

# THE HEALTHY FOOD ENVIRONMENT POLICY INDEX (FOOD-EPI)

4 November 2020

Dr STEFANIE VANDEVIJVERE

Senior Researcher SCIENSANO (Scientific Institute of Public Health, Belgium)

Honorary Senior Research Fellow The University of Auckland, New Zealand

International Network for Food and Obesity, NCDs, Research, Monitoring and Action Support

(INFORMAS), module leader Food-EPI

# Overview

- Background – INFORMAS
- Overview of the Food-EPI tool and process
- Uptake and uses of the Food-EPI to date
- Food-EPI tool and its good practice indicators
- Food-EPI process and its different steps and related practicalities
- Adaptation of the Food-EPI tool and process for use in Africa to tackle the double burden of malnutrition
- Other future developments for the Food-EPI

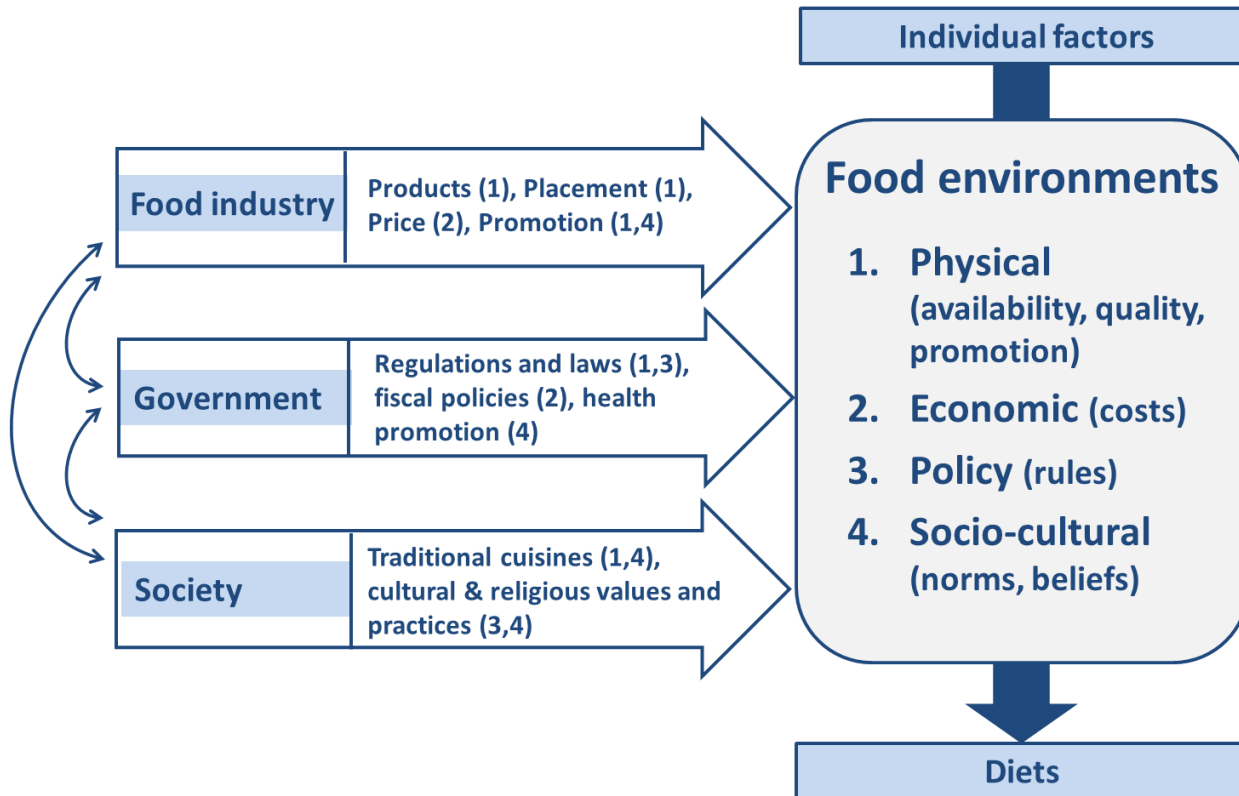
# BACKGROUND

INFORMAS



Benchmarking food environments

# Food environments



Unhealthy diets is #1 preventable contributor to burden of disease (~10%)

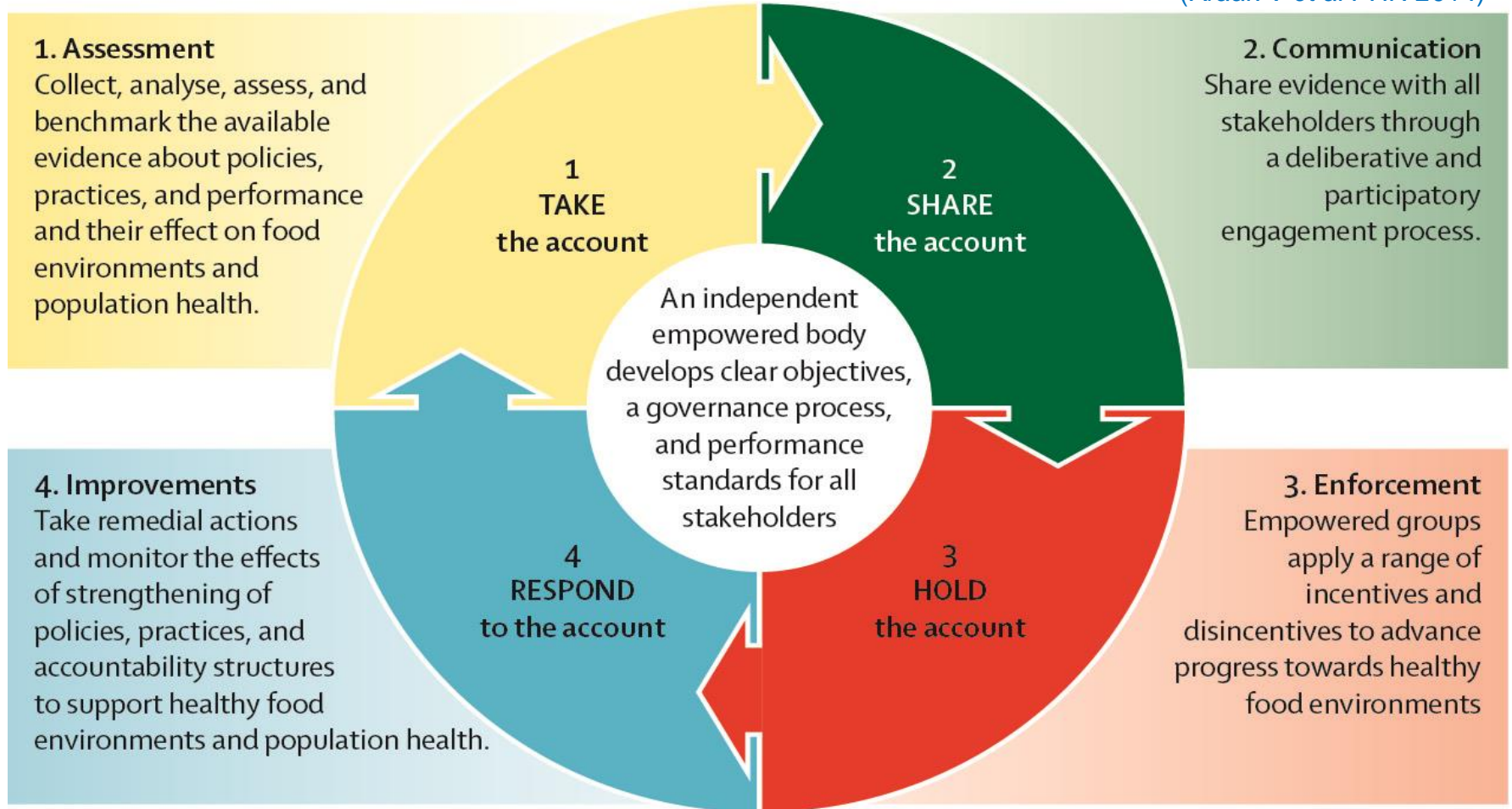
ORGANISATIONS	PROCESSES	Public sector policies and actions	Private sector policies and actions
		How much progress have (international, national, state and local) governments made towards good practice in improving food environments and implementing obesity/NCDs prevention policies and actions?	How are private sector organisations affecting food environments and influencing obesity/NCDs prevention efforts?

FOOD ENVIRONMENTS	IMPACTS	Food composition	Food labelling	Food marketing	Food provision	Food retail	Food prices	Food trade & investment
		What is the nutrient composition of foods and non-alcoholic beverages?	What health-related labelling is present on foods and non-alcoholic beverages?	What is the exposure and power of promotion of unhealthy foods and non-alcoholic beverages to different population groups?	What is the nutritional quality of foods and non-alcoholic beverages provided in different settings (eg. schools, hospitals, workplaces)?	What is the availability of healthy and unhealthy foods and non-alcoholic beverages in communities and within retail outlets?	What is the relative price and affordability of 'less healthy' compared with 'healthy' diets, meals & foods?	What are the impacts of trade and investment agreements on the healthiness of food environments?

POPULATIONS	OUTCOMES	Population diet	Physiological & metabolic risk factors	Health outcomes
		What is the quality of the diet of different population groups?	What are the burdens of obesity and other risk factors?	What are burdens of NCD morbidity and mortality?

# Increasing accountability of actors

(Kraak V et al PHN 2014)



The governance process should be transparent, credible, verifiable, trustworthy, responsive, timely, and fair and have formal mechanisms to identify and manage conflicts of interest and settle disputes.

# Benchmarking countries and companies - Example food marketing on TV

Average frequency of food ads (ads/hour/channel)				
	All food	Not- permitted	Permitted	Ratio permitted: not-permitted
<b>Asia Pacific</b>				
China	6.5 (5.8)	3.3 (3.7)	1.3 (2.0)	1:3
Australia	6.0 (3.2)	<b>3.8 (2.6)</b>	0.9 (1.1)	1:4
New Zealand	4.7 (3.7)	2.8 (2.6)	1.0 (1.1)	1:3
Thailand	3.6 (7.4)	2.3 (5.0)	0.0 (0.2)	1:58
Malaysia	3.2 (3.6)	2.4 (2.8)	0.1 (0.3)	1:24
Tonga	2.7	1.8	0.0	No permitted food ads
Fiji	0.9	0.5	0.2	1:3
Samoa	0.9	0.4	0.2	1:2
New Caledonia	0.3	0.1	0.1	1:1
American Samoa	0.4	0.3	0.0	No permitted food ads
<b>Africa</b>				
South Africa	4.6 (4.2)	2.7 (2.8)	0.7 (1.0)	1:4
<b>Central and South America</b>				
Colombia	5.3 (4.5)	<b>3.9 (3.6)</b>	0.9 (1.3)	1:4
Costa Rica	3.4 (3.2)	2.2 (2.4)	0.3 (0.6)	1:7
Guatemala	3.2 (3.1)	1.9 (2.2)	0.4 (0.9)	1:5
Argentina	2.8 (3.4)	2.2 (2.6)	0.2 (0.6)	1:11
<b>Europe</b>				
Spain	7.3 (5.0)	<b>5.2 (3.5)</b>	1.5 (1.8)	1:3
Slovenia	5.3 (6.9)	2.8 (3.8)	1.0 (1.7)	1:3
United Kingdom	3.1 (2.9)	1.9 (2.0)	0.6 (1.0)	1:3
Malta	2.3 (3.4)	1.5 (2.6)	0.7 (1.3)	1:2
<b>North America</b>				
Canada	10.9 (6.9)	<b>9.7 (5.9)</b>	0.8 (1.5)	1:12
<b>OVERALL</b>	<b>4.1(4.8)</b>	<b>2.7 (3.4)</b>	<b>0.6 (1.2)</b>	<b>1:5</b>

Kelly et al, 2019, Obesity Reviews



# Benchmarking countries and companies - Example food marketing on TV

	Total food ads (n (%))	Not-permitted food ads (n (%))	N of countries with ads from companies
Coca-Cola Company, The	1,260 (4.1)	1,145 (5.6)	17
Kellogg Company	1,151 (3.7)	1,135 (5.5)	11
Danone	1,409 (4.6)	1,026 (5.0)	12
PepsiCo, Inc	907 (2.9)	825 (4.0)	13
Mondelez International, Inc	841 (2.7)	823 (4.0)	14
Nestle S.A	1,287 (4.2)	790 (3.8)	15
McDonald's Corporation	1,043 (3.4)	656 (3.2)	15
Unilever Group	850 (2.8)	560 (2.7)	13
General Mills, Inc	593 (1.9)	557 (2.7)	4
Ferrero Group	510 (1.7)	510 (2.5)	7
Yum! Brand, Inc	492 (1.6)	434 (2.1)	11
Mars, Inc	459 (1.5)	412 (2.0)	11
Adam Foods, S.L.	331 (1.1)	331 (1.6)	1
Restaurant Brands International Inc.	364 (1.2)	307 (1.5)	6
Agrokor d.d	689 (2.2)	262 (1.3)	1
Groupe Lactalis S.A.	395 (1.3)	277 (1.3)	4
Alpina Productos Alimenticios S.A.	364 (1.2)	251 (1.2)	3
Lidl Slovenija D.O.O. K.D.	462 (1.5)	145 (0.7)	1
Wal-Mart Stores, Inc	385 (1.2)	148 (0.7)	6
TUS Trgovine	393 (1.3)	130 (0.6)	1
SPAR International B.V.	323 (1.0)	126 (0.6)	2
Abbott Laboratories	338 (1.1)	1 (0.0)	5

*Kelly et al, 2019, Obesity Reviews*

The graphic features the WHO logo and 'World Health Organization REGIONAL OFFICE FOR Europe' at the top right. Below this is a grid of 12 icons representing various food items: a person at a computer, a cake, a carrot, a smartphone, a popcorn bucket, a fork, a flower, an ice cream cone, a bowl of fries, a laptop, a glass of juice, a cupcake, a leaf, and a fish.

WHO Regional Office for Europe  
NUTRIENT PROFILE MODEL



# Further reading INFORMAS



Volume 14, Issue S1

**INFORMAS (International Network for Food and Obesity/non-communicable diseases, Research, Monitoring and Action Support): rationale, framework and approach**

Pages: 1-164

October 2013

*Protocols for modules available upon request*

*Country profiles under development*

*Possibility to join regional informal tele-meetings; 3 times a year (Europe-Africa)*

# OVERVIEW FOOD-EPI TOOL AND PROCESS



**FOOD  
EPI**

# Healthy Food Environment Policy Index (Food-EPI) General aims

- I. To assess the extent of implementation of policies and infrastructure support for creating healthy food environments by (national) governments compared to international best practice
- II. To propose concrete actions to close the implementation gaps identified
- III. To prioritize actions proposed according to their importance and achievability

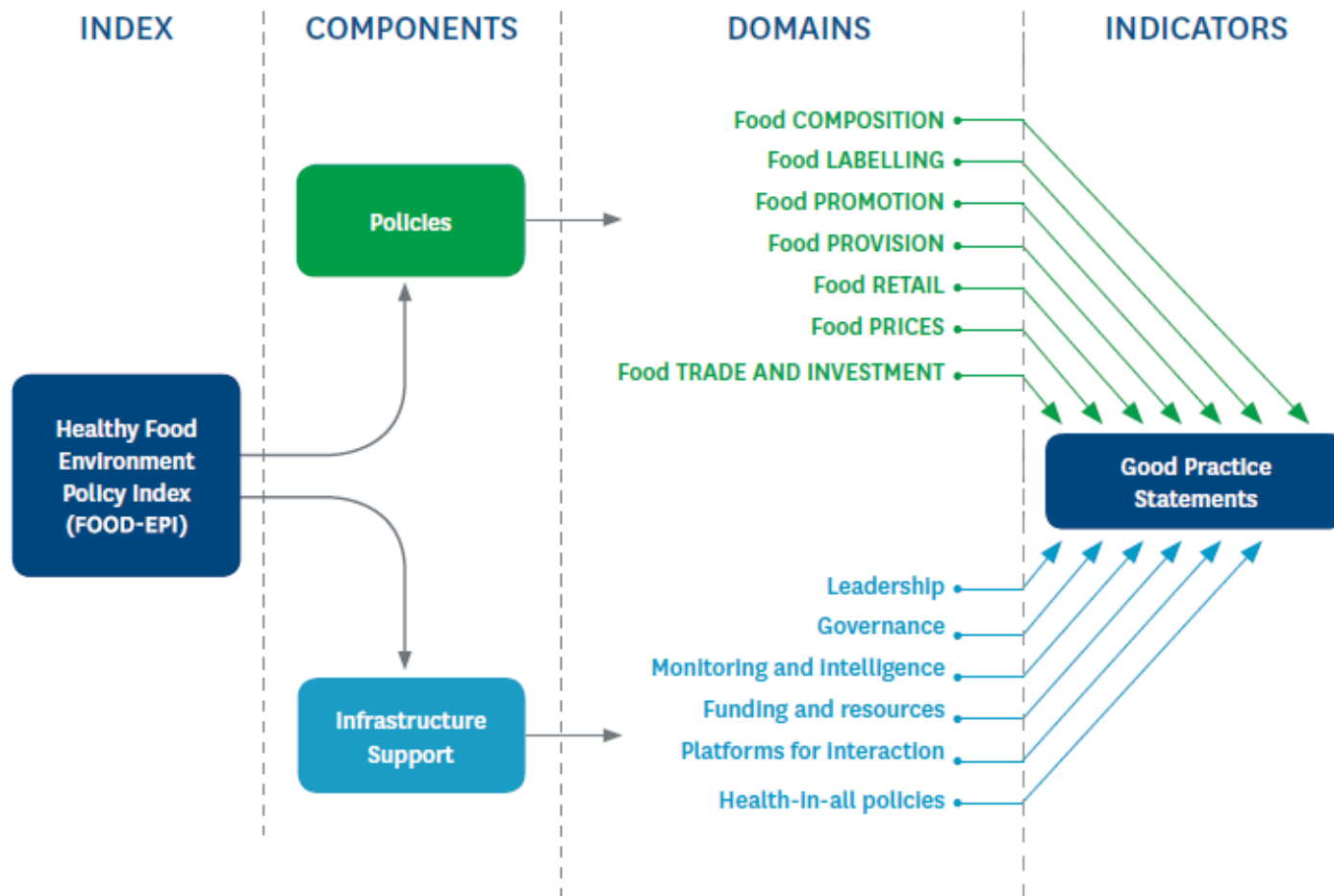


## Out of scope:

*Barriers and facilitators to policy implementation*

*Evaluation of food industry commitments (separate tool and process)*

# Healthy Food Environment Policy Index (Food-EPI) Tool



*Development based on review of existing high level policy documents & consultation with 30 international experts, including LMIC representatives*

# Healthy Food Environment Policy Index (Food-EPI) Scope

- Focus on **creating healthy food environments** to reduce obesity and diet-related chronic diseases (NCDs)
- Physical activity, alcohol, breastfeeding, micronutrient deficiencies, sustainability, food production **out-of-scope**
- 47 good practice indicators; 7 (**Policies**) and 6 (**Infrastructure Support**) domains
- Evaluation of **extent of implementation** of good practice indicators compared to **international best practice exemplars** (benchmarks)
- The extent of implementation considers **all steps in the policy cycle**
- The extent of implementation considers the **intentions/plans** of the government, **government funding** for actions undertaken by non-governmental organisations, and policies **partly or fully implemented**
- Nutrients of concern: sodium, saturated fat, *trans* fat, added sugar

# Healthy Food Environment Policy Index (Food-EPI) Indicators

## Policy action areas for creating healthy food environments

### Food composition

- Food composition standards and targets

### Food labelling

- Ingredient lists / nutrient declarations
- Regulatory systems for health and nutrition claims
- Front-of-pack nutrition labelling
- Menu labelling

### Food promotion

- Restrict marketing of unhealthy food in:
  - broadcast media
  - non-broadcast media
  - children's settings

### Food prices

- Minimise taxes on healthy foods
- Increase taxes on unhealthy foods

### Food provision

- Policies promote healthy food choices in:
  - schools
  - other public settings
- Support and training systems for healthy food provision

### Food retail

- Availability of healthy and unhealthy foods in food service outlets
- In-store availability of healthy and unhealthy foods

### Food trade and investment

- Protect regulatory capacity regarding nutrition
- Assess potential impacts of trade agreements on nutrition

# Healthy Food Environment Policy Index (Food-EPI) Indicators

## Infrastructure support needed to support policy action

### Leadership

- Strong, visible, political support for population nutrition
- Population intake targets established
- Food-based dietary guidelines implemented
- Comprehensive implementation plan linked to state/national needs
- Priorities for reducing nutrition inequalities

### Governance

- Restricting commercial influence on policy development
- Use of evidence in policies related to nutrition
- Transparency and access to government information
- Assessing the potential health impacts of all policies

### Monitoring & intelligence

- Monitoring food environments
- Monitoring population nutrition intake
- Monitoring population body weight
- Evaluation of major programs and policies

### Funding & resources

- Research funding for obesity & NCD prevention
- Budget for population nutrition promotion
- Independent health promotion agency

### Platforms for interaction

- Coordination mechanisms (national, state and local government)
- Platforms for government and food sector interaction
- Platforms for government and civil society interaction

### Health-in-all-policies

- Health impacts of food policies
- Health impacts of non-food policies

# Examples of Food-EPI good practice POLICIES

**COMPOSITION:** *Food composition targets/standards* have been established by the government for the content of the nutrients of concern in certain foods or food groups if they are major contributors to population intakes of these nutrients of concern (trans fats, sodium and added sugars in processed foods, saturated fat in commercial frying fats)

**LABELING:** A single, consistent, *interpretive, evidence-informed front-of-pack supplementary nutrition information system*, which readily allows consumers to assess a product's healthiness, is applied to all packaged foods

**PROMOTION:** *Effective policies* are implemented by the government to **restrict exposure and power of promotion of unhealthy foods to children** through all forms of media, including broadcast (TV, radio) and non-broadcast media (e.g. Internet, social media, packaging, sports sponsorship, outdoor advertising) and in settings where children gather (→ 3 or 5 different good practice indicators)



# Examples of Food-EPI good practice INFRASTRUCTURE SUPPORT

**LEADERSHIP:** *Clear, interpretive, **evidence-informed food-based dietary guidelines** have been established and implemented.*

**PLATFORMS FOR INTERACTION:** *There are formal **platforms for regular interactions between government and civil society** on food policies and other strategies to improve population nutrition*

**MONITORING:** *There is **regular monitoring of adult and childhood overweight and obesity prevalence** using anthropometric measurements*

# Examples of international best practice exemplars - Benchmarks

## **POLICIES**

**COMPOSITION:** *Denmark banned trans fats in foods since 2013*

**LABELING:** *Mandatory warning labels for energy, sugar, saturated fat and sodium in Chile, Uruguay, Peru and Mexico*

**PROMOTION:** *Comprehensive marketing restrictions in Chile for food products carrying at least 1 warning label (for either sodium, saturated fat, sugar or energy)*

## **INFRASTRUCTURE SUPPORT**

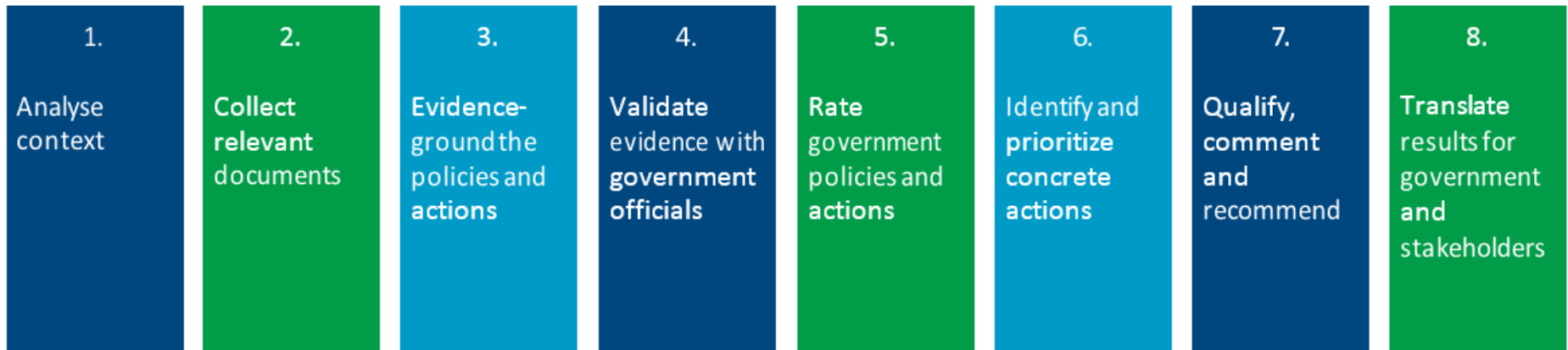
**LEADERSHIP:** *Brazilian food-based dietary guidelines address healthy eating from a cultural, ethical and environmental perspective*

**MONITORING:** *England's National Child Measurement Program measuring the height and weight of all children in Reception class (aged 4 to 5) and at year 6 (aged 10 to 11).*

**PLATFORMS:** *Brazilian National Council for Food and Nutrition Security*

# Healthy Food Environment Policy Index (Food-EPI) Process

Process driven by panel of independent and government public health experts



# Food-EPI outputs (1): Evidence document(s)



Detailed evidence of implementation for all 47 good practice indicators – taking into account the whole policy cycle – for each country and/or other jurisdiction

# Food-EPI outputs (2): National scorecard(s)

Expert panels' assessment of the Australian Federal government's level of implementation (up to 30 June 2016) of key policies for tackling obesity and creating healthier food environments



Category	Policy	Implementation Level
Food composition	Food composition standards / targets for packaged foods	Low
	Food composition standards / targets for out-of-home meals	Low
Food labelling	Ingredient lists / nutrient declarations	High
	Regulatory systems for health and nutrition claims	High
	Front-of-pack labelling	Medium
Food promotion	Restrict promotion of unhealthy food in broadcast media	Low
	Restrict promotion of unhealthy food in non-broadcast media	Low
	Restrict promotion of unhealthy food in children's settings	Low
Food prices	Minimise taxes on healthy foods	High
	Increase taxes on unhealthy foods	Low
Food provision	Policies in schools promote healthy food choices	Medium
	Policies in public settings promote healthy food choices	Low
	Support and training systems for public sector settings	Low
	Support and training systems for private companies	Low
Food retail	Retail store availability of healthy and unhealthy foods	Low
	Food service outlet availability of healthy and unhealthy foods	Low
Food trade	Trade agreement impacts assessed	Low
	Protect regulatory capacity regarding nutrition	Low
Leadership	Strong, visible, political support for population nutrition	Low
	Population intake targets established	Low
	Food-based dietary guidelines implemented	High
	Comprehensive implementation plan linked to state/national needs	Low
Governance	Priorities for reducing inequalities related to nutrition	Low
	Restricting commercial influence on policy development	Low
	Use of evidence in policies related to population nutrition	Medium
	Transparency and access to government information	High
Monitoring & intelligence	Assessing the potential health impacts of all policies	Low
	Monitoring food environments	Low
	Monitoring population nutrition intake	Low
	Monitoring population body weight	High
Funding & resources	Evaluation of major programs and policies	Medium
	Research funding for obesity & NCD prevention	Medium
Platforms for interaction	Independent health promotion agency	Low
	Coordination mechanisms (national, state and local government)	Medium
	Platforms for government and food sector interaction	Medium
	Platforms for government and civil society interaction	Medium

## Top 5

Things the Australian Federal government is doing well

(with reference to international best practice)



Regular monitoring of population body weight at a national level



No GST on fresh fruit and vegetables



Development of the Health Star Rating scheme, and regulations on health and nutrition claims

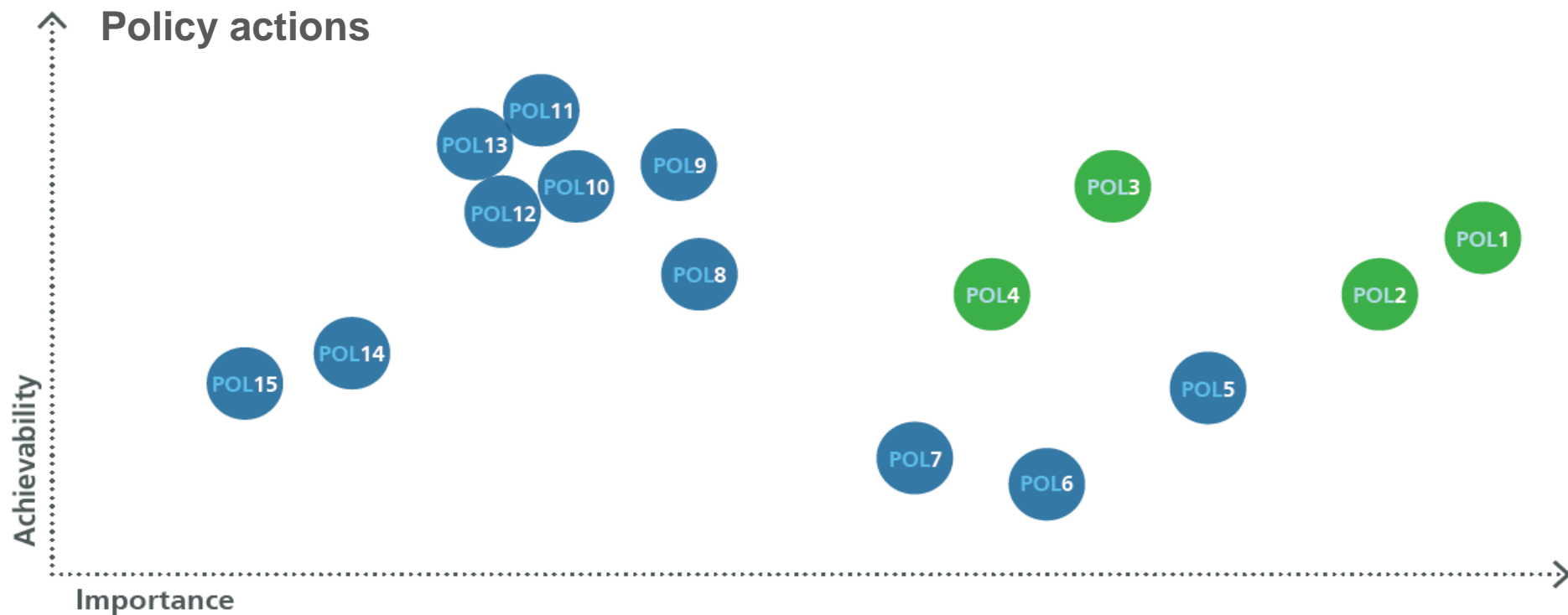


Food-based dietary guidelines implemented, based on rigorous evidence



Procedures for transparency and broad consultation as part of policy development within the Food Regulation System

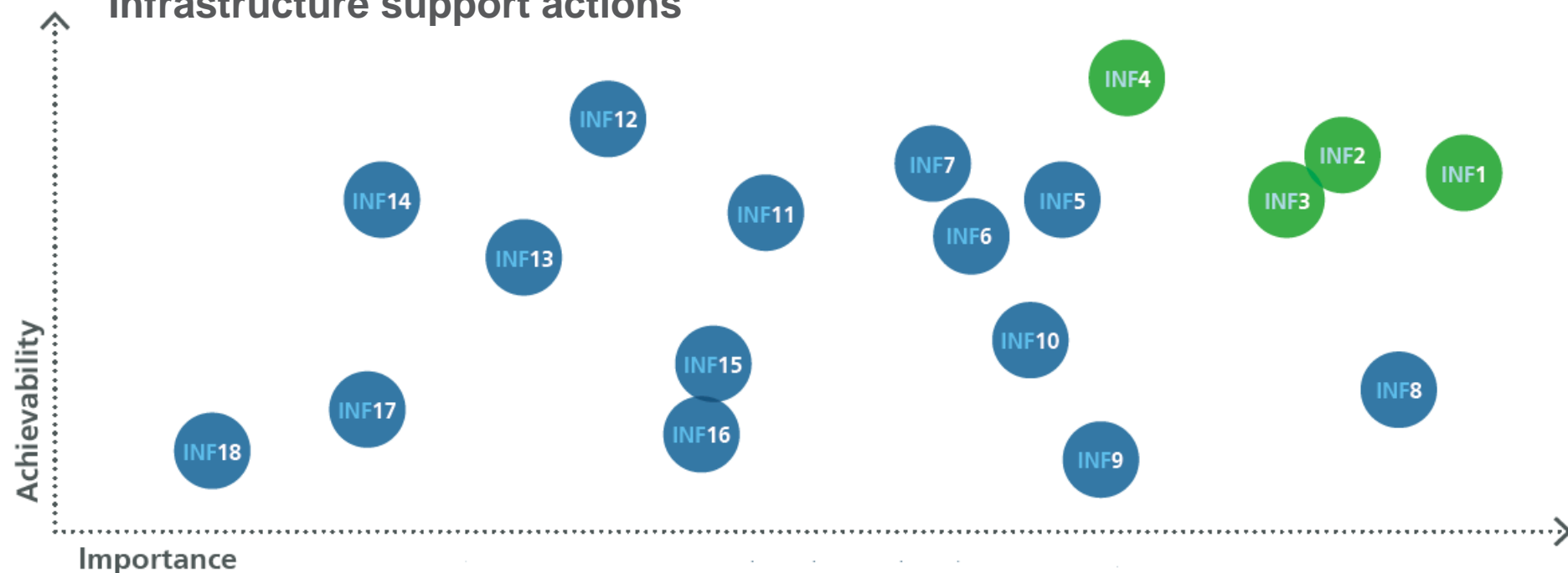
# Food-EPI outputs (3): National policy priorities



POL1	Food prices	Implement a health levy on sugar-sweetened drinks to increase consumer-end prices by 20%, and invest revenue raised into public health interventions
POL2	Food promotion	Implement mandatory time-based (up to 9:00pm) restrictions of unhealthy food and beverage advertising on broadcast media (television and radio), including effective monitoring and enforcement
POL3	Food composition	Establish clear national targets for reductions in salt, saturated fat, trans fat and added sugar in key food categories related to packaged foods and out-of-home meals
POL4	Food labelling	Fast-track changes to the Health Star Rating scheme to address anomalies / design issues, and make the scheme mandatory for all packaged food by July 2019 in collaboration with State and Territory governments

# Food-EPI outputs (3): National infrastructure support priorities

## Infrastructure support actions



INF1	Leadership	Establish obesity prevention as a national priority, with a national taskforce, sustained funding, regular and ongoing monitoring and evaluation of key measures, and regular reporting with respect to targets
INF2	Leadership	Develop a National Nutrition Policy, building on the work that has already been undertaken to inform its development. The Policy should: be integrated with the National Strategic Framework for Chronic Conditions and National Diabetes Strategy; include explicit, specific strategies to reduce inequalities and target all vulnerable populations, including Aboriginal and Torres Strait Islanders; and be supported by a long-term funding stream, with co-ordination across government departments and jurisdictions
INF3	Monitoring & intelligence	Commit sustained funding and ongoing support for a comprehensive diet and nutrition survey conducted every 5-10 years
INF4	Leadership	Establish national population dietary intake targets, including reducing the proportion of discretionary food intake

# Food-EPI outputs (4): Reports/infographics



**73 experts from 41 organisations assessed the policies related to the food environment in England**

**THE EXPERTS JUDGED THAT ENGLAND IS DOING WELL ON**

- Supporting systems for monitoring obesity and diet-related diseases and risk factors
- Labelling packaged foods
- Allowing public access to key government documents on food strategy
- Developing national dietary guidelines
- Adopting school food standards

**THE EXPERTS CONCLUDED THAT ENGLAND IS NOT DOING WELL ON**

- Controlling the advertising of unhealthy food to children
- Systems-based approach to improving the food environment
- Strengthening planning laws to encourage healthy food outlets
- Considering health in food and farming strategies
- Subsidising farmers to produce healthier food
- Listening to civil society

**10 PRIORITY ACTIONS THAT EXPERTS THINK COULD SIGNIFICANTLY REDUCE OBESITY- AND DIET-RELATED DISEASES**

- Reduce the sugar, fat and salt content in processed foods
- Control the advertising of unhealthy food to children
- Implement the levy on sugary drinks
- Strengthen planning laws to discourage fast food
- Prioritise health and the environment in the 25-year Food and Farming Plan
- Monitor school food standards
- Adopt a national food action plan
- Evaluate food-related programmes and policies
- Monitor the food environment
- Apply buying standards to all public sector institutions

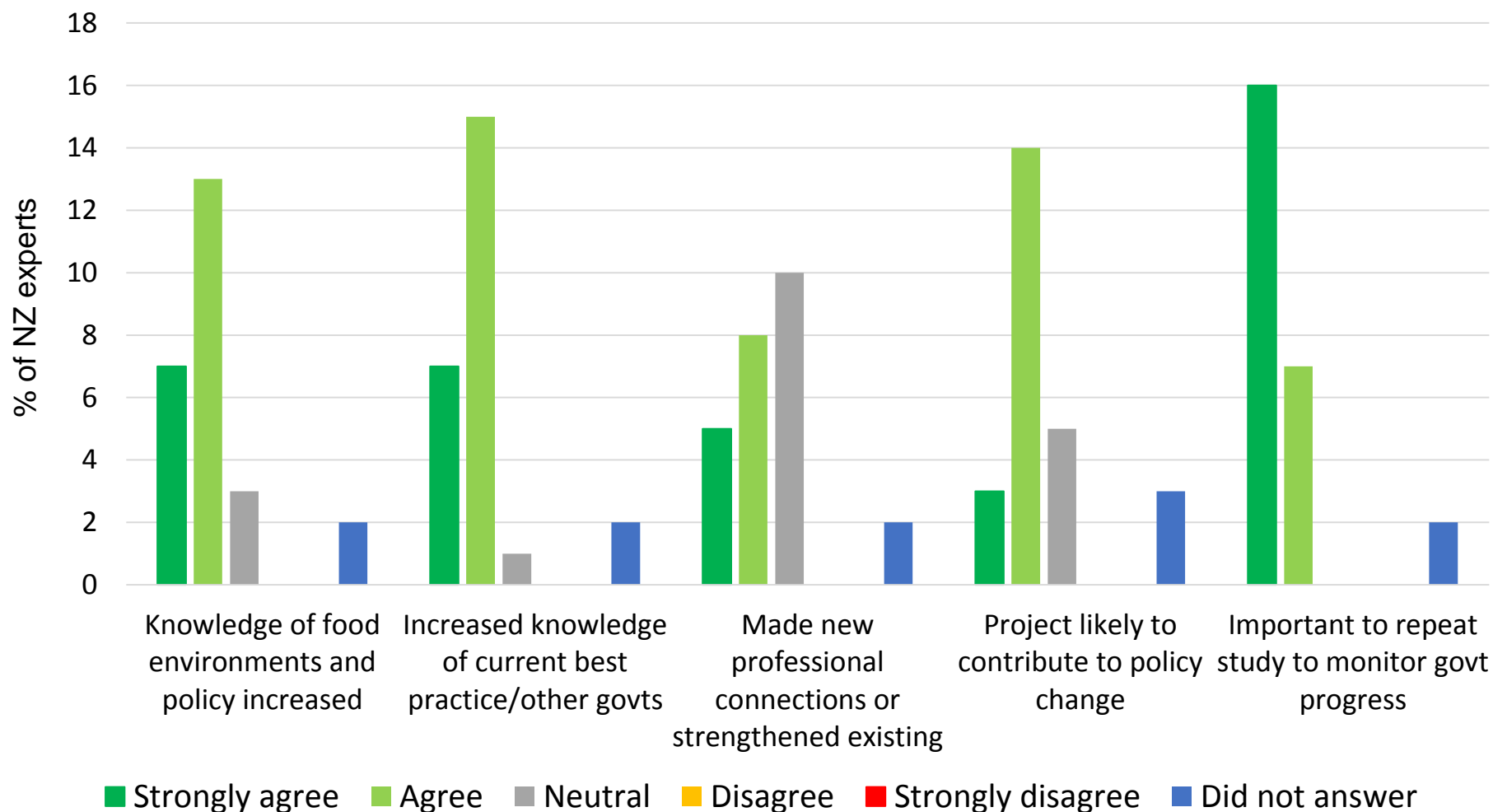
## LEARNING FROM EXPERIENCE IN THE UK AND ABROAD

<p><b>Advertising of unhealthy food to children</b> </p> <p>Quebec bans all food advertising aimed at children under 13 years. French speaking families in Quebec are 39% less likely to consume fast food than their counterparts in Ontario.</p>	<p><b>Health in food and farming plans</b> </p> <p>Scotland will launch the consultation on a Good Food Nation Bill in 2017. It promises to address procurement, waste, health, education and social justice. It is intended to enhance the National Food Policy.</p>	<p><b>Monitoring school food</b> </p> <p>Sweden monitors the quality of school meals with an online tool which allows schools and municipalities to evaluate their school food provision in six areas: choice, nutritional quality, safety and hygiene, educational resource, environmental sustainability, organization and policy. Currently 39% of all primary schools have started to use the system.</p>
<p><b>Sugar, fat and salt content of processed foods</b> </p> <p>The UK introduced voluntary salt-reduction targets for a range of processed foods in 2006. Many foods now have 10–20% less salt than 10 years ago, while salt intake has fallen by 18%. Less progress was made with foods eaten out of home. It is important to build on this experience in the new sugar reformulation plan.</p>	<p><b>Levy on sugary drinks</b> </p> <p>France introduced a 'soda tax' in 2012. It is €0.11 per 1.5 litres of soda and raises around €400m a year for the general budget. Demand for soft drinks reduced by 3.3% in 2012 and 3.4% in 2013 following the introduction of the tax.</p>	

+ support from experts explicitly included



# Food-EPI outputs (5): Evaluation with experts



# Food-EPI outputs (6): Evaluation with government

“It was an onerous process for all involved to collect this baseline data but it is hard to imagine how it could be less onerous given most jurisdictions do not have this information in one place, ready to go”

“Overall it was a useful exercise and I have used the findings to inform people in senior management and Ministers about what we need to be doing better”

**“The Food-EPI project has cemented/confirmed our priorities and provided an independent recommendation to support our proposed plans”**

“The exercise has had some impact in focusing political attention on obesity prevention and actions that might be supported – whether this is sustained and in an environment of fiscal constraint and significant system reforms is uncertain”

**“Further thought is needed on to how to make optimal use of the information gathered beyond the release of the report, and flurry of media and political interest that quickly subsides”**



# Main benefits of the Food-EPI

- Getting civil society and experts participating and on the same page
- Supporting bureaucrats in the specifics of policies and actions
- Setting the agenda with politicians
  - Incumbent vs opposition
  - Translation of WHO NCD action plan to national plan
- Process as important as the outcome!!
- Engagement with policymakers & dissemination of results different in different countries – valuable learning process

# FOOD-EPI UPTAKE AND USES



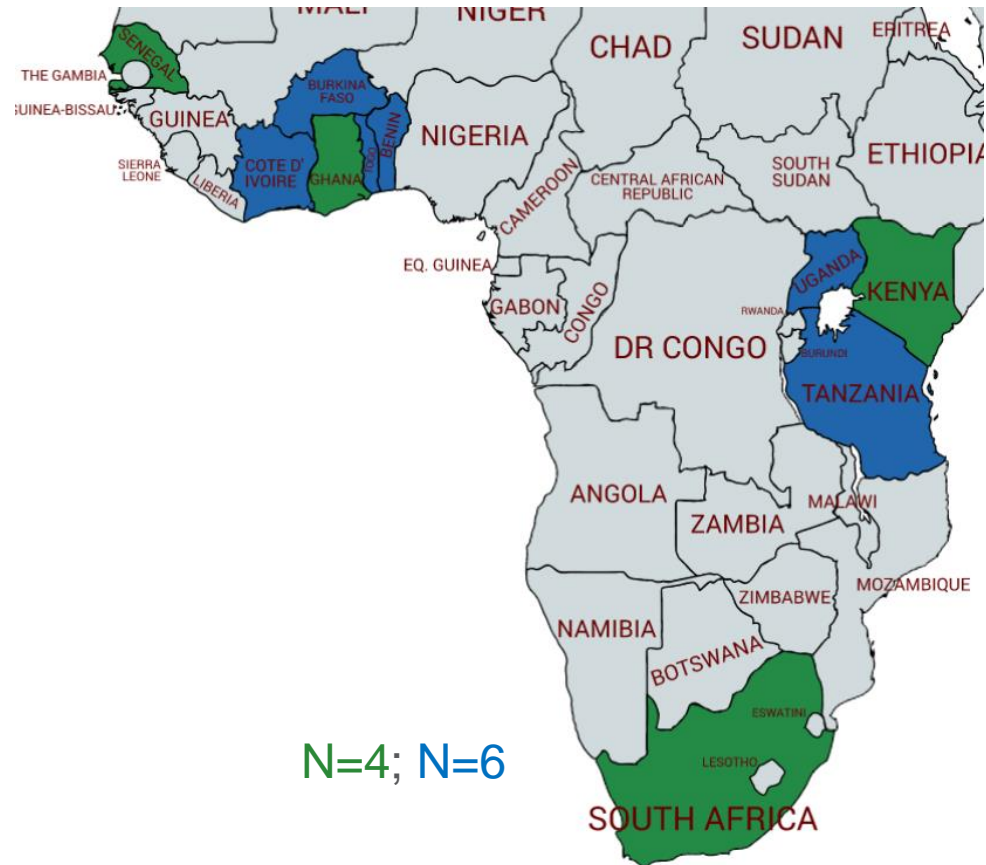
# Food-EPI studies update



N=4; N=2

- Implemented
- In progress

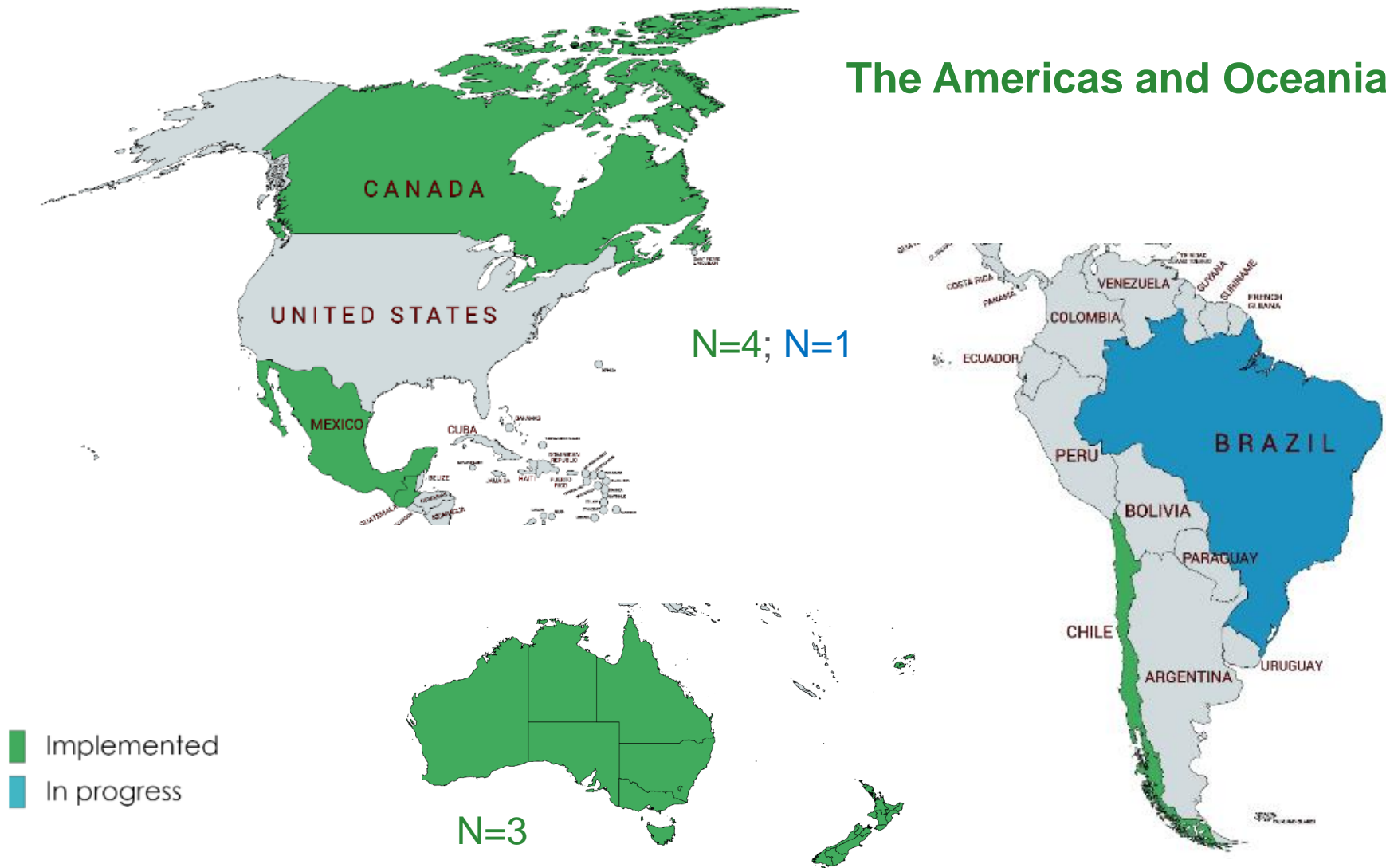
## Asia and Africa



N=4; N=6

# Food-EPI studies update

## The Americas and Oceania



# Food-EPI studies update

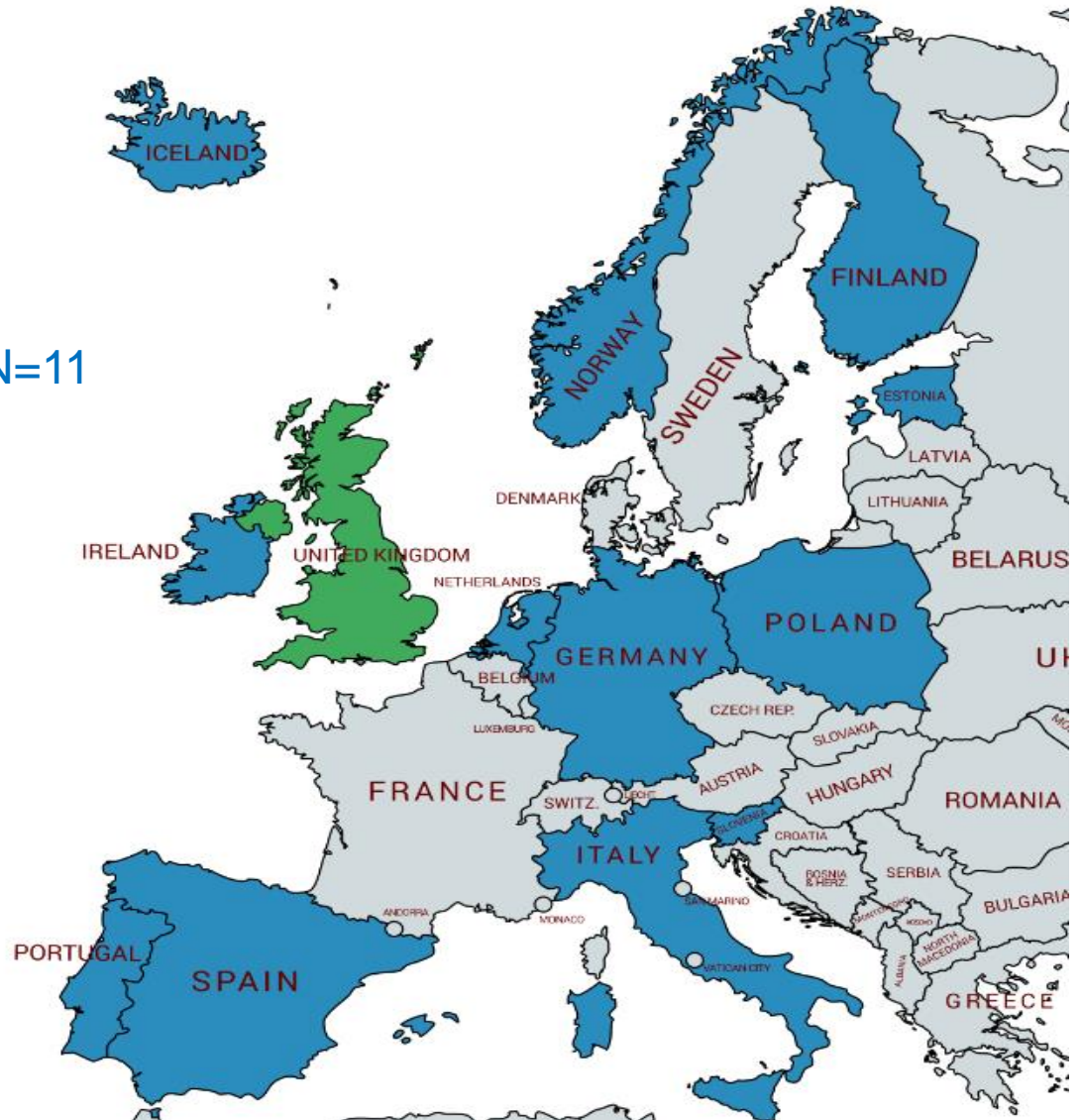
## Europe



N=1; N=11



- Implemented
- In progress



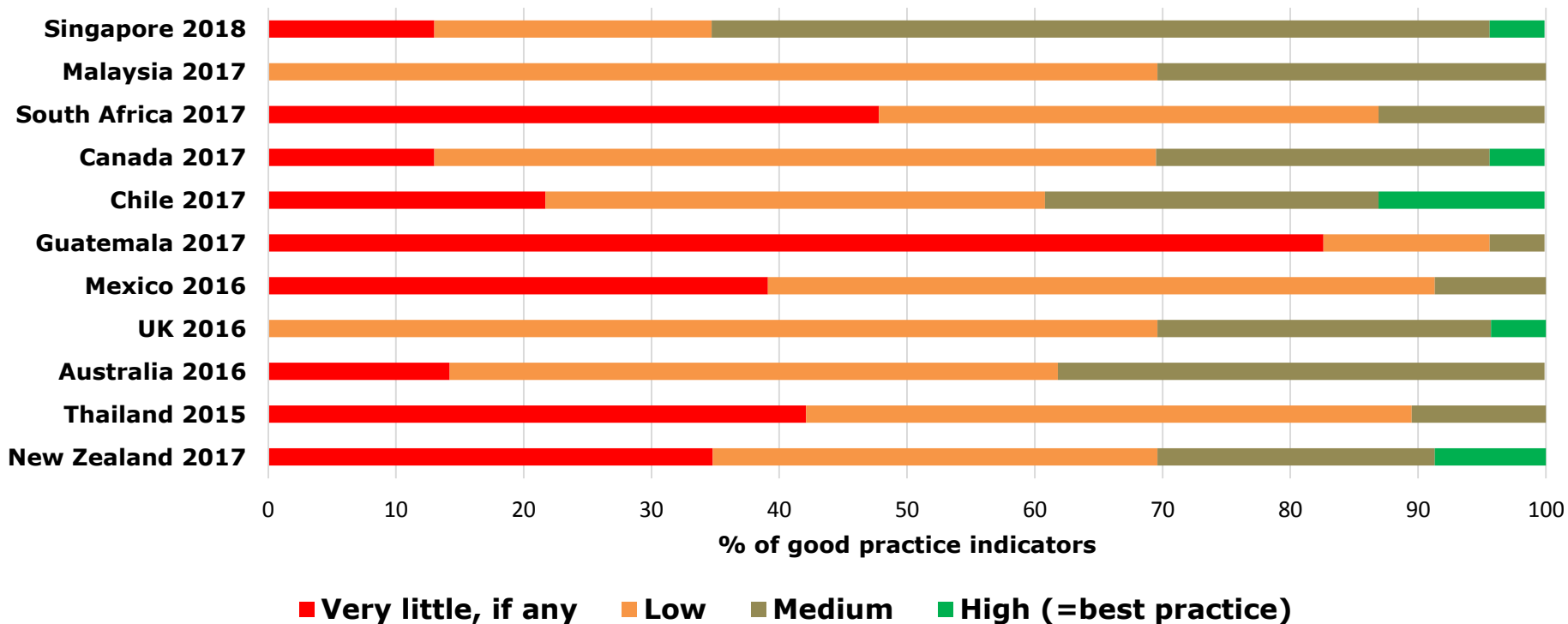
# Multi-country analysis – Food-EPI

Region	Country	Year	N experts invited	% of academia	% of NGO representatives	% of other civil society organizations	Response rate -total
Asia-Pacific	New Zealand	2014	105	22 (42.3%)	21 (40.4%)	9 (17.3%)	58 (55.2%)
	New Zealand	2017	125	25 (35.2%)	14 (19.7%)	32 (45.1%)	71 (56.8%)
	Thailand	2015	46	16 (59.3%)	11 (40.7%)	0 (0.0%)	27 (64.8%)
	Australia	2016	144	49 (48.5%)	49 (48.5%)	3 (3.0%)	<b>101 (70.1%)</b>
	Malaysia	2017	49	11 (42.3%)	15 (57.7%)	0 (0.0%)	26 (53.1%)
	Singapore	2018	44	13 (65.0%)	4 (20.0%)	3 (15.0%)	20 (45.5%)
Latin America	Chile	2017	87	32 (80.0%)	8 (20.0%)	0 (0.0%)	40 (46.0%)
	Mexico	2016	101	20 (60.6%)	13 (39.4%)	0 (0.0%)	<b>33 (32.7%)</b>
	Guatemala	2017	142	26 (57.8%)	8 (17.8%)	11 (24.4%)	64 (45.1%)
North America	Canada	2017	111	44 (62.0%)	23 (32.4%)	4 (5.6%)	<b>78 (70.3%)</b>
Europe	England (UK)	2016	107	20 (48.8%)	21 (51.2%)	0 (0.0%)	59 (55.1%)
Africa	South Africa	2017	39	10 (90.9%)	1 (9.1%)	0 (0.0%)	<b>11 (28.2%)</b>



# Multi-country analysis – Food-EPI

% of food environment policies with 'very little if any', 'low', 'medium' or 'high' implementation compared to international best practice



# Multi-country analysis – Food-EPI

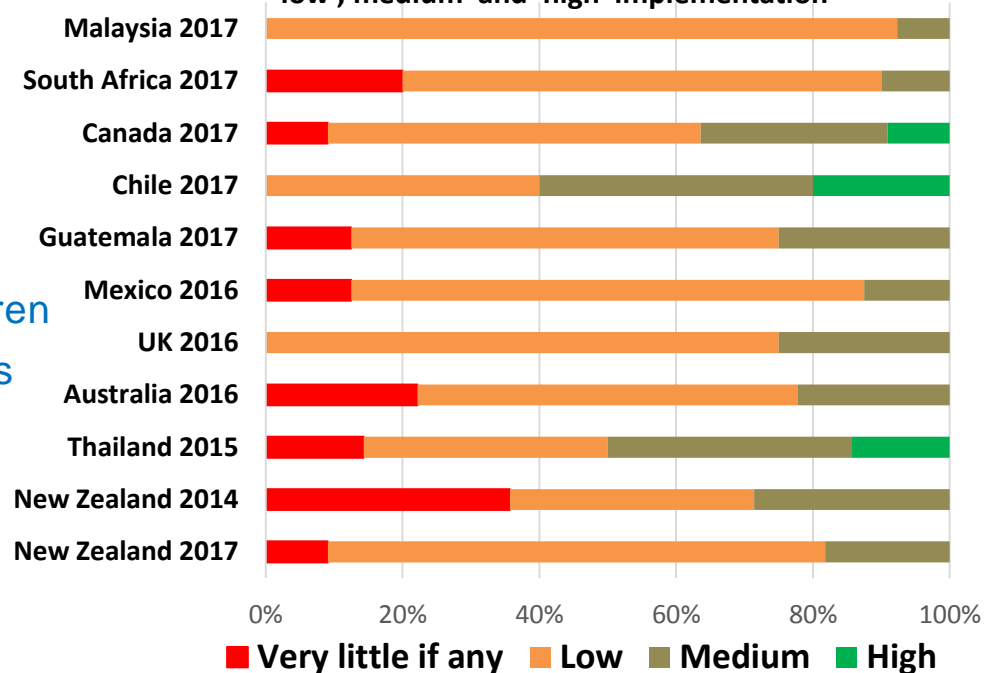
On average **9 priority actions in final policy package recommended for implementation by the government** across the 47 Food-EPI good practice indicators

## Top policy areas prioritized across the 10 countries:

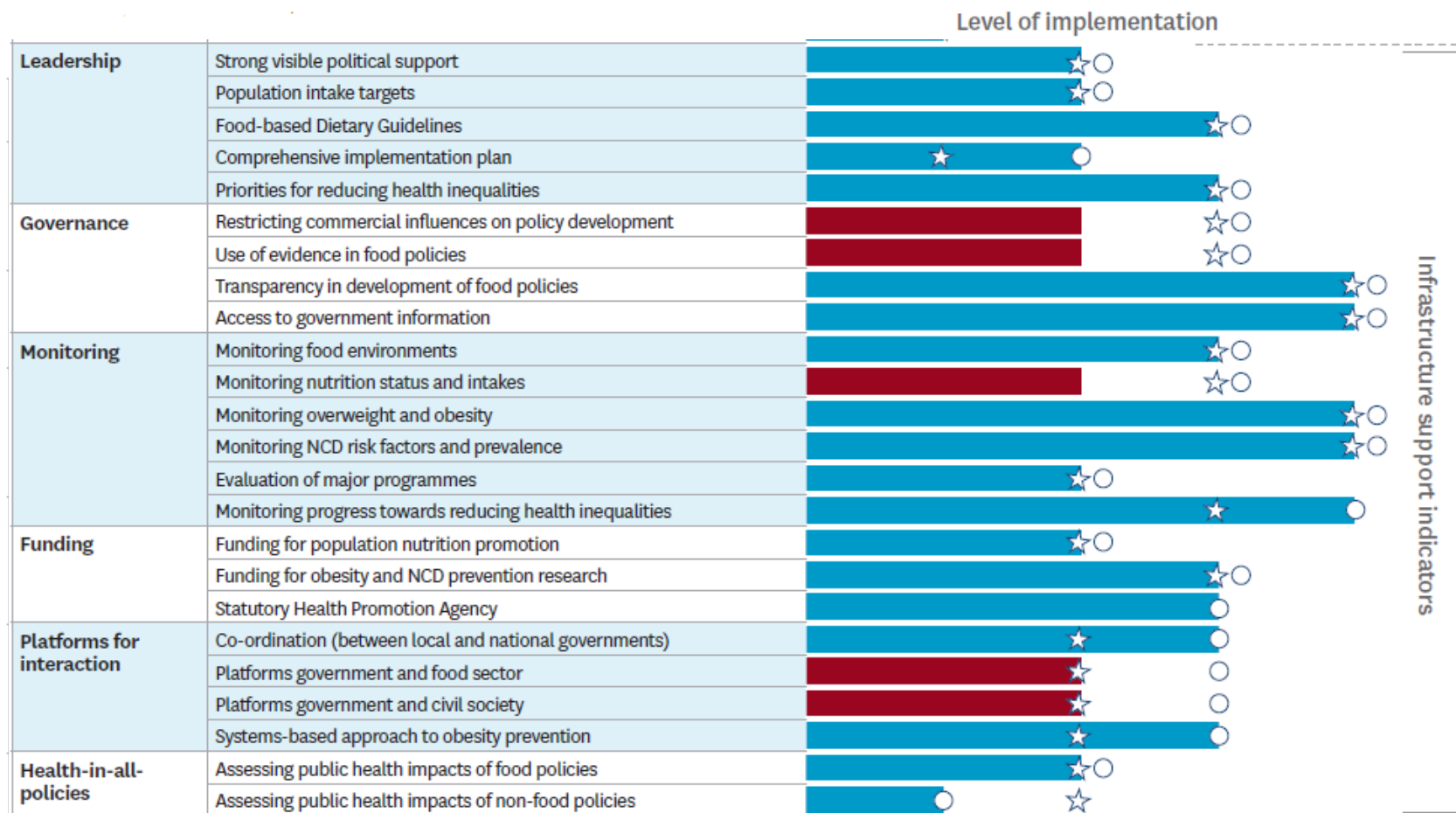
(actual recommendations more specific)

1. Increasing taxes on unhealthy foods
2. Front-of-pack nutrition labelling
3. Restricting unhealthy food marketing to children
4. Food composition targets for processed foods
5. Healthy school food policies

% of priority actions for indicators at 'very little if any', 'low', 'medium' and 'high' implementation



# Food-EPI Repetition: example New Zealand



**Figure 1:** Level of implementation of food environment policies and infrastructure support by the New Zealand Government in 2020 against international best practice (☆ 2014, ○ 2017 ratings). Change in level of implementation: ■ Reduced since 2017; ■ No change since 2017; ■ progress since 2017

# Food-EPI at the European level



## The Healthy Food Environment Policy Index (FOOD-EPI): European Union

An overview of EU-level policies influencing food environments in EU Member States

July 2020



### Expert panel

Representation from Public Health, Nutrition, Epidemiology, Policy:

*Academia*

*NGOs*

*Other organisations*

~49 invitations sent to experts, 35 completed the evaluation

# Food-EPI at the European level

Jurisdiction for indicators: **EU**    **national/EU**    **national/local**

F  
O  
O  
D  
  
L  
A  
B  
E  
L  
L  
I  
N  
G

- ❖ *Ingredient lists and nutrient declarations in line with Codex recommendations are present on the labels of all packaged foods.*
- ❖ *Evidence-based regulations are in place for approving and/or reviewing claims on foods, so that consumers are protected against unsubstantiated and misleading nutrition and health claims.*
- ❖ *One or more interpretive, evidence-informed front-of-pack supplementary nutrition information system(s), which readily allow consumers to assess a product's healthiness, is/are applied to all packaged foods (examples are the Nutriscore and traffic lights).*
- ❖ *A simple and clearly-visible system of labelling the menu boards of all quick service restaurants (i.e. fast food chains) is implemented, which allows consumers to interpret the nutrient quality and energy content of foods and meals on sale.*

# Food-EPI at the European level

## Policy recommendations related to:

- *mandatory, ambitious food composition targets for added sugars, salt, and saturated fat*
- *mandatory declaration of added sugars on label*
- *harmonized easy-to-understand front-of-pack label, which is mandatory for Member States to display on all prepacked foods.*
- *evidence-based nutrient profiling system to prevent the use of claims on less healthy foods*
- *policies to restrict marketing of foods containing high levels of saturated fat, trans fat, salt and added sugars to children up to 18 years old on food packages.*
- *Gradually remove the sponsorship of foods high in saturated fat, trans fat, salt or added sugars from major EU sporting and other events.*

## Infrastructure support recommendations related to:

- *Harmonizing the promotion of healthy diets with other issues like climate change & environmental protection*
- *Increasing the EU financial contribution for Member States (i.e. through EFSA) to conduct regular food consumption surveys.*
- *Making health impact assessments mandatory for all policies, including the CAP.*
- *Establishing an EU health promotion agency (e.g. such as the European Environment Agency) to support the design, implementation, monitoring and evaluation of policies on food environments, population nutrition, diet-related NCDs and their inequalities*

# Food-EPI at the regional level: example Canada

Indicator	AB	BC	MB	NB	NL	NWT	NS	ON	PEI	QC	SK	YK
Political support	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low
Population intake targets	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low
Strategy/plan to improve food environments	Low	High	Low	Low	High	Low	Low	High	Low	Low	Low	Low
Priorities for inequalities related to nutrition	Low	Low	Low	High	High	Low	Low	Low	Low	Low	Low	Low
Restrict commercial influence	Low	Low	Low	Low	Low	Low	High	Low	Low	Low	Low	Low
Evidence in policymaking	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low
Transparency in policy development	Low	Low	Low	Low	High	Low	Low	High	Low	Low	Low	Low
Public access to information	High	High	High	High	High	High	High	High	High	High	High	High
Monitoring food environments	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low
Monitoring population intakes	Low	Low	Low	High	Low	Low	Low	High	Low	Low	Low	Low
Monitoring overweight and obesity	Low	Low	Low	Low	Low	Low	Low	Low	Low	High	High	Low
Monitoring NCD prevalence and risk factors	High	Low	Low	High	High	Low	Low	High	Low	High	Low	Low
Evaluation of programs and policies	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low
Monitoring health inequalities	Low	High	High	High	Low	Low	Low	Low	Low	Low	Low	Low
Sufficient population nutrition budget	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low
Government-funded research	High	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low
Health promotion agency	Low	Low	Low	High	Low	Low	Low	High	Low	High	Low	Low
Coordination mechanism across government	Low	Low	Low	High	High	Low	Low	High	Low	High	Low	Low
Coordination mechanism with food sector	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low	Low
Coordination mechanism with civil society	Low	Low	High	High	High	Low	Low	High	Low	High	Low	Low
Health considerations in all food policies	Low	Low	Low	Low	Low	Low	Low	Low	Low	High	Low	Low
Health impact assessments in non-food policies	Low	Low	Low	Low	Low	Low	Low	Low	Low	High	Low	Low

39/47 original Food-EPI indicators relevant

None or Very Little Low Moderate High

# Food-EPI at the city level: example Canada

Policy

Infrastructure Support



TORONTO

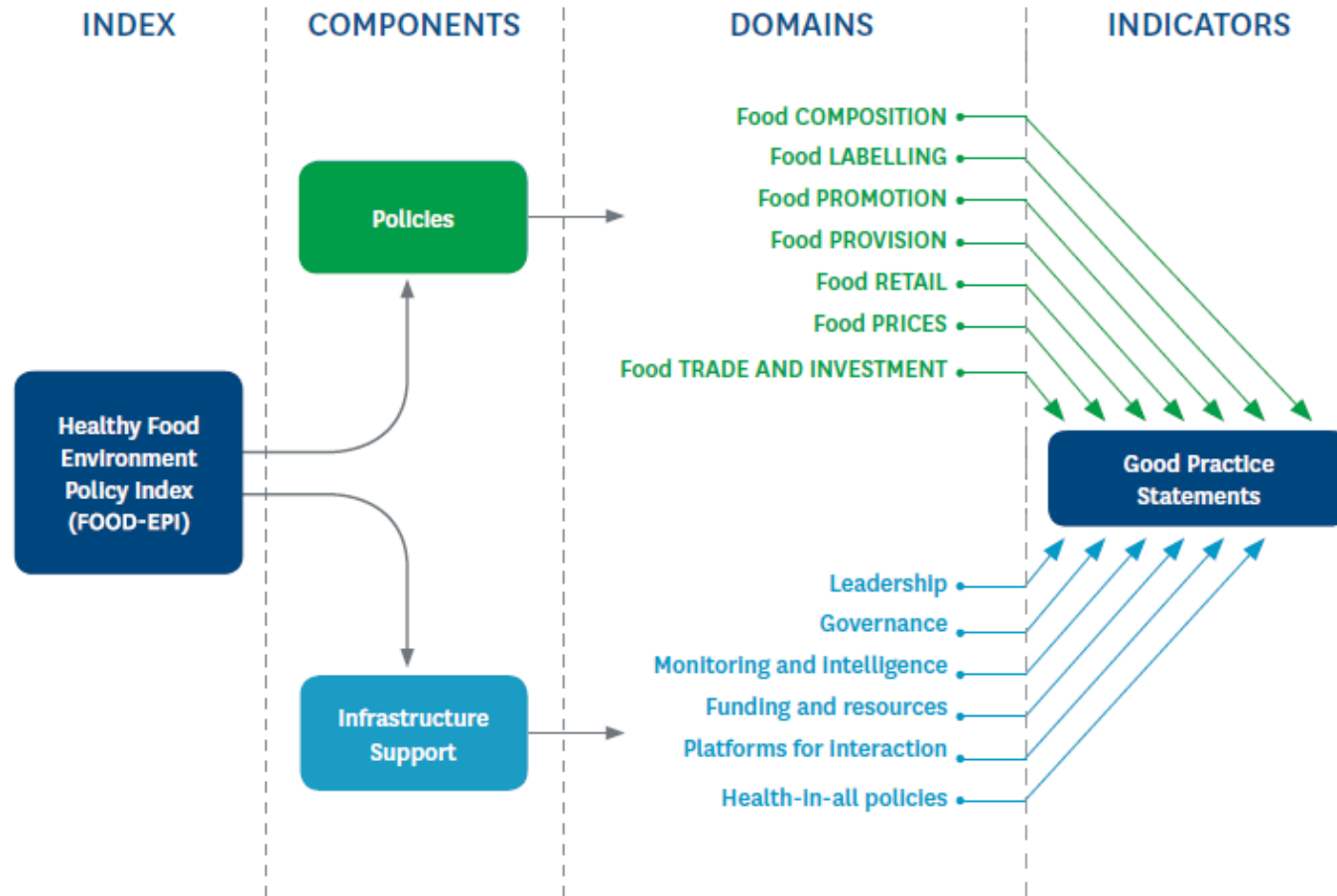
11/23 original policy indicators relevant for city jurisdiction



# FOOD-EPI TOOL AND GOOD PRACTICE INDICATORS



# Food-EPI tool



*Development based on review of existing high level policy documents & consultation with 30 international experts, including LMIC representatives*

# Food composition

There are government systems implemented to ensure that, where practicable, processed foods minimise the energy density and the nutrients of concern (salt, saturated and *trans* fats, and added sugars)

**COMP1** *Food composition targets/standards for processed foods*

**COMP2** *Food composition targets/standards for out-of-home meals*



# Food labelling

There is a regulatory system implemented by the government for consumer-oriented labelling on food packaging and menu boards in restaurants to enable consumers to easily make informed food choices and to prevent misleading claims

*LABEL1 Ingredient lists and nutrient declarations*

*LABEL2 Regulatory systems for approving/reviewing claims on foods*

*LABEL3 Interpretive front-of-pack supplementary nutrition information system(s)*

*LABEL4 System of labelling the menu boards*



# Food promotion

There is a comprehensive policy implemented by the government to reduce the impact (exposure and power) of promotion of unhealthy foods to children across all media

**PROMO1** *Policies to restrict unhealthy food promotion to children through broadcast media*

**PROMO2** *Policies to restrict unhealthy food promotion to children through non-broadcast media*

**PROMO3** *Policies to restrict unhealthy food promotion in settings where children gather*

Ghana/Kenya: + restrict marketing of breastmilk substitutes

EU: broken down into 5 indicators (food packages and social media separately)



# Food prices

Food pricing policies (e.g., taxes and subsidies) are aligned with health outcomes by helping to make the healthy eating choices the easier, cheaper choices

**PRICES1** *Taxes or levies on healthy foods are minimised*

**PRICES2** *Taxes or levies on unhealthy foods or nutrients of concern*

**PRICES3** *Subsidies on foods favour healthy rather than unhealthy foods*

**PRICES4** *Existing food-related income support programs are for healthy foods*



# Food provision

The government ensures that there are healthy food service policies implemented in government-funded settings to ensure that food provision encourages healthy food choices, and the government actively encourages and supports private companies to implement similar policies

*PROV1 Policies in schools and early childhood education services to provide and promote healthy foods*

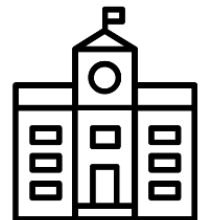
*PROV2 Policies in other public sector settings to provide and promote healthy foods*

*PROV3 Support and training systems for public sector settings*

*PROV4 Government actively encourages and supports private companies to implement healthy food service policies*

Ghana/Kenya: PROV4 not included

Latin America: Provision of safe and free drink water



# Food retail

The government has the power to implement policies and programs to support the availability of healthy foods and limit the availability of unhealthy foods in communities (outlet density and locations) and in-store (product placement)

**RETAIL1** *Zoning laws to place limits on the density of outlets selling mainly unhealthy foods*

**RETAIL2** *Zoning laws to encourage the availability of outlets selling fruits and vegetables*

**RETAIL3** *Support systems to encourage food stores to increase availability of healthy foods and limit availability of unhealthy foods*

**RETAIL4** *Support systems to encourage food service outlets to increase availability of healthy foods and limit availability of unhealthy foods*

Ghana/Kenya: RETAIL12 and RETAIL34 combined; extra indicator on food hygiene policies

Latin America: Provision of safe and free drink water in public spaces





# Food trade and investment

The government ensures that trade and investment agreements protect food sovereignty, favour healthy food environments, are linked with domestic health and agricultural policies in ways that are consistent with health objectives, and do not promote unhealthy food environments

*TRADE1 Direct and indirect impacts of trade and investment agreements on food environments and population nutrition assessed*

*TRADE2 Measures taken to manage investment and protect regulatory capacity with respect to public health nutrition*



# Leadership

The political leadership ensures that there is strong support for the vision, planning, communication, implementation and evaluation of policies and actions to create healthy food environments, improve population nutrition, and reduce diet-related inequalities

*LEAD1 Strong, visible, political support for improving food environments and population nutrition*

*LEAD2 Population intake targets for nutrients of concern*

*LEAD3 Evidence-informed food-based dietary guidelines*

*LEAD4 Comprehensive, up-to-date implementation plan*

*LEAD5 Priorities to reduce inequalities in relation to diet and nutrition*



# Governance

Governments have structures in place to ensure transparency and accountability, and encourage broad community participation and inclusion when formulating and implementing policies and actions to create healthy food environments, improve population nutrition, and reduce diet-related inequalities

*GOVER1 Procedures to restrict commercial influences on the development of policies*

*GOVER2 Policies and procedures for using evidence in the development of food policies*

*GOVER3 Policies and procedures for ensuring transparency in the development of food policies*

*GOVER4 Access to nutrition information for the public*



# Monitoring and intelligence

The government's monitoring and intelligence systems (surveillance, evaluation, research and reporting) are comprehensive and regular enough to assess the status of food environments, population nutrition and diet-related NCDs and their inequalities, and to measure progress on achieving the goals of nutrition and health plans

**MONIT1** *Regular monitoring of food environments*

**MONIT2** *Regular monitoring of adult and childhood nutrition status and food consumption*

**MONIT3** *Regular monitoring of adult and childhood anthropometry*

**MONIT4** *Regular monitoring of the prevalence of NCDs and risk factors*

**MONIT5** *Sufficient evaluation of major programs and policies*

**MONIT6** *Monitoring of progress towards reducing inequalities*



# Funding and resources

Sufficient funding is invested in 'Population Nutrition Promotion' (~population promotion of healthy eating and healthy food environments for the prevention of obesity and diet-related NCDs, excluding all one-on-one promotion (primary care, antenatal services, maternal and child nursing services etc.), food safety, micronutrient deficiencies (e.g. folate fortification) and undernutrition) to create healthy food environments, improved population nutrition, reductions in obesity, diet-related NCDs and their related inequalities

**FUND1** *The budget spent on 'Population Nutrition Promotion' is sufficient to reduce diet-related NCDs*

**FUND2** *Government funded research is targeted for improving food environments*

**FUND3** *There is a statutory health promotion agency in place*



# Platforms for interaction

There are coordination platforms and opportunities for synergies across government departments, levels of government, and other sectors (NGOs, private sector, and academia) such that policies and actions in food and nutrition are coherent, efficient and effective in improving food environments, population nutrition, diet-related NCDs and their related inequalities

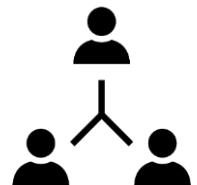
*PLATF1 Robust coordination mechanisms across departments and levels of governments*

*PLATF2 Formal platforms for regular interactions between government and the commercial food sector*

*PLATF3 Formal platforms for regular interactions between government and civil society*

*PLATF4 Systems-based approaches to improve the healthiness of food environments*

Ghana/Kenya: PLATF4 not included



# Health in all policies

Processes are in place to ensure policy coherence and alignment, and that population health impacts are explicitly considered in the development of government policies

*HIAP1 Prioritization of nutrition and health outcomes in development of government food related policies*

*HIAP2 Health impact assessments for non-food policies*

Ghana/Kenya: HIAP1 and 2 combined



# Strengths of the tool

## General comments

The tool is well structured

The tool is comprehensive

The tool has a good trade-off between comprehensiveness and efficiency

Overall reliability of the tool is good

Flexible for adaptation to the country context while maintaining comparability with other countries

## Good practice indicators

The indicators have been extracted from recommendations in overarching high level policy documents

## Benchmarks for indicators

Comprehensive set of benchmarks included for most of the indicators

## Evidence document on implementation of indicators

The evidence document on extent of implementation for indicators makes the tool evidence-based

The evidence document is generally well received by a range of government officials and experts

Ratings of indicators by participants are supported by the use of an evidence document



# Challenges/limitations of the tool

## General comments

The instrument is long with 47 good practice indicators; making the rating process time-consuming

## Good practice indicators

There is a trade-off between efficiency and having too many indicators but it is sometimes difficult to rate when the good practice indicator covers a number of different aspects (e.g. different nutrients of concern or different settings which may be subject to different policies for example)

The overall tool is reliable, but for selected indicators agreement among experts for the rating is not as good as for others (e.g. in cases when benchmarks are weak or do not cover the whole indicator)

It is hard to collect evidence for some of the indicators, e.g. funding for population nutrition promotion and subsidies. It is however possible to omit some of these indicators from rating when it is too difficult to collect information or define scope.

## Benchmarks for good practice indicators

Insufficient international examples for some indicators. For example for some domains like Domain 7: Food Trade & Investment; Domain 9: Governance; and Domain 11: Funding & Resources.

It is hard to rate against the benchmarks when they are still weak and not very aspirational

It is hard to rate against the benchmarks where they do not cover all aspects of the indicator, although that is normal in cases where no countries have implemented all aspects of the indicator

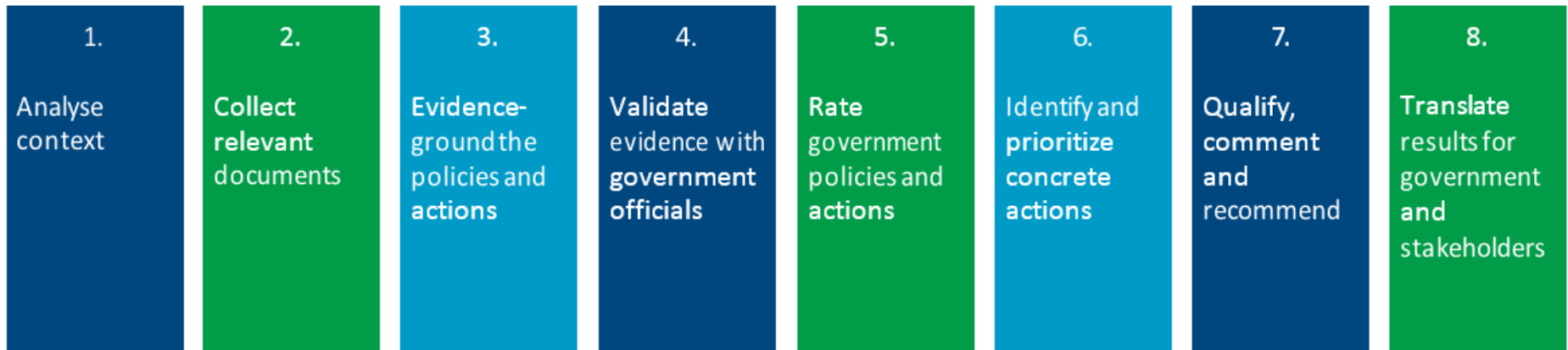
# FOOD-EPI PROCESS AND THE DIFFERENT STEPS



**FOOD  
EPI**

# Food-EPI process

Process driven by panel of independent and government public health experts



*Pilot test recommended in case of major changes to tool and/or process and/or context; not always conducted; depends on budget/feasibility*

# Analyse context



- Political context and determination of time period for evaluation
- Adaptation of the tool and indicators to the country context (checking relevance/comprehensiveness/clarity of domains/indicators, (dis)aggregation of indicators, translation and back translation), check with experts and policymakers in the country
- Adaptation of the process to the country context
- Mapping of stakeholders (independent and government experts) and assign roles within the different steps of the process
- Evaluate access to experts, government officials and information needed
- Potential barriers & facilitators for carrying out the Food-EPI
- Time frame for conducting and launching the Food-EPI

# National expert panel

- Size of expert panel and types of experts varies across countries
- Public health (nutrition) experts from academia, NGOs & other organizations
- Mapping experts and check expert list with other key experts to have good representation of the public health nutrition community in country
- Declaration of interests (together with informed consent form) before participation in the rating and action workshops
- Excluding experts with major conflicts of interest (e.g. food industry or experts with strong ties to food industries excluded); participation of experts in Govt advisory committees not considered a conflict of interest
- Government officials not part of expert panel, but involved in process to verify evidence documents and as observers in workshops. There are countries which conducted a self-assessment by government officials, but requires additional resources and engagement.

# Evidence of extent of implementation

- For each of the 47 good practice indicators, evidence of implementation needs to be documented in detail + references/sources for chosen period of evaluation
- Consideration of **all steps of the policy cycle** from agenda setting (initiation), development, implementation to evaluation
- Evidence can include (examples):
  - commitments/intentions/plans of government to explore policy options
  - establishment of steering committee, expert panel, working group, platform
  - allocation of responsibility to individuals/teams
  - Studies, reviews or consultation processes undertaken
  - policy briefs/proposals
  - regulations, legislation implemented
  - Monitoring data/policy evaluations
  - Government funding for implementation of actions by NGOs or academia
- Searches: government websites, contacts, libraries, grey and published literature, official information act requests, personal communications
- Focus on national Govt, can take into account sub-national levels where relevant
- Sufficient **time** needed for this step, **often underestimated!!**

# Evidence of extent of implementation

Template available, including definitions and scope, context, policy details

## GOVER2 Use of evidence in food policies

### Food-EPI good practice statement

Policies and procedures are implemented for using evidence in the development of food policies

#### Definitions and scope

- Includes policies, procedures or guidelines to support government employees in the use of evidence for policy development including best practice evidence review methodology (including types and strength of evidence needed) and policy implementation in the absence of strong evidence (where the potential risks or harms of inaction are great)
- Includes policies, procedures or guidelines that stipulate the requirements for the establishment of a scientific or expert committee to inform policy development
- Includes the use of evidence-based models, algorithms and tools to guide policy development or within policy to guide implementation (e.g. nutrient profiling model)
- Includes government resourcing of evidence and research by specific units, either within or across government departments

• Any trade or economic agreements negotiated within the last **5 years** are considered decision-making about nutrition or health claims reformulation (see COMM1 and/or RETAIL4)

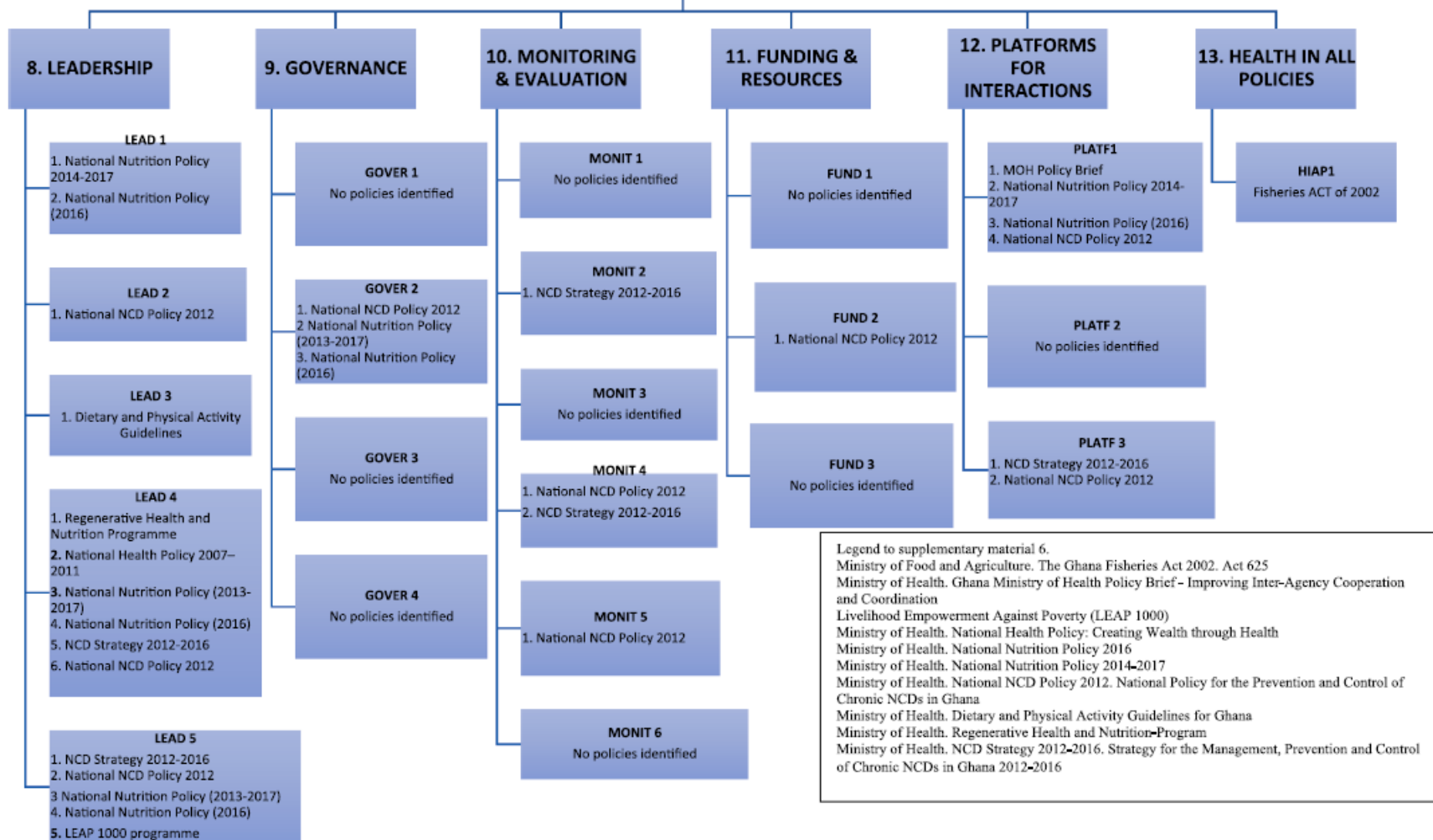
# Compilation evidence document - Ghana

- **Step One** - Use the stakeholder mapping to identify key public/ government organizations involved in the various Food-EPI policy and infrastructure support domains; also identify key organizational websites.
- **Step Two** - Where organizational websites are identified, trawl each website to identify evidence on relevant policies and/or infrastructure support – capturing these using a Google form and coding the evidence to the relevant Food-EPI domains/indicators.
- **Step Three** - Where no organizational websites are identified and/or once websites have been mined for information, follow up with key identified organizations to discuss what evidence exists in relation to the different policy and support domains.
- **Step Four** – When key policies and/or initiatives have been identified, conduct additional but focused searches of academic databases using key terms associated with any identified policies/initiatives.
- **Step Five** – Submit Official Information Requests to relevant government ministries, departments, and agencies to retrieve information on budgets or other aspects on policies, actions or infrastructure support that may not be publicly available.
- **Step Six** – Follow up with particular stakeholders to discuss the emerging evidence in order to initially validate the emerging evidence and/or to collect further evidence/fill any identified gaps.



# Compilation evidence document - Ghana

## INFRASTRUCTURE



# Verification of evidence document by government experts

- Verification of completeness and accuracy of evidence document by government experts from different departments, not just the Ministry of Health
- Independent experts can help in this step as well if deemed useful
- Can be at the end or throughout the process of evidence collection
- Face-to-face, telephone and email are OK
- Differing levels of engagement of government across countries (i.e. in Australia, government experts filled out templates with evidence information but was long process and lot of discussion on the wording and official sign off needed)

# Best practice exemplars (benchmarks)

- Exemplars of policies/infrastructure support implemented globally
- Exemplars change over time, updated once a year
- From databases, policy experts, Food-EPI evidence documents
- Selected based on strength and comprehensiveness in relation to good practice indicators
- Often a few rather than just one exemplar for each indicator
- Some benchmarks are (still) fairly weak (far from 'the ideal')
- Some benchmarks do not (yet) capture all aspects of good practice statement
- For some indicators hard to find benchmarks, examples rather than exemplars, can rate against good practice statement (ideal) in those cases or leave out the indicator (i.e. funding, subsidies)
- Methodologically challenging; but preferred approach for political acceptability

DOMAIN		POLICY AREA	EXAMPLES
FOOD ENVIRONMENT	N	Nutrition label standards and regulations on the use of claims and implied claims on foods	e.g. Nutrient lists on food packages; clearly visible 'interpretive' and calorie labels; menu, shelf labels; rules on nutrient and health claims
	O	Offer healthy foods and set standards in public institutions and other specific settings	e.g. Fruit and vegetable programmes; standards in education, work, health facilities; award schemes; choice architecture
	U	Use economic tools to address food affordability and purchase incentives	e.g. Targeted subsidies; price promotions at point of sale; unit pricing; health-related food taxes
	R	Restrict food advertising and other forms of commercial promotion	e.g. Restrict advertising to children that promotes unhealthy diets in all forms of media; sales promotions; packaging; sponsorship
	I	Improve the quality of the food supply	e.g. Reformulation; elimination of trans fats; reduce energy density of processed foods; portion size limits
	S	Set incentives and rules to create a healthy retail environment	e.g. Incentives for shops to locate in underserved areas; planning restrictions on food outlets; in-store promotions
FOOD SYSTEM	H	Harness supply chain and actions across sectors to ensure coherence with health	e.g. Supply-chain incentives for production; public procurement through 'short' chains; health-in-all policies; governance structures for multi-sectoral engagement
BEHAVIOUR CHANGE COMMUNICATION	I	Inform people about food and nutrition through public awareness	e.g. Education about food-based dietary guidelines, mass media, social marketing; community and public information campaigns
	N	Nutrition advice and counseling in health care settings	e.g. Nutrition advice for at-risk individuals; telephone advice and support; clinical guidelines for health professionals on effective interventions for nutrition
	G	Give nutrition education and skills	e.g. Nutrition, cooking/food production skills on education curricula; workplace health schemes; health literacy programs

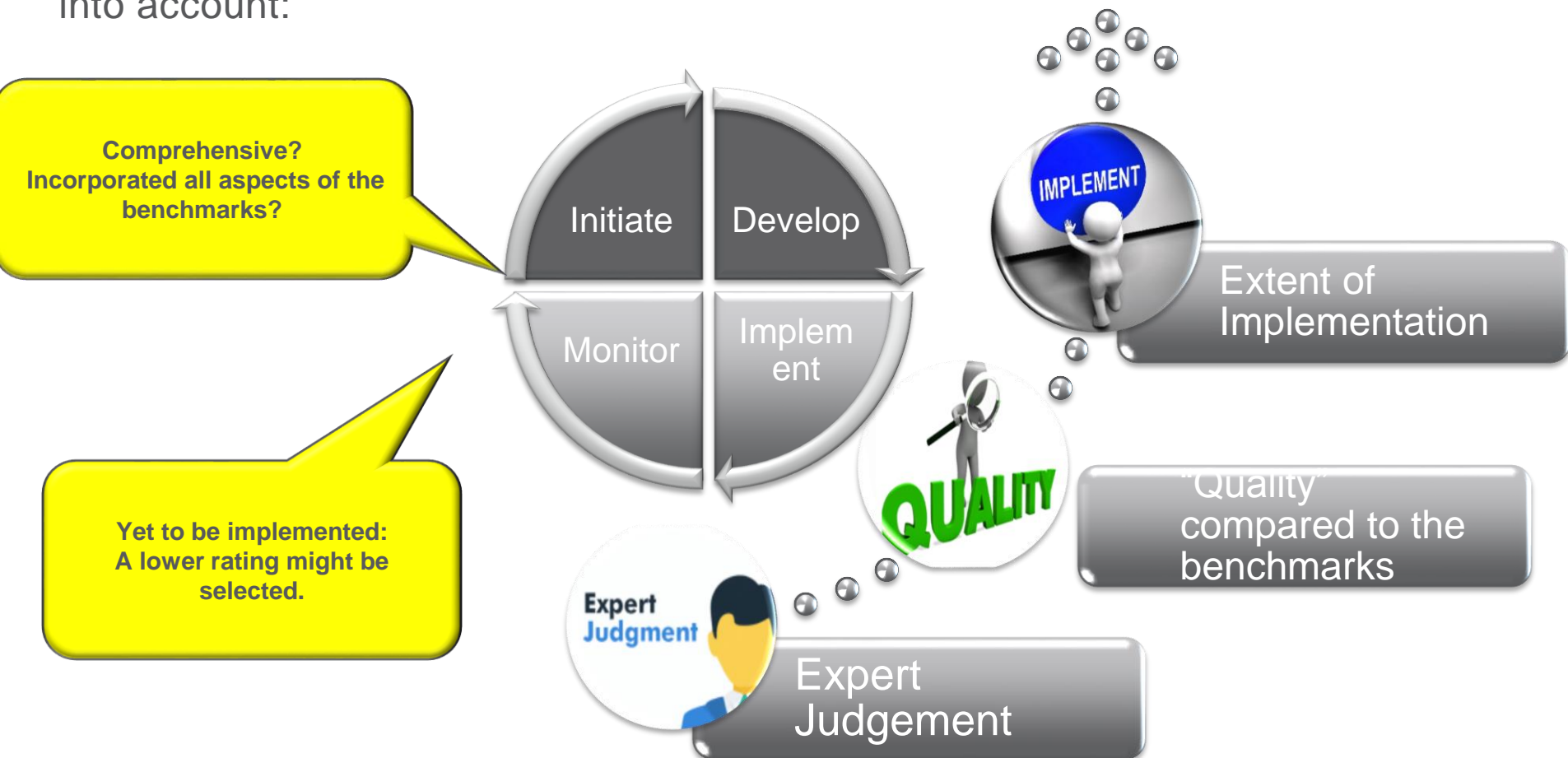
# Rating process



- Expert Panel = Participants; Government = Observers
- Workshop (1 or more) or online process (both have advantages and disadvantages)
- Experts need to be provided with full evidence document (incl. benchmarks) and summaries of evidence and benchmarks on beforehand to support them to rate
- ± Half a day at least as there are 47 indicators
- Presenter/facilitator/logistics person needed on the day
- Presentation of indicator/benchmarks/evidence of implementation and then experts rate each indicator compared to international best practice
- Workshop can use audience response system if combined with half day actions workshop afterwards to show results to participants
- Exclusion of indicators with 0 evidence of implementation or indicators that are too hard to collect all evidence from rating

# Rating process

Expert judgement supported by evidence: multiple considerations to be taken into account:



# Rating process



Likert scale (some countries use 1-10):

- 1 (<20% implemented compared to best practice)
- 2 (20-40% implemented compared to best practice)
- 3 (40-60% implemented compared to best practice)
- 4 (60-80% implemented compared to best practice)
- 5 (80-100% implemented compared to best practice)
- Cannot rate

Opportunity to ask for clarifications & write down comments

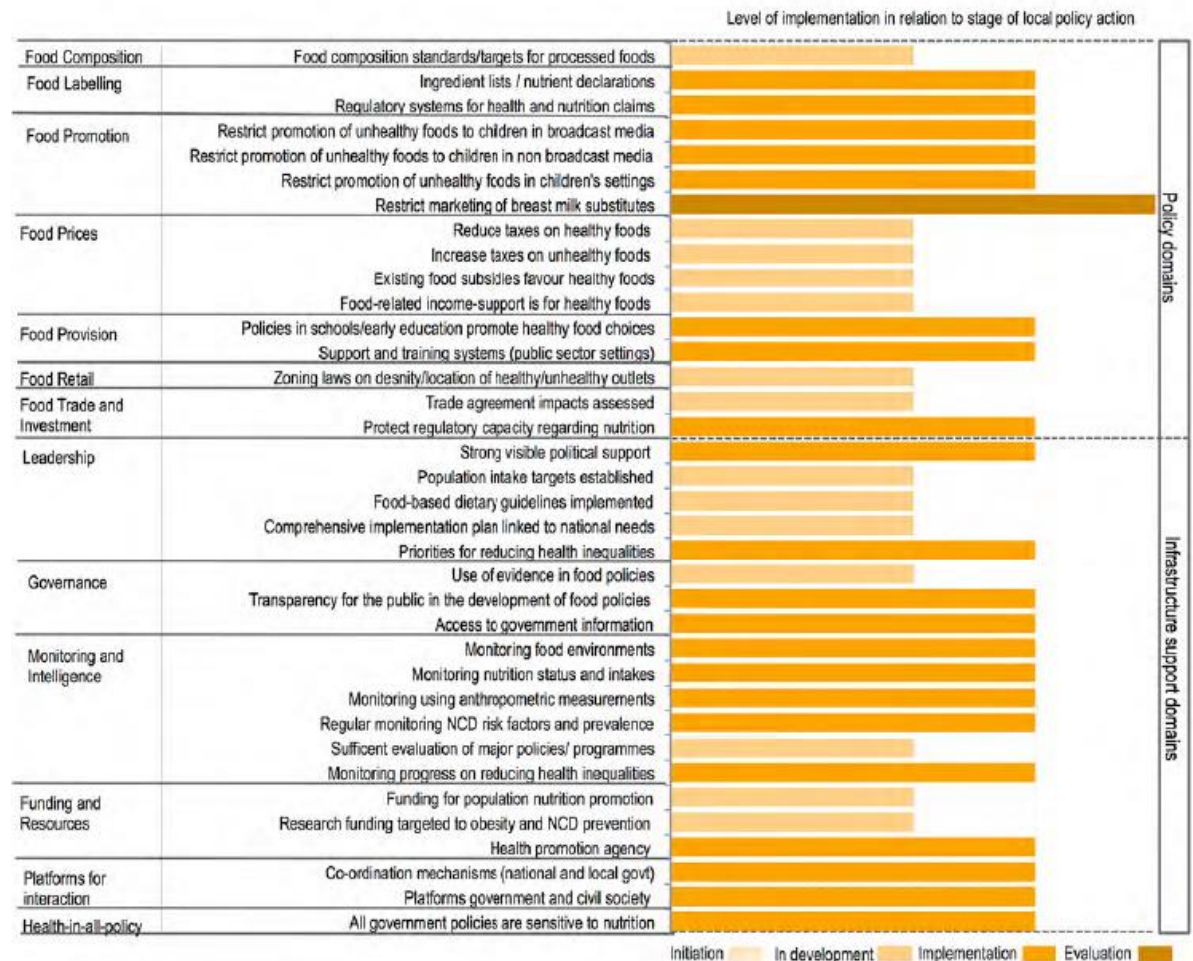
Important for experts to give credit to government where credit due  
(experts can sometimes be harsh)

Ratings afterwards collapsed into 4 categories ('very little if any', 'low', 'medium' and 'high' implementation) for dissemination purposes

# Rating process: additional step Ghana/Kenya

Rating according to policy cycle:

- 1 Initiation
- 2 In development
- 3 Implementation
- 4 Evaluation



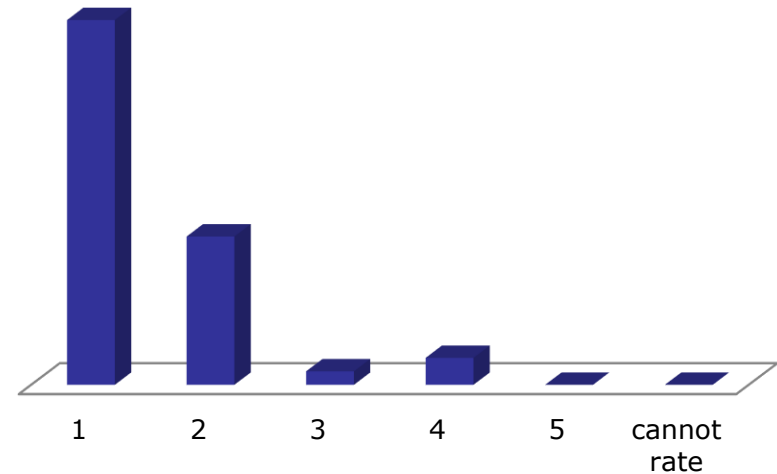


# Action identification process

Always workshop format, **NEVER ONLINE**

Implementation gaps presented back to experts

Median rating for indicator: 1



Actions to be proposed for all or selection of indicators

“Proposed actions” can be prepared to stimulate discussion

Only actions with support from majority of experts to be put on the list

Good facilitator is crucial!

# Prioritization process

- Workshop and/or online format; done individually
- Ranking or distribution of points across proposed actions
- Separately for policies and infrastructure support
- Senegal: **additional criterion for double burden of malnutrition**

Importance	Achievability
<b>Need</b> The size of the implementation gap	<b>Feasibility</b> How easy or hard the action is to implement
<b>Impact</b> The effectiveness of the action on improving food environments and diets (including reach and effect size)	<b>Acceptability</b> The level of support from key stakeholders including government, the public, public health, and industry
<b>Equity</b> Progressive / regressive effects on reducing food/diet-related health inequalities	<b>Affordability</b> The cost of implementing the action
<b>Other positive effects</b> (e.g., on protecting rights of children and consumers)	<b>Efficiency</b> The cost-effectiveness of the action
<b>Other negative effects</b> (e.g., regressive effects on household income, infringement of personal liberties)	

# Analysis

- Full scorecard with indicators (4 levels of implementation (VERY LITTLE IF ANY, LOW, MEDIAN, HIGH implementation))
- Inter-rater reliability (Gwet AC<sub>2</sub>); level of agreement among experts

## AgreeStat 2013.1

### WEIGHTED COEFFICIENTS

METHOD	Coefficient	Inference/Subjects			Inference/Subjects & Raters		
		StdErr	95% C.I.	p-Value	StdErr	95% C.I.	p-Value
Conger's Kappa	0.71939	0.00000	0.719 to 0.719	n/a	0.01259	0.695 to 0.744	0.000E+00
Gwet's AC <sub>2</sub>	0.80743	0.00000	0.807 to 0.807	n/a	0.00956	0.789 to 0.826	0.000E+00
Fleiss' Kappa	0.72033	0.00000	0.72 to 0.72	n/a	0.01242	0.696 to 0.745	0.000E+00
Krippendorff's Alpha	0.72038	0.00000	0.72 to 0.72	n/a	0.01254	0.696 to 0.745	0.000E+00
Brenann-Prediger	0.78492	0.00000	0.785 to 0.785	n/a	0.01039	0.765 to 0.805	0.000E+00
Percent Agreement	0.94623	0.00000	0.946 to 0.946	n/a	0.00260	0.941 to 0.951	0.000E+00

- Composite Food-EPI score (less relevant at country level; relevant for comparing countries/jurisdictions)

# Analysis

Display of all actions and selection of priorities for policies and infrastructure support separately

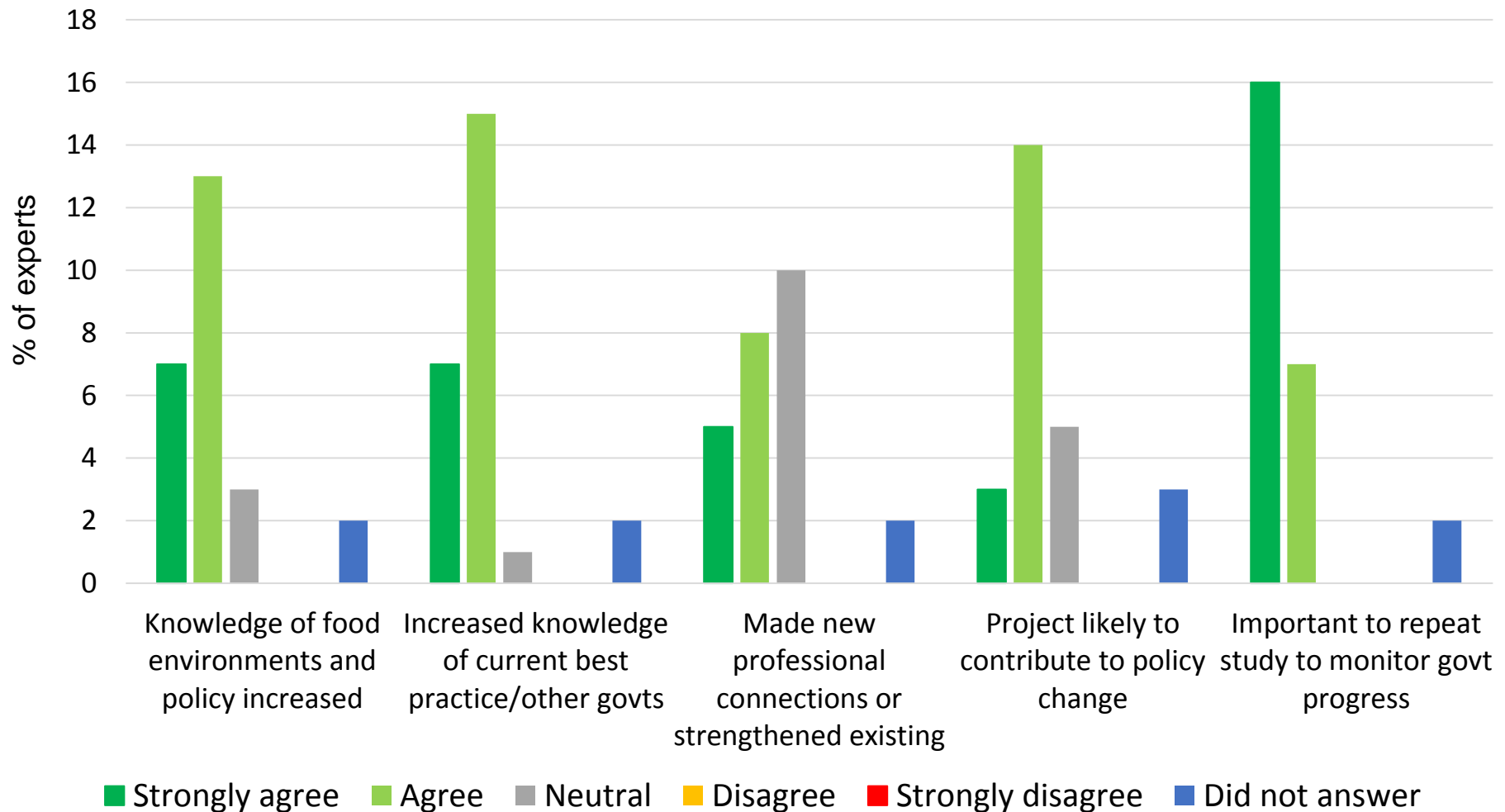


# Analysis



Mapping actors to implement the proposed priority policies:  
Government entities  
+ supporting government entities

# Analysis



# Dissemination

Scorecard

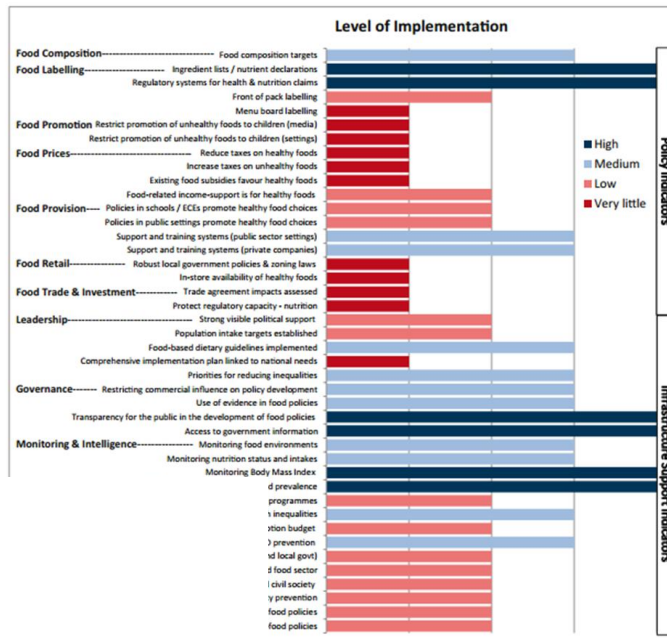
List of top priorities

Report

Flyers

Media

Figure 3: Level of implementation of food environment policies and infrastructure support by the New Zealand Government



# Strengths of the process

## General comments

The process is important and should be the main reason for countries implementing the Food-EPI

Degree of engagement by experts, getting valuable input from them; knowing that they got something out of the process

Having a wide network of people involved in the process

Liaison with policymakers

The existence of a baseline Food EPI means that it is possible to re-apply Food EPI in the future to measure progress over time and compared to other countries

Food-EPI process is not only an opportunity to focus on the gaps in the implementation of policies but also to network and learn about different aspects of the food environment and international best practice (capacity building)

## Rating process

Use of an evidence document to support the ratings

Inclusion of rigorous process to perform the ratings

## Prioritization process

The inclusion of a priority setting step in the process is really valuable

The outcome of the Food EPI process is a set of actions that can be used to bring together diverse groups around a common set of advocacy messages.



# Challenges/limitations of the process

## General comments

Time involvement is considerable for experts, government and researchers

Although engagement with policymakers was a strength, they can be risk averse in different steps of the process. They needed sign off from a lot of people higher up before releasing the evidence documents. They checked the wording of everything and there were a lot of phone calls needed to get it right.

## Evidence compilation

This step takes the most time and is usually underestimated. It is important to give lots of time to policymakers and allow for 3-4 rounds of feedback.

## Rating process

The rating process is time consuming and repetitive

It is challenging to rate the combination of extent of implementation and the quality of a policy at the same time

The collective nature of the rating exercise may lead to a negative 'herd mentality'. Collective scoring may lead to lower scores.

Some experts felt uncomfortable to rate if they weren't expert on certain domains, even with the use of the evidence document

The presence of policymakers in the room influenced the discussion and ratings in some of the workshops.

Rating against benchmarks is challenging if the benchmark is not aspirational or does not cover all aspects of the good practice indicator

## Actions

There is a risk to run out of time to do this part properly during the one-day workshop. Wording and refining of the recommendations can take time. Need to make sure to allow sufficient time for this to do justice to the actions.

# Innovations to the Food-EPI process

- Self-assessment by government actors in several countries (Thailand, Mexico, New Zealand, Malaysia)
- Consensus workshop/meeting on prioritized actions with state and non-state actors (Thailand)
- Taking into account the double burden of malnutrition in the prioritization of actions (Senegal)
- Using Food-EPI results as a situation analysis for the preparation of Food-Based Dietary Guidelines (Senegal)
- Regional capacity building (Latin American countries, West African countries, Europe)
- Applying the Food-EPI at the state/federal levels (Canada, Australia)
- Applying the Food-EPI at the local/city levels (Canada)

# ADAPTATION OF TOOL AND PROCESS FOR CAPTURING DOUBLE BURDEN OF MALNUTRITION: FIRST CONSIDERATIONS



**FOOD  
EPI**

# Compilation of existing recommendations

Document	year	Title	Author
Report	2017	Nutrition and food systems. A report by the High Level Panel of Experts on Food Security and Nutrition of the Committee on World Food Security, Rome.	High Level Panel of Experts on Food Security and Nutrition
Guidelines	2019	Sustainable Healthy Diets: Guiding Principles	FAO / WHO
Report	2019	The Lancet Commission Global Syndemic report	Lancet Commission on Obesity/Global Syndemic Commission
Report	2019	Protecting Children's Right to a Healthy Food Environment	UNICEF
Report	2019	Monitoring Framework Indicators	Milan Urban Food Policy Pact
Paper	2019	Double-duty actions: seizing programme and policy opportunities to address malnutrition in all its forms	Hawkes et al
Guidelines	2020	Committee on World Food Security Voluntary Guidelines on Food Systems and Nutrition (VGFSyN) – Draft report (not yet published), informed by HLPE 2017	Committee on World Food Security

# General considerations

- I. Process for development/adaptation of index (systematic review/Delphi study)
- II. Instrument should not become too long/extensive, there are already a large number of indicators included in existing Food-EPI
- III. Evidence collection and benchmarks will be needed for new/adapted indicators as well
- IV. Keeping comparability with previous and ongoing Food-EPI assessments
- V. Allowing the prioritization of **double duty** actions

# Specific considerations

- Keep focus on the food environment, indicators related to maternal nutrition and antenatal care programmes out of scope?
- Some indicators are already integrated (covering the double burden of malnutrition, such as school food standards) while others are more specific to reducing obesity/NCDs (i.e. food labeling, taxes)
- Some existing Food-EPI indicators, in particular those related to infrastructure support, can be either kept or quite readily be reworded to capture the double burden of malnutrition, but then comparability with earlier Food-EPI assessments will be more difficult?

# Specific considerations

- Some new Food-EPI domains may be needed like promotion of breastfeeding and adequate complementary feeding or try to fit within existing Food-EPI domains (marketing, provision)
- Empowerment of women or actions on food supply chains (i.e. including reducing food loss and waste) could also be relevant for reducing undernutrition. Food supply chains/food production are currently not part of the existing Food-EPI
- Discussion on way forward to make the adaptations and work and consultations, Delphi process needed

# OTHER FUTURE DEVELOPMENTS





# Future developments



- Increasing the number of countries implementing the Food-EPI
- Stimulating repeated assessments
- Evaluation of the process and impact of Food-EPI
- Index capturing double burden of malnutrition in African countries and other LMIC
- Index for sustainable food systems: Development and pilot testing
- Application of the Food-EPI at the city/local level, in particular when including sustainability

# Q&A



Contact:

[stefanie.vandevijvere@sciensano.be](mailto:stefanie.vandevijvere@sciensano.be)

: @svandevijvere  
@\_INFORMAS  
@food\_epi