

Topic Overview

Improving the Healthiness of Food Environments in the Caribbean

Stakeholder Dialogue June 22, 2016

The Caribbean Public Health Agency convened a stakeholder dialogue on the subject of improving the healthiness of food environments in the Caribbean. With support from the Pan American Health Organization, the dialogue brought together 20 participants—ten policymakers/advisors, two researchers and eight stakeholders from academia, civil society, government, and the private sector.

Deliberation about the problem

The participants agreed that non-communicable disease was a major health problem in the Caribbean and that complex environmental factors worked together to influence unhealthy dietary choices. Some of the key issues contributing to the problem were identified to be: the inability of countries to exercise sovereignty over their food supply; high importation of nutritionally poor foods; economic and health policies that conflicted with each other; relentless food advertising and promotion; a changing food-related culture among the Caribbean people; insufficient nutrition awareness; and the absence of legislation, to provide a uniform framework for the application of regulatory measures. Participants also agreed that a range of evidence-based policy options was available to tackle the various issues, however, Caribbean Governments faced constraints with respect to implementation, and these constraints arose largely due to difficulties in achieving a whole-of-government response; the limited engagement of all-of-society; and weaknesses in the legislative development process.



Stakeholders from agriculture, trade, health, civil society, the food and beverage industry, the legal profession, research organizations and CARICOM gather during the Caribbean Public Health Agency event on 22 June 2016 in the Turks and Caicos Islands

Deliberation about an approach

Participants agreed that inter-sectoral governance mechanisms were needed to support efforts at whole-of government action. They noted that a lack of understanding of the whole-of-government concept, conflict between political groups, and government ministries that were not configured to support inter-sectoral work were often constraints. They identified three factors that were critical to the success of multi-sectoral arrangements: 1) full engagement of the political leadership, such as the Head of Government or a lead Minister; 2) clarification of implementation process requirements; and 3) implementation of systems to monitor and evaluate success. To promote fuller engagement of civil society organizations, the food industry and citizens, in the policy and law-making process, it was suggested that alliances between health-related and non-health related non-governmental organizations should be built; influential individuals or organizations should be engaged to act as champions; and messages should be created to motivate various types of stakeholders and audiences. The importance of legislative drafters having a sound understanding of the underlying policy context was stressed as was the need for good policy data to support decision-making. Nevertheless, participants pointed out that conflicts of interest at the political level were often a risk to the implementation of well-developed policies. Participants also recommended that children's rights to health should be emphasized in the food and nutrition discourse.

Deliberation about next steps

Ten priorities for action or acceleration were identified. 1) Hold a joint-meeting of regional economic and social sector institutions, towards in-country implementation; 2) Develop national Food-based Dietary Guidelines and collaborate with the private sector to promote them; 3) Implement consumer-friendly graphic nutrition labels for use on all packaged products; 4) Form alliances of health and non-health NGOs within countries; 5) Develop workplace wellness programs; 6) Develop a business case, targeted to politicians, for implementation of policy actions to address unhealthy food environments; 7) Create Working Groups to identify the requirements for implementation of the policy measures outlined in each of the seven domains in the evidence brief. One Working Group should explore legal requirements; 8) Commission studies to provide guidance about the type and level of taxes needed to create consumption (demand) and production (supply) incentives or disincentives for healthy and unhealthy foods; 9) Share promising food and nutrition programs and practices in the region; 10) Share the lessons learnt from the stakeholder dialogue with individuals who can instigate

Dialogue deliverables

To learn more about this topic, consult the [evidence brief](#) that was presented to participants before the dialogue, and the [summary](#) of the dialogue. For an electronic copy of the evidence brief or dialogue summary, visit our website <http://carpha.org/>



CARPHA Headquarters
Caribbean Public Health Agency
16-18 Jamaica Boulevard,
Federation Park
Port of Spain, TRINIDAD & TOBAGO
Tel: 868 622-4261 | Fax: 868 622-2792
Website: www.carpha.org

Click the icons below to connect with CARPHA on social media

