

Get Down to Business

The Role of Private Industry

— AUTHOR —

Jose M. Saavedra

The global epidemic of coronary heart disease, stroke and related illness is fueled by just a very few risk factors. At the top of that list are smoking, inadequate exercise and unhealthy eating habits—specifically a high-calorie diet laden with fat, salt and sugar. Cardiovascular diseases and diabetes are on course to become a global epidemic, affecting countries across the economic spectrum. Together, they account for about 18.6 million premature deaths worldwide, predominantly in developing nations.

Although deceptively simple changes in behavior can decrease those risks, altering habits isn't easy, even under the best of circumstances. In many places, poverty, geography, war or other factors can make lifestyle changes even more difficult. A major collaborative effort by all who have a stake in the health and well-being of the population is needed to undertake the immense challenge of controlling this epidemic.

Over the last few decades, as the world realized that chronic diseases are rising dramatically in developing countries, governments and policy makers viewed food companies as one force behind unhealthy dietary habits. But today, leading food companies are slowly beginning to see themselves as contributors to the health of the communities that consume their products, and some have begun taking steps to help curb rising rates of cardiovascular diseases. Investors are closely watching this food industry transformation, and have begun ranking companies based on

their efforts to fight obesity. It's a move that would have been unheard of even a few years ago.

With this dawning realization of the need for collaboration to produce healthier products and promote healthier diets, the adversarial stance between policy makers and industry has begun to soften. Industry leaders have also stepped into major roles in World Health Organization-led discussions on ways to reduce the global burden of chronic diseases.

Bringing industry to the table is a necessary step, as outlined in the Institute of Medicine's 2010 report, "Promoting Cardiovascular Health in the Developing World." It specifically called on the food industry, including the International Food and Beverage Alliance (IFBA), to play its part in reducing dietary intake of salt, sugars, saturated fats and trans fats. The process, it noted, "should include stakeholders from the public health community and multinational food corporations as well as the food services industry and retailers."

Such collaborative efforts are just beginning to emerge. The IFBA, formed in 2008 by CEOs from some of the world's largest multinationals, pledged support to WHO's Global Strategy on Diet, Physical Activity & Health. The IFBA committed to developing new, healthier products; reformulating existing ones; providing complete, understandable nutritional information and ensuring responsible advertising campaigns for products marketed to children. A

“...leading food companies are slowly beginning

to see themselves as contributors

to the health of communities that consume their products.”



recent three-month analysis of newspapers, magazines, Web sites and TV stations in eight countries found almost total compliance with IFBA's commitments toward responsible advertising directed at children by the 11 members of the alliance.

Partnerships are yielding results. In the United States, for example, 16 food and beverage companies teamed up with Michelle Obama's Partnership for a Healthier America to eliminate 1.5 trillion calories from the nation's marketplace by 2015. The Healthy Weight Commitment Foundation announced that by January 2014, they had exceeded that goal by 400 percent—and had sold 6.4 trillion fewer calories in 2012 than they did in 2007. But we still have a long way to go.

TACKLING THE OBESITY EPIDEMIC

People across the globe are exercising less while eating greater amounts of fattier, saltier, higher calorie, more sugar-laden foods. This type of diet contributes directly to weight gain, high blood pressure, high cholesterol and increased risk of heart attack, stroke and diabetes. Although it appears that obesity rates in wealthy nations are beginning to plateau, the trend is worsening in developing countries.

The statistics are alarming. Global obesity has more than

doubled in the last three decades. Today, more than 1.4 billion adults—35 percent—are overweight, and 500 million are obese. Scarier yet, in 2011, one fifth of children aged five to 17 were overweight, a 60 percent rise since 1990. Most of those children live in developing countries. Studies show that obese children generally become obese adults, and extra weight contributes to nearly half of all diabetes cases and a quarter of coronary heart disease cases.

Currently, 65 percent of the world's population lives in countries where obesity kills more people than undernutrition and starvation. In poor countries, the obesity epidemic coexists with persistent malnutrition. Together, this double burden bears great health and economic consequences.

What's especially frustrating about the obesity epidemic is that it is avoidable. It's clear that preventing obesity will require societal and individual behavior changes—and there is a recent population-wide, public health precedent: tobacco. The WHO's Framework Convention on Tobacco Control, adopted in 2003 and implemented two years later, detailed the dangers of tobacco and set limits on sales, distribution and advertising around the world.

Many believe that a similar framework aimed at society in general, and the food industry in particular, could stem the rising tide of weight-related ills. But a tobacco-control program is dramatically different from a healthy diet program. Humans need food to survive, and meals are part of the social and cultural fabric of communities. And while cigarettes can be universally deemed unhealthy, it's hard to argue for a complete ban on soda, chips or family recipes. More importantly, the determinants of eating behaviors and obesity risk are present throughout the life cycle.

The ultimate goal is to influence food choices and dietary habits in people of all ages. The Institute of Medicine report notes: "Accumulation of cardiovascular risks begins early in life, and strong evidence supports the value of starting cardiovascular health promotion during pregnancy and early childhood and continuing prevention efforts throughout the life course." Infants born to obese mothers are themselves at higher risk of obesity and by two years of age, an infant's weight is already predictive of their obesity risk as an adult. Breast-feeding alone decreases obesity risk. Metabolic patterns, taste preferences and diet patterns are imprinted in the first 1,000 days of life (gestation to two years of age), and are shaped by how infants and toddlers are fed. Healthy—or unhealthy—diet and eating habits start at home, influenced by cooking, choices of both fresh and packaged foods and family meals and snack patterns. Helping parents instill healthy eating habits could prove to be the most effective obesity prevention strategy. Changing established poor habits is a greater challenge, requiring education (and reeducation) on healthy eating, and initiatives that promote these habits at home, at school and in the community.

The bigger picture is even more complex. Diet is inextricably linked to other global challenges. There is a pressing need to produce more nutritious foods while preventing obesity as countries develop and gain affluence. Food production must double by 2050 to feed some nine billion people, according to United Nations estimates. These problems grow thornier with a growing global water crisis that requires radically altered water use for agriculture, with food crops being diverted to bio-

"After decades of supersizing and encouraging consumer tastes for products high in fat, sugar and salt, companies now need to reverse the message."



fuel production to meet rising energy needs—and with nearly two billion rural subsistence farmers living in poverty. There is also the need to grow food amidst increasing drought and devastating floods as the effects of climate change grow more extreme. These issues need global solutions that safeguard farmers' livelihoods, maintain food safety and are implemented in an environmentally sustainable way.

CREATING HEALTHIER PRODUCTS AND PROMOTING HEALTHIER DIETS

Although it's tempting to think that companies could easily fix some obesity-related issues by drastically reformulating their products, it's not that simple. Take the example of Campbell's Soup, the world's largest soup maker. In February 2010, the company announced that it was slashing salt levels in one line of its condensed soups by 45 percent. A surprising second announcement came a year and a half later: The company was putting much of that salt back in to combat lukewarm sales. Creating healthier products does little good if consumers won't eat them.

Consumer taste preferences matter. In a seven-country survey conducted by Unilever and the International Union of Nutritional Scientists, 80 percent of those polled felt no need to reduce their salt intake and listed taste as their top priority in food choices. If manufacturers change the sodium content in their products—without testing for taste preference, without pricing it affordably and without education on why it matters—these efforts are likely to fail.

After decades of supersizing and encouraging consumer tastes for products high in fat, sugar and salt, companies now need to reverse the message. This means finding a balance between acquired tastes, habits and health concerns. Such efforts need support from public and private health programs that educate consumers on nutrition.

In the U.S., the poorest paradoxically have the highest rate of obesity. Processed products, particularly those with added sugars and high fat content, are far cheaper than nutrient-dense whole-grain breads, fresh fruits and vegetables, seafood and lean meats. Farm subsidies for corn, soy and other grains have boosted the production of increasingly affordable processed food, to which added fat and sugar (including the ubiquitous high fructose corn syrup) decreases their nutritional value. Too much added sugar of any kind contributes empty calories, causes weight gain and raises risk for type 2 diabetes, high triglyceride levels and heart disease. Policy makers can help align support for agri-



Products from Unilever, Nestlé and Danone

“Nonprofits and investors are tracking industry performance and rewarding companies that take decisive steps toward manufacturing healthier products.”

culture with growing nutritional concerns, making it easier and more cost-effective for companies to produce healthier packaged food—and there is a growing demand from consumers in both wealthy and lower-income countries for such products. One study found that these healthier options accounted for 39 percent of overall packaged food sales and 72 percent of sales growth in sales from 2007-2011.

Few people follow government-established dietary guidelines. A recent study from University of California, Davis, found that to be true for most Americans, and low-income consumers were even less likely to do so. They cited prohibitive prices and availability as primary reasons. Retail prices of fruits and vegetables rose by almost 120 percent from 1985 to 2000, about six times the rate of soft drinks and three times more than fats or sweets. Those living in poor neighborhoods are inundated with unhealthy offerings: “dollar” menus at fast-food restaurants and corner stores that sell snacks, instead of farmers’ markets in middle-class neighborhoods that sell fresh produce. That will have to change, and industry is beginning to take notice.

JUST THE FACTS

Worldwide, more than 1.4 billion adults are overweight, and 500 million are obese.



ADDRESSING CORPORATE CHALLENGES

The solutions will ultimately require participation of individuals, families, communities, government, nonprofit organizations, academia, the media—and industry. Historically, mistrust has inhibited and undermined collaboration with industry, in part because of a lack of corporate transparency and the lack of common nutritional and health standards for

**“People across the globe
are exercising less while eating...
fatter, saltier, higher-calorie,
more sugar-laden foods.”**



products. Industry needs to reassess and innovate its business models to meet these societal challenges. C. K. Prahalad, best known for documenting the correlation between sustainability and innovation, wrote, “Innovation in business models is key... No single firm can do it alone. Successful firms build an ecosystem of local entrepreneurs, small- and medium-size firms, NGOs and large firms acting together as one. The solutions must be co-created.”

The corporate bottom line is always in play. There is intense pressure to satisfy shareholders, boost sales and maintain profit margins today, which counters attempts to manufacture healthier products with lower demand. Often, even if a company’s CEO has embraced change, the ideas may not fully trickle down to the company’s marketing practices, says Derek Yach, an ex-WHO health policy expert who led nutrition-based efforts at PepsiCo until recently. Companies must devote as much effort to producing and selling their wholesome products and educating consumers as they do promoting less healthy choices like cookies and potato chips—and the public sector must reinforce the benefits of those healthier choices.

Companies that work with governments and NGOs to co-create better food choices will help everyone understand the value (benefit for the cost) of healthier diets, and will benefit from a more loyal and sustainable consumer base. Incorporating shared value as part of companies’ business models can greatly improve health while allowing industry and the economy to do well by doing good.

In the short term, leadership is needed and some companies are showing greater dedication to nutrition, health and wellness. For example, Nestlé has set targets for reducing public health-sensitive ingredients (salt, trans fats, total fat, calories

and artificial colors) in its products. By 2011, the company had eliminated 12,500 tons of salt from its recipes and was using 9,000 less tons of sugar in its breakfast cereals. Cereal Partners Worldwide, Nestlé’s joint venture with General Mills, is cutting sugar content in 20 breakfast cereal brands to nine grams or less per serving by 2015.

In 2004, the company developed its Nestlé Nutritional Profiling System (NNPS) for benchmarking its products against recommended values from WHO and other independent authorities. The system evaluates a product’s nutritional content, considering its role within a balanced diet, its ingredients (including sodium, fat, added sugars, calcium and whole grains) and the serving size consumed by adults or children. Over the eight years since the system was adopted, three quarters of Nestlé’s products—and 89 percent of its children’s products—had adequate nutritional criteria.

Unilever’s Nutrition Enhancement Program, launched in 2003, has also reduced salt, sugar and both saturated and trans fats in their products. By 2012, the company had removed trans fats from partially hydrogenated vegetable oil in all of their products. Reformulations are also generating spreads and ice creams with less saturated fat. More than half of the company’s foods meet WHO standards for maximum salt levels; their goal is to reach this standard for all products by 2020.

PepsiCo, too, has launched nutrition-based programs. Five years ago, a quarter of the company’s beverages sold in the U.S. had lower-calorie options; that number is now 50 percent. The company’s Frito-Lay division has reduced sodium levels in chips by 25 percent; other “lightly salted” corn and potato chips have half the sodium of the original products.

INDEPENDENT VIEWS

Nonprofits and investors have begun tracking industry performance and evaluating companies on the nutritional quality of their products and their marketing practices. One of these watchdogs, the Access to Nutrition Index (ATNI), is a new global enterprise that rates food and beverage manufacturers’ contribution to obesity and poor nutrition. The program, launched with funding from the Bill & Melinda Gates Foundation, the Wellcome Trust and the Global Alliance for Improved Nutrition, published its first assessment of the world’s 25 top food and beverage manufacturers in 2013. The ATNI Index rated companies according to the types of products they sell, their marketing strategies, the degree of truth and transparency in their food labels, and their degree of engagement with policy makers.

The organization’s findings showed much room for improvement. Just three companies—Unilever, Nestlé and Danone—ranked above 5 on a scale of 1 to 10 (with 10 rating highest). Most ranked under 3. Despite commitments from 16 companies to create heart-healthier products, just five have revealed concrete plans to do so. And only three companies—Grupo Bimbo, Nestlé and Unilever—have disclosed targets for reducing salt, sugar, fat and trans fats in their portfolios.

The ATNI report noted that, “While some companies have commitments to make their healthy products more affordable and available, few provided evidence of actually having done so.” And although most are taking at least some action, the ATNI wrote that, “across the board, the world’s largest food

and beverage manufacturers can do substantially more to improve consumers' access to nutrition."

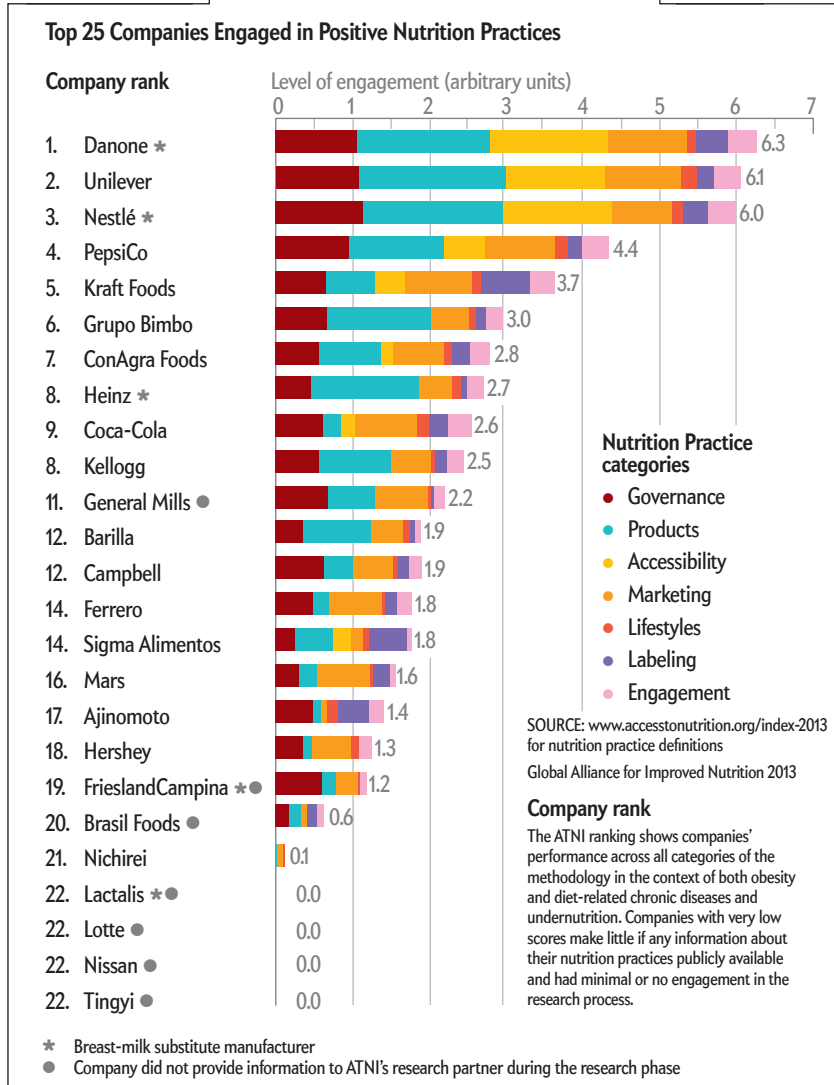
The intent is not to name and shame companies, said Inge Kauer, the ATNI's executive director, "but instead to highlight strong practices and to provide a means for companies to benchmark their approach to nutrition against their peers and identify areas for improvement."

The index is already changing the landscape. Companies that previously failed to provide information are now promising to engage in the next round, with reporting due in 2015. Perhaps that is because the index is also recruiting the support of socially conscious investors. Forty investment firms from around the world have signed the ATNI's investor's statement, committing to the philosophy that health and nutrition are crucial drivers of future growth in the food and beverage sector.

It can be argued that food companies that manufacture infant formula require particular investor oversight because their marketing practices can derail mothers from exclusively breast-feeding babies for the first six months of life, with significant health consequences. *The Financial Times* and London Stock Exchange socially responsible investment index (FTSE-4Good) has developed an assessment of companies' commitments to compliance with WHO's International Code of Marketing of Breast-Milk Substitutes.

At least one major firm, UBS, has incorporated index rankings in its sustainable investing reports, endorsing the idea that a low ranking from an independent body such as the ATNI represents a long-term risk to the company. In August 2013, Bank of America's corporate and investment banking division released a report that rates stock values in the food, pharmaceutical, weight loss and sports industries on how effectively they target obesity. As big investors begin to cite performance and commitments to nutrition as reasons to invest, industry players should come onboard.

ACCESS TO NUTRITION INDEX 2013



Poor diets are inextricably linked with the epidemic of non-communicable diseases, and improving them is everyone's responsibility. Collaboration between companies, government agencies, NGOs and the public can help create a virtuous cycle, where food supply and demand meet—on a healthier plane. To quote Charles Darwin, "In the long history of humankind... those who learned to collaborate and improvise most effectively have prevailed." As a species, we owe this to ourselves.

ABOUT THE AUTHOR

Jose M. Saavedra is associate professor of pediatrics at Johns Hopkins University School of Medicine in Baltimore. He has published extensively on pediatric nutrition and gastroenterology and founded the Johns Hopkins Children's Nutrition Center, which he directed for 10 years. He serves as global chief medical officer for Nestlé Nutrition in Vevey, Switzerland.

MORE TO EXPLORE

Promoting Cardiovascular Health in the Developing World: A Critical Challenge to Achieve Global Health. Fuster V., Kelly B. B. eds. Institute of Medicine, 2010. The National Academies Press, Washington, D.C.

WHO Global Strategy on Diet, Physical Activity and Health. World Health Assembly, Resolution WHA 55.23, May 2004.

Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Noncommunicable Diseases. United Nations General Assembly, A/66/L.1, Sep. 16, 2011.

Access to Nutrition Index. Global Index 2013. Copyright Global Alliance for Improved Nutrition, Mar. 2013. Available at <http://www.accesstonutrition.org>