

Symposium on Food and Agriculture Policies and Obesity: Prevention of Non-Communicable Diseases in the Caribbean

Conclusions and Recommendations

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It would be a mistake for Caribbean planners and policy-makers to focus narrowly on increasing agricultural production and productivity alone. Nutrition-related chronic diseases, linked to unbalanced diets and sedentary lifestyles, have emerged as the major causes of death in the region. These new concerns in the region make it imperative for policy-makers to reassess the role of agriculture and its relationship to health in particular.

There are basic and incontestable reasons upon which to argue for a new paradigm in agriculture, building upon the production/sustainability orientation that already exists, but incorporating issues related to diets, health and nutrition. This new paradigm must begin with a fresh conceptualization of this multi-faceted problem.

We need a systems approach which clearly demonstrates that health issues cannot be mere appendages to agricultural policies but must be an integral part of policies and strategies of several sectors of the economy. In the past, the issues of health status, food security, diets, and agricultural trade, have been approached as originating from disparate, unrelated sectors of the economy. However, there are strong links between and among these sectors and recognizing and acting upon them can contribute to the sustainability of development and to the enhancement of health status in the Caribbean.

Agricultural development should link the sector to health and nutrition, given the food and employment generation functions which agriculture is expected to perform. However, this synergy and its importance in policy making have not been explored explicitly in the Caribbean. Since 1971, the Caribbean region has been a net food importer, and currently spends well over \$US 1.5 billion annually on food imports to close the gap between food consumption and domestic food production.

In the past, there have been several programs to deal with food insecurity, but no systematic attempt to use food and nutritional policies to address the region's major health problems. The current period provides a good opportunity for policy-makers to take a new vision, one that seeks to address, on a national and regional scale,

nutritional well being and public health issues in terms of food production, marketing and the general food supply systems. Below are some recommendations which can advance the process to that end. Each recommendation lists several activities which are organized according to the following timelines in which it is reasonable to expect that action can be on the activities: Immediate (within one year), Medium term (1-3 years) and Long term (4-6 years).

Recommendations

Expected Outcome 1

Laws, regulations and regulatory practices instituted that will:

- i. Align food imports and local production policies in the context of global trade, to the recommended population food goals.
- ii. Enable people to make healthy dietary choices
- iii. Make more local foods available to support nutritionally desirable diets
- iv. Remove trans fats from our food supply
- v. Create production incentives for selected local food products.

Activities:

Immediate (within one year)

- Examine food imports and assist in the development and implementation of ways to balance the importation of fatty foods (e.g. milk and meat) and the low fat foods (grains and other cereals).
- Review national food policies from a nutrition/health needs perspective and support the production and marketing of affordable complex carbohydrate foods.
- Supermarkets and other consumer distribution outlets encouraged to promote low energy density foods (e.g., low fat, low sugar), and foods low in salt content.
- Initiate the process of analysis, education, legislation and monitoring to make the Caribbean trans-fat free.

Medium Term (1-3 years)

- Subject to budgetary constraints, provide domestic support to encourage the production of selected food and agricultural products within the limits of the de minimis provisions and Article 6.2 of the WTO Agreement on Agriculture.
- Under the WTO Doha Development Agenda and similar future arrangements the selection of special products for meeting the food security concerns of the Caribbean include foods such as fresh fruits and vegetables that address the problem of obesity and chronic non communicable diseases.
- Selective use of trade measures (import duties and excise taxes) in combination with other measures such as consumer education, marketing and distribution strategies, to effectively influence the supply, prices, consumer preferences and demand for specific products.
- Expansion of agriculture production both for exports and import-substitutes.
- Sustained and expanded commitment to agriculture diversification and increase production of non-traditional crops and specialty foods

such as organic, ethnic and health related.

- Develop regulatory guidelines for people in the food service sector taking into account nutritional considerations, e.g. legislation on nutritional labeling, code of advertising, healthy choices for fast food franchises.
- Strengthen regulatory bodies through training and monitoring the use of dietary guidelines in the food industry and trade.
- Promote the concept of small increases in consumer taxes on selected high calorie, non-nutritious foods.
- Promote the production, supply and consumption of legumes, ground provisions, fruits and vegetables and low fat foods to meet the recommended national dietary goals.

Long term (4-6 years)

- Increased attention to agro-processing and marketing of high-valued agriculture products

Expected Outcome 2

The private sector is fully aware of food, nutrition and health relationships, and participates in the implementation of the dietary recommendations for the improvement of public health.

Activities:

Immediate (within one year)

- Encourage food service establishments (hotels, restaurants, fast food outlets and vendors) to offer a variety of health-promoting foods and also to display information about caloric and fat content of meals e.g. on menus, place mats and food wrappers.

Medium Term (1-3 years)

- Create awareness among the private sector food trade groups (producers, importers, manufacturers, retailers and vendors) about the relationship between diet and nutrition-related chronic diseases.
- Promote the concept of incentives for the increased production of a wide variety of appealing low fat, high complex carbohydrate and high fiber foods.
- Train private sector entities in the conservation of nutrients in the manufacturing, processing and packaging of foods.
- Create storage spaces and establish transportation and marketing facilities for healthy foods.

Expected Outcome 3

Integrate agriculture food production and school feeding and other food assistance programs with a strong nutrition foundation.

Activities:

Immediate (within one year)

- Plan school feeding menus, as a matter of policy, to serve only meals which contribute to acceptable nutritional practices.
- Organize local farming communities to supply the food items to school feeding and other food assistance programs

Medium Term (1-3 years)

- Food assistance schemes should be based on the supply of nutritious foods, such as skimmed as opposed to whole meal, whole grain cereals as opposed to refined foods etc.

Expected Outcome 4

The environment is conducive to ensuring access to healthier food choices at affordable costs to consumers while guaranteeing producers a sustainable livelihood.

Activities:

Immediate (within one year)

- The widespread dissemination of information is undertaken on obesity and chronic non-communicable diseases including information on nutritional measures which can be taken to prevent or treat the problems.
- Widespread recognition that prevention strategies have to be a collaboration with partners from many sectors (multi-sectoral).

Medium Term (1-3 years)

- At the national level there must be recognition and acknowledgement that the Food & Agriculture sector is one the crucial partners in this endeavour.
- Sustained and comprehensive efforts to change the thinking and practices of consumers regarding diets and food choices.

Long Term (4-6 years)

- Adoption of a holistic, multi-dimensional approach to dealing with the problems of obesity and chronic NCDs involving all relevant Ministries including Health, Education, Trade and Agriculture.
- Promote policy coherence by ensuring that policies and strategies dealing with obesity and chronic NCDs adopted in one forum or government department should complement those pursued in other forum or departments.

Expected Outcome 5

The Caribbean is a well-known and much sought-after Good Health and Nutrition/Wellness destination.

Activities:

Immediate (within one year)

- Hotels and restaurants must promote a nutritional well-being menu as a hallmark of Caribbean cuisine along with other elements of a wellness programme.

Medium Term (1-3 years)

- A regional strategy is pursued geared towards establishing the Caribbean as a Good Health and Nutrition/Wellness destination.
- Provide public amenities (green spaces, pools, multi-purpose ball courts) related to recreation for the local population to encourage outdoor activities for local market.
- Promote natural products and value added by-products associated with wellness.

Expected Outcome 6

The agriculture and trade sectors are highly competitive, in the domestic, regional and global markets, through technology development and improved management

Activities

Medium Term (1-3 years)

- Appropriate technology is used to improve the productivity of food production to lower cost and price and to enhance access to foods.
- Adequate and timely information is available to guide decisions on production, distribution and consumption.

- Establish an early warning system on all components of food security (food availability, access, and consumption).
- Promote surveillance systems in health and nutrition.
- Provide market intelligence on a timely and affordable manner

Conclusions

Patterns and levels of physical activity and dietary practices are in rapid transition in the Caribbean. The region is still at an early or mid-way part of this transition compared to the now developed countries where the full effect of this transition is currently being felt. Fortunately, significant traditional agriculture, food system, and food habits still flourish or at least survive in the region. For example, several countries in the region still produce significant amounts of food to sustain traditional diets based on fruits, pulses, and roots, the main sources of complex carbohydrates. However, the processes of globalization and economic reforms are rapidly displacing these traditional diets and leading to health problems that impact significantly in term of costs on the health system. The recommendations above offer an opportunity to advance policies that can alter the pattern of chronic diseases epidemiology towards a more healthy Caribbean population.

