

Intersectorial Strategy for Obesity Prevention and Control: RECOMMENDATIONS FOR BRAZILIAN STATES AND MUNICIPALITIES



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ABIA	Associação Brasileira das Indústrias de Alimentação [Brazilian Association of Food Industries]
AC	Estado do Acre [State of Acre]
ANVISA	Agência Nacional de Vigilância Sanitária [National Health Surveillance Agency]
CAISAN	Câmara Interministerial de Segurança Alimentar e Nutricional [Interministerial Chamber of Food and Nutritional Safety]
CEASAS	Centrais de Abastecimento [Supply Centers]
CEI	Coordenação de Ensino do Interior do Estado de São Paulo [Teaching Coordination of the Interior of the State of São Paulo]
CNPq	Centro Nacional de Desenvolvimento Científico e Tecnológico [National Center of Scientific and Technological Development]
COGSP	Coordenação de Ensino da Região Metropolitana da Grande São Paulo [Teaching Coordination of the Metropolitan Region of the Greater São Paulo]
CONAB	Companhia Nacional de Abastecimento [National Company for Food Supply]
CONSEA	Conselho Nacional de Segurança Alimentar e Nutricional [National Council of Food and Nutritional Security]
DEM	Democratas [Democrats]
DHAA	Direito Humano à Alimentação Adequada [Human Right to Adequate Food]
DSE	Departamento de Suprimento Escolar [Department of School Supply]
EAN	Educação Alimentar e Nutricional [Food And Nutritional Education]
EJA	Educação De Jovens e Adultos [Education of Youth and Adults]
ES	Estado do Espírito Santo [State of Espírito Santo]
ESF	Estratégia de Saúde da Família [Family Health Strategy]
FNDE	Fundo Nacional de Desenvolvimento da Educação [National Education Development Fund]
GM/MS	Gabinete do Ministro / Ministério da Saúde [Minister's Desk / Ministry of Health]
IDEC	Instituto de Defesa do Consumidor [Consumer's Defense Institute]
INC	Informação Nutricional Complementar [Complementary Nutritional Information]
LOSAN	Lei Orgânica da Segurança Alimentar e Nutricional [Organic Law of Food and Nutritional Security]
MDS	Ministério do Desenvolvimento Social e Combate à Fome [Ministry of Social Development and Fight Against Hunger]
MEC	Ministério da Educação [Ministry of Education]
MERCOSUL	Mercado Comum do Sul [Common Market of the South - Mercosur]
MS	Ministério da Saúde [Ministry of Health]
MT	Estado do Mato Grosso [State of Mato Grosso]
NASF	Núcleos de Apoio à Saúde da Família [Family Health Support Centers]
OMS	Organização Mundial da Saúde [World Health Organization]
OPAS	Organização Pan-Americana da Saúde [Pan American Health Organization]
PAA	Programa de Aquisição de Alimentos [Food Purchase Program]
PAR	Plano de Ações Articuladas [Articulated Actions Plan]
PAT	Programa de Alimentação do Trabalhador [Worker's Feeding Program]
PBF	Programa Bolsa Família [Bolsa Família Program]

PDE	Programa de Desenvolvimento da Educação [Education Development Program]
PL	Projeto de Lei [Bill]
PLANAPO	Plano Nacional de Agroecologia e Produção Orgânica [National Plan of Agroecology and Organic Production]
PLS	Projeto de Lei do Senado [Bill from the Senate]
PMAQ	Programa de Melhoria do Acesso e da Qualidade da Atenção Básica [Program for the Improvement of Access and Quality of Basic Health]
PMDB	Partido do Movimento Democrático Brasileiro [Party of the Brazilian Democratic Movement]
PNAE	Programa Nacional de Alimentação Escolar [National School Feeding Program]
PPS	Partido Popular Socialista [Popular Socialist Party]
PROHORT	Programa Brasileiro de Modernização do Mercado Hortigranjeiro [Brazilian Program of Market Produce Modernization]
PSB	Partido Socialista Brasileiro [Brazilian Socialist Party]
PSDB	Partido da Social Democracia Brasileira [Brazilian Social Democracy Party]
PSE	Programa Saúde na Escola [Health in School Program]
PSOL	Partido Socialismo e Liberdade [Socialism and Liberty Party]
PT	Partido dos Trabalhadores [Labor Party]
PT do B	Partido Trabalhista do Brasil [Brazilian Labor Party]
PV	Partido Verde [Green Party]
RAS	Redes de Atenção à Saúde [Health Care Networks]
REBRAE	Rede Brasileira de Alimentação Escolar [Brazilian School Feeding Network]
RJ	Estado do Rio de Janeiro [Rio de Janeiro State]
RO	Estado de Rondônia [Rondônia State]
SAN	Segurança Alimentar e Nutricional [Food and Nutritional Security]
SENAC	Serviço Nacional de Aprendizagem Comercial [National Service of Commercial Apprenticeship]
SENAI	Serviço Nacional de Aprendizagem Industrial [National Service of Industrial Apprenticeship]
SESC	Serviço Social do Comércio [Social Service of Commerce]
SESI	Serviço Social da Indústria [Social Service of Industry]
SISAN	Sistema Nacional de Segurança Alimentar e Nutricional [National System of Food and Nutritional Security]
SISMOB	Sistema de Monitoramento de Obras [System for Monitoring of Works]
SP	Estado de São Paulo [State of São Paulo]
SUS	Sistema Único de Saúde [Brazilian National Health System]
UBS	Unidades Básicas de Saúde [Basic Units of Health]
VAN	Vigilância Alimentar e Nutricional [Food and Nutritional Surveillance]

Presentation

In recent years, the number of overweight and obese people has increased alarmingly in Brazil. This phenomenon affects all regions of the country and all genders, and it is more severe among the population of lower income and lower education. It is a national problem that is expressed in a reduction in the quality of life, greater disease burden, difficulties for the daily life of those who are directly affected, for their families and for society in general.

Facing this situation requires joint action among different levels of government, through intersectoral actions and social participation, to promote proper and healthy eating and physical activity in the environment that we live in.

With respect to these circumstances, an interdisciplinary committee to discuss actions for Prevention and Control of Obesity was established in 2011, in the context of the Interministerial Chamber of Food and Nutritional Security (CAISAN). In addition to the ministries of the Chamber, the National Council for Food and Nutritional Security (CONSEA) and the Pan American Health Organization/World Health Organization, are part of the Committee.

This is one of the actions resulting from the articulated and intersectorial effort of this Committee and brings together various actions of the federal government that contribute to the reduction of obesity in the country. We hope that the states and municipalities implement the proposed actions with resolution.

Arnoldo de Campos

Executive Secretary of the Interministerial Chamber of
Food and Nutritional Security

INTRODUCTION

In absolute numbers, it is estimated that 74 million Brazilians of different age groups are overweight (IBGE, 2011), requiring the prompt action of the State in implementing strategies that modify the current trend.

Chart 1. Prevalence of weight excess (overweight and obese) people in Brazil.

Group	1989	2003	2009
Children (5 to 9 years)	13.5	-	33.5
Adolescents (10 to 19 years)	10.8	15.9	20.5
Adults (20 years or more)	35.7	40.6	49.0

Source: PNSN 1989, POF 2003, POF 2008/2009.

The determination of overweight and obesity is in the set of factors that constitutes a way of life for modern people, who continue to consume more processed and ultraprocessed products, industrially manufactured with the addition of substances such as fat and sugar to foods to make them durable, more palatable and supposedly more attractive. These substances are usually derived from foods, such as oils, flours, starches and sugars. Additionally, many are obtained by further processing of substances extracted from foods.

The disproportion of energy balance that determines weight excess (overweight and obesity) is due, in part, to changes in dietary pattern associated with reduced physical activity, both in labor and leisure. The causes are not only individual, but also environmental and social, regarding which the individual, on many occasions,

has little capacity for change (WHO, 1998). From this perspective, dealing with this situation requires that the State adopts complex measures and actions articulated in different levels and sectors with the participation of civil society.

The Intersectoral Strategy for the Prevention and Control of Obesity is an integral component and is in line with the Multiannual Plan 2012-2015, the Plan for Food and Nutritional Security and the Plan of Coping with Chronic Non-Transmissible Diseases, 2011-2022, the latter being led by the Ministry of Health.

The Strategy is aimed at preventing and controlling obesity in the Brazilian population, through intersectoral actions, promoting proper and healthy nutrition and the practice of physical activity in the environment in which we live. For such, the following specific objectives were outlined:

- i. To improve the standard of food consumption of the Brazilian population in order to reverse the increase in overweight and obese people;
- ii. To enhance the consumption of regional food, traditional preparations and promote the increase in availability of appropriate and healthy food to the population;
- iii. To develop strategies that promote the replacement of consumption of processed and ultraprocessed products with high concentrations of energy (calories) and with high levels of sugars, fats, and sodium, with different foods, with an emphasis on whole grains, roots and tubers, pulses, oilseeds, fruits, vegetables, meat and fish, milk and eggs, water;

- iv. To promote the practice of physical activity, particularly in institutional settings such as workplaces, schools and centers of the academy of health, in addition to the promotion of safe urban environments for all life course stages;
- v. To promote and ensure adequate and healthy nutrition in public facilities for food and nutrition security¹;
- vi. To organize care procedures for integral health care of the individual with excess weight/obesity;
- vii. To promote social spaces (squares, parks and gardens) and use of quality collective transport aimed at habits and modes of sustainable living.

¹ Public facilities for food and nutrition security are spaces that allow for the supply, distribution and/or marketing of foods/meals, such as: centers for receiving and distribution of products of family farming, food banks, popular restaurants, community kitchens, day care centers, schools, social assistance entities, hospitals, prisons, universities and others).



The strategy is based on six major axes for action: 1) availability and access to appropriate and healthy food, 2) actions of education, communication and information, 3) promotion of healthy lifestyles in specific environments, 4) food and nutritional surveillance, 5) comprehensive health care of the individual with excess weight/obesity in the health network and 6) regulation and control of the quality and safety of food.



1



1. Availability and access to appropriate and healthy food

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This axis brings together actions that aim to facilitate the physical access of communities and families to food and traditional preparations, and, on the other hand, expand the supply of adequate and healthy nutrition in the public facilities of the country.

With the growing prevalence of obesity and non-transmissible chronic diseases, it became necessary to intensify actions so that family agriculture produced, increasingly, appropriate and diversified food considering regional and cultural aspects; and also that the purchase and donation of food to public facilities are meeting the nutritional needs of the population.

The actions of this axis are related to Family Agriculture, Food Purchase Program(PAA), National Program of School Food (PNAE), Worker Food Program (PAT) and Public Facilities for food and nutritional security.

Main actions that can be carried out by the states and municipalities:

- To support structures such as: food banks, units of assistance and food distribution for family agriculture and educational institutions, in promotion of the distribution of appropriate and healthy food;
- To support existing structures in the local Supply Centers (Ceasas) aiming at the implementation of food collection centers that allow the handling, processing and distribution of appropriate and healthy food for entities that support families in a situation of food and nutrition insecurity;
- To contribute to the development of Family-based Agriculture, by means of supporting the installation, modernization, adequacy of physical structures and technological equipment of the local supply centers (Ceasas);

- To encourage the organization of trade fairs of locally produced food, including organic, facilitating the access to appropriate and healthy food to the population in general;
- To encourage/ensure the inclusion of healthy food in the baskets of food sponsored by local action;
- To support units of food and nutrition in day nurseries and elementary schools by means of the purchase of equipment and utensils for receipt and processing of foodstuffs;
- To make institutional purchases (by means of PAA) of appropriate and healthy food produced by family agriculture through public tender in philanthropic institutions and public facilities;
- To encourage the inclusion of organic and ecologically based products in the market. Learn about the National Plan of Agroecology and Organic Production (PLANAPO), access: <http://portal.mda.gov.br/portal/institucional/planapo>;
- To realize Organic Food Week, to learn more visit: <http://www.agricultura.gov.br/desenvolvimento-sustentavel/organicos/semana-dos-alimentos-organicos>;
- To increase the inclusion of fish in institutional markets, with a focus on encouraging the consumption of fish in school supply;
- To realize Fish Week, to know more visit: <http://www.mpa.gov.br/index.php/topicos/2085-semana-do-peixe-valoriza-peixes-produzidos-no-brasil-1>;
- To comply with Art. 23 of Resolution 26 CD/FNDE, regarding the restriction of purchase of canned food, sausages, sweets, compound feed, semi- ready or ready made preparations, or concentrated food (powder or dehydrated for reconstitution), to learn more visit: <http://www.fnde.gov.br/fnde/legislacao/resolucoes/item/4620-resolu%C3%A7%C3%A3o-cd-fnde-n%C2%BA-26,-de-17-de-junho-de-2013>;

- To comply with Resolution 26 CD/FNDE, Art. 14, paragraph 9, regarding the compulsory weekly offering of three portions of fruit and vegetables in the menus for school meals, to learn more visit: <http://www.fnde.gov.br/fnde/legislacao/resolucoes/item/4620-resolu%C3%A7%C3%A3o-cd-fnde-n%C2%BA-26,-de-17-de-junho-de-2013>;
- To apply at least 30% of the resources of the PNAE in the purchase of food from family agriculture;
- To carry out studies and research on tax policies such as subsidies for food and taxation of processed foods, aiming to replace the consumption of processed and ultraprocessed foods with fruit and vegetables, whole grains, legumes, oilseeds and fish;
- To carry out consultations and/or discussion forums that allow for an extended discussion on Brazilian subsidies in the supply chain, as well as the economic sector in order to encourage the adoption of healthier eating habits by the population;



SUPPLY DYNAMICS

Among the main fruits and vegetables flow and supply channels, the supply centers are highlighted. These depots (Ceasas - Food and Agricultural Supply Centers) are located in the majority of Brazilian states, in areas with large population concentrations, close to strategic highways and roads for the stockpiling of harvests, reception and distribution of products. These and other facts justify, increasingly, the involvement of Ceasas in development of national supply, and may also contribute to actions and social movements for collecting, preparing and distributing products intended for donation to the people in a state of food insecurity. In consideration of the peculiarities, needs and expectations of each locality, the installation, modernization and compliance of supply centers must necessarily be decentralized, through the participation of states and municipalities in which the centers are formally linked, aiming to improve expected outcomes. To learn more about the Programa Brasileiro de Modernização do Mercado Hortigranjeiro (PROHORT) [Brazilian Program for Modernisation of Market Gardens], visit: <http://www.ceasa.gov.br/index.php?pag=10>. Get to know also about the Campaign to encourage the consumption of fruit and vegetables in the Ceasas, visit:

<http://www.ceasa.gov.br/publicador/gesin/campanhaflv.php>

INSTITUTIONAL PURCHASE



The modality of PAA [Programa de Aquisição de Alimentos - Food Purchase Program] institutional purchase, established by Decree 7.775 /2012, allows

the states, municipalities and federal organs to buy food from family agriculture through public tender, reducing bureaucratic procedures. It is important to point out that these institutions already purchase food from large food industries. In most cases, these are processed foods with high content of sugar, salt and fat. This modality allows these entities to have access to the wide variety of products that are currently purchased by the PAA - about three thousand items. To learn more about the PAA, visit: <http://www.mds.gov.br/segurancaalimentar/aquisicao-e-comercializacao-da-agricultura-familiar>.

There are examples of municipalities that perform institutional purchase. Thus, municipal hospitals and social assistance entities maintained by the city are supplied, in part, by local production, which contributes to boosting and structuring family agriculture in the region.

In addition, it is important that the states and municipalities seek to improve mechanisms for movement of general foodstuffs within their territory, in order to enhance short food transits and promote a better and healthier diet.

This is because it reduces intermediaries in the marketing of foodstuffs, which in turn are consumed locally - reducing the need to be transported over long distances, which generates lower environmental impact. The consumer is provided with access to local and healthy foods, according to seasonality and local food culture, and at a fair price.

In this sense, the Centers for Receipt and Distribution of Food play an important role, because - in addition to supporting the local production, supply and consumption circuits - they assist with the activities of receiving and distributing the foodstuffs purchased under the PAA.

OTHER PUBLIC FACILITIES OF SAN

[Segurança Alimentar e Nutricional - Food and Nutrition Security]

An adequate strategy for the promotion of access to and availability of food should consider, for example, all public institutions that offer meals to the public, institutionalized or not, such as schools, kindergartens, penitentiaries and prisons, hospitals, social assistance entities, popular restaurants and community kitchens, among others. Ensuring good conditions at these public facilities for the provision of an adequate and healthy food supply and to seek their convergence with policies such as the PAA, are fundamental steps to SAN consolidation in the national territory.

2



2. Actions of education, communication and information



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The set of proposed actions in this axis aims at sharing knowledge and practices that can contribute to the achievement of better living conditions, health and food and nutritional security for the population. It includes the provision of information and stimulus to self-care, in addition to articulated and continuous strategies of education and mobilization of public opinion, which necessarily must be coordinated with more structured measures that allow choices of healthy food for the population.

The component of information, communication and education confers the dynamism and objectivity required on the establishment of dialogs with the general population, disseminating information and developing educational processes, in various spaces and different social groups. Thus, the various sectors involved in this axis will be responsible for disseminating relevant information and developing actions for the promotion of healthy lifestyles in different social environments, in addition to the implementation of actions to promote proper and healthy nutrition within the population.

This axis must express in its implementation the product of qualified dialog between knowledge, popular culture and technical knowledge. The whole process of training of professionals, the development of technical and informative materials and the final actions should consider that the feeding of people and groups reflects a set of values and habits, which are historically determined, and are influenced by different factors.

This scenario indicates two strategic actions. The first refers to the public agenda implementation of the “Reference Framework of Food and Nutrition Education for Public Policies” in which were explained the conceptual references, approaches,

practices and responsibilities. Additionally, the second is to disseminate the new version of the “Food Guide for the Brazilian Population”, and the Food Guide for children under two years, as technical strategic instruments of food and nutritional education geared towards the individual, the family and the community, in addition to guiding the actions of health professionals and all sectors involved in the food system. Given the centrality and the scope of these actions it is critical that they occur in a wide-ranging and participatory process.

REFERENCE FRAMEWORK OF FOOD AND NUTRITION EDUCATION FOR PUBLIC POLICIES

The Reference Framework of Food and Nutrition Education for Public Policies is the result of a process of constructive participation, with ample scope of reflection on the concepts and practices of EAN [Educação Alimentar e Nutricional - Food and Nutritional Education]. It was elaborated on the basis of the valuable contributions of actors involved in the different areas (health, education, social assistance and food and nutritional security), as well as scholars, teachers, civil society organizations, entities, managers and professionals who work in accordance with the theme of EAN.

To read the Framework visit: <http://www.mds.gov.br/segurancaalimentar> or http://ideiasnamesa.unb.br/files/marco_EAN_visualizacao.pdf



One of the contributions of the Framework was the collective construction of the meaning of EAN: “it is a field of knowledge and of continuous, interdisciplinary, intersectoral and multidisciplinary practice, which aims to promote the practice of autonomous and voluntary healthy eating habits, in the context of the completion of the DHAA [Direito Humano à Alimentação Adequada - Human Right to Adequate Feeding] and the guarantee of the SAN. The practice of EAN should make use of challenging and active approaches and educational resources to encourage dialogue with individuals and population groups, considering all the steps in the food system”. The importance of fostering the public agenda of EAN is understood not only at the federal level, but also at the state and municipal level. It is suggested that the strategic agenda and the intersectorial articulation agenda consider:

- To foster the development of strategies of EAN in different public spaces of the sectors, mainly of Health, Education and Social Development;
- To strengthen the links between national policies and educational actions developed at the local level;
- To prepare and update systematic protocols, manuals and support materials for the actions of EAN carried out in different areas of management, sectors and social spaces;
- To link actions that allow the incorporation of themes of food, health and nutrition in the curriculum and in the teaching projects of schools;
- To foster and support the processes of permanent research, knowledge management and continuing education;
- To institutionalize processes of monitoring and evaluation;
- To adopt a interdisciplinary approach and multidisciplinary action;

- To establish mechanisms for the dissemination of the good practices of EAN in various sectors;
- To establish procedures to encourage and facilitate partnerships with civil society organizations;
- To include EAN actions in the Plano Estadual e Municipal de Segurança Alimentar e Nutricional [State and Municipal Plan of Food and Nutritional Security], Plano Estadual e Municipal de Educação [Plan of Municipal and State Education], Plano Estadual e Municipal de Saúde [State and Municipal Health Plan], Plano de Desenvolvimento Escolar [School Development Plan] and in the Programa de Ações Articuladas (FNDE/MEC) [Program of Articulated Actions];

Main actions that can be carried out by the states and municipalities:

- To implement the public agenda for Food and Nutritional Education provided for within the Framework of Reference of EAN for Public Policies
- To diffuse the principles and recommendations of the Food Guide for the Brazilian Population and the Food Guide for children under two years;
- To prepare materials and other sub-products of Food Guides, for example: courses of self-learning, to inform, communicate and guide the population concerning healthy dietary choices, with provision for training strategies for the professionals who should use the Guides;
- To perform actions of Food and Nutritional Education agreed in Municipal or State Plans of Food and Nutritional Security;
- To develop educational and communication materials in order to promote proper and healthy nutrition, through different media, such as: videos, leaflets, spots;

- To develop communication strategies regarding the risks associated with the consumption of foods rich in sugar, fat and salt;
- To guide directives for the adoption of healthy menus in celebrations promoted by public institutions, incorporating fruits, vegetables, oilseeds, legumes, roots and tubers, fish and whole grains (minimally processed food) and reducing the supply of fried food, soft drinks and ultraprocessed products, in addition to performing actions of food and nutrition education directed at individuals;
- To organize and promote permanent education processes with a focus on promoting healthy eating and physical activity for health professionals of the health care network, in particular of basic health care, of education, especially those involved with school food and assistance of the supply and agriculture sector;
- To perform actions of food and nutrition education on World Food Day, to learn more, visit: <https://www.fao.org.br/dma.asp>.
- To participate actively in virtual networks, aiming at the exchange of experiences in food and nutritional education: Ideias na Mesa [Ideas on the Menu], Rede Brasileira de Alimentação Escolar (REBRAE) [Brazilian Network of School Feeding], RedeNutri;
- To encourage the inclusion of the issue of Food and Nutrition Security, with a focus on healthy eating, at the Pedagogical Policy Plan of schools;
- To implement the programs of MEC/FNDE (Programa de Desenvolvimento da Educação–PDE [Program for the Development of Education]; Plano de Ações Articuladas (PAR) [Articulated Actions Plan]; Parâmetro Curriculares de Educação [Curricular Education Parameter]; among others), for the development of actions of food and nutritional education;
- To perform actions of Food and Nutritional Education in philanthropic institutions and public facilities;
- To structure actions and projects that articulate research, outreach and servic-

es in universities addressing the issues relating to EAN - local actions - formation of healthy eating habits. Such as, for example, the Public Tender CNPq/ MDS-SESA N ° 027/2012, to learn more visit: http://www.cnpq.br/web/guest/chamadaspublicas?p_p_id=resultadosportlet_War_resultadoscnpqportlet_instanCe_0ZaM&filtro=abertas&detalha=chamadadivulgada&iddivulgacao=2381

FOOD GUIDE FOR THE BRAZILIAN POPULATION

The Food guide for the Brazilian population provides information, recommendations and orientation to individuals, families and the community to make their choices, to guide the consumption of food and the preparation of meals. Besides, it considers environmental factors that may favor or disfavor the practical recommendations, suggesting ways to understand and overcome obstacles.

The Guide is an important instrument for food and nutritional education which may be used by the population, as well as health professionals, community health agents, educators and human resources professionals in general, to provide guidance on change in health related and living behavior bringing food as the basis for individual nutrition. The ten steps for healthy eating are also part



more, visit:

http://dab.saude.gov.br/portaldab/ape_promocao_da_saude.php?conteudo=guias

To check the National Plan for Food Security and Nutrition (PLANSAN, 2012-2015) visit:

http://www.mds.gov.br/segurancaalimentar/arquivos/LIVRO_PLANO_NACIONAL_CAISAN_FINAL.pdf:



VISIT THE VIRTUAL NETWORKS:

<http://www.ideiasnamesa.unb.br>

<http://www.rebrae.com.br>

http://ecos-redenutri.bvs.br/tiki-read_article.php?articleId=1177

3



3. Promotion of healthy lifestyles in specific environments



3. Promotion of healthy lifestyles in specific environments

The component of healthy lifestyles in specific environments is the axis of the strategy that deals with structural changes, mainly in institutional and urban spaces, aimed at promoting adequate and healthy nutrition, physical activity, and access to public spaces for leisure.

This axis also seeks to incentivize the guarantee of spaces that allow for educational actions and health promotion to make food choices healthier and feasible to the population, with emphasis on urban spaces, work environments, school environments, and in the health care and social care networks.

There is a need for federal, state and municipal managers to modify or enhance the adequacy of physical spaces, building or revitalizing structures used in order to promote healthy lifestyles.

The Manual of Healthy School Canteens – promoting healthy eating is a guide for owners of school canteens that want to transform their establishments in healthy and adequate eating places. To know more about the document, access:

<http://www.cantinasaudavel.com.br/>

Main actions that can be carried out by the states and municipalities:

In Schools:

- To conduct continuing education for agents in the PNAE, with a focus on compliance with the regulations of the program, particularly the educational actions;
- Disclose the Manual das Cantinas Escolares Saudáveis - promovendo a alimentação saudável [Manual of Healthy School Canteens - promoting healthy feeding] and encourage schools and canteen workers to transform private school canteens into healthy canteens;
- To raise awareness and encourage the schools and owners of private school canteens to carry out the course of distance self-learning called Cantinas Escolares Saudáveis [Healthy School Canteens: promoting Healthy Feeding] available on the web site of Redenutri. For more information visit:

<http://ecos-redenutri.bvs.br/tiki-index.php?page=cantinas>



HEALTH AT SCHOOL PROGRAM

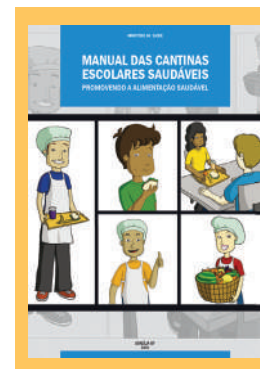
A product of the federal government effort to build inter-sectorial policies to improve the quality of life of the Brazilian population, the Health at School Program (Programa Saúde na Escola – PSE) is a privileged space for practices of health promotion and prevention of diseases, contributing to the strengthening of full development and providing the school community with tools to tackle vulnerabilities that compromise the full development of Brazilian children, teenagers and youngsters. For more information, access:

<http://dab.saude.gov.br/portaldab/pse.php>

- To allow access to the Health at School Program and encourage the Teams of Basic Care to develop activities related to the promotion of healthy nutrition in conjunction with the school;
- To participate in the Health at School Week and develop actions related to the theme of the week and the prevention and control of obesity, in addition to the promotion of health throughout the school year. To learn more about the Health at School Week, access: http://portal.mec.gov.br/index.php?option=com_content&view=article&id=18497&Itemid=1211 ou <http://dab.saude.gov.br/portaldab/pse.php>
- To disseminate the educational materials produced by the Health at School Program;

PROMOTION OF HEALTHY AND ADEQUATE EATING AT SCHOOL

Numerous managers (local, district and state) showed concern in fostering healthy and adequate eating at schools. Santa Catarina was the first Brazilian state to create a specific law (State Act 12061/2001) to regulate food sold in school canteens. Currently, several states (Paraná, Mato Grosso, São Paulo, Rio Grande do Sul, Rio de Janeiro,) and municipalities (Ribeirão Preto, Aracaju, Itapetininga, Campo Grande, Florianópolis, Pelotas, Rio de Janeiro, Porto Alegre, among others) in addition to the Federal District have adopted the idea and have been regulating the supply of food at schools. In the federal scope, since 2002, six bills of law have been drafted. In August 2013, Bill 406/2005 that forbids the sale of low nutritional beverages or food rich in sugar, saturated fat, trans fat or sodium in elementary schools, was passed by the Federal Senate and now awaits approval of the Chamber of Deputies. Refer to annex1 to know more.



To learn more about the Project Educating with the School Garden, visit:

<http://www.fn-de.gov.br/fnde/sala-de-imprensa/noticias/item/4683-projeto-educando-com-a-horta-escolar-recebe-inscri%C3%A7%C3%B5es>

- To promote Project Educanvisa (Education and Health in the school context), with a view to promote adequate and healthy nutrition. To learn more, visit: **http://www.anvisa.gov.br/propaganda/educacao_saude/educanvisa.htm**
- To encourage the planting of vegetable gardens in schools, with the objective of promoting healthy eating practices.
- To consult with universities (Cecanes, specialized Academic Units) in order to develop permanent education actions among all the actors involved in school food. For more information visit: **http://www.rebrae.com.br/centros_colaboradores.html**
- To promote the recovery of local food culture, mainly on commemorative dates. Learn about the publication Alimentos Regionais Brasileiros [Brazilian Regional Food] elaborated by the Ministry of Health.
- To prepare teaching materials with the theme of food and nutrition in various tools, such as: applications for smartphones and computers, web pages, theaters, games, culinary workshops, theatrical plays, among others.

GUIDELINES TO CREATE THE MENU BY THE NATIONAL PROGRAM OF SCHOOL FOOD

The school food menu is a tool that aims to ensure the supply of healthy and adequate eating that meets the nutritional needs of students during the school year. It must be prepared by a dietitian, related to the school food sector of the Board of Education, keeping in mind:

- the importance of healthy and adequate eating, comprising the use of sorted, safe food in accordance with the culture, traditions and healthy eating habits;
- food types produced locally, preferably by family farming and by rural entrepreneurs;
- cultural specificities of indigenous and/or quilombo (former African slaves' communities) communities;
- students with specific nutritional needs, such as: Celiac disease, diabetes, food allergies and intolerance;
- the supply of, at least, 3 portions of fruit and vegetables per week (200 g/student/week). Fruit-based beverages do not substitute the compulsory fruit supply;
- sensorial aspects, such as colors, taste, texture, combination of food and preparation techniques;
- time when food is served and suitable food for each meal;
- nutritional needs, as per the energy reference values, macro and micro-nutrients as per the PNAE ordinance



In addition to such recommendations, the PNAE, aiming to limit the supply of low-nutritional value processed food, rich in sugar, fat and salt, sets forth:

IN RELATION TO PURCHASE:

- The purchase of canned food, cured meat, sweets, compound food, prepackaged food or ready to eat food, or feed concentrates is restricted;
- It is forbidden the purchase of low nutritional value beverages, such as: Soda and artificial juices, guarana or gooseberry syrup-based beverages or concentrates, ice teas and other similar drinks:

IN RELATION TO SUPPLY

- The supply of sweets is limited to 2 portions a week (110 Kcal/portion).

In work environments:

- To stimulate the implementation of the Programa Peso Saudável [Healthy Weight Program] for employees of public and private bodies, with a view to promoting self-care to the individual for the monitoring of weight.
- To establish partnership with the S system (SESI and SESC), companies and public partners for the implementation of the guidelines of the Strategy in the work environment, through the provision of healthy meals, carrying out actions of food and nutritional education, encouraging physical activity, nutritional oversight for the workers and their families, in addition to making the work environment more suitable for adoption of healthier lifestyle practices;

Healthy Weight Program has the objective of preventing body weight gain among adult workers. In addition, it seeks to encourage the adoption of a self-monitoring weight routine; to stimulate the adoption of healthier eating practices; and encourage the practice of physical activity. To learn more, visit: <http://dabsistemas.saude.gov.br/sistemas/pesosaudavel/>

Program Sesi Kitchen Brazil [Programa Sesi Cozinha Brasil] has the purpose of promoting food education with positive impacts on health and income boosting by means of total food utilization. To learn more, visit: http://www.sesirs.org.br/projetos_sesi.asp.



- To encourage public and private institutions to have adequate space for implementation of healthy meals in work environments;
- To encourage companies to have rooms to support breastfeeding;
- To promote actions of active physical labor and stimulate other practices of physical activity;

BREASTFEEDING SUPPORT

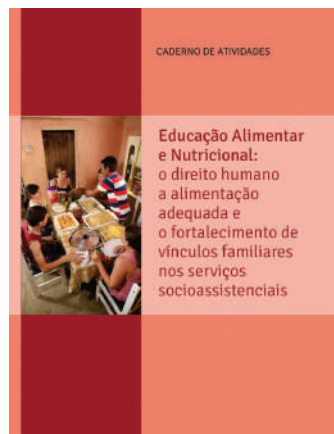
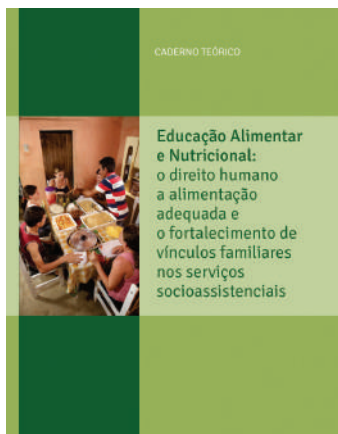
Breastfeeding support rooms are spaces within the company where women can comfortably, privately and safely take milk, storing it in previously sterilized bottles, to give to their children later. This milk is kept in a freezer at a controlled temperature until the end of the day, with a label identifying the mother's name, date and time of collection. At the end of the working day, women can take their milk home so that their children can have it while they are absent, and they can also donate it to a Human Milk Bank.

In 2010, the Ministry of Health of Brazil and ANVISA (Brazilian Health Surveillance Agency) encouraged the implementation of breastfeeding support rooms at companies by means of the Joint Technical Note nº 01/2010. Such Note presents step by step the implementation of a Breastfeeding support room. The room does not require a complex structure. Therefore, its implementation and maintenance costs are low. In addition, everyone benefits from it: Mothers, babies and companies.

The states and municipalities can perform the local articulation to increase the number of companies that provide such space for breastfeeding support and nutritional and food safety of Brazilian children.

To know more, access: www.saude.gov.br/crianca.

In the social assistance network:



- To perform continuous education with professionals who work in entities of the social assistance network and public facilities, with a view to offering adequate and healthy nutrition, especially in entities that receive food through the Programa de Aquisição de Alimentos [Food Purchase Program];
- To strengthen actions to promote adequate and healthy nutrition in social assistance services through the implementation of the Cadernos de Educação Alimentar e Nutricional [Food and Nutritional Education Booklets], with consideration for support of families with food and nutrition insecurity, as well as establishing reference to the health service. Access the booklet at <http://www.mds.gov.br/segurancaalimentar> or <http://www.ideiasnamesa.unb.br/>
- To strengthen actions to promote adequate and healthy nutrition and the Human Right to Adequate and Healthy Food directed to beneficiary families of the Programa Bolsa Família [Family Grant Program], through:

1) the continuous education and training of managers and professionals working in health, education and assistance, including promoting the participation of these professionals in the distance course Educação alimentar e nutricional: uma estratégia para a promoção do direito humano à alimentação adequada [Food and Nutrition Education: a strategy for the promotion of the human right to adequate feeding], to be made available on the network Ideias na Mesa [Ideas on the Menu] in the first half of 2014;

2) the implementation of strategies for direct communication with families, such as radio spots and educational and instructional materials. These communication strategies are available at <http://www.mds.gov.br/segurancaalimentar> or <http://www.ideiasnamesa.unb.br/>

In the Healthcare network:

- To implement Estratégia Amamenta e Alimenta Brasil [Breastfeeding And Feeding Brazil Strategy] aiming at the qualification of professionals in Atenção Básica [Basic Care] for the promotion of breastfeeding and complementary healthy feeding for children younger than two years - <http://dab.saude.gov.br/portaldab/amamenta.php>;



- To elaborate strategies for the dissemination of guidelines for healthy food provided for in Guia Alimentar para crianças menores de dois anos [Food Guide for children under the age of two years] and Guia Alimentar para a População Brasileira [Food Guide for the Brazilian Population];
- To stimulate the Health Units to create groups for

the promotion of adequate and healthy nutrition and for the prevention of excess weight, using various methods of attraction and stimulus for group permanence;

- To use the space of the Academy of Health for the promotion of healthy ways of life and adequate and healthy food;
- To produce educational materials for the promotion of adequate and healthy nutrition in the Academy of Health space;
- To ensure that all health units comply with the Brazilian Standard for Marketing of foods for infants and Children in their early Childhood, Nipples, Pacifiers and Bottles (Law no. 11.265, dated 3 January 2006 and Law no. 11447 of 15 May 2007). To learn more visit:
<http://portal.anvisa.gov.br/wps/content/Anvisa+Portal/Anvisa/Inicio/Alimentos>
- To ensure that the health units do not undertake partnerships with public or private institutions which have conflicts of interest in the area of food and nutrition.

HEALTH ACADEMY PROGRAM

The Academy of Health Program has as its main function to contribute to health promotion and caregiving, as well as healthy population lifestyle. It is an open access area, catalyzing the development of actions, in addition to being an environment for producing, redefining and living out knowledge conducive to collective and individual construction of healthy ways of life.

The Academy of Health Program is not an isolated service, it is a focal point of care in Redes de Atenção à Saúde - RAS [Health Care Networks], as a component of Basic Health Care, being part of the care pathway and able to articulate various individual and collective supervision of basic care.

In this area, various actions can be developed focused on physical practices and physical activity, promoting healthy eating, integrative and complementary practices, artistic and cultural practices, health education and community mobilization.

To be part of this action and deploy the Programa Academia da Saúde [Academy of Health Program] in your municipality it is necessary to petition for the construction of the program center, registering the proposal on SISMOB - Sistema de Monitoramento de Obras [Monitoring of Works System] (<http://dab2.saude.gov.br/sistemas/sismob/login.php>), by amendment or program, noting the date of system opening and the availability of budgetary resources of the Ministry of Health, on the program website: (http://dab.saude.gov.br/portaldab/ape_academia_saude.php)

There are three forms of the Health Academy Program centers [Programa Academia da Saúde], in addition to the features of investment for construction, the MS shall finance the construction of three forms of Health Academy centers and invest resources of funding for implementation of activities. The municipality can also implement the program by means of similar initiatives recognized by MS, and fund the program.

For more information access the GM/MS No. 2,681, from November 7th, 2013, which redefines the program and the No. 2.684 of November 8th, 2013, which redefines the rules of investment, funding and similarity on the program website, at the website:

http://dab.saude.gov.br/portaldab/ape_academia_saude.php.

4



4. Food and Nutrition Surveillance

4. Vigilância Alimentar e Nutricional

Food and Nutritional Surveillance [Vigilância Alimentar e Nutricional (VAN)] includes the monitoring of the food and nutrition conditions of a specific individual or population. It must be understood as a set of guidelines and interpretations that allow for the identification of cases of individuals with obesity and excess weight in the health services, as well as the carrying out of periodical population surveys, with a view to knowing the nutrition and health profile of the entire population. It also aims to support managers and health professionals in the process of organization and assessment of nutritional care and support the planning of actions related to health promotion and adequate and healthy nutrition.

A combination of strategies that involve the investigation of nutritional status, the associated morbidities, nutritional deficiencies, as well as the evaluation of food consumption, are necessary for the realization of the VAN. In this sense, it is recommended to monitor feeding practices in all phases of the life cycle, such as breastfeeding, the introduction of new foods and food quality in the routine of health services, which have useful value for individual and collective diagnosis. Health teams should plan their actions according to local conditions

Main actions that can be carried out by the states and municipalities:

- To strengthen and ensure Food and Nutritional Surveillance in health care networks for all stages of the life course;
- To purchase anthropometric equipment appropriate for the achievement of food and nutritional surveillance;
- To organize food and nutritional surveillance in various care centers of the health care network (primary care and specialist care);

- To feed the information system with existing surveillance data of food and nutritional surveillance;
- To qualify the actions of food and nutritional surveillance undertaken by health professionals;
- To carry out nutritional and food diagnosis in health care centers and monitor the prevalence of excess weight and obesity in the population of the State and Municipality in order to support the qualification of nutritional care and health promotion actions;
- To prioritize the Food and Nutritional Surveillance of children, pregnant women and women in the postpartum period, especially for the families of the Family Grant [PBF];
- To strengthen the actions of pre-natal care by promoting adequate weight gain for women during pregnancy;
- To support recuperation to an adequate nutritional status during the period of puerperium (3, 6, and 9 months postpartum).
- To promote the carrying out of municipal and state research on the food and nutritional situation of the population and strategies for control and prevention of obesity;
- To promote the carrying out of research to evaluate the effectiveness of interventions for the treatment of obesity;

NUTRITIONAL AND FOOD SURVEILLANCE

Nutritional and Food Surveillance (Vigilância Alimentar e Nutricional – VAN) aims at the permanent analysis of the health conditions of the population for the organization and execution of more suitable practices to tackle existing problems, and it should be inserted in the daily routine of Basic Attention Teams.

This information shall subsidize the nutritional attention planning and actions related to the promotion of health and adequate and healthy eating and the quality and regulation of food, within the SUS (Unified Health System of Brazil) management. In addition, it will contribute to the control and social participation and diagnosis of nutritional and food safety in the territories.

The organization of health attention for overweight and obese individuals takes place from a suitable and timely local diagnosis. The structuring and organization of the services in the territories are necessary to assist professionals and managers in the planning of prevention strategies and treatment of non-communicable diseases. It is understood that the VAN practice shall happen at attention points of the network, such as basic health units, gyms, households, schools and other spaces for action of the basic attention team in the territory.

To structure the VAN actions in your municipality, get to know the materials available at the homepage of the Basic Attention Department/Ministry of Health. Since 2011, the Ministry of Health has provided funds for the municipalities to invest in the VAN structure, allowing the purchase of anthropometric equipment for the Basic Health Units that joined the National Program of Basic Attention Quality and Access and gyms.

To know more, access:

http://dab.saude.gov.br/portaldab/ape_vigilancia_alimentar.php.

5



5. Comprehensive health care of the individual with excess weight/obesity in the health care system

5. Comprehensive health care of the individual with excess weight/obesity in the health care network.

The comprehensive health care of the individual with excess weight and obesity, in the Brazilian National Health System (SUS), must be performed based on the principles and guidelines of this system (universality, equity, regionalization, hierarchization and integrality of health care). It must provide a set of care efforts that include actions of health promotion and protection, as well as the prevention, diagnosis and treatment of obesity and other health problems associated with it, organized and offered jointly by the three spheres of management. The actions in this sense must account for individuals, families and communities, and should consider: the specificities of the different stages of the life course, of gender and of different population groups, peoples and traditional communities.

The organization of integrated and interdisciplinary actions are justified as effective practices in the treatment of obesity in view of the understanding that changes in life habits should not arise from a process of regulation and much less from the blaming of the individual, or the family and mother. It is understood that the changes are not restricted only to food consumption and physical activity, but have influence over the entire constellation of meanings attached to eating, the body and life.

Main actions that can be carried out by the states and municipalities:

- To ensure integral care to individuals with excess weight and obesity in the health care network, from Basic Care services to the care centers making the most use of technology (medium and high complexity services);
- To define the clinical guidelines and organization of the care pathway for the treatment of obesity in the health care network of the SUS, according to the guidelines of the Ordinance no. 424 /GM/MS , of 19th March, 2013;

- To ensure integral care to individuals with excess weight and obesity of indigenous communities, quilombolas and traditional peoples and populations who live in field, forest and rural areas;
- To establish shared care by means of protocol with the various care centers;
- To ensure the support of the diagnosis and therapy service for the provision of comprehensive care to individuals with excess weight and obesity;
- To promote actions of prevention and for promotion of adequate and healthy nutrition in basic care;
- To articulate intersectorial actions with the various public facilities for the control of obesity in the territory;
- To use the Programa Telessaúde Brasil [Telehealth Brazil Program], which aims to encourage the use of modern information technology and telecommunications, for activities of centralized support and distance education related to health;
- To promote the membership of primary care and family health teams to the Programa de Melhoria do Acesso e da Qualidade da Atenção Básica (PMAQ) [Program to Improve Access and Quality of Basic Health Care].

PATHWAY OF CARE FOR THE PREVENTION AND TREATMENT OF EXCESS WEIGHT AND OBESITY:

The care of patients with chronic diseases requires continued attention not only of biomedical interventions, but also planned care and attention able to anticipate their needs.

The Decree no. 424 /GM/Ms, of 19th March, 2013 redefines the organization's guidelines for prevention and treatment of excess weight and obesity as a priority care pathway of Rede de Atenção à Saúde das Pessoas com Doenças Crônicas [Network of Attention to the Health of People with Chronic Diseases] within the scope of the SUS.

The purpose is to strengthen and enhance care for people with excess weight and obesity through the comprehensiveness and the longitudinality of care in various public and social facilities.

For the organization of care for the individual with overweight and obesity, there is a need for a continuous action of Vigilância Alimentar e Nutricional (VAN) [Food and Nutritional Surveillance] for the identification of cases and risk stratification, as well as the establishment of flows of reference and counter-reference between the various healthcare centers. For shortfalls in Basic Health Care, the other centers of care, Atenção Especializada Ambulatorial e Hospitalar [Specialized Ambulatory and Hospital Care], should also be sensitive to the identification and uptake of users. Once the flows and protocols of care are established, this framework should be disseminated to the health care network. It is worth noting that the diagnosis and therapy support is necessary for the care in primary health care in order to enhance its degree of resolution.

Interdisciplinary centralized support is fundamental to the dedication of basic health care teams. The teams of the Núcleo de Apoio à Saúde da Família [Center of Support for Family Health] fulfill this role with the family health teams, in addition to being important actors involved in the articulation of care between health care centers.

In the hospital context, there was the publication of the Decree 425 GM/Ms of 19th March, 2013, establishing technical regulation, norms and criteria for the Assistência de Alta Complexidade ao Indivíduo com Obesidade [High Complexity Assistance to the Individual with Obesity]. To offer High Complexity assistance to the Individual, the local manager, in partnership with the manager of the enabling hospital, must organize and deploy in its region, the care pathway for the prevention and treatment of excess weight and obesity.

To learn more visit: <http://dab.saude.gov.br/portaldab/>

6



6. Regulation and control of the quality and safety of food

6. Regulation and control of the quality and safety of food.

In addition to ensuring access to basic and minimally processed food it is necessary that these foods are in ideal condition for consumption with regard to sanitary quality and safety. With respect to ultraprocessed food, generally of high energy density (rich in fats and simple carbohydrates or starch), there is a clear need for nutritional quality improvement, the focus of which should be given to the reduction of the levels of sodium, saturated and trans fats and sugars. This action is highlighted as a key element for the prevention and control of increasing excess weight and obesity, since the consumption of processed and ultraprocessed food promotes weight gain, in addition to being poor in micronutrients.

Agenda for the reformulation of processed food with the food industries - in 2007 was signed, and in 2013 renewed, the Term of Commitment between the Ministry of Health and associations representing the productive sector (such as the Brazilian Association of Food Industries/Abia), which has, among its objectives, the reduction of the quantities of sugar, fat and sodium in processed foods. To learn more visit: http://dab.saude.gov.br/portaldab/ape_promocao_da_saude.php?conteudo=controle.

Learn about what the federal government has been developing in this axis:

- Monitoring of the levels of sodium, sugars and fats in processed foods carried out by ANVISA, made available to the population by means of technical reports on the following link: (<http://portal.anvisa.gov.br/wps/content/Anvisa+Portal/Anvisa/Inicio/Alimentos>);
- Monitoring of agreements and partnerships with the productive sector, setting targets for reformulation of processed foods, such as the reduction of sodium content, fats and sugars;

- Improvement of standards of labelling for packaged foods to improve visibility and legibility, facilitating access to information by the consumer, such as, for example, the publication of legislation DRC No 54, 2012, from Anvisa, harmonized in Mercosur regarding complementary nutritional information (INC) designed to inform the consumer about the nutritional properties of food (<http://portal.anvisa.gov.br/wps/content/Anvisa+Portal/Anvisa/Inicio/Alimentos/Assuntos+de+Interesse/Legislacao/Legislacao+Horizontal>);
- Proposing to MERCOSUR the inclusion of an obligatory declaration of sugar quantity in nutrition labeling;
- Preparation of the Guia de Boas Práticas Nutricionais para Pão Francês [Guide to Good Nutritional Practices for French Bread] and Referência para Guias de Boas Práticas Nutricionais [Reference Document for Guides to Good Nutritional Practices] (<http://portal.anvisa.gov.br/wps/content/Anvisa+Portal/Anvisa/Inicio/Alimentos/Assuntos+de+Interesse/Boas+Praticas+Nutricionais>);
- Training of family farmers on food safety with a focus on the use of agrochemicals and transgenics;
- Regulation of the supply of food and meals for the public sector, ensuring it reaches the recommendations on proper and healthy nutrition, via normative instruction from the MPOG [Ministry of Planning, Budgets and Management];
- Promotion of labelling standardization for genetically modified foods;

FOOD PUBLICITY

The advertising of foods, especially that which is oriented towards a child audience, has great impact on the increase of obesity by encouraging excessive usual consumption of processed foods with high levels of sugar, fat, and salt. Considering the advertising market aimed at the young public, the second most advertized segment is food, with emphasis on fast food, biscuits and snacks. The commercial promotion of foods is performed by various channels of communication: propaganda conveyed by television, display of products within television programming, actions at points of sale, disposition of products at points of sale, sponsorship of events, packages, internet, cinemas, actions in public spaces, such as streets, squares; actions in educational institutions; and radio (advertisement conveyed by television and radio); among other types of actions.

Brazil does not have national legislation dealing specifically with the commercial promotion of foods. However, publicity is regulated by the Code of Consumer Protection (Law no. 8,078 / 1990) which prohibits misleading or abusive advertisement. This means that, in order to protect basic rights such as information and health and safety of consumers, advertisers should properly report the characteristics of the products, including the risks that may result from these. In addition to this, it is not allowed to disregard basic social values, to induce the consumer to act in a way that is detrimental to their health and safety, or to take advantage of the child's deficiency in judgment and experience, under penalty of accountability within the civil, criminal and administrative scopes. To learn more visit: http://www.planalto.gov.br/ccivil_03/leis/l8078.htm

The abusive targeting of marketable communication to the child in any type of product or service, is also provided for in Resolution no. 163/2014 of Conanda (National Council for the Rights of Children and Adolescents), which adds to the normative system composed by the Federal Constitution, Statute of the Child and Adolescent Code and Consumer Protection. This norm presents clear examples of the strategies commonly used to persuade, in various ways and places, the children to the consumption of any product or service, such as the presence of characters, offering collectable giveaways and childish language, in addition to guiding principles for advertising to adolescents, and does not apply to non-commercial campaigns for information on good food. To access the Resolution visit:

<http://pesquisa.in.gov.br/imprensa/jsp/visualiza/index.jsp?jornal=1&pagina=4&data=04/04/2014>.

In addition to the existing laws, there are some bills in process (Annex 02). Within the scope of state and municipality local actions can be carried out to protect children from this exposure with limitation on displaying of advertisements and availability of food that is not healthy in public places such as schools, parks, gyms, beaches, parks, etc. There can additionally be monitoring, on the part of the public authorities, of commercial actions for the dissemination of products in schools, hospitals, competitions, clubs and other places.

Some of the actions related to advertising and the availability of food in public spaces can be regulated by municipal and state laws. It is important for the State to protect children and adolescents as they comprise a vulnerable public that is in need of protective actions. These actions are mechanisms that reduce exposure to information and tend to improve the dietary intake of this group. Some states and municipalities have initiatives that go in this direction, with legal measures which limit some types of advertising, especially in schools and places frequented by children and adolescents.

Some of the actions related to publicity and the availability of food in public spaces can be regulated by municipal and state laws, in accordance with the legal system in force. It is important for the State to protect children and adolescents as they are vulnerable members of the public, who cannot yet defend themselves from the abuses of their vulnerable rights.

Actions of the State for protection, with effective supervision of irregularities, especially by the organs of consumer and childhood protection, are fundamental to guiding families and other actors in society, to respect, jointly, the rights of children and adolescents. It is important for the State to protect children and adolescents as they comprise a vulnerable public and are in need of protective actions.

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The Pan American Health Organization/World Health Organization (PAHO/WHO) have clear recommendations to governments on the need to regulate the advertising market, targeted to children, and foods rich in fat, sugar and salt. Access here the Portuguese, Spanish and English versions of the publication:

http://www.paho.org/bra/index.php?option=com_docman&task=doc_details&gid=1431&itemid=423.

Social participation is essential to move the agenda of food advertising. Some institutions have been standing out in support for the regulation of food advertising, such as the Alana Institute (**<http://alana.org.br/>**) and Instituto Brasileiro de Defesa do Consumidor (IDEC) [Brazilian Consumer Defense Institute] (**<http://www.idec.org.br>**).

Also it is important to note that the Conselho Nacional de Segurança Alimentar e Nutricional (CONSEA) [National Council of Food and Nutritional Security] currently maintains a Working Group on the subject with the aim of discussing strategic actions for regulation of food advertising, having in view the human right to adequate and healthy food. CONSEA has also already discussed the issue of regulation of food advertising in plenary sessions, having sent Recommendation (No. 006/2013) to parliamentarians to assess priority law projects that deal with the regulation of food advertising. Go to the website of CONSEA at: <http://www2.planalto.gov.br/consea>.

Intersectoral Management Strategy for the Prevention and Control of Obesity in the federal context

Aiming at effectuating the actions for the prevention and control of obesity, it was proposed, at the federal level, a model of intersectoral governmental management, within the framework of CAISAN, with the establishment of a Management Committee composed of a set of government representatives, representative of the CONSEA [National Council of Food and Nutritional Security] and PAHO/WHO. A rotary leadership for the Committee Manager was opted for to ensure its integrative function and better management, which should seek to ensure efficient arrangements for coordination and convergence of actions, in order to facilitate the coordination of intersectoral activities, monitoring and evaluation, communication, information, mobilization and Strategy Advocacy, as well as articulation with civil society.

The Management Committee will carry out the Monitoring and Evaluation of actions for prevention and control of obesity and will monitor the implementation and results of the actions taken by the organs, in the ambit of the Interministerial Chamber of Food and Nutritional Security - CAISAN. The purpose is to subsidize decisions, as well as to redirect planned actions, using specific monitoring instruments.

The actions and expected results from the implementation of the activities should be presented and disclosed/communicated. It is important to note, in the process of communication, the linking of actions with other broad strategies of the Federal Government such as the Plan of SAN [Plano de Segurança Alimentar e Nutricional - Plan of Food and Nutritional Safety], Plan Brazil without Extreme Poverty and the Plan of Coping with Chronic Non-Transmissible Diseases. Communication and social mobilization should provide for both actions of mass communication, conveyed in mainstream media, and likewise permanent strategies for communication in social networks, using the sectoral communication strategies available to each of the partners.

STRATEGY AND LOCAL PLANNING ACTIONS

The actions presented in this document are examples, proposed by the Federal Government, and that can be replicated by local authorities (states and municipalities). In addition to the federal programs, there are a number of locally developed initiatives that add to those presented, and have the ability to enhance actions related to the prevention and control of obesity at all life stages.

It is suggested that the states and municipalities create committees (or another type of instance) for the prevention and control of obesity. These committees may be allocated under the Chamber of Intersectoral Food and Nutritional Security (when this is established) or another body, according to local regulation. The important thing is that this committee combines different sectors in order to ensure the intersectorality required for this complex agenda.

The Interministerial Chamber of Food and Nutritional Security - CAISAN, based on a dialogue with states and municipalities, and respecting the federal pacts already existing in the different sectors (Health, Education, Assistance, and other), will adopt mechanisms to articulate actions of Intersectoral Strategy with the states and municipalities, in order to improve the mechanisms for coordinating actions and avoiding overlaps or gaps.

Another important issue is the discussion of activities and inclusion of actions in local planning instruments. The actions should not be limited to municipal Plans of health, education, food and nutritional security, among others. All the sectors involved can plan actions within the scope of its secretariat, ensuring that the activities are formalized in management tools, as well as financing for their implementation.

This initiative can be planned for the next planning cycle of the states and municipalities or at the time of the revision of the Plans. The important thing is that the actions are discussed and thought out jointly between the sectors so that they can comprise the list of municipal and state actions for dealing with obesity in Brazil.

CIVIL SOCIETY ON THE MANAGEMENT COMMITTEE FOR PREVENTION AND CONTROL OF OBESITY

Alongside representatives of different government sectors, the participation of a representative of the local CONSEA [National Council for Food and Nutritional Security] in the Manager Committee of the Prevention and Control of Obesity Strategy has the role of serving as a link between this space and the Council. The diversity of civil society representations, the manner in which problems are expressed in the different groups, and the priorities and propositions for balancing them, identified by CONSEA, must be present in the definitions of the Management Committee. Similarly, the opportunity to participate in the decision-making process and monitor the various initiatives, as well as to experience practical challenges in order to offer intersectorial actions, contributes to the improvement of the activities and propositions of the CONSEA.

It is also vital for the civil society representative, and CONSEA as a whole, to establish an agenda for dialog and partnership with local councils involved in this agenda such as those of health, school nutrition, urban development, rural development, and social assistance, among others. Activities and joint intersectorial commitments may be established to strengthen the agenda of preventing obesity and promoting healthy eating.

This participation is one of the outcomes that is provided for in LOSAN [Lei Orgânica de Segurança Alimentar e Nutricional - Organic Law of Food and Nutritional Security] on the role of articulating, overseeing and monitoring, in cooperation with the other members of SISAN [Sistema Nacional de Segurança Alimentar - National System of Food Security], the implementation and the convergence of actions inherent to the National Policy and the National Plan of Food and Nutritional Security. Commitment to co-ordinated action is essential, so that each party achieves their specific objectives, using existing resources in a more efficient and high quality manner.

Annexes

Annex 1 - Examples of State and Municipal Laws that regulate food trade in schools:

Table 2 - Examples of municipal laws on the regulation of food trade in schools by Brazilian municipal workers.

Prefectures	Regulation	Law
Aracaju	<u>Prohibits</u> foods rich in trans fats, and with high calorie content, such as: sweets; filled cookies and filled biscuits; fried preparations, salted and shortcrust pastry, sweets in general and popcorn.	Law N° 3.814/2010
Itapetininga	<u>Prohibits</u> the marketing of drinks with alcoholic content; food and drinks harmful to health; sweets; filled cookies and filled biscuits; general fried preparations.	Law n° 5.320/2009
Campo Grande	<u>Prohibits</u> foods that are not healthy and industrialized foods with more than 10% saturated fat; foods prepared with the use of hydrogenated vegetable fat.	Law N° 4992/2011.
Florianópolis	<u>Allows</u> healthy food and prohibits unhealthy food;	Law n.º 5.853/2001
Rio de Janeiro	<u>Prohibits</u> purchase, preparation, distribution, and consumption of unhealthy products.	Decree n.º 21.217/ 2002
Ribeirão Preto	<u>Prohibits</u> trade of unhealthy food.	Municipal Resolution n.º 16/2002
Belo Horizonte	<u>Prohibits</u> the placement of gifts or toys associated with food.	Law n° 10.477/2012
Pelotas	<u>Prohibits</u> trade of unhealthy food.	Law n° 5.778

Natal	Technical Standards of nutritional quality, to be followed by coffee shops and the like, installed in elementary and high schools, private and public.	Law nº 0245/2006
Jundiaí	<u>Prohibits</u> trade of alcoholic beverages; tobacco; drug or chemical-pharmaceutical products; <u>Allows</u> trade of healthy food.	Joint Ordinance COGSP/CEI/DSE/2005
Porto Alegre	<u>Restricts</u> trade in unhealthy food.	Law nº 10.167/2007

Table 3. Examples of state laws on the regulation of food trade in schools by Brazilian states.

States	Regulation	Law
Rio Grande do Sul	<u>Prohibits</u> the exhibition of advertising posters that encourage the purchase of unhealthy food; <u>Prohibits</u> the marketing of alcoholic beverages; unhealthy food.	Law nº 13.027/2008
Santa Catarina	<u>Prohibits</u> drinks with alcoholic content; sweets; soft drinks; industrialized snacks and fried salty snacks;	Law Nº 12.061/2001
Mato Grosso	<u>Prohibits</u> the marketing of industrialized food and with high levels of saturated fats, trans fats and salt;	Law 8681/2007
Rio de Janeiro	<u>Prohibits</u> commercialization, purchase, manufacture and distribution of products that are not healthy.	Law n.º 4.508/2005
Federal District	Promotion of healthy eating; <u>Prohibits</u> the marketing of foods that are not healthy.	Law nº 3.695/2005
São Paulo	<u>Prohibits</u> alcoholic beverages; tobacco; drug or chemical-pharmaceutical products; Stimulates the marketing of healthy foods.	Joint Ordinance COGSP/CEI/DSE/2005

Paraná	Prohibits the marketing of industrialized foods;	Law n.º 14.423/2004
	Regulates technical standards of nutritional quality to be followed by lunch shops.	Law n.º 14.855/ 2005

Annex 2 - Examples of proposals to regulate advertising of foods

Table 4 - Examples of Bills on food publicity being processed at the National Congress.

Proposer	Summary	Bill
Deputy Jorge Tadeu Mudalen (DEM- SP)	Deals with prohibition on the sale of bundled food products intended for a child and juvenile public in all national territory.	Bill- 4888/2009
Deputy Capitão As-sumção (PSB-ES)	Prohibits the combined sale of toys associated with the acquisition of food and drinks, including in “fast food” restaurants. Amends Law no. 8,078, 1990.	Bill- 4935/2009
Deputy Dr. Nechar (PV/SP)	Promotion of “fast food” network that sells toys combined with food.	Bill- 4815/2009
Deputy Henrique Afonso (PT – AC)	Deals with the quantity of “trans” fat present in foods and with the advertising and publicity of foods containing them.	Bill- 4462/2008
Deputy Carlos Bezer- ra (PMDB – MT)	Deals with offers, advertising, publicity, information and other related practices, whose object is the dissemination and promotion of foods with high amounts of sugar, saturated fat, trans fat, sodium, and drinks with low nutritional content.	Bill- 1637/2007
Deputy Eduardo Valverde (PT-RO)	Institutes the obligation to include in advertisements for food and drinks with levels of sugar, salt and fat higher than those recommended by the National Agency of Sanitary Surveillance, information on damage to health due to the excessive consumption of such foods and drinks.	Bill- 3793/2008

Deputy Celso Rus-somano (PP-SP)	Establishes as abusive the advertising that can induce the child to disregard the social and ethical values of the individual and the family.	Bill-4440/2008
Deputy Capitão Assunção (PSB-ES)	Deals with the ban on advertising in communication media directed to a young audience at times between 06:00 in the morning and 20:00 at night.	Bill-6693/2009
Senator Marisa Serrano	Amends the Decree Law no. 986, of October 21st, 1969, to regulate the advertising of foods.	Bill of the Senate 150/2009
Luiz Carlos Hauly (inicial) Maria do Carmo Lara	Adds a paragraph to Article 37 of Law no. 8,078, of September 11th, 1990, which “establishes consumer protection and makes other provisions”.	Bill-5921/2001
Leandro Sampaio PPS/RJ	Deals with the obligation to disclose of nutritional messages and warnings in commercial establishments and in products specified.	Bill-7304/2010
Chico Alencar PSOL/RJ	Deals with regulations for advertisement, publicity, information and other related practices whose purpose is the dissemination and the commercial promotion of foods considered to have high amounts of sugar, saturated fat, trans fat, sodium, and drinks with low nutritional content and gives other provisions.	Bill-7644/2010
Bruno Rodrigues PSDB/PE	Establishes rules for advertising, publicity, information and any other related practices on the dissemination and promotion of foods with high amounts of sugar, saturated fat, trans fat, sodium, and drinks with low nutritional content.	Bill-7667/2010
Senator –Vital do Rêgo	Amends Law no. 8,078, of September 11th, 1990 (Consumer Protection Code), to regulate advertising aimed at children and adolescents.	Bill of the Senate 360/2012
Committee of the Environment, Consumer Protection and Surveillance and Control	Amends Law no. 8,078, of September 11th, 1990 (Consumer Protection Code), on the advertising of food to the infant public.	Bill of the Senate 282/2010

Rogério Carvalho PT/SE	Regulates infant advertising of food.	Bill- 5608/2013
Rogério Carvalho PT/SE	Amends the Decree Law no. 986, of October 21st, 1969, to prohibit the assignment of emphasis to declarations of qualities and nutritional characteristics, both in packaging and food publicity.	Bill- 5629/2013

