standards, labelling, marketing, procurement in institutional settings including – but not limited to – schools and prisons, and fiscal measures) have been considered or adopted in your country and/or community to improve food and nutrition, especially for persons in vulnerable situations? Where relevant, how are those measures being enforced?

**School nutrition policies**

Barbados has a robust school meals programme where school-aged children are provided with lunches daily. The programme was recently revamped to align with the new School Nutrition Policy (SNP) which was approved by the Ministry of Education in 2022. The SNP restricts the consumption of SSBs in schools, as well as places limits on foods high in fat, salt and sugar. Accordingly, the recipes in the school meals programme have been adjusted to ensure that meals served in schools are now in compliance with the age-appropriate nutrition standards outlined in the SNP. Implementation of the SNP is phased. Civil society has some concerns about this phased approach and, moreover, about push-back from powerful industry interests and local school vendors backed by industry. Nevertheless, the SNP is in the early stages of roll-out and an assessment of the pace of implementation and other matters will take some time.

In Jamaica, the government recently undertook national consultations, including a youth and student consultation, to support the development of the Jamaica SNP which they hope to implement with effect from the September 2023 school term. Prior to this ongoing process, Interim Beverage Guidelines for Schools were set by the Government in 2018, which placed limits on the grams of sugar allowed per litre in the beverages sold to school-aged children. Although the Guidelines had varying levels of success in some institutions, their introduction further exacerbated the need for a more far-reaching policy with clear guidance that could be followed by all school administrators. The implementation of the Interim Beverage Guidelines for Schools highlighted major gaps in the monitoring of implementation of prescribed standards in schools. It also demonstrated how industry was able to use its resources and relationships with schools to dictate which beverages are purchased even when, oftentimes, these were not compliant with the Guidelines. There were even instances where one manufacturer printed in a national newspaper a range of products they claimed were compliant, when it was clear that these products did not satisfy the threshold in the Guidelines. This was a direct attempt to undermine the implementation of the Guidelines, and to confuse and deceive the public and school administrators.

**NCD Commissions**

Across the Caribbean, NCD Commissions or their equivalent have been established by Governments as platforms for achieving a whole of Government and whole of society response to NCDs by fostering a more coordinated response that involves government, civil society, academia, and private sector entities. Barbados has one of the most active NCD commissions in the region. The Barbados NCD Commission is tasked with advising the Minister of Health on NCD policies and legislation; brokering involvement of all sectors in programme implementation; assisting in mobilisation of resources to facilitate implementation of programmes; recommending relevant research; promoting collaborations and partnerships; monitoring regional and international trends; facilitating the commissioning of audits/evaluation of NCD programmes; and making recommendations to Minister of Health on a policy framework that encourages and promotes behaviour change to prevent NCDs. This mandate is similar across other Caribbean territories which have established commissions to combat NCDs. However, the mere advisory nature of these commissions means that governments are not compelled to advance the proposals or actions recommended by these bodies. Some of these commissions also face resource constraints that affect their functioning and output.

**Civil society pushing for FOPWL, BOPL and SSB taxes**

Civil society organisations are engaged in advocacy regarding front-of-package warning labelling and back-of-pack labelling, which are especially important to support the provision of adequate information to consumers about the nutritional content of food; and taxes on sugar-sweetened beverages across the region.

1. In your context, have any legislative or regulatory measures attempted to simultaneously address undernutrition, on the one hand, and diet-related non-communicable diseases such as diabetes, cardiovascular diseases, and cancer, on the other hand? In doing so, have they been successful? Please provide concrete examples.

**Taxes on SSBs in Barbados**

Barbados Prime Minister Mia Mottley introduced a 20 percent *ad valorem* tax on sugar-sweetened beverages (SSBs) effective April 1, 2022. This signalled a further increase from a 10 percent tax instituted in 2015. The tax measure complies with WHO-backed evidence and recommendations that a tax on sugary drinks that raises their price by 20 percent can lead to a reduction in consumption of around 20 percent, thereby playing a key role in preventing obesity and diabetes.[[5]](#footnote-5)

In announcing the tax, Prime Minister Mottley lamented that “the high consumption of foods with high sugar and high salt content continues to undermine the efforts to fight chronic NCDs”. The Honourable Prime Minister went on to explain that “Against this background, I now propose to raise the excise tax on sweetened beverages… as a further signal to all manufacturers and consumers that we need to curb our sugar intake”.[[6]](#footnote-6) The Prime Minister also informed that the Barbados Ministry of Health and Wellness would work with stakeholders to identify food products with high salt content for the purpose of imposing a similar tariff.[[7]](#footnote-7)

At the regional level efforts have been initiated to address gaps in the legislative framework managing pre-packaged food products for all CARICOM member countries. As such the regional standard making body CROSQ[[8]](#footnote-8) has begun drafting standards to improve nutrient content information presented on the back and front of labels. Both standards would improve the level of information being provided to consumers about pre-packaged food items. There has however been limited progress towards finalizing both standards which have been held up in regional and national committee consultations.

6. What is the impact of gentrification, development, technology, industry activity and deforestation on food security? Please share some concrete examples.

**Industry interference in policymaking**

The relatively small size of Caribbean populations and economies, and the significant role played by industry as a driver of these economies, allow the private sector to enjoy a special relationship with CARICOM governments and to be treated favourably as key partners and allies of governments in economic matters and beyond - more so now as economies seek to rebound post-COVID pandemic. In many instances, private sector participation is built into public health policymaking processes due to the often institutionalised multistakeholderism to which governments are committed or by virtue of the law.

Industry also directly interferes with efforts by CSOs to promote healthy food policies and choices by consumers. In 2018, the Heart Foundation of Jamaica (HFJ) led a massive public education campaign that sought to provide information on the nutritional content of SSBs and the impact of consumption on health. The campaign involved illustrations of the silhouette of various beverages on the market and graphically showed how many teaspoons of sugar each bottle contained. The HFJ team inadvertently posted an image mentioning a specific brand of the Wisynco company. HFJ took immediate remedial action, removing the image that mentioned the brand, however, the graphic piece remained available on the Internet. Wisynco filed an action against HFJ, alleging that the campaign was defamatory to its name and product, and requested that defamation be declared, the campaign cease to depict its product, and that HFJ compensate them. Eventually, Wisynco withdrew the lawsuit and offered to pay the legal costs.[[9]](#footnote-9) This case illustrates how powerful corporations can use their power to intimidate CSOs and frustrate public health efforts.

**Regional standards setting - the experience with FOPWL**

A 2021 Jamaican study led by the University of Technology, Jamaica, the Ministry of Health and Wellness, Jamaica and PAHO found that octagonal high-in warning labels were superior to other labelling systems having consistently outperformed the traffic light system, magnifying glass system and facts-up-front system.[[10]](#footnote-10) In 2018, the CARICOM Regional Organisation for Standards and Quality (CROSQ) began a process to approve a regional labelling standard for ultra-processed foods based on the ‘high in’ black octagonal model for products high in salt, fat and sugar. The process stalled in 2022 following a regional vote in which CARICOM member states were unable to reach a consensus on the final draft regional standard which contained the scientifically-backed octagonal “high-in” warning label model and the PAHO nutrient profile model to define nutrient thresholds. Despite strong public health and civil society support, some actors in the private sector strongly opposed the warning labels proposed in the standard and lobbied for alternative models and additional research.[[11]](#footnote-11) Eventually, although a few countries voted in favour of the final draft standard, most abstained from the vote or voted against the standard.

CARICOM standards are negotiated at both the national and regional levels by the CROSQ. Issues arose as the respective CARICOM countries considered the octagonal high-in FOPWL system as part of the proposed regional standard. For instance, in Jamaica, a last-minute reversal of a supportive vote after the voting deadline, led to immediate backlash from civil society, which raised concerns around industry interference. Consultations at the national level had been highly irregular, inconsistent and opaque, raising concerns around transparency, accountability and lack of process standardisation. These weaknesses favoured a highly coordinated, mobilised and resourced private sector who were engaged in the national bureaus standards negotiations and negotiated a privileged position on the Regional Technical Steering Committee through the Caribbean Private sector Organisation (CPSO). Sanctioned by the regional governance structure in CARICOM, the private sector/CPSO has conducted their own study on food labels which found, unsurprisingly, that the octagonal warning label recommended by PAHO was the least effective. This study has been used to inform national and regional consultations resulting in policy decisions that have not been based on science free from conflict of interest.

1. Food and Agricultural Organisation of the United Nations and Caribbean Development Bank. Study on the State of Agriculture in the Caribbean. FAO and CDB: 2019. Available at [https://www.fao.org/3/ca4726en/ca4726en.pdf?eloutlink=imf2fao.](https://www.fao.org/3/ca4726en/ca4726en.pdf?eloutlink=imf2fao) [↑](#footnote-ref-1)
2. Food and Agriculture Organisation of the United Nations, International Fund for Agricultural Development, United Nations Children’s Fund, World Food Programme, Pan American Health Organisation. 2022 Regional Overview of Food Security and Nutrition in Latin America and the Caribbean - Towards Improving Affordability of Healthy Diets. FAO, IFAD, UNICEF, WFP, and PAHO: 2023. Available at [https://iris.paho.org/bitstream/handle/10665.2/57032/9789251375242\_eng.pdf?sequence=4&isAllowed=y.](https://iris.paho.org/bitstream/handle/10665.2/57032/9789251375242_eng.pdf?sequence=4&isAllowed=y) [↑](#footnote-ref-2)
3. Caribbean Community, Caribbean Disaster Emergency Management Agency, World Food Programme, Food and Agriculture Organisation of the United Nations. Caribbean Food Security & Livelihoods Survey Impacts of COVID-19 and the Cost of Living Crisis Regional Summary Report - August 2022. CARICOM, CDEMA, WFP and FAO: 2022. Available at [https://reliefweb.int/report/jamaica/caribbean-food-security-livelihoods-survey-impacts-covid-19-and-cost-living-crisisregional-summary-report-august-2022.](https://reliefweb.int/report/jamaica/caribbean-food-security-livelihoods-survey-impacts-covid-19-and-cost-living-crisis-regional-summary-report-august-2022) [↑](#footnote-ref-3)
4. Caribbean Community, Caribbean Disaster Emergency Management Agency, World Food Programme, Food and Agriculture Organisation of the United Nations. Caribbean Food Security & Livelihoods Survey Impacts of COVID-19 and the Cost of Living Crisis Regional Summary Report - August 2022. CARICOM, CDEMA, WFP and FAO: 2022. Available at [https://reliefweb.int/report/jamaica/caribbean-food-security-livelihoods-survey-impacts-covid-19-and-cost-living-crisisregional-summary-report-august-2022.](https://reliefweb.int/report/jamaica/caribbean-food-security-livelihoods-survey-impacts-covid-19-and-cost-living-crisis-regional-summary-report-august-2022) [↑](#footnote-ref-4)
5. World Health Organisation. Taxes on sugary drinks: Why do it?. WHO: 2016. Available at [https://apps.who.int/iris/bitstream/handle/10665/260253/WHO-NMH-PND-16.5Rev.1-eng.pdf.](https://apps.who.int/iris/bitstream/handle/10665/260253/WHO-NMH-PND-16.5Rev.1-eng.pdf) [↑](#footnote-ref-5)
6. Barbados Government Information Service. Budgetary Proposal & Financial Statement 2022 presented by Prime Minister Mia Amor Mottley. GIS: 2022. Available at [https://gisbarbados.gov.bb/download/budgetary-proposal-financialstatement-2022/.](https://gisbarbados.gov.bb/download/budgetary-proposal-financial-statement-2022/) [↑](#footnote-ref-6)
7. Barbados Government Information Service. Budgetary Proposal & Financial Statement 2022 presented by Prime Minister Mia Amor Mottley. GIS: 2022. Available at [https://gisbarbados.gov.bb/download/budgetary-proposal-financialstatement-2022/.](https://gisbarbados.gov.bb/download/budgetary-proposal-financial-statement-2022/) [↑](#footnote-ref-7)
8. CROSQ is a regional inter-governmental organisation established in February 2002 to facilitate the development of regional standards, promote the harmonization of metrology systems and support the sustainable production and trade of goods and services in the CARICOM Single Market and Economy (CSME). [↑](#footnote-ref-8)
9. Livern Barrett. ‘Are you drinking yourself sick?’ Why Wisynco wants court to halt ad campaign. Jamaica Gleaner: April 24, 2018. Available at [https://jamaica-gleaner.com/article/news/20180424/are-you-drinking-yourself-sick-why-wisynco-wantscourt-halt-adcampaign#:~:text=The%20company%20sought%20to%20explain,CranWata%2C%20will%20make%20them%20sick.](https://jamaica-gleaner.com/article/news/20180424/are-you-drinking-yourself-sick-why-wisynco-wants-court-halt-ad-campaign#:~:text=The%20company%20sought%20to%20explain,CranWata%2C%20will%20make%20them%20sick) [↑](#footnote-ref-9)
10. Pan American Health Organisation. Superior Efficacy of Front-of-Package Warning Labels in Jamaica. PAHO: 2021. Available at [https://iris.paho.org/handle/10665.2/53328.](https://iris.paho.org/handle/10665.2/53328) [↑](#footnote-ref-10)
11. See Healthy Caribbean Coalition. Front-of-Package Warning Labelling for list and links to media coverage on CROSQ FOPWL process. Available at [https://www.healthycaribbean.org/front-of-package-warning-labelling-fopwl/.](https://www.healthycaribbean.org/front-of-package-warning-labelling-fopwl/) [↑](#footnote-ref-11)