5.2 Government-led reformulation of packaged food products to reduce sodium and sugar and eliminate industrial produced trans fatty acids

What problem is your proposition addressing?

The retail food sector has seen dramatic growth over the last 2-3 decades, particularly in Latin America and Asia, with more recent growth observed in Sub-Saharan Africa. With this expansion comes an increase in the purchase and consumption of packaged and processed/ultra-processed foods, which are frequently high in sodium, sugar, and trans-fat. The widespread availability of these products has contributed to a nutrition transition for many countries, particularly in low- and middle-income countries, from undernutrition to overweight and obesity, as well as increased diet-related noncommunicable diseases, such as cardiovascular disease, diabetes, and cancers. Unhealthy diets now contribute to almost 8 million deaths each year (GBD 2019). Diets high in sodium, trans fat, and sugar-sweetened beverages and diets low in fresh or minimally processed foods such as vegetables, fruits, legumes, and whole grains contribute significantly to this burden. High sodium consumption alone leads to nearly 1.9 million deaths each year. Policy interventions are needed to curb the rising health burden and premature mortality caused by increasing processed food consumption.

How does your proposition address the problem?

As availability and consumption of packaged and processed/ultra-processed foods increase, governments have an opportunity and responsibility to ensure that consumers have access to a healthy diet. Government-led reformulation of packaged food allows governments to set targets for key categories of packaged food to limit the amount of nutrients, such as sodium, sugars, and trans-fat, permitted in packaged food products. This strategy changes the packaged food environment without requiring consumer action or even knowledge, thus making healthier choices the default. While mandatory targets are preferred, many countries have set voluntary targets as well.

Packaged food targets have most commonly been set for sodium. As of 2019, 57 countries had set limits for sodium in at least one key packaged food category. Only nine countries have set mandatory targets for multiple categories, demonstrating a need for further action in this area. The World Health Organization recently released global sodium benchmarks for different categories of packaged foods in May 2021 to guide countries and industry in implementing best practice sodium targets. The Pan American Health Organization will similarly release updated regional sodium targets for packaged foods in 2021.

Targets have also been set to reduce sugar in packaged foods by a smaller number of countries. For example, the UK set voluntary targets in 2016 to reduce the overall sugar content of the food products that contribute the most sugar to children's intakes by 20% by 2020, and the National Salt and Sugar Reduction Initiative in the United States released revised voluntary targets for sugar in 2021 to promote gradual, achievable, and meaningful reductions in sugar content in packaged foods and beverages.

Mandatory limits on industrially produced trans-fat to 2 grams per 100 grams of total fat in all foods (including packaged foods), is a global best practice and has been adopted by over 40 countries globally and is in line with government-led packaged food reformulation.

Is this a new solution or an existing solution that needs scaling?
This is an existing solution that needs scaling.

Which organisation/s, institution/s or groups of individuals are associated with the solution?
World Health Organization (WHO) headquarters
Pan American Health Organization (PAHO)
Resolve to Save Lives, an initiative of Vital Strategies
World Action on Salt, Sugar, and Health (WASSH)
The George Institute for Global Health

What is the scientific evidence that supports your proposition?
There is strong evidence that comprehensive target setting for categories of packaged foods effectively reduces the sodium content in processed foods. Forty-one countries have set voluntary or mandatory targets for packaged food, with many reporting reductions in salt levels in a variety of product categories. For example, an evaluation in Argentina found that more than 90% of the products included in the law were found to be compliant. Further evidence demonstrates that target-setting can lead to meaningful reductions in sodium intake. For example, as a result of the voluntary targets set for 85 food categories by the United Kingdom in 2005, adults' salt intake decreased by approximately 15% between 2003 and 2011, with additional decreases in average blood pressure in the population and deaths from CVD.

Reformulation of processed food to contain less sugar has been implemented less frequently, but evidence from modeling studies supports the effectiveness of this strategy on achieving reductions in added sugar intake as well as population health benefits, such as reduced obesity and obesity related noncommunicable diseases.

Is this idea applicable to a particular geography, demography, landscape or other type of setting?
This idea is global in scope: All countries can benefit from setting targets for key categories of packaged food to limit the amount of sodium, sugars, and trans-fat permitted in packaged food products. Target setting is typically implemented at the national level, although regions may also set targets for packaged food, for example, as seen previously in the Americas region.

Who are the main actors that would put this action into place?
Policymakers (government)
Public Health Authorities
Private sector

Source and process
- Funke Ajenikoko, Laura Cobb, Nicole Ide, Lindsay Steele, Resolve to Save Lives, an initiative of Vital Strategies