

The Consequences of Inaction

The Case for Accelerating Trans Fat
Elimination Efforts in the Commonwealth



The Commonwealth

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Published by the Commonwealth Secretariat.

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Acronyms

GINA	Global Database on the Implementation of Nutrition Actions
NCDs	Noncommunicable Diseases
PAHO	Pan American Health Organization
PHOs	Partially Hydrogenated Oils
SIDS	Small Island Development States
TFA s	Trans Fatty Acids
WHO	World Health Organization

Acknowledgements

This paper was written by Janneth Mghamba, Emily Gilmour and Layne Robinson. The authors would like to acknowledge the support of Dr Ruth Kattumuri, Senior Director of the Commonwealth Secretariat's Economic, Youth and Sustainable Development Directorate, for invaluable contributions to and oversight of this area of work. The authors would also like to acknowledge Resolve to Save Lives for their technical guidance regarding trans fat elimination in the Commonwealth and their feedback on this paper; and the World Health Organization for the provision of data, both national and regional, to support the analysis.

Executive summary

- Commonwealth member countries share a high burden of noncommunicable diseases (NCDs), with the highest prevalence found in the Small Island Development States (SIDS).
- Ultra-processed, unhealthy foods, which make up an increasingly large share of the world's diet, are among the major drivers of NCDs around the world due to their high concentration of trans fats.
- Consumption of trans fats is closely linked to raised blood pressure (a major contributor to cardiovascular disease and strokes), chronic kidney disease and poor outcomes for diabetes.
- Cardiovascular disease is one of the leading causes of death globally, with evidence associating a 2 per cent increase in total energy derived from trans fats to a 28 per cent increase in the risk of death from coronary heart disease.
- Taking action to eliminate trans fats through policies presents both social and economic benefits. Such policies are considered low-cost approaches to alleviate unnecessary burdens on health systems due to the rise of NCDs and can prevent up to 17 million deaths from cardiovascular disease globally by 2040.

1. Introduction

Noncommunicable diseases (NCDs) are the leading cause of death globally, resulting in more than 36 million deaths annually, principally from cardiovascular disease, diabetes, cancers and chronic respiratory diseases (WHO 2013). Commonwealth countries have a high burden of NCDs, with nearly 400 million individuals living there currently diagnosed with at least one (WHO 2018). In 2015, NCDs accounted for over 10 million deaths across the Commonwealth, with the highest prevalence among Small Island Development States (SIDS). The rise of NCDs has been primarily driven by four key modifiable risk factors: physical inactivity, tobacco use, excessive use of alcohol and unhealthy diets.

The rapidly growing burden of these modifiable NCD risk factors has been accelerated by the negative effects of globalisation, lifestyle changes due to recent urbanisation, and increasingly sedentary lives. Furthermore, these risk factors have been amplified by the COVID-19 pandemic, which has reduced opportunities for physical activity and healthy eating (Ammar et al. 2020). The economic consequences of the pandemic have led to a decline in individual purchasing power, increasing reliance on cheap foods with a long shelf life and leading to greater consumption of foods with a high content of trans fats. Research suggests that decreased dietary quality may persist even after COVID-19 is under control due to economic pressures in the pandemic's aftermath (Collin et al. 2020).

Taking action to prevent the rise in NCDs through, for example, policies and legislation, which are low cost, will play an important role in reducing the risks of NCDs and addressing the rising burden (Kluge et al. 2020). For instance, recent systematic reviews on the impacts of different policy options to reduce trans fats in the food supply – including voluntary reductions and labelling – confirm that setting a legislative mandatory limit is the most “effective, economical, and equitable policy approach” (Downs et al. 2017). This evidence indicates that the benefits of addressing unhealthy diets by lowering the prevalence of trans fatty acids (TFAs) are not just health-related but also economic (Collin et al. 2020).

Prioritising trans fat elimination can therefore provide critical opportunities to reduce preventable deaths from NCDs. Should action be taken promptly, estimates suggest that its elimination from the global supply chain could prevent up to 17 million deaths by 2040 (Bosch et al. 2021).

2. Global strategies to eliminate trans fats

The Commonwealth has been a long-standing advocate for the reduction of NCDs. In successive high-level meetings, Commonwealth leaders, including Heads of Government and health ministers, have made commitments to address the rising burden. Most recently, at their meeting in June 2022, Heads renewed their commitment to promoting good nutrition, fighting malnutrition and taking bold and coordinated action to reduce the incidence of NCDs. In support of this commitment, Commonwealth health ministers underscored the need to take intersectional and multisectoral actions to address the common modifiable NCD risk factors, including tobacco use, harmful use of alcohol, unhealthy diets and physical inactivity. These commitments are being supported by the Commonwealth Secretariat through its programme of work.

Global initiatives led by organisations such as the World Health Organization (WHO) have aimed to address trans fats and unhealthy diets more generally. In 2013, the World Health Assembly endorsed the Global Action Plan on Noncommunicable Diseases 2013–2020, which included a set of actions for member countries and international partners to work with WHO to prevent NCDs, promote healthy diets and physical activity and attain the nine global NCD targets by 2025.

To specifically address trans fats, WHO launched REPLACE in 2018, a step-by-step guide with six action areas calling for the elimination of industrially produced trans fatty acids (TFAs) from the global food supply. Recommended areas of action include reviewing dietary sources and the current food supply landscape on industrially produced TFAs and taking mandatory regulatory actions to eliminate them. In particular, the two best-practice policy options for countries are: a mandatory national restriction that limits artificial trans fat to 2 per cent of total fat content in all foods; or a mandatory national ban on the production or use of partially hydrogenated oils (PHO) in all foods.

In 2020, WHO announced the WHO Certification Programme for Trans Fat Elimination. The programme aims to accelerate progress towards the 2023 goal of global elimination by recognising countries that have eliminated industrially produced TFA from their national food supplies.

3. Progress towards trans fat elimination in the Commonwealth

The WHO report 'Countdown to 2023: WHO report on global trans fat elimination 2021' includes many Commonwealth countries in its findings, and uses data collected for the TFA Country Score Card by the Global Database on the Implementation of Nutrition Actions (GINA). Findings from this report indicate that governments in ten Commonwealth countries surveyed have passed best-practice TFA policies. Previously, in 2020, the number of Commonwealth countries surveyed with best-practice policies was five, indicating that the Commonwealth is making progress towards elimination efforts.

This section details the varying stages reached by the 38 countries surveyed, by region, with regards to their national trans fat elimination efforts. It is important to note that data was not available from all Commonwealth countries, and therefore not discussed in this publication.

Africa

Ten Commonwealth countries in Africa have adopted national plans on nutrition that include goals or strategies to eliminate industrially produced trans fats. South Africa currently leads the way with best-practice mandatory limits in foods, oils and fats since 2011. Various countries are currently working towards stronger reduction policies.

Table 3.1: Summary of the TFA policy situation in African Commonwealth countries

National policy commitment to eliminate TFA	Other complementary measures	Less restrictive TFA limits	Best-practice TFA policy	Best-practice TFA policy passed but not yet in effect	Monitoring mechanism for mandatory TFA limits
Botswana Eswatini Ghana Kenya Mauritius Namibia Nigeria Seychelles United Republic of Tanzania Zambia			South Africa		South Africa

Source: WHO 2021

North America and the Caribbean

According to the WHO (2021) report, the North America and Caribbean region has seen early and growing progress towards eliminating industrially produced trans fats. In 2019, all member countries in the Americas approved the Pan American Health Organization (PAHO) Plan of Action for the Elimination of Industrially Produced Trans-Fatty Acids 2020-2025, which promotes trans fat policies aligned with the best-practice policies recommended by WHO. The majority of Commonwealth countries in the region currently have a national policy commitment to eliminate TFAs, with Canada instituting the most significant policies, such as their 2018 ban on partially hydrogenated oils (PHOs).

Table 3.2: Summary of the TFA policy situation in the Americas and the Caribbean Commonwealth countries

National policy commitment to eliminate TFA	Other complementary measures	Less restrictive TFA limits	Best-practice TFA policy	Best-practice TFA policy passed but not yet in effect	Monitoring mechanism for mandatory TFA limits
Antigua and Barbuda The Bahamas Barbados Belize Grenada Guyana Jamaica St Kitts and Nevis Saint Lucia St Vincent and the Grenadines Trinidad and Tobago			Canada		Canada

Source: WHO 2021

Europe

Europe has the largest number of trans fat limits in place. Cyprus, Malta and the United Kingdom have all held best-practice TFA policies since April 2021 as per European Union (EU) regulations.

Table 3.3: Summary of the TFA policy situation in European Commonwealth countries

National policy commitment to eliminate TFA	Other complementary measures	Less restrictive TFA limits	Best-practice TFA policy	Best-practice TFA policy passed but not yet in effect	Monitoring mechanism for mandatory TFA limits
			Cyprus Malta United Kingdom		

Source: WHO 2021

Asia

India and Singapore are currently leading the way in best-practice trans fat policies, with other countries, such as Bangladesh, Maldives and Sri Lanka, at various stages in the policy process.

Table 3.4: Summary of the TFA policy situation in Asian Commonwealth countries

National policy commitment to eliminate TFA	Other complementary measures	Less restrictive TFA limits	Best-practice TFA policy	Best-practice TFA policy passed but not yet in effect	Monitoring mechanism for mandatory TFA limits
Bangladesh Maldives Sri Lanka	Brunei Darussalem		Singapore India		India Singapore

Source: WHO 2021.

Pacific

Of the countries in the Pacific region surveyed in the 2021 WHO study, all have national commitments to eliminate trans fats, with Fiji instituting other complementary measures to aid its efforts. Regional collaborations will help increase attention to trans fats as well as help SIDS looking to increase capacity in the area to access greater support.

Table 3.5: Summary of the TFA policy situation in Pacific Commonwealth countries

National policy commitment to eliminate TFA	Other complementary measures	Less restrictive TFA limits	Best-practice TFA policy	Best-practice TFA policy passed but not yet in effect	Monitoring mechanism for mandatory TFA limits
Nauru Papua New Guinea Samoa Vanuatu	Fiji				

Source: WHO 2021.

4. Cost of inaction

Inaction on trans fat reduction policies risks perpetuating unhealthy dietary habits among populations and adding to the rising burden of NCDs. While higher-income countries are typically making progress in eliminating trans fats, efforts in lower-income countries are lagging, leading to persistent incidences of cardiovascular disease. With current evidence indicating that eliminating trans fats from diets can prevent approximately 500,000 deaths globally from cardiovascular diseases per year, policymakers who fail to act face further constraints on their health systems and the risk of unnecessary and preventable deaths. Although 49 countries around the world have adopted best-practice policies to remove industrially produced trans fats by 2024, 9 out of the 15 countries estimated to have the highest burden from trans fats have not made any significant commitments (WHO 2022). This indicates that there is still significant work to be done to meet our global commitments to reduce the incidence of NCDs.

Moreover, the economic consequences of inaction are significant due to the ability of trans fat reduction policies to also reduce costs to national food supplies and health systems. A study analysis completed by the European Commission in 2016 found that imposing an EU-wide legal limit and making voluntary agreements prevented the loss of 3.73 and 2.19 million disability-adjusted life years and saved more than 51 and 23 billion euros, respectively (Martin-Saborido et al. 2016). For the individual, trans fat intake among other unhealthy dietary habits poses economic risks such as increased time out of the workforce and a higher likelihood of early retirement due to ill health (Pearson-Studdard et al. 2017). With governments looking to stabilise their economies while they respond to and recover from the COVID-19 pandemic, adopting trans fat reduction policies could provide a multi-benefit solution.

5. Opportunities

While efforts towards reducing trans fats vary across the Commonwealth, it is clear that interest in achieving elimination is growing (Brenner 2020). Three Commonwealth countries are currently drafting best-practice policies that are close to passage: Bangladesh, Nigeria and Sri Lanka.

Many low- and middle-income countries face greater challenges in achieving elimination due to limited resources, regulatory capacities and political will. As such, regional collaborations are an avenue to help foster cooperation as well as access greater support for countries looking to increase capacity in the area.

Under the broader NCD agenda, there is high-level political support for addressing NCDs in the Commonwealth, with endorsements and commitments made by Heads of Government and health ministers at their respective meetings. Over the last decade, various initiatives have been undertaken, including 'Commonwealth Moves', a multisectoral project integrating youth, education and sports to address NCD risk factors, and the creation of the NCD Legislative Drafting Initiative in the Pacific and Caribbean regions.

6. Recommendations for next steps towards trans fat elimination

The following four recommendations seek to support further Commonwealth efforts towards best-practice trans fat elimination policies, and member countries are encouraged to consider these options as strategies for progressing their national commitments.

i. Participation in the WHO Certification Programme for Trans Fat Elimination

Commonwealth countries that have implemented best-practice trans fat policies should consider WHO's call for participation in the Certification Programme for Trans Fat Elimination. This initiative supports the monitoring and enforcement of national best-practice policies to eliminate industrially produced trans fats and helps to recognise countries for their efforts to eliminate this major risk factor for NCDs and protect their populations from premature death.

ii. Advocacy and support for trans fat elimination policies

Given that addressing trans fat elimination and instituting policies goes beyond health, Commonwealth leaders should collectively advocate for the development and passage of policies that remove industrially produced trans fats from national food supplies based on the WHO best-practice policy models (see section 2). By passing and implementing such policies, countries will maximise their life- and cost-saving impact. The Commonwealth Secretariat is currently working with countries in legislative drafting and policy development, particularly with regards to NCDs, and further support is available for countries to strengthen efforts towards trans fat elimination.

iii. Facilitating the technical exchange of information and best practices

Given the diverse membership of the Commonwealth, and the varying stages of countries in their trans fat elimination efforts, there is much to gain from dialogue and best-practice sharing. The newly formed COVID-19 Open-Ended Informal Technical Working Group is an opportunity for member countries to exchange challenges and strategies relating to trans fat policies and to foster cooperation and solutions to address rising NCD risk factors.

iv. Increased partnerships

There is a need to further strengthen partnerships with WHO as well as other key global partners to gain commitment and support for Commonwealth efforts. The upcoming joint collaboration between the Commonwealth Secretariat, WHO and Resolve to Save Lives provides opportunities for such cooperation to realise goals related to NCDs.

7. Conclusion

With multiple Commonwealth countries recently adopting – or about to adopt – best-practice trans fat elimination policies, members should take advantage of this fresh expertise and experience through information-sharing and championing elimination efforts at the highest levels. With the support of partners such as WHO and Resolve to Save Lives, the Commonwealth Secretariat is able to support member countries in progressing their in-country capacity building as well as multilateral consensus-building efforts.

Trans fat elimination policies provide the dual benefit of cost-effectiveness and efficacy, with the ability to significantly reduce mortality rates from cardiovascular disease and lift its burden on health systems. Moreover, implementing strong trans fat legislation will not only accelerate progress towards global NCD targets but also build healthier and more resilient populations that are better prepared to deal with future health emergencies. With the 2023 goal of global elimination of industrially produced trans fats on the horizon, and more support from technical partners than ever before, the Commonwealth is well positioned to progress national commitments and prevent many unnecessary deaths among its population.

References

Ammar A, M Brach, K Trabelsi et al. (2020), 'Effects of COVID-19 home confinement on eating behaviour and physical activity: Results of the ECLB-COVID19 international online survey', *Nutrients*, Vol. 12, 1583.

Bosch S, L Westerman, N Renshaw and I Pravst (2021), 'Trans fat free by 2023: A building block of the COVID-19 response', in Pravst, I, B Pei Ing Chang and MM Raats (Eds.), *The Effects of the COVID-19 Outbreak on Food Supply, Dietary Patterns, Nutrition and Health: Volume 1*, Frontiers Research Topics, March.

Brenner H (2020), 'Will there be an epidemic of corollary illnesses linked to a COVID-19-related recession?' *American Journal of Public Health*, Vol. 110, 974–975.

Collin J, R Ralston, SE Hill and L Westerman (2020), 'Signalling virtue, promoting harm: Unhealthy commodity industries and COVID-19', NCD Alliance and SPECTRUM.

Downs, SM, MZ Bloem, M Zheng et al. (2017), 'The impact of policies to reduce trans fat consumption: A systematic review of the evidence', *Current Developments in Nutrition*, Vol. 1 No. 12.

Kluge HHP, K Wickramasinghe, HL Rippin et al. (2020), 'Prevention and control of non-communicable diseases in the COVID-19 response', *Lancet*, Vol. 395 No. 10238, 1678–1680.

Martin-Saborido, C, T Mouratidou, A Livaniou et al. (2016), 'Public health economic evaluation of different European Union-level policy options aimed at reducing population dietary trans fat intake', *The American Journal of Clinical Nutrition*, Vol. 104 No. 5, 1218–1226.

Pearson-Stuttard, J, W Hooton, J Critchley et al. (2017), 'Cost-effectiveness analysis of eliminating industrial and all trans fats in England and Wales: Modelling study', *Journal of Public Health*, Vol. 39 No. 3, 574–558.

WHO (World Health Organization) (2013), *Global Action Plan for the Prevention and Control of Noncommunicable Diseases*, World Health Organization, Geneva.

WHO (World Health Organization) (2018), *Noncommunicable Diseases Country Profiles 2018*, World Health Organization, Geneva.

WHO (World Health Organization) (2021), 'Countdown to 2023: WHO Report on Global Trans Fat Elimination', World Health Organization, Geneva.

WHO (World Health Organization) (2022), 'Global Database on the Implementation of Nutrition Action', <https://extranet.who.int/nutrition/gina/en/home>, accessed 17 September 2022.

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