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## Food policies: in times of COVID-19 and beyond

3 billion people were not able to afford a healthy diet before the COVID-19 pandemic and this number is estimated to rise by 267.6 million between 2020 and 2022 according to the 2021 Global Food Policy Report released by the International Food Policy Research Institute. The report details the severe health and economic effects that the COVID-19 pandemic has had on food systems and supply chains and provides key recommendations to help achieve healthy diets for all. With the rise in low quality, nutrition-deficient diets comes the inevitable increase in nutrition-related non-communicable diseases (NCDs), which were already at an unprecedented high before the pandemic.

NCDs, which include cardiovascular diseases, diabetes, and obesity are now the leading cause of death worldwide accounting for more than 70% of deaths. Obesity, malnutrition, and physical inactivity all increase the risk of dying from an NCD. Poor diet leading to undernutrition and stunting are also recognised risk factors for the development of obesity and other NCDs in later life.

COVID-19 has highlighted and strained our current flawed food systems and policies; however, the root cause has been years in the making. In the past few decades, the “nutrition transition”, a term coined almost 30 years ago by Barry M Popkin at the University of North Carolina, has led to an upsurge in cheap, ultra-processed foods that have become widely available at the same time as nutritious fresh food has become less accessible and affordable for many. In many low- and middle-income countries (LMICs) a modernisation of food processing and distribution has meant that foods high in sugar, salt, saturated fats, and refined grains have become increasingly popular. This transition is reflected in obesity levels, especially child and adolescent obesity, which in the past four decades have seen a ten-fold rise. It is also seen in increased undernutrition as infants and preschoolers are increasingly fed the same ultra-processed foods.

The Global Food Policy report also examines how food insecurity because of COVID-19 has caused detrimental health consequences. Many LMICs rely heavily on jobs in farming but lockdown conditions have contributed

to increased job insecurity, which in turn has led to food waste and decreased stocks of perishable nutritious food. This issue has coincided with a reduced demand for fresh, healthy food as many could no longer afford healthy food options. In addition, many LMICs began stocking up on non-perishable, relatively cheap food due to lack of access to refrigerator facilities.

Food policy and its association with NCDs has long been a topic of discussion with many national, international, and collaborative initiatives being put in place. Four of the nine voluntary targets outlined in the WHO GAP for the Prevention and control of NCDs relate to nutrition. Policies such as the soft drinks industry levy in the UK or the WHO action framework for developing and implementing public food procurement and service policies for a healthy diet are steps in the right direction. However, in reality, the implementation of many healthy eating directives are subject to multiple bureaucracy and practical hurdles. In *The Lancet Diabetes & Endocrinology*, Barry M Popkin and colleagues discuss impactful policies that several countries have implemented in an effort to curb the rise in obesity and NCD prevalence. They highlight policies, such as a marketing ban of ultra-processed food from 6am to 10pm initiated by Chile and subsequently by the UK, which have been instrumental in many countries in reducing the health burden. However, governments cannot work alone and to tackle the issue properly, a multisector response is needed. In particular, the food industry must be conducive and not a hindrance in global efforts to reduce poor nutrition.

Many corporations whose products contribute to the prevalence of NCDs have exploited the pandemic for their own profit and used it to create a public image of conscious corporate citizens. As Martin McKee and colleagues wrote earlier this year in *The Lancet Diabetes & Endocrinology*, we must “challenge all commercial interests that undermine our efforts to build a fairer and healthier world”.

If governments, food companies, and the public do not prioritise healthy diets and wellbeing with impactful policies, we risk not only losing decades of progress but also a substantial increase in NCDs that will be a major threat to population health.

■ *The Lancet Diabetes & Endocrinology*



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For more on the **2021 Global Food Policy Report** see <https://gfpr.ifpri.info/2021/04/10/nutrition-transforming-food-systems-to-achieve-healthy-diets-for-all/>

For more on **non-communicable diseases** see <https://www.who.int/news-room/fact-sheets/detail/noncommunicable-diseases>

For more on the **nutrition transition** see <https://academic.oup.com/nutritionreviews/article/70/1/3/1829225>

For more on the **WHO Global Action Plan for the Prevention and Control of NCDs 2013–2020** see <https://www.who.int/publications/i/item/9789241506236>

For more on the **WHO action framework** see <https://www.who.int/publications/i/item/9789240018341>

For the **Popkin and colleagues Personal View on food policies** see *Lancet Diabetes Endocrinol* 2021; published online April 15. [https://doi.org/10.1016/S2213-8587\(21\)00078-4](https://doi.org/10.1016/S2213-8587(21)00078-4)

For more on **industry practices during the pandemic** see **Comment**

*Lancet Diabetes Endocrinol* 2021; 9: 61–63