

## Policy Brief on Progressively Eliminating Unhealthy Food Subsidies

Hard evidence from scientific research and credible institutions such as World Health Organization (WHO)<sup>1</sup>, suggests that inappropriate and unhealthy dietary risk factors and practices such as higher levels of added sugars and sugary drinks, refined wheat flour, sodium, and oils and fats (specially with higher than 2% of industrially produced trans fatty acids) are responsible for increasing rates of overweight and obesity, non-communicable diseases (NCDs) such as diabetes, hypertension, cardiovascular diseases (CVDs), cancers, and other chronic diseases in Pakistani population.

### The Rapid and Alarming Spread of NCDs in Pakistan

The overweight, obesity and diet related NCDs are on the rise in Pakistan. The National Nutrition Survey 2018 confirmed the prevalence of overweight among children under five has almost doubled from 2011 to 2018. Similarly, obesity and overweight increased in women of reproductive age from 28% to 38% from 2011 to 2018. According to the NCDs STEPS Survey 2014-2015, more than four out of ten adults (41.3%) were obese or overweight, while 37% had hypertension. The cardiovascular diseases stand among the top killers of Pakistanis with 29% contribution in the total NCDs related deaths in the country (WHO 2016). According to the 10<sup>th</sup> edition of International Diabetes Federation<sup>2</sup> (IDF) 2021 Diabetes Atlas, Pakistan has the 3<sup>rd</sup> highest burden of type 2 diabetes worldwide with more than 33 million cases with additional 10 million termed as pre diabetic.

These unhealthy conditions of the Pakistani population are being manifested in causes of mostly premature deaths. It is estimated that around 6/10 deaths are contributed by NCDs (WHO, 2016), and 3/10 deaths are contributed by CVDs (WHO 2016);

Such high prevalence rates of these conditions and the heavy burden of disease, disability and deaths they can cause threaten to generate a devastating financial burden for the country, overwhelming health services and undermining its economic and social well-being. Urgent action is therefore needed to tackle this alarming and escalating problem.

If no immediate policy action taken, number of people living with diabetes will reach to 62 million by 2045. The IDF estimated \$2640 million as expenditure of diabetes in 2021 in Pakistan. In 2015, the annual cost of obesity was estimated to be PKRs 428 billion by Pakistan Institute of Development Economics.

### Utility Stores Corporation

The Federal government is supplying food basket to vulnerable population through Utility Stores Corporation of Pakistan on subsidized rates. The basket includes Vanaspati Ghee and Sugar. The Vanaspati Ghee often contains high amount of industrially produced Trans fatty acids (iTFA) and high amount of saturated fats which are harmful for the public health and cause several chronic diseases. Similarly, World Health Organization's guidelines recommend that adults and children should reduce their daily intake of free sugars to less than 10% of their total energy intake. A further reduction to below 5% per day would provide additional health benefits<sup>3</sup>.

<sup>1</sup> [https://iris.who.int/bitstream/handle/10665/259519/emropub\\_2017\\_20141.pdf?sequence=1](https://iris.who.int/bitstream/handle/10665/259519/emropub_2017_20141.pdf?sequence=1)

<sup>2</sup> <https://diabetesatlas.org/data/en/country/150/pk.html>

<sup>3</sup> <https://www.who.int/news/item/04-03-2015-who-calls-on-countries-to-reduce-sugars-intake-among-adults-and-children>

In the light of the above-mentioned scientific evidence, it is recommended that the Ministry of Industries along with other government departments may like to take the following policy measures:

**Fiscal Measures:**

- Progressively eliminate subsidies for all types of fats/ oils and sugar, and subsidize only healthy foods like fruits, vegetables, lentils, legumes, rice, and whole grain flour that prevent diet related risk factors of chronic diseases and have better nutritional value.

**Public Procurement Measures:**

- Ensure procurement and provision of healthy food in public institutions (e.g. schools, hospitals, military bases, prisons, and other government institutions).

**Surveillance Measures:**

- Strengthen human, logistic and institutional capacity for surveillance, monitoring and evaluation of food items produced by the industry to facilitate compliance with health standards.