**Supplementary material**

**National and regional strategies for obesity prevention by country**

**Argentina**

***Governmental structures for obesity prevention***

* **Office for the promotion of health and control of non-communicable diseases** (Dirección de Promoción de la Salud y Control de Enfermedades no Transmisibles)1. Developed by the Ministry of Health through Resolution 1083 to implement the National Strategy to Prevent and Control non-communicable diseases. This office created “Health Argentina (Argentina Saludable)” and “Walk Argentina (Argentina Camina)” to reduce the cost of non-transmissible diseases and their modifiable risk factors. Also led to the creation of policies surrounding health eating and increased physical activity1.
* **Office for the promotion of Health and control of non-communicable diseases (**Dirección de Promoción de la Salud y Control de las Enfermedades no Transmisibles)2. Developed by the Ministry of Health through Resolution 1083 to implement the National Strategy for the Prevention and Control of non-communicable diseases (Estrategia Nacional de Prevención y Control de Enfermedades No Transmisibles)”.
* **National Health Plan “Healthy Argentina”)** (Plan Nacional “Argentina Saludable”): Actions at the population and multi-sector advisory level to prevent the main risk factors of non-communicable diseases, such as unhealthy eating and sedentary behaviors; to promote healthy eating and active lifestyles through creating environment that promote physical activity and healthy eating behaviors rich in fruits and vegetables and low in sodium and trans fats.
* **Surveys related to obesity monitoring**
	+ National survey of risk factors (Encuesta Nacional de Factores de Riesgo)3. It started in 2003 by the Ministry of Health. It evaluates obesity indicators by age, sex, educational level, income, and region. It is a cross-sectional study that assessed 14 dimensions (personal data and housing, employment status, accessibility and coverage, general health, body weight, food, tobacco, consumption of alcohol, diabetes, physical activity, blood pressure, cholesterol, preventive measures, and risk of injury).
	+ National survey of risk factors of non-communicable diseases (Encuesta Nacional de Factores de Riesgo de Enfermedades No Transmisibles)3. It evaluates the prevalence of the factors that increase the risk of non-transmissible diseases among adults >18 year in cities and urban areas with more than 5,000 residents (across 23 provinces and Buenos Aires). It is done every 4 years. The first one was conducted in 2005, the second in 2009 and the third in 2013.
	+ National survey of Nutrition and Health (Encuesta Nacional de Nutrición y Salud)4. The first survey was conducted in 2005 and only included children up to 5 years of age and women in reproductive age. It included data on feeding patterns and malnutrition, focused on obesity. The second survey was conducted in 2018 in homes in a representative sample of 22,000 individuals of all ages. It included questions of diet, physical activity and general health, anthropometric measurements, and a 24-h food record. Among a subsample 3600 individuals, biochemistry measurements were done to evaluate anemia, deficiency of folate and vitamin B12, renal function and urinary sodium excretion.

***Regulations to support healthy behaviors***

* **Law No. 5067**5**.** The objectives of this law are to make the population aware of the risks involved in the frequent intake of foods with high contents of saturated fats and trans fats, added sugars and salt, to raise awareness among the population about the risks involved in the frequent intake of foods with high contents of saturated fats and trans fats, added sugar and salt, and to establish that the shops and street vendors that sell certain foods (listed in article 2) display, in visible format by means of signage and on the printed menu, the following legend: "The frequent consumption of this food can cause serious disturbances in the Health."
* **Law No. 26,905** Maximum values of sodium consumption6. This law is to promote the reduction of sodium consumption in the population. It establishes the maximum sodium values that the indicated food groups must reach (meat products and derivatives, farinaceous, soups, seasonings and preserves) after a period of 12 months from the entry into force of these provisions. The commercialization of food products that do not comply with the maximum levels of sodium established will be considered an offense, of the sanctions indicated in article 9.
* **Obesity Law** (Ley de la Obesidad # 26396)7: “Prevention and Control of Eating Disorders”. Created the National Program for the Prevention and Control of Eating Disorders within the scope of the Ministry of Health. Goals are to: implement information campaigns related to eating disorders; sponsor acts, seminars, workshops, conferences, contests and / or dissemination programs that contribute to the knowledge of the problems that come with different eating disorders and their forms of prevention; to decrease the morbidity and mortality associated with eating disorders; to formulate norms for the evaluation and control against eating disorders; to encourage the development of research activities; to promote, especially among children and adolescents, healthy nutritional behaviors; to promote in the community spaces for reflection and education to contain those who suffer from these diseases; to propose actions aimed at eliminating discrimination and stigmatization in the workplace, educational and / or social, in the face of the suffering of food disorders; to develop dissemination activities, television, radio and graphics, aimed at the general population in order to raise awareness about the health risks caused by unhealthy diets and to educate about healthy eating habits. Foods with high caloric content and poor in essential nutrients, must contain the legend "Excessive consumption is harmful to health".
* **Law for the Nutrition and Food National Program** (Ley del Programa de Nutrición y Alimentación Nacional)8. As part of the Law on Food Security, this law is created to guarantee the right to be nurtured (2002).
* **Regulation to remove industrial trans fatty acids** and replacing them with polyunsaturated fats9. It was voluntary in 2004 but then in 2008, it was a mandatory regulation that specify that trans fatty acids in foods should not exceed 2% of total fats in vegetable oils and margarines for direct consumption and 5% of total fats in other foods. Since 2015, the National Food Institute of the Ministry of Health has been responsible for the surveillance and enforcement of industry compliance with these regulations.
* **Law 26.873 Promotion and awareness of breastfeeding** (Ley 26.873 de Promoción y Concientización Pública de la Lactancia Materna)10. This law was created by the Ministry of Health in 2013 to promote and create awareness of the importance of breastfeeding and the adequate nutrition for children up to 2 years.
* **Nutrition and feeding National Program** (Programa de Nutrición y Alimentación Nacional)11. This regulation was approved in 2003 to promote nutrition education among vulnerable groups.
* **Front-of-package labels** (2018)12. Proposed by the Ministry of Health and Social Development as part of the National Program of Healthy eating and Obesity Prevention.

***Guidelines for promoting healthy behaviors***

* **Health guidelines** (Cuidarse en Salud)13: In 2008, the Ministry of Health created the Health Care Program, whose purpose is to install a culture of care, protection and health promotion, addressing the prevention of diseases through education, information and communication devices aimed at population in general.
* **Dietary guidelines for Argentinians** (Guías alimentarias para la población Argentina)14. Developed by the Ministry of Health in 2016.
* **Overweight and Obesity in Children and Adolescents. Guidelines for its Prevention, Diagnosis and Treatment in Primary Health Care**2**.** (2013). It aims to guide the actions in the first level of care, offering a guide of actions of health promote and overweight & obesity prevention.
* **Guide to National Clinical Practice on Diagnosis and Treatment of Obesity in adults for all levels of care**2**,** within the framework of the National Strategy for the Prevention and Control of non-communicable diseases. Published by the Ministry of Health in 2014. It contains a series of recommendations based on evidence that seek to influence decision-making about adequate care, aimed at professionals and health teams working with this problem. It also aims to encourage healthier behavior in the community.
* **Practical clinical guide for diagnosis and treatment of obesity** (Guía de práctica clínica nacional sobre diagnóstico y tratamiento de la obesidad en adultos)15. Created by the Ministry of Health in 2014.

***Population-wide or community-based programs or initiatives***

* **Argentina Walk** (Argentina Camina)16: 2006 initiative that promotes the intensification of physical activity to combat sedentary lifestyle, which causes preventable health disorders such as hypertension, diabetes, obesity, cardiovascular problems, cholesterol, osteoporosis and certain types of cancer.
* **National Program of School Health** (Programa Nacional de Salud Escolar)17: 2015 program whose mission is to develop and strengthen integrated care policies between Health and Education, to give an active response to the care needs of children and adolescents of school age, giving impetus to actions to prevent diseases and promote health, strengthening the articulation between the Ministries of Health and Education. Children and adolescents of the initial, primary and / or secondary level of public and private schools.
* **National Strategy for the Prevention and Control of non-Communicable diseases** (Estrategia Nacional de Prevención y Control de enfermedades no transmisibles)2: Based on health promotion, reorienting health services for the management of non-communicable diseases, and strengthening the monitoring systems of non-communicable diseases Clear prices(Precios Claros)18:a new system of information by which consumers can check and compare prices online of more than 5,000 products and decide where they it is more convenient to buy. In addition, the system includes a permanent update of prices that covers 400 basic food products available in 2,268 supermarkets all across the country.
* **Medical obligatory Program** (Programa Medico Obligatorio)2 - Resolution 742, approved in 2009 by the Health Ministry to form part of Law 26396. It covers essential and basic medical benefits for the coverage of obesity related conditions, including medical, nutritional, psychological, clinical, surgical, pharmacological and medical practices necessary for care.

**Bolivia**

***Governmental structures for obesity prevention***

* **Policy for the food and nutrition** (Política de Alimentación y Nutrición en el Marco del Saber Alimentarse para Vivir Bien)19. Created by the National Council of Food and Nutrition (CONAN) in 2014. This policy seeks to promote the nutritional status of the population, promoting the consumption of a variety of foods in the life cycle, by establishing and strengthening food and nutrition programs that are culturally adequate.
* **Surveys related to obesity monitoring**
	+ National Survey of Risk Factors for Non-Communicable Diseases (1ra Encuesta Nacional de Factores de Riesgo)20: this survey is currently being conducted. It started in 2018. It records consumption of tobacco, alcohol, unhealthy diets (low F&V), physical inactivity, Overweight & Obese, & high BP.
	+ National Survey of Health and Nutrition (Encuesta de Evaluación de Salud y Nutrición)21. This survey was conducted in 2012 (ESNUT 2012) to evaluate the health and nutritional conditions of the population, in particular women and children 0-5 years.
	+ Demography and Health Survey (Encuesta de Demografía y Salud; EDSA)22: It provides information on the indicators generated by the research, related to the main public policies on health and food implemented by the different levels of Bolivia, linked to fertility, mortality for different groups, maternal health, contraception, vaccination and nutrition of children, anemia in women and children. The first survey was conducted in 2008 and the second one in 2016.
	+ Global school-based student health survey (Encuesta Global de Salud Escolar)23. It is a collaborative surveillance project to measure and assess the behavioral risk factors and protective factors in 10 key areas among young people aged 13 to 17 years. It was conducted in 2012.

***Regulations to support healthy behaviors***

* **Traffic Light Labeling**24**.** Created in 2015 to alert customers about levels of fat, sugars, and salt in pre-packaged items, considering them high (red), medium (yellow) or low (green).
* **Law # 622 Nutrition in School** (Alimentación Escolar en el marco de la Soberanía Alimentaria y la Economía Plural) (2014)25. Its objective is to regulate the nutrition in schools.
* **Law to Promote Healthy Nutrition** (Ley de Promoción de Alimentación Saludable)26. This was published by the Ministry of Health in 2016 to establish guidelines and mechanisms to promote healthy food habits in the population to prevent chronic diseases related to diet.

***Guidelines for promoting healthy behaviors***

* **Food-based dietary guidelines for the Bolivian population** (*Guías alimentarias para la población Boliviana*). Developed by the Ministry of Health in 201327.
* **Dietary guidelines for adolescents** (Guía alimentaria para las y los adolescentes). Developed by the Ministry of Health and Exercise in 201328.

***Population-wide or community-based programs or initiatives***

* **National Complementary School Meal Program**29**.** Created in 2014 with the goals to provide lunch and/or breakfast and/or snack, food baskets defined by municipalities (rural: Parents cook food; urban: Ready-to-eat breakfasts (bread, milk, yogurt, etc.). Implementation & provision of food decentralized, operates under responsibility of local municipalities (rural: social educational community councils are in charge, & teachers help w/ preparation and storage; and urban: private companies supervised by “technical teams”). To improve school performance and the nutritional status of students through healthy & culturally appropriate diets. Incorporate nutrition education to teach students good dietary practices by means of classes and school gardens. It serves preschools, primary, and secondary schools in urban & rural areas. In 2013, 93% of municipalities provided school meals.
* **Program to support the Family Agriculture in Sustainable Communities** (Programa Apoyo a la Agricultura Familiar Comunitaria Sustentable)30. This is a program created by the Ministry of Rural and Land Development to promote the family agriculture to produce healthy and fresh foods and improve the nutritional status of the population.
* **Program for the use of biodiversity for nutritional purposes (**Programa Uso y Aprovechamiento de la Biodiversidad para Fines Nutricionales)31. Program of the Ministry of the Environment and water to promote the diversity for nutritional and food values.
* **Multi-sectorial program for Food and Nutrition in the Life Cycle** (Programa Multisectorial de Alimentación y Nutrición en el Ciclo de la Vida)32. This program was created by the Department of health to contribute to the prevention and care of malnutrition through the development of multisector actions related to food and nutrition in the life cycle.
* **Program Education in Food and Nutrition** (Programa Educación Alimentaria Nutricional)33. Created by the Ministries of Education and Health to prevent malnutrition and obesity.
* **Nutritional complement for the elderly** (Complemento Nutricional para el Adulto Mayor)34. Created by the Ministry of Health in 2015 to complement the nutrition of elders in centers of the Social Security or in primary level health centers.

**Brazil**

***Governmental structures for obesity prevention***

* **Inter-ministerial Chamber of Food and Nutritional Security**35. It is composed of 19 ministries. This was developed in 2007 to prevent and control obesity. The objectives are to improve the population’s food patterns, provide nutrition education, increase access to healthy foods and promote sustainable lifestyle habits*.*
* **National Food and Nutrition Policy**35**.** This policy is integrated with the SUS National Health Policy (1999): Technical and policy framework for the Brazilian government’s efforts to combat obesity and guarantee the human right to food and health. Regulatory actions on the following issues: Nutritional labelling; Negotiating voluntary agreements to change the nutritional profiles of processed foods; Designing media campaigns and training for health education professionals to create a broad approach to promoting healthy diets and preventing and controlling obesity and its related non-communicable diseases.
* **Brazilian Strategy to Prevent and Control Obesity**36. Created by the Interministerial Chamber of Food and Nutrition Security (CAISAN) in 2014 to bring changes at the state and municipal level. Alongside the National CAISAN, 11 ministries and the PAHO/WHO were involved in this plan. Executed through articulation with the 2nd National Food and Nutrition Security Plan (2016-2019) and with the Health Ministry’s Noncommunicable Diseases Plan (2011-2022). The specific objectives of this plan are: Availability and access to healthy food; Information, education, and communication; Promoting healthy lifestyles in specific environments; Food and nutrition surveillance; Comprehensive health care for affected individuals; Regulation of food quality; Systemic monitoring on production and consumption*.*
* **Strategic Action Plan to Tackle non-communicable diseases**35. It was launched by the Ministry of Health in 2011 for the period 2011–2022. Goals are to conduct health surveillance and promotion of healthy eating and physical activity35*.*
* **Surveys related to obesity monitoring**
	+ Brazil’s telephone survey for the surveillance of risk factors and chronic disease protection (Vigitel)37. It started in 2006 and aims to monitor the frequency and distribution of risk and protection factors for chronic non-communicable diseases by telephone survey. It is conducted every year, with the last survey conducted in 2018.
	+ National School Health Survey (PeNSE)38. This is a survey among adolescent since 2009, in partnership with the Brazilian Institute of Geography and Statistics (IBGE) and with the support of the Ministry of Education. It monitors risk factors and health protection in school children. It also helps prioritize the development of public policies to promote health in schoolchildren, especially the School Health Program. It is conducted every three years, with the last survey conducted in 2015.

***Regulations to support healthy behaviors***35

* **Regulation on school lunch program** (2001). It establishes that at least 70% of the food purchased by the school lunch program should be basic foods.
* **Law on school lunch program** (2009), approved by Congress. It establishes that at least 30% of the school lunch program budget should be used to purchase fresh foods directly from family farms and their cooperatives.
* **Brazilian Regulation for the Marketing of Food to Infants and Young Children** (2006). This regulates food advertisements for infants and children.
* **Inter-ministerial Ordinance 1010/200**6 (2006) by the Ministries of Health and Education to promote healthy eating in schools by providing nutrition education, creating gardens in the schools, restriction of food advertisement and sales, increasing incentives for fruit and vegetable consumption.
* **Front-of-package labels Proposal**39**.** The National Agency for Health Monitoring **(**Agencia Nacional de Vigilancia Sanitaria, Anvisa) is evaluating improving the front of package labeling, with a system in which the main display side indicates to the consumer whether a product is "HIGH" in sugar, sodium, and/or fats. A proposal was submitted to public consultation, ensuring broad, democratic debate.

***Guidelines for promoting healthy behaviors***

* **Healthy Diet Promotion**40**:** Food Guidelines based on recommendations in the two dietary guides published by the Health Ministry, the Food Guide for Children under Two Years of Age published in 2002 and the Food Guide for the Brazilian Population published in 2006.
* **Brazilian Obesity guidelines**41. Guidelines developed by the Brazilian Association for the study of obesity and metabolic syndrome in 2016.

***Population-wide or community-based programs or initiatives***35*.*

* **Family Health Strategy.** It was implemented for obesity prevention in health care services (1995).
* **Family Health Support Nuclei** was created to create multidisciplinary teams to work together to prevent obesity in the Brazilian population (2008).
* **School Meal Program**. Created in 1954 to promote healthy food environment for schools.
* **Health Academy Program (2011)**, created by the Ministry of Health to promote and create areas for physical activity. The program’s goal is to fund 4,000 locations throughout Brazil by 2014.
* **Breastfeeding and Complementary Feeding Strategy (2009).** Created to promote breastfeeding among new mothers in efforts to decrease obesity rates and improve child overall health.
* **School Health Program.** Created in 2007 by the Health and Education Ministries through Decree No. 6286, to provide comprehensive care to increase health in public schools42,43.
* **National Program of School Nutrition (**Programa Nacional de Alimentação Escolar)44. This program started in 1955 as a feeding school program, nutritional education, and school garden.
* **Program Academy of Health** (Programa Academia da Saúde)45. It was created in 2011 by the Ministry of Health to promote physical activity, healthy eating, health education, among others.

**Chile**

***Governmental structures for obesity prevention***

* **National Counsel for the Promotion of Health** (Consejo Nacional para la Promoción de la Salud VIDA CHILE)46. This is an inter-sectorial counsel promoted by the Ministry of Health and integrated by 28 public and private institutions in Chile since 1998. Their mission is to advise the ministries in the creation of healthy policies and coordinate a strategic plan.
* **National policy in Foods and Nutrition** (Política Nacional de Alimentación y Nutrición)47. Created by the Ministry of Health in 2017 to contribute to the improvement of health and quality of life in foods and nutrition and provides a structure for the development of regulations, strategies, plans and programs in foods and nutrition.
* **Global Strategy against Obesity (EGO-CHILE)**48**.** It was created in 2006 to promote policies and inter-sectorial action plans to improve dietary patterns and increase physical activity by the Ministry of Health. It is a complementary strategy to the National Plan of health. It has several levels of action: general health, family and community, school, workplace, and academic and scientific.
* **National Policy for physical activity and sports** (Política Nacional de Actividad Física y Deporte 2016-2025)49. It was created in 2016 by the Ministry of Sports.
* **Strategy for the nutritional intervention through the life cycle for the prevention of obesity and other non-communicable diseases** (Estrategia de Intervención Nutricional a través del Ciclo Vital para la Prevención de Obesidad y otras Enfermedades no Transmisibles EINCV)50. Created in 2005 and revised in 2010.
* **Surveys related to obesity monitoring**
	+ Survey of Quality of Life and Health (Encuesta de Calidad de Vida y Salud, ENCAVI)51. It has been done in 2000, 2006 and 2015.
	+ National Health Survey (Encuesta Nacional de Salud, ENS)52. It is a cross-sectional population-based survey among individuals 15 years and older in Chile conducted in the homes. It is conducted to estimate the prevalence of the main health problems and their determinants. It has been done in 2003, 2009-10 and 2016-17.
	+ Global school-based student health survey (Encuesta Global de Salud Escolar)53. It is a collaborative surveillance project to measure and assess the behavioral risk factors and protective factors in 10 key areas among young people aged 13 to 17 years. The first survey was conducted in 2004-05 and the second survey in 2013.

***Regulations to support healthy behaviors***

* **Choose to live healthy** (Elige Vivir Sano)54(2013) – Law number 20.670. The goal was to create the “Choose Healthy Living System,” which will be a management model consisting of policies, plans and programs developed and executed by various State agencies, designed to help generate habits and styles of healthy life and to prevent and reduce the risk factors and behaviors associated with noncommunicable diseases. The Ministry of Social Development will oversee the administration, coordination and supervision of the System. The President of the Republic, annually, will determine the policies, plans and programs that will be part of the System. A resolution, issued by the Ministry of Health and also signed by the Ministry of Social Development, will determine the diseases that will be considered non-communicable derived from unhealthy habits and lifestyles and those factors and risk behaviors associated with them to establish standards in matters of publicity, promotion and corporate social responsibility that companies and private institutions must comply with in order to enter into agreements with the Ministry of Social Development and other public bodies to participate in initiatives related to the Choose Healthy Living System. Funded, its first year, by the Ministry of Social Development, with extra funding by the Ministry of Finance.
* **The Nutritional Food Composition Law and its publicity** (La Composición Nutricional de los Alimentos y su Publicidad; 20.606)55. Created in 2012 by the Ministry of Health to require a special label for foods made with genetically modified organisms (both foreign and domestic) and will determine which foods contain (per one unit of weight or volume) a large number of calories, fat, sugar, salt or other ingredients that the ordinance names.
* **Front-of-package labels**56–58. Regulation created in 2016 for foods that exceed the established limits of critical nutrients (sugars, sodium, calories, saturated fats) will be labeled with a black octagon (similar to a STOP sign). The text inside the octagon should specify that the product is "HIGH IN", followed by the critical nutrient. A package is given one stop sign for each nutrient that is too high. These black signs are readily visible on the front of the package. The easy-to-read warnings say, in Spanish, “High in Sugar,” “High in Calories,” “High in Fat” and “High in Salt.” Shoppers are being taught to reach for healthier choices through the marketing campaign, as the slogan spells it out: “Choose foods with fewer signs, and if they don't have any, even better. These products should be banned from being sold, advertised, or given out for free within preschool and elementary educational institutions and cannot have advertising aimed at children under 14 or use come-ons such as toys, accessories, stickers, incentives, or other alike for advertising. Unhealthy items for consumption include packaged foods, such as chips and candy bars. Healthier foods are those lower in salt, sugar, and fat such as fruit, low fat yogurt, some cereal and granola bars, and low-calorie drinks.
* **Publicity of foods Law # 20.869**56(Publicidad de los Alimentos). Restriction on marketing of unhealthy food for children. This regulation was created in 2016 to restrict the marketing of unhealthy foods when a television audience consists of more than 20% children. Cartoon characters also may not be used on the packages or in advertising directed at children. New regulations will soon be implemented to prohibit the advertising of products that carry warning signs between 7 a.m. and 10 p.m., the hours children might see them.
* **Sugar-sweetened beverage tax**59. Tax created in 2016 for sugar-sweetened beverages with more than 6.25gr of sugar/100ml (or 15gr/240ml as stated in the law) are taxed at 18%, while sugar-sweetened beverages below this threshold are taxed at 10%.
* **Ban on trans fats**60**:** Argentina, Chile, Colombia and Ecuador have set best practice limits for industrially-produced trans-fat in fats/oils (2%), which in Chile and Ecuador apply to all foods.
* **Nutrition education and physical education**61**.** This is part of nationwide official school curriculum.

***Guidelines for promoting healthy behaviors***

* **Guidelines for healthy life (Guía para una vida saludable)**62**.** The Ministry of Health created guidelines for healthy eating and physical activity for the population in 2004.
* **Guide for Healthy Universities (Guía para Universidades Saludables)**63**.** Created in 2006 by the Institute of Nutrition and Technology (Instituto de Nutrición y Tecnología de los Alimentos, INTA), Catholic University (Universidad Católica), with funds from WHO/PAHO. It is an instrument to guide policies in education to promote healthy lifestyles in universities and other upper education institutes.
* **Guidelines for the out-patient treatment of malnutrition by deficit or excess in children younger than 6 years** (Norma para el manejo ambulatorio de la malnutrición por déficit y exceso en el niño menor a 6 años)64. Created in 2005 by The Ministry of Health.

***Population-wide or community-based programs or initiatives***

* **Five a day campaign**65**:** Major campaign to promote the consumption of five portions of fruit and vegetables a day (2004). It is a partnership between university researchers, the private sector, the national government and international health organizations such as the United Nations. It brings together the government and food producers to create policies aimed at increasing fruit and vegetable production and quality. It includes multimedia educational and marketing campaigns to encourage Chileans to eat five servings of fruits and vegetables a day.
* **Healthy Santiago** (Santiago Sano)66,67: thisprogram delivers interventions on alcohol, sexual health, activity in the elderly, and childhood obesity, bringing together stakeholders from every municipal department into 40 dedicated committees.
* **Choose Healthy Living (Elige Vivir Sano)**68**.** Re-launched in 2016 and created by the Ministry of Social Development and Family. It includes several initiatives that aim to create a healthier environment, which promotes and enables a healthy lifestyle.
* **Overweight program** (Contrapeso program)69**.** It aims to promote healthy eating and physical activity among school children, including restrictions on the sale of unhealthy products in schools and increasing the healthy food choices available for school meals.
* **Work place based program** (2006)70. Voluntary but supported by the program as it identified safety and health as national priorities for work. They recently ratified the ILO Convention No. 187 (2006) on the promotional framework for safety and health.
* **Program Healthy life and obesity** (Programa Vida Sana y Obesidad)71,72.It consists of a multi-professional treatment of obesity by nutritionist, psychologist and physical education teacher. It includes counselling and physical activity program to control malnutrition by excess, improve metabolic profile and physical condition in the population between 6 and 65 years with risk factors for developing diabetes mellitus and diseases cardiovascular. The program operates in various places, such as a community center, at school or at the health centers.
* **Program Healthy life** (Programa Vida Sana)71. It is a program from the Ministry of Health for the integral treatment to reduce the risk factors for diabetes and hypertension through an intervention on physical activity and nutrition for 1 year.
* **VIDA Chile**73**.** Program chaired by the Minister of Health and integrated by 28 public and private institutions throughout the country. Its function is to advise the ministries to the development of healthy policies and coordinate a strategic action plan of inter-sectorial nature. In 2000, Vida Chile established five priorities for this decade, including reducing the prevalence of obesity.
* **School meal program** (Programa de Alimentación Escolar)74. Program created by the National Council to help schools and scholarhips (Junta Nacional de Auxilio Escolar y Becas; JUNAEB). It provides meals (breakfast, lunch, snacks and dinner) based on vulnerability, in schools.

**Colombia**

***Governmental structures for obesity prevention***

* **Inter-sectorial commission on Nutrition and Food Security** (Comisión Intersectorial de Seguridad Alimentaria y Nutricional, CISAN)75. It was created by the National Council of Social and Economic Policy, Conpes) 113 in 2008 and it is the entity that will conduct nutrition and food surveillance.
* **National Inter-sectoral Commission for the Coordination and Higher Orientation of the Promotion, Development and Measurement of the Impact of Physical Activity**. It was created by the National Council for Agriculture and Forestry Research (Consejo Nacional de Investigaciones Agropecuarias y Forestales, CONIAF)76, and the table for healthy, safe and sustainable mobility: road safety has been managed, infrastructure provision that promotes practice of physical activity, incentives to use of alternative transport and the varied offer of activities for the participation of the community.
* **National Policy in Food security and Nutrition** (Política Nacional de Seguridad Alimentaria y Nutricional)77. Created by the Ministry of Agriculture in 2008 to guarantee to the population access to healthy foods.
* **National Plan of Food and Nutrition Education** (Plan Nacional de Educación Alimentaria y Nutricional)78. Law 1355 of 2009, also known as the obesity law, is currently the guide to establish inter-sectorial actions to prevent, treat, and control obesity and non-communicable diseases. The law also describes strategies to promote healthy eating, such as 1) ensuring fruit and vegetable availability in schools; 2) implementation of food education programs in schools; 3) regulation of highly caloric food and beverage intake in schools; 4) encouraging consumption, production, and marketing of fruit and vegetables; and 5) regulation of fat content of food, mainly trans and saturated fats. The law also promotes physical activity through strategies such as increasing physical education time in schools, promoting active breaks at work sites, and supporting active transportation. It emphasizes actions such as increasing cyclist and pedestrian road safety and the number and frequency of public spaces used for leisure activities, such as the bike route (Ciclovía), a mass recreational program in which streets are closed temporarily to motorized transport, allowing access only to walkers, runners, roller blades, and cyclists.
* **Comprehensive Care Route for the Promotion and Maintenance of Health, and the Integral Route of Health Care for the perinatal maternal population**79: (Resolution 3280 of 2018). These care routes are aimed at promoting health, preventing risk, preventing disease and generating a culture of health care for individuals, families and communities; includes as mandatory care for the entire Colombian population: comprehensive assessment of health status, early detection of alterations, specific protection and education for health, which contains care for caregivers. They contemplate all the moments of life and define care for the promotion of exclusive breastfeeding and guidelines for health education in the areas of promotion of healthy eating and physical activity.
* **Ten-Year Plan of Breastfeeding**80: It is constituted as a policy instrument that seeks to strengthen the development of institutional capacities for the promotion, support and protection of breastfeeding, develop mechanisms of appropriation, mobilization and social responsibility in favor of breastfeeding and the consolidation of political management in order to favor actions for the feeding of children under two years of age.
* **Surveys related to obesity monitoring**
	+ National Survey of Nutritional Situation National Nutritional Survey (Encuesta Nacional de la Situación Nutricional en Colombia, ENSIN)81. ENSIN is a reference study whose objective is to analyze the food and nutritional situation as an input for the formulation, monitoring and reorientation of public policies on food and nutrition. The ENSIN is part of the population surveys of strategic interest for public policies that have been developed since 2005, with the last survey conducted in 2015.
	+ National Demographic and Health Survey (Encuesta Nacional de Demografía y Salud, ENDS)82. It is done every five years since 1990; with the last survey conducted in 2015.
	+ Identification System of Potential Beneficiacies of Social Programs (Sistema de Identificación de Potenciales Beneficiarios de Programas Sociales, SISBEN)83. The SISBEN is a system designed by the Colombian National Government to identify families who could benefit from social programs. It considers sociodemographic characteristics (family composition, employment status, family income, and educational level), living conditions (construction type and materials), and access to public utilities (sewer, electricity, potable water, and garbage collection).

***Regulations to support healthy behaviors***

* **Law $ 1.355**84**.** Declaration of obesity as a chronic condition and strategies for its control, attention and prevention. This was approved by Congress in 2009. It established that this law will be undertaken by different ministries to promote a healthy and balance diet and physical activity, regulation of trans and saturated fats, of food labels, foods available in schools, marketing of foods and beverages, and commercialization of products for weight loss.
* **Law proposal 244** (Proyecto de Ley 244)85. The Ministry of Health in 2016 proposed a law to regulate the School Food Program and create a National Agency for School Food.
* **Food labeling Law proposal 165**86. This law proposes to establish an additional monochromatic labeling of processed foods, submitted in 2017.

***Guidelines for promoting healthy behaviors***

* **Guidelines for the acquisition and preparation of healthy foods** and their implementation in the contractual processes of the food assistance programs run by the state: which establishes guidelines for the promotion of healthy eating in the food support programs, aims in the first instance to promote the consumption of fresh and natural foods, through compliance with the application of the RIEN Energy and Nutrient Intake Recommendations and the GABA Food-Based Dietary Guidelines, and avoiding or reducing the consumption of processed and ultra-processed foods; This document defines critical nutrient content limits that serve as an input for the selection of suppliers.
* **Guidelines for the prevention, diagnosis and treatment of obesity** (Guía de Práctica Clínica para la prevención, diagnóstico y tratamiento del sobrepeso y la obesidad en adultos)87. Created by the General system for the Health Social Security System in 2016.
* **Food-Based Dietary Guidelines for the Colombian population under 2 years of age, pregnant and lactating**88**.** Created in 2018; this tool seeks to promote the health of women during pregnancy and breastfeeding period and of children under 2 years of age, for the prevention of malnutrition and noncommunicable diseases related to food, through the adoption of healthy eating practices. Through 17 messages: 5 messages during pregnancy, 3 messages for breastfeeding women, 8 messages for children under 2 years and 1 transversal message for the 3 groups. These messages provide recommendations regarding support, promotion and protection of breastfeeding, food groups, recommended times and number of exchanges per day for each population group.
* **Food-Based Dietary Guidelines for the Colombian population over 2 years old**89**.** It was created in 2015 as a national tool in the field of healthy eating, which seeks to contribute to the promotion of healthy lifestyles, control deficiencies or excesses in food consumption and reduction of the risk of diseases related to food, through 9 comprehensible messages, and guides families, educators, consumer associations, media and food industry, among other social actors, on how their food should be. Likewise, it provides the number and size of servings for each group of age and gender recommended within the framework of a healthy diet, through the varied and balanced consumption of 6 food groups: Cereals, roots, tubers and bananas, fruits and vegetables, meats, legumes and seeds, milk and dairy products, fats and sugars.
* **Guidelines for healthy living**(Documento guía Alimentación Saludable)89. Created by the Ministry of Health in 2013.

***Population-wide or community-based programs or initiatives***

* ***Familias en Acción***90**.** Created in 2012 and consists of a conditional subsidy to education and nutrition.
* **Promotion of fruit and vegetable consumption**91**:** Created by the Ministry of Health in 2015 to develop different actions articulated with other sectors, among them: open competition to generate creative processes that could be applied to the implementation of fruit and vegetable distribution points, from this experience they were awarded 6 applicable proposals in the environments and from which the winning proposal for the work setting was chosen: the fruit and vegetable dispensing machine. Manuals and ABCs for the implementation of these points, inclusion of this topic in the territorial health plans of the different territories of the country, finally a technical document of promotion of consumption of fruits and vegetables was developed, which defines the lines of action, responsible to promote the consumption of these natural and fresh foods.
* **National technical guidelines for the promotion of fruits and vegetables**92**.** Created by the Ministry of Health in 2015 to promote the consolidation of intersectoral scenarios that contribute to the improvement of the entire fruit and vegetable chain and highlights the importance of addressing plans, programs and actions with an integrating and differential approach to cultural, ethnic and social conditions of the country. The technical guidelines and their examples of guiding actions are also perceived as an opportunity to recover the culinary traditions that constitute the gastronomic and biological heritage of the country.
* **Healthy educational environment strategy** (Estrategia de Entorno Saludable)93. Created by the Ministry of Health in 2013 to contribute to the sustainable development of the students and the optimal development of their abilities, promoting a culture of health in the educational environment. It is applied at the national, regional and local level to achieve a comprehensive and articulated intervention of the educational community of the Educational Institutions in the Colombian territory. It includes healthy schools and healthy homes.
* **School Meal Program** (Programa de Alimentación Escolar)94. It offers a complementary portion of foods to children in schools.
* **Healthy school stores**: within the framework of the Intersectoral Commission of Food and Nutritional Security (CISAN), a document was worked in conjunction with the Ministry of National Education to guide actions to promote healthy eating in school cafeterias, so that can serve as a technical input for the regulation and restriction of processed and ultra-processed foods with excessive sodium, sugars, saturated and trans-fat content.
* **Promotion of physical activity**: technical guidance has been developed through technical documents, communication tools (commercial Plan A, move to life, do not stand still, physically activated, the remedy) and ABC's, nutritional guideline (overweight / obesity, anemia and malnutrition). Likewise, and in order to favor the conditions of the environments through transversal actions in promotion and promotion of physical activity that transcend health to all policies, they have been strengthening with other sectors such as: National Parks, Chancellery, Ministry of Transport, Road Safety Agency, Ministry of Information Technology and Communication, Ministry of Environment, Ministry of Culture, Association of Sports Doctors, National University, Colombian foundation of the Heart, Report research group of Qualifications in physical activity in children and adolescents in Colombia, sport sector table, among others.
* **Bike Routes** (Ciclovías)95**.** Program created in 1974 in Bogota but established in 1995 to close streets during Sundays and holidays for the population to exercise. Currently, it allows 1.500.000 users for different physical activities in Bogota, but it has expanded to other cities in Colombia.

**Costa Rica**

***Governmental structures for obesity prevention***

* **Integral plan for the prevention of overweight and obesity in childhood and adolescence** (Plan para el Abordaje Integral del Sobrepeso y la Obesidad en la niñez y la adolescencia)96. Created in 2017 by the Ministry of Health.
* **Plan for the prevention of obesity in children and adolescents 2014-2025** (Estrategia para la Prevención de la Obesidad en la Niñez y Adolescencia)97. Developed by the Counsel of Ministries of Health in Central America (Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua and Panama) and Dominican Republic (Consejo de Ministros de Salud de Centroamérica y República Dominicana, COMISCA). It includes 3 strategies: a) Actions at the population level to prevent obesity; b) Actions at the clinical level to treat the cases of overweight and obesity; c) Policies to regulate the commercialization, marketing and publicity of foods towards these groups.
* **National Plan to Reduce Public Consumption of Salt/Sodium in Costa Rica** (Plan Nacional para la Reducción del Consumo de Sal / Sodio en la población de Costa Rica 2011-2021)98. Organized by the Ministry of Health of Costa Rica and the Costa Rican Institute of Research and Teaching in Nutrition and Health (INCIENSA).
* **Surveys related to obesity monitoring**
* National Survey of Nutrition (Encuesta Nacional de Nutrición)99. This survey is done to evaluate the nutritional situation of the population to develop policy, plans and programs to promote health and evaluate the impact of past interventions.
* Global school-based student health survey (Encuesta Global de Salud Escolar)100. It is a collaborative surveillance project to measure and assess the behavioral risk factors and protective factors in 10 key areas among young people aged 13 to 17 years. It was conducted in 2009.

***Regulations to support healthy behaviors***

* **Decree # 30256 Processed food labeling** (Etiquetado Nutricional de los Alimentos Preenvasados)101. Created in 2002 to ensure that food labeling help consumers choose foods by labeling the nutrients and sound nutritional information.
* **Front-of-Package Proposal**102**.** Developed by the Counsel of Ministries of Health in Central America (Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua and Panama) and Dominican Republic (Consejo de Ministros de Salud de Centroamérica y República Dominicana, COMISCA) in 2018.

***Guidelines for promoting healthy behaviors***

* **Dietary Guidelines** (Guías Alimentarias para Costa Rica)103. Created in 2011 by the Ministry of Health, Ministry of Education, PAHO, University of Costa Rica, Social Security in Costa Rica (Caja Costarricense del Seguro Social), and CEN*-*CINAI (Dirección Nacional de Centros de Educación y Nutrición y de Centros Infantiles de Atención Integral).

***Population-wide or community-based programs or initiatives***

* **Food and Nutrition Program of school children and adolescents** (Programa de Alimentación y Nutrición del Escolar y del Adolescente, PANEA)104. This program offers complementary food to children, it promotes healthy eating, health food habits. It is managed by the Ministry of Education.
* **National Orchard Program (**Programa Nacional de Huertas)105. Created by the Ministry of Education under the Department of Food and Nutrition to offer the educational centers the necessary tools to initiate school gardens to supply healthy and fresh foods for the school cafeteria.
* **5-a-day Campaign**106**.** Created by the Department of Health in 2009 to promote the consumption of fruits and vegetables.
* **Program to provide Nutritional and Infant Developmental services** (Programa Provisión de Servicios de Salud “Nutrición y Desarrollo Infantil”)107. Created by the Ministry of Health in 1969 to improve or maintain the development and growth of children 0-13 years that live in poverty by providing preventive nutritional services. It provides all meals in the integral centers, it distributes milk to rural areas, it distributes foods on a monthly basis to families in need.

**Ecuador**

***Governmental structures for obesity prevention***

* **National Plan for Good Living 2017-2021** (Plan Nacional para el Buen Vivir)108. This plan has several strategic outcomes: Refugees, displaced persons and vulnerable people in Ecuador are enabled to meet their basic food and nutrition requirements all year long; Smallholder farmers, especially women in targeted areas, durably increase their incomes and improve their productivity by 2021; Food-insecure communities and individuals in areas that are highly vulnerable to climate change, and government institutions have strengthened capacity for adaptation to climate change by 2021; and National institutions and programs in Ecuador, including social protection programs, are supported to reduce food insecurity and malnutrition by 2021.
* **Surveys related to obesity monitoring**
* National Survey of Health and Nutrition (Encuesta Nacional de Salud y Nutrición, ENSANUT)109: It is done to escribe the situation of maternal and child health, evaluate risk factors of diseases, evaluate nutritional status, food consumption, micronutrient status, access to programs, physical activity and sedentary lifestyle, access to health services by age, sex, and other socio-demographic characteristics. It has been done in 2012 and in 2018.

***Regulations to support healthy behaviors***

* **Traffic Light Labeling** (2014)110. Alerts customers about levels of fat, sugars, and salt in pre-packaged items, considering them high (red), medium (yellow) or low (green). Implemented through the Ministry of Health, therefore not a law, despite being mandatory.
* **Regulation on SSB** (2013)24**.** All SSBs with >7.5g added sugar/100 mL are restricted. Tax of USD $0.18/100g sugar on SSB w/ ≥25g sugar/liter.
* **Proposal of regulation on publicity and promotion of processed foods** (Proyecto de Reglamento Sustitutivo de Publicidad y Promoción de Alimentos Procesados)111. Submitted by the Ministry of Health 2013.
* **Regulation of foods sold in schools (**Reglamento de bares Escolares del Sistema Nacional de Educación)112. Created by the Ministry of Education in 2014.

***Guidelines for promoting healthy behaviors***

* **Dietary guidelines based on foods for Ecuador** (Guías Alimentarias Basadas en Alimentos de Ecuador)113. Created in 2018 by the Ministry of Public Health.
* **Dietary and nutritional guidelines for parents (**Guía de alimentación y nutrición para padres de familia)114. Created in 2017 by the Ministry of Public Health and Ministry of Education.
* **Dietary, nutrition, and physical activity guidelines for teachers** (Guía de Alimentación, Nutrición y Actividad Física para Docentes)115. Created by the Ministry of Public Health.

***Population-wide or community-based programs or initiatives***

* **School meal Program** (1999)29. Deliver breakfast, lunch, and snacks to 726 beneficiaries of 14 educational institutions that have student residence. Rations deliver 3-20% of total energy and nutrient needs, including protein from animal sources. Mostly pre-packaged foods. Early education (3-4): Flavored oatmeal drink w/ biscuit, milk as snack (516 kcals)”. General education (4-15 yrs): Flavored oatmeal drink w/ 2 grains (biscuit, cereal bar, granola), milk as snack (632 kcals). High School education: Flavored oatmeal drink 2 grains (biscuit, cereal bar, granola), milk as snack 2x/day. Currently, it is in transition phase to Ministry of Education, but WFP foresees positive growth.
* **Promoting Healthy Environments** (2011)116. It promotes the development of healthy street markets, the promotion of traditional foods, of safe parks, and recreational bike paths.
* **Feed Ecuador (**Aliméntate Ecuador) **2003-2011**117**.** National strategy to contribute to the food and nutrition of the most vulnerable by providing foods. It includes the Healthy Food Project (Proyecto Promoción de Alimentos Saludables, PAS), which seeks to improve the nutritional habits of the families.

**El Salvador**

***Governmental structures for obesity prevention***

* **Plan for the prevention of obesity in children and adolescents 2014-2025** (Estrategia para la Prevención de la Obesidad en la Niñez y Adolescencia)97. Developed by the Counsel of Ministries of Health in Central America (Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua and Panama) and Dominican Republic (Consejo de Ministros de Salud de Centroamérica y República Dominicana, COMISCA). It includes 3 strategies: a) Actions at the population level to prevent obesity; b) Actions at the clinical level to treat the cases of overweight and obesity; c) Policies to regulate the commercialization, marketing and publicity of foods towards these groups.
* **National inter-sectorial Plan for the Prevention of Overweight and Obesity 2017-2021** (Plan Estratégico Nacional Intersectorial para el Abordaje Integral del Sobrepeso y Obesidad 2017-2021)118. Developed by the Ministry of Health in 2017.
* **National Plan for prevention of non-communicable diseases** (Plan Estratégico Nacional Multisectorial para el Abordaje Integral de las Enfermedades no Transmisibles)119. Created in 2017 as a multisectoral and integral approach to non-communicable diseases, including obesity, with emphasis on primary care using evidence-based health promotion to influence the determination of social, risk factors and protectors of the non-communicable diseases.
* **National Policy for the Comprehensive Approach of non-communicable diseases** (2019)120. The purpose of this policy is to raise the comprehensive approach in the care of people with noncommunicable diseases, non-communicable diseases and the social determinants that accompany it to the highest technical-political level of the national agenda. The Ministry of Health, with the support of the PAHO/WHO in coordination with other government institutions, is committed to promoting the adoption of healthy lifestyles and ways of implementing regulatory mechanisms in unhealthy food products, medicines and pesticides.
* **National Food and Nutrition Security Policy** (2018)121. It aims to improve the availability of food in the country, through the strengthening of production and productivity, the stability of prices and the increase of the minimum wage to enable a greater purchasing power to families and ensure access adequate food. The Food and Nutritional Security Policy will provide comprehensive attention to the population, with emphasis on the most vulnerable groups and those affected by emergencies.
* **Agreement between Health Ministry and National Institute of Sports** (Convenio de Cooperación entre el MINSAL y el Instituto Nacional de los Deportes 2016-2019). This agreement was established to implement the National Plan for the promotion of physical activity.
* **Surveys related to obesity monitoring**
	+ - National Health Survey (Encuesta Nacional de Salud)122. This survey is a home-based survey among women of reproductive age and children 0-5 years. The first survey was conducted in 2014.
		- Global school-based student health survey (Encuesta Global de Salud Escolar)123. It is a collaborative surveillance project to measure and assess the behavioral risk factors and protective factors in 10 key areas among young people aged 13 to 17 years. It was conducted in 2013.

***Regulations to support healthy behaviors***

* **Tax on sugary beverages**124(Legislative decree Nº 237) (2009). The purpose of this Law is to tax gaseous, isotonic, fortifying or energizing beverages, juices, nectars, soft drinks and concentrated or powdered preparations for the production of beverages with the taxes defined therein.
* **Integral law to protect children and adolescents**125(Legislative decree Nº 839 - Ley de Protección Integral de la Niñez y de la Adolescencia) (2009). It has the purpose of including the right to a decent and adequate standard of living for all children and adolescents, including the right to obtaining a nutritious and balanced diet under the requirements and regulations established by the health authorities.
* **Regulation on foods sold in stores and cafeterias in schools**126(Normativa de Tiendas y Cafetines Escolares Saludables) - Agreement Nº 733 (2017). It prescribes that the Ministry of Education will issue the regulations that have as objective to regulate and control the commercialization of foods with a high content of fat, salt and sugar, and of all those that do not contribute to a healthy food in school stores and cafeterias (Article 113). It will establish the amount of nutrients allowed for the commercialization of food and beverages in school stores and coffee shops; compliance is mandatory in all schools in the country. Processed and ultra-processed food products that contain critical nutrients such as free sugars, sodium, total fats, saturated fats, trans fats and sweeteners that are marketed and distributed in schools must meet the criteria established in this regulation. It approves the Healthy School Stores and Cafeteria Regulations, which aims to regulate and control the commercialization of foods high in fat, sodium and sugar and all those who do not contribute to a healthy diet inside the school stores and cafeterias of the Official Centers and Private Education Centers. In order to promote healthy eating habits and lifestyles, schools should promote nutrition education and promote periodic physical activity, as a strategy for the prevention of overweight, obesity, high blood pressure, diabetes, dyslipidemias among other noncommunicable diseases.
* **Front-of-Package Proposal**102**.** Developed by the Counsel of Ministries of Health in Central America (Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua and Panama) and Dominican Republic (Consejo de Ministros de Salud de Centroamérica y República Dominicana, COMISCA) in 2018.

***Guidelines for promoting healthy behaviors***

* **Dietary Guidelines for Families in El Salvador** (Guía Alimentaria para las familias Salvadoreñas)127. Created in 2011 by the Ministry of Health.

***Population-wide or community-based programs or initiatives***

* **School Feeding Program** (Programa de Alimentación y Salud Escolar)128. Program by the Ministry of Education to provide food, nutritional education, school garden, and milk.
* **Healthy lunch box ("A HEALTHY LONCHERA”)**129: campaign for the prevention of obesity launched in 2016.
* **Feeding “El Salvador”** (Nutrimos El Salvador)130: Established in 2017 to continue supporting the Government of El Salvador in its efforts, to guarantee food security and improve the nutritional status of the most vulnerable populations. It is in conjunction with the World Food Program, extends the complementary feeding coverage. Through the delivery of nutritional bonds in communities that live near or under the line of poverty, it is sought to prevent the delay in growth of children who are in their first 1,000 days of life. With these bonds, pregnant women can acquire a food supplementary called "Super Cereal Plus", which contains milk and is fortified with vitamins and minerals that help cover nutritional requirements of the mother and boys and girls.
* **Joint effort between the Ministry of Health and the National Sports Institute**131. Established in 2017 to promote physical activity as part of the comprehensive care of people with risk factors, mainly overweight and obesity, who suffer from diseases such as diabetes mellitus, arterial hypertension and renal disease. Likewise, it establishes the implementation of continuous actions in the health facilities of MINSAL to prescribe physical activity to the population that suffers from noncommunicable diseases: Diabetes Mellitus, Arterial Hypertension and Kidney Diseases as tools to achieve better control and prevention of complications.
* **Move Program** (Muevete program)132. Program created in 2013 to promotes physical activity, through which the National Sports Institute of El Salvador (INDES) dynamizes and puts at the disposal of social sectors, of different ages, its sports spaces, for the creative occupation of leisure time.
* **I want to live healthier Program** (Quiero Vivir Sano)133. Collaboration established in 2015 between the Adventist schools, together with the Ministry of Health and the Ministry of Education to improve health and prevent diseases. Integrates health (in the formal and non-formal curriculum) into educational programs by teaching students how to develop habits (drinking natural water, a positive attitude, eating healthy, physical activity, adequate rest, self-control, breakfast more, dine less and happiness).
* **Agriculture Bank Program** (Program Banca Agropecuaria)18: for micro, small and medium-sized agricultural producers. The program seeks to boost the production of basic grains, livestock, cocoa, fruits, vegetables, honey, fishing, coffee and sugar, among others.
* **Profarmers El Salvador**18**:** in collaboration with the World Food Program of United Nations. Seeks 50,000 small producers and producers of corn, beans, and sorghum have greater opportunities to enter local, national and regional business and to improve the capacity of the Ministry of Agriculture and Livestock.
* **Bike route** (Ciclovía)95**:** an easily adaptable program that is provided to the entire population and that increases physical activity. Streets are temporarily closed to motorized traffic, generating wide and safe spaces for pedestrians, runners, cyclists and others for non-motorized means of recreation.

**Guatemala**

***Governmental structures for obesity prevention***

* **National Committee for the prevention of non-communicable chronic diseases and cancer** (Comisión Nacional para la Prevención de Enfermedades Crónicas No Transmisibles y Cáncer)134. A committee organized on February 11, 2014 which among many objectives, prioritizes the complete eradication of obesity in children.
* **Plan for the prevention of obesity in children and adolescents 2014-2025** (Estrategia para la Prevención de la Obesidad en la Niñez y Adolescencia)97. Developed by the Counsel of Ministries of Health in Central America (Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua and Panama) and Dominican Republic (Consejo de Ministros de Salud de Centroamérica y República Dominicana, COMISCA). It includes 3 strategies: a) Actions at the population level to prevent obesity; b) Actions at the clinical level to treat the cases of overweight and obesity; c) Policies to regulate the commercialization, marketing and publicity of foods towards these groups.
* **National Policy on Food security** (Política Nacional de Seguridad Alimentaria y Nutricional)135. Developed in 2006 by the Secretary of Food security (SESAN) to guarantee the public’s rights to nutritious meals and to an active and healthy lifestyle that can contribute to their development.
* **Surveys related to obesity monitoring**
	+ - National survey on maternal and infant health (Encuesta Nacional de Salud Materno Infantil)136. It is a representative home-based survey among children, women and men. The first survey was conducted in 2008-09 and the last survey in 2014-15.
		- Global school-based student health survey (Encuesta Global de Salud Escolar)137. It is a collaborative surveillance project to measure and assess the behavioral risk factors and protective factors in 10 key areas among young people aged 13 to 17 years. It was conducted in 2015.

***Regulations to support healthy behaviors***

* **National Sports Law 76-97**138. Created to promote, educate, research and practice sports and physical recreation as an integral part of the development of individuals and communities.
* **Health code** (Decree # 90)139. Created in 1997 by the Ministry of Health, in coordination with other sectors and agencies to promote the availability, production, consumption and utilization of foods leading to health.
* **Law of National System for Food Security** (Ley del Sistema Nacional de Seguridad Alimentaria y Nutricional)140. Law that ensures since 2004 food security and also keeps in mind nutrition necessary.
* **Decree #16-2017 School meal program** (Ley de Alimentación Escolar)141. Law created in 2017 to ensure the distribution of healthy and nutritious meals in schools. This law also guarantees that schools will educate the students to eat nutritiously and adequately.

***Guidelines for promoting healthy behaviors***

* **Food Based Dietary Guidelines**142**.** Developed in 2012 bythe Ministry of Public Health, INCAP and PAHO.

***Population-wide or community-based programs or initiatives***

* **Healthy Schools Program (Estrategia Escuelas Saludables)**143,144**.** Virtual course launched on March 20, 2015 which promotes the adoption of healthier life choices, especially in the educational environment. The following strategies, which are supported in the virtual course, are also encouraged through regular conversations at schools: how to pack a healthy lunch and participating in physical activities.
* **School meal Program** (Mi Comedor Seguro)145. Program created by the Ministry of Social Development in 1969 to provide a rationed, nutritious meal that is fulfilling, balanced, sanitary, and affordable for those families who do not have the means to access such meals.
* **School breakfast program** (Programa De Desayunos Escolares)146. Program administered by the Ministry of Education since 2010 to deliver breakfast to all children in preschool and elementary school. These breakfasts are prepared by the student’s mothers and are supposed to be a good source for well-balanced nutrition.
* **Food assistance program** (Programa de Asistencia Alimentaria).147 This program is ran by the Department of Food Assistance since 1969 to prevent food insecurity, this program dedicates itself to the distribution of corn, beans, rice, ‘bienestarina’ (a dietary supplement), and oil.
* **My food** (Mi Comidita)148. National program for the distribution of vitamins and meals for children under two years of age.

**Honduras**

***Governmental structures for obesity prevention***

* **National Health Plan** (Plan Nacional de Salud) 2021149. Created by the Ministry of Health in 2005 with the objective of promoting activities for healthy lifestyles and reducing the risk factors for non-communicable diseases.
* **Plan for the prevention of obesity in children and adolescents 2014-2025** (Estrategia para la Prevención de la Obesidad en la Niñez y Adolescencia)97. Developed by the Counsel of Ministries of Health in Central America (Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua and Panama) and Dominican Republic (Consejo de Ministros de Salud de Centroamérica y República Dominicana, COMISCA). It includes 3 strategies: a) Actions at the population level to prevent obesity; b) Actions at the clinical level to treat the cases of overweight and obesity; c) Policies to regulate the commercialization, marketing and publicity of foods towards these groups.
* **Policy of long-term Food Security** (Política de Seguridad Alimentaria y Nutricional de Largo Plazo)150. A governmental measure created in 2006 that guarantees Hondurans the nutrition necessary to physically and cognitively thrive, especially for those who need proper nutrition.
* **Surveys related to obesity monitoring**
	+ - National Survey of Demographics and Health (Encuesta Nacional de Demografía y Salud, ENDESA)151. This is a representative home-based survey among 21,362 homes. It provides information on reproduction, family planning, breastfeeding, nutritional status of mothers and children 0-5 years, infant mortality and health of mother and children. It was conducted in 2011-2012.
		- Global school-based student health survey (Encuesta Global de Salud Escolar)152. It is a collaborative surveillance project to measure and assess the behavioral risk factors and protective factors in 10 key areas among young people aged 13 to 17 years. It was conducted in 2012.

***Regulations to support healthy behaviors***

* **Law for the protection of physical activity and sports** (Ley de Protección de la Actividad Física y el Deporte)153. Decree # 203 published in 1984.
* **Law on Food security** (Ley de Seguridad Alimentaria y Nutricional)154. Law created in 2011 that oversees the Food security which makes available the necessary nutrition for Hondurans in general, but specifically those of greater need, for the overall improvement of Honduran nourishment and growth as a nation
* **Law of School Meal** (Ley de Alimentación Escolar). Government law since 2017 to oversee the program Healthy Schools whose objective is to not only educate on health, but provide the means necessary to reach proper health, such as rationed meals.

***Guidelines for promoting healthy behaviors***

* **Food dietary guidelines**155**.** Created in 2013 in collaboration with Ministry of Health, PAHO, FAO, INCAP, the academia, and other organizations.

***Population-wide or community-based programs or initiatives***

* **Healthy School program** (Programa de Escuela Saludables)156. Created in 1998 by the Secretary of Development and Social Inclusion to reduce malnutrition, improve academic performance and promote healthy environments. It provides snacks and promotes school gardens.
* **School meal program** (Programa de Merienda Escolar)157. The school meal program was implemented in 1998 to improve the diet quality of children in schools. In 2010, a total of 1,345,793 children from 17,573 centers were impacted.
* **Glass of milk program** (Programa de Vaso de leche)158. In 2010, the school meal program was complemented with the addition of the glass of milk.
* **Community Meals** (Comedores Solidarios)159. Program provide for community restaurants that sell nutritious and balanced meals for low costs.
* **Community gardens** (Huertos Familiares)160. Created by the Network of Sustainable Development in 2012 to promote community gardens.
* **Presidential program of health, education and nutrition (**Bono Vida Mejor del Programa Vida Mejor)161. This program created in 2010 was implemented by the Secretary of education and Health and by the Program on Family (PRAF) to provide money and to provide micronutrients.
* **Program Better Families** (Programa Mejores Familias)162. Created in 2015 by Secretary of Development and Social Inclusion to promote food insecurity, particularly among women of reproductive age.
* **Activate Honduras** (Honduras Actívate)163 – A program made in 2015 in which Hondurans gather to promote the practice of healthy eating and exercise by participating in various activities such as Zumba, cycling competitions, marathons, among others. This presidential event is one that enforces the idea that exercising at least 30 minutes a day does the body a great help.

**Mexico**

***Governmental structures for obesity prevention***

* **Inter-sectorial group for health, feeding, environment, and** **competitivity** (Grupo Intersecretarial de Salud, Alimentación, Medio Ambiente y Competitividad, GISAMAC). This was created in 2020.
* **National Health Plan, 2013-2018**164**.** The strategies for this plan are to Promote Healthy Attitudes & Behaviors at Personal/Family Level; implement the National Strategy for Prevention & Control of Overweight, Obesity, & Diabetes; Carry Out Actions to Reduce Morbidity/Mortality from Communicable Diseases of Epidemiological Importance; Strengthen Prevention & Control to Adopt Healthy Behaviors in Adolescent Population; and Promote Active & Healthy Aging to Improve Quality of Life in Elderly Individuals.
* **National Strategy for the Prevention of Overweight, Obesity, and Diabetes** (Estrategia Nacional para la Prevención y el Control del Sobrepeso, la Obesidad y la Diabetes)165. Created in 2013 by the Ministry of Health.
* **Integral strategy for social food assistance** (Estrategia Integral de Asistencia Social Alimentaria)166. Strategy under the National System for the Integral Development of Families in which food insecurity is decreased, the quality of nutrition is increased, and orientation on nutrition is set in place.
* **Surveys related to obesity monitoring**
	+ National Survey of Health and Nutrition (Encuesta Nacional de Salud y Nutrición, ENSANUT)167,168. gather information on the health and nutritional status of the Mexican population. The first National Health and Nutrition Survey took place in 2006, the second was in 2012, 2016 and 2018. Previously, the National Nutrition Surveys were conducted in 1988 and 1999. In 2016, data were collected on sleep, diet, physical and leisure activity, health education and literacy, health status, health care use and access, and sociodemographic and household characteristics. An estimated 11,759 individuals ages 5 and up were interviewed. Additional data were acquired with anthropometric measurements, blood tests, and a food frequency questionnaire.

***Regulations to support healthy behaviors***

* **Front of Package Labeling** **2014**169**.** Family size packages show nutrition content for whole package and serving sizes. Shows calorie content according to Dietary Allowance & distinguishes source of the calories. *Ex. Can of Coca Cola - As opposed to “149 calories, 7% DV”, and “37g Sugar, 41% DV” the new label reads “Total Sugar 149 kcal, 41% DV”.*
* **Tax on Sugar Sweetened Beverages 2014**170**.** Implemented 2 laws: 1) 1 peso/liter excise tax on SSB, paid by producer, yielding 10% price increase and, 2) 8% ad valorem tax on purchase price for many non-essential, energy dense snacks (snacks, confectionary, chocolate, etc.; ≥ 275 kcals/100grams).
* **Children Advertising Regulations 2013**169**.** 40% reduction of ads for SSB, chocolate, confectionary, & snacks to children under 12, based on advertising records. The regulations will define day parts which are deemed to be “child targeted” as follows: 2:30 PM – 7:30 PM Monday-Friday and 7:00 AM – 7:30 PM Saturday-Sunday. Products not meeting nutrition criteria to be determined will not be able to be advertised during these day parts if the audience at the time of broadcast is composed of over 35% children under the age of 12.
* **General Health Law** (Ley General de Salud)171. Law that prohibits, among other things, that processed foods low in nutrient density to be sold or serve in schools.
* **Regulation 043-SSA2-2005 Basic services for health, promotion and education in food** (Servicios Básicos de Salud, Promoción y Educación para la Salud en Materia Alimentaria)172. Since January 22, 2006, this measure has set norms for the general health of the public. The norms state the following: physical activities of many kinds are helpful towards health, eating less fats lowers risks of cardiovascular diseases, clean water is the best liquid to hydrate and is free of sugars, contaminations, etc., an adequate diet lowers health risks and results in emotional, intellectual, physical satisfaction.
* **School Health and Nutrition (q11) - Nutrition education included in school curriculum - School age children.** Agreement established in 2016-2017 about the general guidelines for the sale and distribution of foods and beverages in schools and for the installation and maintenance of water fountations in schools: <http://alimentosescolares.insp.mx/>

***Guidelines for promoting healthy behaviors***

* **Dietary guidelines**173**.** Created by the Ministry of Health in 2010.
* **Guidelines on diet and physical activity**174**.** Created by the National Institute of Public Health in 2015.
* **Guidelines for the treatment of obesity**175**.** Created by the National Center of Excellence in Health Technology (Centro Nacional de Excelencia Tecnológica en Salud, CENETEC) in 2012.

***Population-wide or community-based programs or initiatives***

* **Action Specific program: Food and physical activity 2013-18** (Programa de Acción Específico: Alimentación y Actividad Física)176. Program whose goals are to promote healthier eating, promote physical activities, implement educative campaigns for healthy lifestyles, host events that could further the promotions of healthier eating and physical activities, among others. All these goals lead to the ultimate improvements in population health.
* **Check yourself, measure yourself and move (**Chécate, Mídete y Muévete)177 2015. National program encouraging communities to check their weight with a scale in the morning and keep records, as well as by visiting the clinic for a check-up. The second aspect encourages lowering sugar, fat, and salt intake. Exercise is encouraged in the third pillar.
* **11 games for Health (**11 Jugadas para la Salud)178 2012. The objective of the project is to contribute to health and well-being of the student population, with emphasis on the vulnerable population, as adolescents with disabilities (visual, auditory, motor and mental), attention deficit hyperactivity disorders, with disorders of the indigenous population and food, through the culture of care and promotion of school health and physical activity (soccer), in the young people from public high schools.
* **School breakfast program** (Programa de Desayunos Escolares)179. This program contributes to the food security of school age children by providing breakfast to children at risk of malnutrition.
* **Program of food assistance to poor families** (Programa de Asistencia Alimentaria a Familias en Desamparo)180. Program that contributes to the prevention of food insecurity by temporarily providing alimentation support.
* **National program of physical activation** (Programa Nacional de Activación Física)181. Program made under the Republic Government in order to promote physical activity and educate Mexicans on the importance of their physical well-being. The program offers recommendations for meals and exercises for three months. Through such means, the government aims to improve the overall quality of life for Mexicans.
* **Program for food assistance to children younger than 5 years at risk** (Programa de Atención Alimentaria a Menores de 5 Años en Riesgo, no Escolarizados)182. Program that forms part of the strategy on food security in which children of 5 years or less are provided meals containing dietary fiber, beans, fruits, and vegetables accordingly. This program pays special attention to those kids that are vulnerable and unable to attend school. Also, orientation on meals and hygiene is also offered to the parents of children.
* **Program of food assistance to vulnerable individuals** (Programa de Asistencia Alimentaria a Sujetos Vulnerables)183. The National System for the Integral Development of Families is responsible for this program in which individuals at risk of food insecurity are allowed meals containing dietary fibers, fruits and vegetables, beans, and necessary components such as calcium.
* **Program of community meals** (Programa de Comedores Comunitarios)184. Under the Secretary of Well-Being, this program aids children 0-11 years old, pregnant woman, handicapped individuals, and any adults over 65 years old. The aim is to improve nutritional conditions in the previously stated groups of people by provided nutritional meals in communities’ restaurants that are high in quality and in adequate proportions.

**Nicaragua**

***Governmental structures for obesity prevention***

* **Plan for the prevention of obesity in children and adolescents 2014-2025**97(Estrategia para la Prevención de la Obesidad en la Niñez y Adolescencia). Developed by the Counsel of Ministries of Health in Central America (Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua and Panama) and Dominican Republic (Consejo de Ministros de Salud de Centroamérica y República Dominicana, COMISCA). It includes 3 strategies: a) Actions at the population level to prevent obesity; b) Actions at the clinical level to treat the cases of overweight and obesity; c) Policies to regulate the commercialization, marketing and publicity of foods towards these groups.
* **National Policy on infants** (Política Nacional de la Primera Infancia)185. Associated with the National Commission on love for the boys and girls since 2011, it is dedicated to guaranteeing the overall wellbeing of the young. More specifically, they push to educate the children the importance of eating healthy. Additionally, they provide for communities and have schools provide their students healthy meals.
* **National policy on food security** (Política de Seguridad y Soberanía Alimentaria y Nutricional desde el Sector Público Agropecuario y Rural)186. Led by the Ministry of Forestry and Agriculture (MAGFOR) since 2009 to guarantee the availability of meals that are both nutritious and healthy as well as affordable.
* **Surveys related to obesity monitoring**
* National Survey of Demographics and Health (Encuesta Nicaraguense de Demografía y Salud, ENDESA)151. It is administered by the National Institute of Information Development (Instituto Nacional de Información de Desarrollo, INIDE) in collaboration with the Minister of Health. It evaluates maternal and infant health, fertility and reproduction, infant mortality and health of children by measuring growth, knowledge and practice of sexually transmitted diseases, immunizations, diarrhea, respiratory infarctions, pregnancy, post-partum, domestic violence, among others. The first and only was done in 2011-2012.
* Nicaragua Living Standards Measurement Survey (Encuesta Nacional de Hogares sobre Medición de Nivel de Vida, EMNV)187. It is a longitudinal and representative survey of the population. It was conducted in 2001, 2009, 2014 and 2016.

***Regulations to support healthy behaviors***

* **National Food Program** (Programa Nacional de Alimentos)188. Plan executed in 2008 to promote healthy eating by supporting, improving, and enhancing companies and the quality of their productions such as cacao, fruits, greens, among many other foods.
* In 2010, the National Assembly approved compulsory technical standards to regulate food being served in schools.
* **Law of sovereign and food security # 693** (Ley de Soberanía y Seguridad Alimentaria y Nutricional)189. Established in 2009, the purpose of this law is to guarantee the right of all Nicaraguans to have sufficient, safe and nutritious food according to their vital needs; that these are physically, economically, socially and culturally accessible in a timely and permanent manner; and that these foods’ availability, stability, and sufficiency are overseen and implemented by public policies linked to food and nutritional sovereignty and security.
* **Proposed law to prevent obesity and other nutritional ailments and Law to promote healthy foods for children and adolescents** (La Ley para Prevenir la Obesidad y los Trastornos Alimenticios y la Ley de Promoción de la Alimentación Saludable para Ninos, Ninas, y Adolescentes)190. Law established in 2015 proposed to the National Assembly to develop gradual mechanisms to prevent and attend to obesity, overweight, and other nutritional ailments, including preventing the availability/sale of junk foods in schools.
* **Physical education as part of nationwide official school curriculum**191**.** In 2015, law #522 was reformed to include physical activity education and recreation in schools.
* **Nutrition education as part of nationwide official school curriculum**192**.** In 2006, law #582 was reformed to include nutrition education in schools.
* **Proposed law to increase tax on beverages**193**.** In January of 2019, the Treasury Public Credit proposed an increased to the tax on sugary beverages to 15% (currently is 9%).

***Guidelines for promoting healthy behaviors***

* **National Micronutrients Plan (**Plan Nacional de Micronutrientes)194.Created in 2010 to be an Essential Micronutrients Guide and the Nicaraguan Food Composition Table and also to provide guidance for preventing childhood obesity.
* **Dietary guidelines for school children** (Guía para una Alimentación Nutritiva y Saludable del Escolar)195. Developed by the Ministry of Education in 2011.
* **Dietary Guidelines for women during pregnancy and post-partum (**Alimentación de la Mujer Durante el Embarazo, Parto y la Cuarentena)196. Developed by the Ministry of Health.

***Population-wide or community-based programs or initiatives***

* **The Community Health and Nutrition Program**197**.** This programpromotes changes in attitudes and behavior concerning health care and nutrition, particularly for children under age 5 years.
* **Integral program of school nutrition (**Programa Integral de Nutrición Escolar, PINE)198 (1994). This is a strategic program from the Ministry of Education to contribute to the improvement of the conditions of education, nutrition, and food culture of children, young people and adolescents of the country's educational centers. Among its components are: (1) School Snack, first effort and most recognized by the general population consists of the daily delivery of a ration of basic foods: oil, rice, cereal, beans, corn or flour; guaranteeing 30% of the daily energies to girls, boys, adolescents and young people of public and subsidized schools in the country; (2) School Gardens, spaces where educational actions related to nature, planting, care of vegetables, fruit, ornamental and medicinal plants through friendly practices with the environment, food and nutrition, are promoted; (3) School Kiosks: Healthy Food and Hygiene Practices in the Promotion of Values. These are spaces authorized and regulated by the authorities of the educational centers, where healthy and nutritious foods are offered to the children and the educational community in general; (4) Education Food and Nutrition Security, it consists of Nutritional Food Security education as a transversal and thematic axis for the country's basic and secondary education curriculum.
* **Healthy UCA program**199(2011). It prohibits the consumption of tobacco on campus and promotes good sports and nutrition practices. Currently training cafeteria owners to re-design their food offers to make them healthier. Students complain about how expensive healthy foods are compared to junk food in coffee shops. That is why university authorities, for 2018, intend to encourage the owners of these businesses to promote a healthier and more accessible to the student.
* **Program for food for the people** (Programa Alimentos para el Pueblo)200. Program under the Company for Basic Food (ENABAS) which guarantees the town access to corn, beans, sugar, and oil at low prices.

**Panama**

***Governmental structures for obesity prevention***

* **National Plan for Food Security and Nutrition (2009-2015)**201**.** Established by theNational Secretariat for the Food and Nutrition Security Plan (SENAPAN) to reduce food insecurity and increase healthy food access in vulnerable populations.
* **Plan for the prevention of obesity in children and adolescents 2014-2025**97(Estrategia para la Prevención de la Obesidad en la Niñez y Adolescencia). Developed by the Counsel of Ministries of Health in Central America (Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua and Panama) and Dominican Republic (Consejo de Ministros de Salud de Centroamérica y República Dominicana, COMISCA). It includes 3 strategies: a) Actions at the population level to prevent obesity; b) Actions at the clinical level to treat the cases of overweight and obesity; c) Policies to regulate the commercialization, marketing and publicity of foods towards these groups.
* **National Plan for the promotion of health** (Plan Nacional de Promoción de la Salud 2016 – 2025)202. Developed by the Ministry of Health in 2017.
* **Surveys related to obesity monitoring**
* National Survey of Sexual and Reproductive Health (Encuesta Nacional de Salud Sexual y Reproductiva, ENASER)203. It was done in 2009, and in 2014-2015.
* National Survey of Health and Quality of Life (Encuesta Nacional de Salud y Calidad de Vida)204. 2008.
* National Survey of Health (Encuesta de Indicadores Múltiples por Conglomerados, MICS)122 2012.

**Regulations to support healthy behaviors**

* **Policy for improving schools** (2015)205. The Ministry of Health and the Ministry of Education are implementing policies for better education in schools and recommending reducing the consumption of sugary drinks in schools and promoting physical education and outdoor activities.
* **Regulation of Food Supply.** Enactment of regulations for food supply in places selling food for snack within schools. It includes a ban on the supply, sale, donation and advertising of soft drinks (soda or soda), unhealthy snacks (junk), fried foods and pills, candies, chewing gum. They were made through Law 75 (of 15 November 2017) and the Resolutions of the Ministry of Education No. 3623 (from 17 July 2017) and the Ministry of Health No. 049 (of January 30, 2018). [Private communication via email with Dra. Flavia Fontes].

***Guidelines for promoting healthy behaviors***

* **Dietary Guidelines** (Guías alimentarias para Panamá)206. Developed by the Ministry of Health in 2013.

***Population-wide or community-based programs or initiatives***

* **School Meal Program**207,208**.** It was created by Ministry of Education to provide nutritious foods for children who choose to eat lunch at school. The components of a school lunch include nutritionally enhanced biscuits, milk, enriched cream (custard).
* **Plate-Lunch Boxes** (Discos-Loncheras)207,208**.** Nutrition education material created to provide parents who choose lunch from home for their children. It is a graphic representation of what a balanced lunch looks like. Distributed nationwide to all schools.
* **Save your life, eat healthy, move and live better** (Salva Tu Vida, come sano, muévete y vive mejor)209. Campaigned created by the Ministry of Health in 2019 to motivate the population to improve their health to prevent obesity.

**Paraguay**

***Governmental structures for obesity prevention***

* **National Strategy for the Prevention and Control of Obesity**210**.** Prepared in a participatory and multisectoral manner, includes 10-year goals (2015-2025) to address obesity in the country. Within the framework of this Strategy, the Operational Plan for the implementation of the Strategy has been drawn up, highlighting the priority axes to be addressed: Tax on sugary drinks; Front labeling; Regulation of advertising; and the school, work, and community environments (promoting healthy lifestyles in).
* **National Policy for the Development of the Agriculture** (Política Nacional de Desarrollo de la Agricultura Sostenible de Paraguay)211. Managed by the Ministry of Agriculture (2010-2020) to improve the quality of life for the population and the improvement of food security by increasing meal offerings at lower prices and better qualities.
* **Surveys related to obesity monitoring**
* Global school-based student health survey (Encuesta Global de Salud Escolar)212. It is a collaborative surveillance project to measure and assess the behavioral risk factors and protective factors in 10 key areas among young people aged 13 to 17 years. This survey is a relatively low-cost school-based survey which uses a self-administered questionnaire to obtain data on young people's health behavior and protective factors related to the leading causes of morbidity and mortality among children and adults worldwide. It was done in Paraguay in 2017.
* National survey of non-communicable diseases (Encuesta Nacional de Enfermedades no Transmisibles)213. It is planned to conduct the second National Survey of Risk Factors in the course of the year 2019. First one was conducted in 2011.

***Regulations to support healthy behaviors***

* **Law # 4959 for the prevention and treatment of food related conditions and their health effects** (Ley N° 4959 Para la Prevención y Tratamiento de Trastornos de la Alimentación y sus Efectos Dañinos a la Salud)214. Created in 2013, this regulation was established regarding the prevention and treatment of obesity in children, youth, and adults. It entrusts health authorities throughout the country to encourage healthy practices necessary to address the health risks associated with obesity.
* **Mandatory trans-fat labeling** (2006)215.
* **Law of school feeding and sanitary control** (Ley de Alimentación Escolar y Control Sanitario)216. Law created by the Ministry of Education and Culture in 2014 to focus on the health and the food rights of students at school. This law keeps in control the weight of students and implements physical activities so that they are kept active and therefore, healthy.

***Guidelines for promoting healthy behaviors***

* **Dietary Guidelines for Paraguay** (Guías Alimentarias del Paraguay)217. Created by the National Institute of Nutrition and Food (Instituto Nacional de Alimentación y Nutrición INAN) in 2013**.**

***Population-wide or community-based programs or initiatives***

* **Integral Management of Obesity Clinics**218**.** Manual for the management of overweight and obese adults.
* **Project for the Prevention of Obesity in Adolescents**219(2017). Implemented by the Ministry of Health in line with the National Strategy for Prevention and Control of Obesity. The project has several components that include the preparation of the draft bill on marketing and food front-of-package labelling, alliances with municipalities in two localities and the direct training of schoolchildren and adolescents in healthy lifestyles to prevent obesity.
* **Move** (Movete)220. Motto developed in 2017 under the National Strategy for the Prevention and Control of Obesity to raise awareness among the population at a national level about the negative impact of obesity on health and promote actions to promote healthy lifestyles in the general population. For the development of the campaign, a mixed communication strategy will be used, including sending messages to the audience through mass media and making available to the population educational materials and information on the promotion of lifestyles healthy and the prevention of obesity.
* **School feeding program** (Programa de Alimentación Escolar del Paraguay)221. Program to distribute lunches to students at school under the Ministry of Education and Culture. A component of this program entitled “Healthy School Cafeteria” (La Cantina Escolar Saludable) works with the promotion of healthy lifestyle by limiting foods high in salt or sugar and instead offering more fruits, greens, natural juices, water, salads. Moreover, the program attempts to educate students on the benefits to choosing a healthy lifestyle.
* **Live Healthy** (Vivir En Salud)222. This program is managed by the Ministry of Public Health and Social Well-Being to promote healthy lifestyles, especially when it comes to nutrition. In order to get this point across, the program works to educate professionals dealing with sanitation, health, etc. and educators on these topics so that they, too, can promote health to the public.
* **Project to support community meals (**Proyecto de Apoyo a Comedores de Organizaciones Comunitarias)223. Project under the Ministry of Social Development to distribute nutritious meals in the communities in order to prevent food insecurity.

**Peru**

***Governmental structures for obesity prevention***

* **Governmental structures for obesity prevention for Infancy and Adolescence** (Plan Nacional de Acción por la Infancia y Adolescencia)224 2012 – 2021. The goals are to: Guarantee the growth and integral development of boys and girls from 0 to 5; Guarantee the continuation of the growth and integral development of boys and girls from 6 to 11 years of age; Consolidate the growth and integral development of adolescents from 12 to 17 years of age; Guarantee the protection of girls, boys, and adolescents from 0-17 years of age.
* **Plan for policies and strategies for the prevention of non-communicable diseases**225(Lineamientos de Políticas y Estrategias para la Prevención y Control de Enfermedades no Transmisibles) 2016- 2020. A measure against all conditions that are untransmissible including those that result from unhealthy eating: diabetes, obesity, etc. The Ministry of Health designed this measure in order to prevent such conditions and contribute to the overall improvement in the quality of life for Peruvians.
* **Surveys related to obesity monitoring**
* National Survey of Demographics and Family Health (Encuesta Demográfica y de Salud Familiar)226. It monitors and evaluates the indicators of the programs and initiatives. It has been implemented since 1986 every 5 years with the last survey in 2016.
* Global school-based student health survey (Encuesta Global de Salud Escolar)227. It is a collaborative surveillance project to measure and assess the behavioral risk factors and protective factors in 10 key areas among young people aged 13 to 17 years. This is a relatively low-cost school-based survey which uses a self-administered questionnaire to obtain data on young people's health behavior and protective factors related to the leading causes of morbidity and mortality among children and adults worldwide. It was done in Peru in 2010.
* Survey of Nutritional Surveillance in School Children (Encuesta de la Vigilancia Nutricional en Escolares, EVINE)228. This was done in 2013 to evaluate the lunch box in school.

***Regulations to support healthy behaviors***

* **Law for Front-of-Package**229**.** Approved in 2019, this includes advertising warnings Manual for foods with high saturated fat, sodium, sugar, or presence of trans fat to highlight their presence individually with a black octagon that claims “high in “x”” inside.
* **Tax on sugary beverages**230. In 2018, the Ministry of Economy and Finance increased the tax to about 50% for beverages with more than 6 grams per 100 ml.
* **Law # 30021 for the Promotion of Healthy Foods for children** (Ley de promoción de la alimentación saludable para niños niñas y adolescentes)231. This was approved by decree # 017-2017-SA to establish specific technical regulations for the advertisement of processed foods.
* **Decree Nº 012-2018-SA Manual for publicity warning (**Manual de Advertencias Publicitarias)231**.** Law that states that all processed foods must have labels containing all ingredients as well as percentages for sodium, sugar, saturated fats, trans fats, etc. With this it is easier to track the components of one’s food and determine what is natural, what has more or less sugar, and so on. Moreover, institutions that provide alimentation such as schools could with that information implement healthier options.
* **Decree N° 102-2012-PCM**232. In charge of elaborating and proposing the plans and actions necessary so that by 2021 the Peruvian population is free of food and nutrition insecurity. This policy has been set since October 2012.

***Guidelines for promoting healthy behaviors***

* **Dietary Guidelines for Peruvians** (Guías alimentarias para la población Peruana)233. Created by the Ministry of Health in 2019.
* **Guidelines for the Promotion and Protection of Healthy Foods in Educational Institutions**234(Lineamientos para la Promoción y Protección de la Alimentación Saludable en las Instituciones Educativas Públicas y Privadas de la Educación Básica). Created by the Ministry of Health in 2019.

***Population-wide or community-based programs or initiatives***

* **National School Meal Program** **“Qali Warma”**235. Created in 2013. It provides breakfast and/or Lunch depending on region and cereals & products of animal origin. Food prepared & distributed by purchase committees (teachers, parents, educational community).
* **Popular Eaters**235**.** Created in 2013. It consists of food packages of vegetable stew, vegetable oil, and cereal, mainly directed to mothers with overweight and obesity.
* **Milk Glass Program**235**.** Created in 2013. It delivers a food portion of 250 mL milk or equivalent food ration (must meet the established nutritional contribution of 207 Kcal, with a balance of 12–15% protein, 20–25% fat, 60–68% carbohydrate, for 7 days a week. In many cases, not daily, but weekly/monthly delivery.
* **Cooking for Health** 2014235. Studied 432 users of 48 dining rooms in Lima, surveyed to know their willingness to increase spending if offered menus with fresh salads and/or fruit by means of a “discrete choice model”. Demonstrated willingness & interest in spending more money for F&V in Lima dining hall among women.
* **Complementary food program** (Programa de Complementación Alimentaria)236. Program made under el Ministry of Development and Social inclusion in which individuals of poor economic status are provided rationed, nutritional meals so as to improve their health and overall quality of life.

**Uruguay**

***Governmental structures for obesity prevention:***

* **Action Plan for Overweight and Obesity Epidemic** (Plan de Acción para Epidemia de Sobrepeso y Obesidad)237. Created by the Ministry of Public Health in 2018.
* **Surveys related to obesity monitoring**
* Public Health Survey (Encuesta de Salud Publica)238. It is conducted to evaluate the lifestyle habits of the population 15-65 years through a home-based survey. It has been conducted in 2018.
* National survey of risk factors of non-communicable diseases (Encuesta Nacional de Factores de Riesgo de Enfermedades Crónicas no Transmisibles in adults)239. It has been conducted in 2006, 2013 and 2018.
* Survey of Nutrition, Infant development and health (Encuesta de Nutrición, Desarrollo Infantil y Salud; ENDIS)240. It is a survey to evaluate the nutritional status of children, their development and health. It was conducted in 2013, 2015 and 2018.
* National Survey of overweight and obesity (Encuesta Nacional de Sobrepeso y Obesidad, ENSO)241. It is a home-based cross-sectional survey in 900 adults from 18-65years. It was first conducted in 2000 and the last survey was in 2009.

***Regulations to support healthy behaviors***

* **Law #19.140 Healthy eating in educational centers (**Alimentación Saludable en los Centros de Enseñanza)242. Legislation banning unhealthy food and beverage sales on public school premises. Approved by Congress in 2013. The purpose of this law is to protect the health of children and adolescents attending public and private schools and high schools, through the promotion of healthy eating habits in schools.
* **Salt Law (2015) in Montevideo**243**.** The city government made it illegal to have anything with high salt out on restaurant tables. If you want it, you have to ask for it. There needs to be a warning on the menu about salt consumption. Restaurants need to have low-sodium alternatives available to customers. Nationally, bakers have also agreed to lower the sodium content in their products by 10 percent.
* **Front-of-label Executive decree 272/018**244**.** Approved in 2018, this decree regulates labels of packaged food containing an excess of certain nutrients. Food not packaged before the customer, ready to be offered to consumers in Uruguayan territory, require a nutrition facts label and special label placed on the front of the packaging with the following: if sodium, sugar or fat has been added to its manufacturing process or to any of its ingredients, and with a final composition with sodium, sugar, fat or saturated fat content exceeding the values established in the decree. The Ministry of Public Health will have available designs for front of label packaging that consist of octagons on a black background with white edges, with the word “EXCESS” followed by the corresponding nutrient. A separate octagon should be included for each nutrient.
* **Trans fat elimination (2018)**245**.** Government set deadlines for the food industry to reduce the amount of trans fats in food (18 months) for the food industry so that trans fats in their raw materials do not exceed 2% of total fats, nor 5% in ready-made foods. In four years, both types of foods may not include more than 2% trans fats.
* **Food security policy** (Derecho a la Alimentación, Seguridad Alimentaria y Nutricional de la Población)246. Approved in 2018.
* **National integrated sports plan** (Plan Nacional Integrado de Deportes)247. Created in 2012 to promote physical activity and sports.

***Guidelines for promoting healthy behaviors***

* **Dietary Guidelines for Uruguayans** (Guía Alimentaria para la población Uruguaya)248. Created by the Ministry of Public Health and revised in 2016 with the emphasis on reducing obesity.

***Population-wide or community-based programs or initiatives***

* **Food Revolution in School Cafeteria (2012)**249**.** Implemented to ban the sale of soft drinks, snacks, chocolates and other foods considered inappropriate to health in schools; to promote sale of healthy food such as 100% natural juices, fruits and cereals. It began a campaign of good eating habits through advertising in various media and delivery of textbooks to all students.
* **Cooperative Fund for Health Promotion Projects (FUSI) (2016)**249**.** National Strategy for Health Promotion together with the Ministry of Public Health created this program to encourage community health promotion projects and prevention of chronic diseases.
* **Social media campaign** (2019)250. Aimed at sensitizing and raising awareness among the population about the risks of the obesity epidemic. It also aims to advance the front labeling of packaged foods, in order to facilitate the identification of excess salt, sugar and fat.
* **School Meal Program** (Programa de Alimentación Escolar)251. Ran by the Council for Initial Education and Primary School (Consejo de Educación Inicial y Primaria), this program dedicates itself to distributing breakfasts, lunches, snacks and milk to the students attending primary schools so that they develop properly as well as begin to consume the adequate nutrition.
* **National Nutrition Program** (Programa Nacional de Nutrición)252. Program under the Ministry of Public Health in which the right to foods for the satisfaction of necessary nutrition is guaranteed in order to contribute to the improvement of life quality.

**Venezuela**

***Governmental structures for obesity prevention***

* **Plan de la Patria 2013- 2019**253**.** Developed by the National Institute of Nutrition (Instituto Nacional de Nutrición) to: (1) prevent overweight and obesity by secure healthy eating for the population, including increasing the prevalence of exclusively breastfeeding by 70%; (2) to promote healthy environments for physical activity, cultural events and sports to reduce overweight among children by 12% and reduce sedentarism by 50%; (3) to educate the population to promote healthy dietary habits; (4) prevent and control micronutrient deficiencies y promote food security; among others.
* **Surveys related to obesity monitoring**
* National cross-sectional study of obesity in individuals 7-40 years254.

***Regulations to support healthy behaviors***

* **Law 38.094 of food for the workers** (Alimentación para los Trabajadores)255. Law that protects a worker’s right to the benefit of nutritional meals so as to strengthen their health and perform better at work. Apart from a well-balanced meal, workers also receive recommendations on nutritional intake. Law has been in action since 2004.
* In the Constitution of the Bolivarian Republic of Venezuela, article 111 states that "every human being has the fundamental right of access to physical education and sports, which are essential for the full development of his personality"256.

***Guidelines for promoting healthy behaviors***

* **Dietary Guidelines** (El Trompo de los Alimentos, Democratizando la Cultura Alimentaria y Nutricional)257. Created by the National Institute of Nutrition in 2007.

***Population-wide or community-based programs or initiatives***

* **School Meal Program**258**.** Administered by the Ministry of the Popular Power for Education, it provides daily a varied, balanced and quality food to children, adolescents and young people enrolled in the official schools of the Bolivarian Education System*.*
* **Nutrition for Life Program (**Programa Nutrición para la Vida)259. Program developed in 2006 by the National Institute of Nutrition to improve the nutritional status in the country. The program accelerates the necessary measures to address the deficiencies and risks encountered from the direct participation of People's Power in order to obtain effective solutions to the problems resulting from malnutrition; and an institutional approach that recovers the infrastructure and provision of Services for Education and Nutritional Recuperation (SERN) which also trains health personnel attending children living with malnutrition.
* **Strategy for an Active and Nutritional Working Environment** (La Estrategia Espacio Laboral Activo y Nutritivo, ELAN)260. The design of this strategy was created in the 2012 Nutrition Diagnosis Conference and some of the approaches was proposed by WHO in 2004. This was created in response to the high figures of overweight and obesity in the Venezuelan population; seeks to improve the availability and access to physical activity and healthy eating within the labor institutions in order to promote healthy lifestyles. Generate work environments that facilitate Venezuelan workers, food practices and physical activity focused on preventing overweight, obesity and other diseases associated with sedentary lifestyle.
* **Food mission** (Misión Alimentación)261. Program to supply food as well as other primary items at low costs while still maintaining satisfactory qualities. This program driven by the International Agency for Atomic Energy since April of 2003 also allows schools to establish a new food culture in which students eat healthier, more secure, and yet equally delicious meals so as to decrease cases of obesity.
* **NutriPunto Program** (Programa Nutripunto)262. Program by the Ministry of the Public Power for Food in 2007 to increase awareness of the consequences and risks of obesity. This program aims to educate the public on the importance of healthy eating, daily exercising. If an individual were found to be at risk of obesity or obese and experiencing serious health issues, then this program could refer the individual to a team ready to treat and provide the necessary attention in order for the person to get better.

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