

HPA AND CSO PARTNERS' POSITION PAPER ON THE PROPOSED PHILIPPINE NUTRIENT PROFILE MODEL

The Healthy Philippines Alliance (HPA), a coalition of Civil Society Organizations (CSOs) fighting non-communicable diseases (NCD) prevalence in the Philippines, along with SocialWatch Philippines, a network of CSOs advocating for pro-poor budgeting and the Philippine Legislators Committee on Population and Development - Child Rights Network (PLCPD-CRN), the largest alliance advocating for children's rights legislation, respectfully manifest our position to the National Nutrition Council (NNC) on the adoption of a Philippine Nutrition Profile Model (NPM).

The HPA and CSO partners strongly support the adoption of the Pan American Health Organization-World Health Organization (PAHO-WHO) NMP for implementation in the Philippines. Recognized as global best practice, the PAHO Model is based on WHO recommended intake limit of nutrients/ingredients of concern and aligns well with our objective to prevent and control NCD prevalence in the country.

However, as representatives of a broad CSO network, we are opposed to any proposal that will diminish the PAHO Model for Philippine adaptation. We reject proposals to exempt certain food and/or beverage groups or to lower the thresholds for critical nutrients and ingredients associated with NCDs. This coalition will not endorse an NPM that undermines, weakens or impairs the right to health of Filipinos or a model that will defeat the very purpose of having a nutrition profile model in the country.

Why should we be worried about NCDs?

NCD incidence in the Philippines is rising at a very alarming rate. By 2040, it is estimated that NCD prevalence will double in number if no pivotal action is taken according to Philippine Institute of Development Studies (PIDS).

The International Diabetes Federation (IDF), based on institutional data alone, reported that in 2021, 4.3 million Filipino adults are living with diabetes or 7.5% of our adult population.¹ This figure is estimated to increase to 5.4 million by 2030 and potentially reach 7.5 million by 2045. In 2021, IDF also recorded 2,200 children (0-14) and 3,900 (15-19) adolescents who are living with type-1 diabetes. ²

Similarly, chronic kidney disease (CKD) in the Philippines is experiencing a surge, hence the abrupt increase in clinical support nationwide. The Philippine Society of Nephrology (PSN) reported that approximately 1 Filipino every hour is developing kidney failure. Data from Lancet (2023) revealed a prevalence rate of 35.94% in the Philippines, surpassing the global prevalence rate of 9.1 to 13.4%.³ Despite the high prevalence rate, the PSN remains concerned over underdiagnosis.

WHO reported that cardiovascular diseases accounted a third of deaths in the country in 2022. ⁴ The Philippine Heart Association (PHA) has observed significant increase in hypertension prevalence from

22% in 1990's to 37% in 2021 and a concerning level of unawareness of individuals affected by hypertension. The PHA continues to monitor hypertension in the Philippines because it is a common risk factor or comorbidity of Filipinos who are hospitalized due to various cardiovascular diseases.⁵ An estimated 1.89 million deaths each year are associated with consuming too much sodium, a well-established cause of raised blood pressure and increased risk of cardiovascular disease. ⁶

Research from the Philippine General Hospital Medical Oncology Division has identified colorectal cancer (CRC) as the third most common malignancy affecting Filipinos, following breast and lung cancer. In 2020, CRC accounted for 9,091 cancer-related deaths, ranking fourth in the Philippines. CRC cases has escalated from 5,787 cases in 2010 to 9,625 cases in 2015.

The Food Nutrition Research Institute (FNRI) has raised concerns about the increasing prevalence of overweight and obesity among adolescents, which rose from 11.6% in 2018 to 13% in 2021.9 FNRI's 2021 Expanded National Nutrition Survey (ENNS) revealed that 3.9% of children under five years old, 14.0% of those aged 5-10 years old, and 13.0% of adolescents aged 10 to 19 years old are either overweight or obese. Additionally, the survey shows that 40.2% of adults and 31.6% of the elderly are overweight or obese. Obesity substantially raises the likelihood of developing a range of chronic conditions, such as cardiovascular disease, type 2 diabetes, hypertension, cancer, osteoarthritis, sleep apnea, reduced quality of life, physical limitations, mental health issues, social stigma and increased healthcare costs. 11

Ultra-processed food (UPF) consumption has been associated with various NCDs. WHO, in a multinational study, declared that a higher consumption of UPF is linked to a higher risk of multimorbidity or combined chronic diseases like cancer, diabetes and heart diseases. ^{12, 13} Moreover, according to the National Kidney Foundation, UPF consumption poses a significant risk for developing CKD. In a longitudinal study tracking 14,000 individuals over 24 years (median follow up), 24% of those with the highest UPF consumption developed CKD. Furthermore, research consistently demonstrates that high consumption of ultra-processed foods increases the risk of developing breast cancer, colorectal cancer as well as other types of cancer. ¹⁴

Among vulnerable and marginalized communities in the country, PIDS has observed an increasing trend in NCD burden. "Mortality data from the Philippine Statistics Authority suggests that NCDs are increasing at a faster rate in poor communities," which will greatly impact government's poverty reduction efforts, according to PIDS.¹⁵ Rapid urbanization in the Philippines is linked to growing risk factors for NCDs particularly unhealthy eating patterns. While ultra-processed foods have become readily available, accessible and affordable to Filipinos, this dietary trend can exacerbate poverty with increased NCD burden. UPF consumption can lead to NCDs that can further push poor Filipino families to extreme poverty.

Common ultra processed products are carbonated soft drinks and energy drinks; instant noodles and powdered and packaged instant soups; instant coffee mixes, powdered milk and baby formula; margarine and other spreads; mass produced breads/buns; packaged snacks, sweets/candies, cookies, pastries, cakes and cake mixes; breakfast cereals; pre-prepared meat, cheese, pasta and pizza dishes; chicken/fish nuggets/sticks, sausages, burgers, hot dogs and other reconstituted meat products; and many others. ¹⁶

Meanwhile, the 2023 Brand Footprint Report identified the top five fast-selling products/brands in the Philippines as instant noodles, 3-in-1 coffee mixes, and soft drinks. ^{17, 18} After tracking household spending, it was found that market penetration of a top brand of instant noodles was high, reaching 98.8% of local households or an equivalent to 27.4 million shoppers. Additionally, the report noted an observed growth in 57% of small brands (reaching less than 10% of Filipino shoppers).

UNICEF has sounded the alarm bells that children and the youth are being targeted by ultraprocessed food companies as their growing customer base according to Euromonitor International. Marketing strategies that appeal to young people have become pervasive. Consequently, "diets dominated by highly processed foods are driving the rise in childhood overweight and obesity in the country, with 1 in 10 children aged 11-19 years considered obese or overweight" according to UNICEF. ¹⁹

Addressing the NCD problem through the Philippine Nutrient Profile Model

As advocated by the WHO, reducing sodium intake through front-of-pack labeling and product reformulation; reducing sugar consumption by raising taxes on sugar sweetened beverages; and eliminating industrial trans fats and replacing saturated fats with unsaturated fats ^{20,21,22} are among the best buys for promoting a healthy diet to prevent/control NCDs. Foods that are ultra-processed often contain excessive amounts of these nutrients and can present health risks to Filipinos, especially to our children who are heavily targeted by advertisements from the food and beverage industry. However, at present, there is no existing adequate mechanism or tool providing a scientific and evidence-based information warning Filipinos on the threshold of nutrients, the excessive consumption of which poses health harms. The Philippine adaptation of the PAHO NPM, designed to identify unhealthy products, is a first critical step toward this direction.

The Philippines should adopt the PAHO NPM in order to curb NCD prevalence in the country. The Philippine NPM must ensure that:

- 1. The model limits nutrients and ingredients of concern in accordance with WHO recommendations, ensuring a scientific and evidence-based criteria. Like the PAHO Model, it should identify the specific nutrients and ingredients associated with NCDs, such as sodium, sugar, saturated fats, trans fatty acids and non-sugar sweeteners (NSSs), and established a threshold for each in order to limit intake and prevent health harm.
- 2. The model covers the general population for NCD prevention and control across age groups.
- 3. The model adopts a single category, similar to the PAHO Model, that applies to both solid and liquid products. Food categories must be limited to a maximum of two (solid and liquid) for ease of implementation. Multiple categories would complicate enforcement and render it ineffective.
- 4. The model does not include nutrients that encourage consumption to avoid confusing consumers with conflicting information. Including nutrients that encourage consumption would defeat the purpose of encouraging the industry to reformulate their products to acceptable nutrient levels.

The NPM, as agreed during the earlier public consultation, is intended as basis for the following food regulatory strategies, among others, in order to alter the unhealthy eating patterns of Filipinos:

- a. Regulation of food marketing;
- b. Front-of-pack labeling (FOPL);
- c. Taxation;
- d. Food for distribution in emergencies;
- e. Food for feeding programs;
- f. Food for school canteen and workplace; and
- g. Reformulation except for foods intended for 0-35 months children.

Studies have highlighted how food companies attempt to delay, prevent or water-down globally recommended food and nutrition policies. Therefore, we urge that the Philippine NPM be grounded in scientific principles, free from conflict of interest, and designed to effectively safeguard public health. It is crucial to ensure that the NPM adopted by the Philippines establishes scientific standards for future food regulatory measures.

We commend the Department of Education (DepEd) for its efforts to regulate school children's access to unhealthy products, and we anticipate that the adoption of the PAHO Model in the Philippines will further empower DepEd to improve school food environment. As our children remain vulnerable to food marketing, ²³ may this pave the way for policies that will further protect our children.

We trust that our esteemed Department Secretaries and Members of the NNC Governing Board, supported by the capable leadership of Assistant Secretary Azucena Dayanghirang and the NNC Secretariat, will ensure that the Philippine NPM fulfills its intended purpose by being scientific and unaffected by commercial interests. We hope that the NNC Governing Board will approve an NPM that will lead to an enhanced food environment in the Philippines, particularly benefitting Filipino children and youth. As foundation for food policy, the NPM should shift the consumption of unhealthy products to natural, fresh foods in order to promote healthier diets among Filipinos, irrespective of socio-economic status. With an increased demand for healthier food, we believe that market forces will eventually enable accessibility, availability and affordability of natural foods, particularly for the marginalized sectors of our society.

Recommendation

Together with PLCPD-Child Rights Network, SocialWatch Philippines and other CSO partners, the Healthy Philippines Alliance stand firm for the health and well-being of Filipinos and, therefore, strongly support the adoption of a Philippine Nutrient Profile Model that upholds public health interest over and above any other interest.

Healthy Philippines Alliance (HPA)

- Alliance for Improving Health Outcomes (AIHO)
- Anxiety and Depression Support Group Baguio Youth Advocates
- Asian Medical Students Association Philippines (AMSA-Phil)
- Cancer Coalition Philippines
- Cancer Warriors Foundation
- Center for Policy Studies and Advocacy on Sustainable Development (The Policy Center)
- Diabetes Philippines (DP)
- Dialysis PH Support Group, Inc.
- Health Futures Foundation, Inc. (HFI)
- HealthJustice Philippines (HJ)
- Medical Action Group (MAG)
- New Vois Association of the Philippines, Inc. (NVAP)
- Philippine Cancer Society, Inc. (PCSI)
- Philippine Alliance of Patient Organizations (PAPO)
- Psoriasis Philippines (PsorPhil)
- Rheumatology Educational Trust Foundation Inc. (RETFI)/ Lupus Inspired Advocacy (LUISA)
- World Association for Psychosocial Rehabilitation Philippines (WAPR-Phil)
- Youth for Mental Health Coalition Inc. (Y4MH)
- #MentalHealthPH (MHPh)

Philippine Legislators' Committee on Population and Development (PLCPD) and Child Rights Network (CRN)

SocialWatch Philippines

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² IDF Diabetes Atlas (2021). Philippines Diabetes Report (2000-2040). https://diabetesatlas.org/data/en/country/157/ph.html

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