Learning Outcomes

- At the end of this session the participant will know how the rapid economic transition and multicultural factors impact diet, nutrition and health status in Latin American populations
  - Double burden of excess weight and undernutrition

- Will appreciate nutrition development in Latin America and successful experiences on public health interventions in the region.

Outline

- NUTRITION IN LATIN AMERICA –LAC–
  - Background and History
  - Who is the nutritionist?

- HEALTH PROFILE AND NUTRITION TRANSITION
  - Nutrition transition
  - Double Burden of Malnutrition
  - Current Policies

- LEADERSHIP IN NUTRITION

- REFLECTIONS

Nutrition History in Latin America

1933-1965 Professor Pedro Escudero
Argentina

- Founder: National School of Dietitians and National Institute of Nutrition in Buenos Aires.

- First School of Dietitians in LA with university level: 3 years (Institutional approach)

- Escudero’s School trained pioneers of dietetics in several Latin American countries.

Disclosures

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No conflict of interest
Shifting from Dietitians to Nutritionists in the 60’s

**PAHO 1965-1973**
- New curricula in recognized universities (availability of university degrees, 4 or 5 years) designed by the Institute of Nutrition of Central America and Panama (INCAP since 1962).
- Creation of the Commission Studies on Academic Programs in Nutrition and Dietetics in Latin America – CEPANAL.
- Technical norms for nutrition and dietetic training were established, integrating public nutrition and shifting focus to tropical region (SURINAME, Panama, Jamaica).
- Creation of the Latin America Society of Nutrition – SLAN and the Latin American Regional Network – SINNE.

**INCAP and PAHO 1970’s and 1980’s**
- "Academic Training of Nutritionist and Dietitians in LA" defining academic profiles and curricula.
- Dietitians (graduated before new orientations) from all LA trained at the School of Nutrition, INCAP for complementary courses on Public Nutrition.
- INCAP supported training of nutritionists in Central America.
- INCAP based curricula still informed many countries.

1. **WHO IS THE NUTRITIONIST IN THE XXI CENTURY?: Labor Market Demands**

   - **CLINICAL NUTRITION**
     - Private Practice
     - Sports Nutrition
     - Hospitals and Institutional food services
   - **FOOD INDUSTRY**
     - Food Technology
     - Food Services Marketing
   - **PUBLIC NUTRITION**
     - Food Security
     - Community Health
     - Public Administration
   - **Research/Teaching**
     - Epidemiology
     - Public Health
     - Basic Science

**Graduate Programs Available for Nutritionists:**

- **The case of Brazil**
  - Master courses: 28
  - PhD courses: 12

**Scientific Production in Latin America:**

**Economic Growth (Real GDP) 2004/2014**
Per Capita Income and Public Health Expenditure as % of GDP


Percentage of Children Under 5 Stunted (Height-for-age < -2 SD), 1990–2015

Source: WHO, Global Health Observatory, Data from IFLS, consulted on October 8. Next, Quote with a link to the global data source and an external source as necessary.

Trends of Childhood Overweight and Obesity in the Americas


Mean Prevalences of Obesity (BMI > 30) by UN Region

Source: Global Nutrition report (RPR), 2015.

Comparative Risk Factors Assessment in Latin American Countries, Global Burden of Disease 2015.


Obesogenic Food Environments

Source: FAO/2015 attachment.
¿Why it is important to study the Double Burden of Nutrition?

- It is a threat in growing economies of countries that should assume health care costs and losts in productivity and human capital.
- Affects countries with different levels of economic growth: lack of institutionalism and resources.
- Situation compromises opportunities to reduce poverty and extreme poverty in the medium and long term.
- Need to strengthen political and public management.

Source: Riviera et al. INCAP 2015.
Current Policies

Uruguay
- School-feeding program, “Baskets for nutritional risk”, “Fortified milk supply”, Cash transfer programs, Payment for health goals, Healthy eating at schools and high schools.
- Focused on one or the other side of the problem

Guatemala
- Most actions addresses undernutrition: Zero Hunger Pact.
- National Healthy Schools Strategy and Food Security and Nutrition Policy of Central America and Dominican Republic mention the DB.
- Implementation strategies do not include this phenomenon.

Ecuador
- The priority is the reduction of the persistent high rates of under nutrition in children <5y.
  - Zero Under Nutrition
  - School lunch program.
- Considering regulating advertising and sale of processed foods

Brazil Dietary Guidelines: Redefining What is a Food and What is a Product

- New public policy to reduce risk factors and mortality rate from non-communicable disease.
- New Dietary guidelines based on 4 recommendations and one golden rule.
**Chile’s Law on Food Labelling and Advertising: A Replicable Model for Latin America**

- **Nutrition interventions**
  - Accordingly to the new epidemiological profile.
- **Food environment regulations**
  - Food composition limits
  - Banning of persuasive marketing targeted to children
  - Food labelling system regulation
  - Soda Tax (18%)