
Food Revolution Day: Sugary drinks for babies & toddlers: a formula for overweight & obesity

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To mark Food Revolution Day, we have joined the campaign with a new blog for the Food Revolution website. Read below about the importance of promoting breastfeeding as a SMART nutrition policy which can address malnutrition written by Alena Matzke, Advocacy Manager with NCD Alliance and Simone Bösch of [WCRF International](#) [1].

Momentum to address the global epidemic of overweight & obesity and non-communicable diseases (NCDs) such as cancer, heart disease and type 2 diabetes is growing. In recent months, taxes on sugary drinks have made the headlines as these products significantly increase the risk of NCDs and overweight & obesity in both adults and children – a 12-ounce sugary drink (roughly the same as a can of regular coca cola) each day increases a child's risk of becoming obese by about 60 percent.

Globally, [41 million children](#) [2] under 5 are overweight or obese. This trend is rising, especially in low- and middle-income countries. In Africa alone the number of overweight and obese children has nearly doubled since 1990, increasing from 5.4 million to 10.3 million.

Infant milks and foods – less nutritious than you think

When we think of sugary drinks and snacks, most of us think of soda and chocolate bars. However, another line of products is causing growing concern – commercially-produced foods and beverages targeted toward infants and young children. These products, which include breast-milk substitutes, expensive toddler or “growing-up” milks and complementary foods, are marketed deceptively to convince parents that these products are as good as, or even better than, breast-milk. Yet the overwhelming majority of these products are unable to reproduce the unique components of breast-milk, such as important antibodies that fight off illness. Many commercially produced infant foods are also **high in sugar, fat, salt and [trans-fatty acids](#)** [3].

These products contribute to the rapid rise in childhood overweight & obesity and NCDs, such as type 2 diabetes, heart disease and some [cancers](#) [4] later in life. Additionally, inappropriate marketing practices negatively impact rates of breastfeeding, when it is recommended that children are [exclusively breastfed for a minimum of 6 months](#) [5].

Additional risks exist in low- and middle-income countries: powdered formula may be prepared using unsafe water or unsterilized equipment, and over-diluting formula to make supplies last longer can lead to a lack of appropriate nutrition. If formula becomes unavailable (e.g. because of shortness of supply), a return to breastfeeding is often not possible because the mother doesn't produce (sufficient) breast-milk anymore. Families around the world spend money on expensive formula and complementary foods that are nutritionally inferior and only needed when breastfeeding is not possible; money that could be used to cover other family needs. Yet infant milks continue to be [aggressively promoted](#) [6] in these settings – at the expense of children's health and families' welfare.

Only 38% of children exclusively breastfed

All of this contributes to [only 38% of children worldwide being exclusively breastfed](#) [7] for the first six months of their lives. The World Health Organization (WHO) estimates that [800,000 deaths](#) [7] (or 11.6% of under-5 deaths) could be prevented if all children aged 0-23 months were [optimally breastfed](#) [8].

Breastfeeding - the best start in life

Because breastfeeding has such a big impact on preventing both undernutrition and overweight & obesity, countries have committed to increase the number of babies exclusively breastfed during the first 6 months of life to at least [50% by 2025](#) [9]. This goal is important, because breastfeeding ensures that babies receive all the nutrients needed to grow and develop healthily, and protects against childhood obesity and NCDs. Government policies that protect and promote breastfeeding should be considered 'double-duty actions' - actions that have a positive impact on both undernutrition and overweight & obesity, and should be championed by governments and donors alike.

Corporate interest vs. children's health

However, this goal, as well as other nutrition targets, will likely be missed because countries are off-track in their efforts to ensure their citizens have access to healthy diets throughout life. To address this the WHO has developed a new 'Guidance Document' that will impact how foods and beverages for children up to age 3 can be marketed and sold. Sadly, some countries are being lobbied by industry groups to oppose the endorsement of the Guidance. This resistance is not surprising given the market for infant formula is worth approx. [\\$44.8 billion](#) [10] globally, with a quickly growing consumer base in Africa, Asia and the Middle-East.

We believe that children's health must be put above commercial interests. Governments should work harder to implement actions that fight both hunger and obesity ('double-duty actions'). That's why we are calling on governments to actively support the Guidance, and to endorse its implementation at the upcoming [World Health Assembly](#) [11] (WHA) in May in Geneva, where we are also co-hosting an event for governments with Jamie Oliver speaking about the importance of a healthy start in life.

What can you do?

If you want to know more about 'double-duty actions' and how we are encouraging governments to develop and implement these, you can read our new policy brief [Ambitious, SMART commitments to address NCDs, overweight & obesity](#) [12], which will be launched on 23 May 2016 at the WHA.

We have joined the Jamie Oliver's Food Revolution campaign, and you can be part of it as well by signing up to the Food Revolution [here](#) [13].

About the Authors:

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NCD Alliance and World Cancer Research Fund International collaborate to encourage governments to implement policies to improve NCD prevention worldwide.

This blog previously appeared on [Jamie's Food Revolution website](#) [18] and has been republished here in full.

While you are visiting the Food Revolution site, join us and [become a revolutionary](#) [19] yourself!

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Links

[1] <http://www.wcrf.org>

[2] http://www.unicef.org/media/files/JME_2015_edition_Sept_2015.pdf

[3] <http://www.nhs.uk/chq/Pages/2145.aspx?CategoryID=51>

[4] <http://www.wcrf.org/int/link-between-lifestyle-cancer-risk>

[5] http://www.who.int/nutrition/topics/exclusive_breastfeeding/en/

[6] http://apps.who.int/iris/bitstream/10665/206008/1/9789241565325_eng.pdf?ua=1&ua=1

[7] http://www.who.int/nutrition/global-target-2025/infographic_breastfeeding.pdf?ua=1

[8] <http://www.who.int/topics/breastfeeding/en/>

[9] http://apps.who.int/iris/bitstream/10665/149022/1/WHO_NMH_NHD_14.7_eng.pdf?ua=1

[10] http://www.who.int/nutrition/publications/infantfeeding/code_report2016/en/

[11] <http://www.who.int/mediacentre/events/governance/wha/en/>

[12] <http://www.wcrf.org/SMART>

[13] <https://signup.jamiesfoodrevolution.org/>

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