

Nutrition interventions in Small Island Developing States

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BACKGROUND

Small Island Developing States (SIDS) share a high burden of chronic non-communicable diseases. A ‘nutrition transition’ has occurred in SIDS where locally-grown foods have been replaced by calorie-dense, processed, imported foods. We know little about what is being done in SIDS to improve nutritional of their populations. Thus, a rapid scoping review was conducted to document the features of nutritional interventions conducted in SIDS between 2000 and 2019.

METHODS

A rapid scoping review was done of studies that reported interventions, conducted in 2000-2019, in 58 SIDS that aimed to improve nutrition. MEDLINE and Web of Science databases were searched. To complement, The World Health Organization’s NCD Progress Monitor 2020 was used to assess achievement of nutritional policies in SIDS. Interventions were categorised by the NOURISHING framework for analysis.

RESULTS

- 74 interventions found in 5 of 9 (56%) AIMS SIDS; 24 of 29 (83%) C’bean SIDS; 20 of 20 (100%) Pacific SIDS. Across regions, most interventions (42%) were conducted in C’bean. Across countries, most interventions were conducted in Fiji, Guinea-Bissau, Singapore, Jamaica.
- Most frequent components were the classic, education-style components: (G) - Give nutrition education and skills and (I²) - Inform people about food & nutrition through public awareness.
- Most common nutritional policy achieved: restrictions on availability and taxes of alcohol.
- Least common nutritional policy achieved: saturated or trans fatty acids.

	Intervention component	# of interventions			Total no. (%)
		AIMS	C’bean	Pacific	
Food environment	N ¹ - Nutrition label standards and regulations on the use of claims and implied claims on food	2	5	2	8 (4)
	O - Offer healthy food and set standards in public institutions and other specific settings	5	8	11	23 (12)
	U - Use economic tools to address food affordability and purchase incentives	1	7	12	19 (10)
	R - Restrict food advertising and other forms of commercial promotion	2	1	5	8 (4)
	I ¹ - Improve nutritional quality of the whole food supply	3	7	12	19 (10)
	S - Set incentives and rules to create a healthy retail and food service environment	2	2	8	12 (6)
	H - Harness supply chain and actions across sectors to ensure coherence with health	2	9	9	18 (9)
Behavior change communication	I ² - Inform people about food and nutrition through public awareness	8	13	15	33 (17)
	N ² - Nutrition advice and counselling in healthcare settings	2	11	3	17 (9)
	G - Give nutrition education and skills	9	15	14	37 (19)
	Other	0	4	2	6 (3)

Table: Nutrition interventions conducted in SIDS 2000-2019.

CONCLUSION

The lack of nutrition interventions in SIDS is likely due to their social, economic and environmental vulnerabilities. Interventions must expand beyond simple education to encompass multiple components of the NOURISHING framework, and promote multi-sectoral inclusion and stronger stakeholder buy-in during this process.

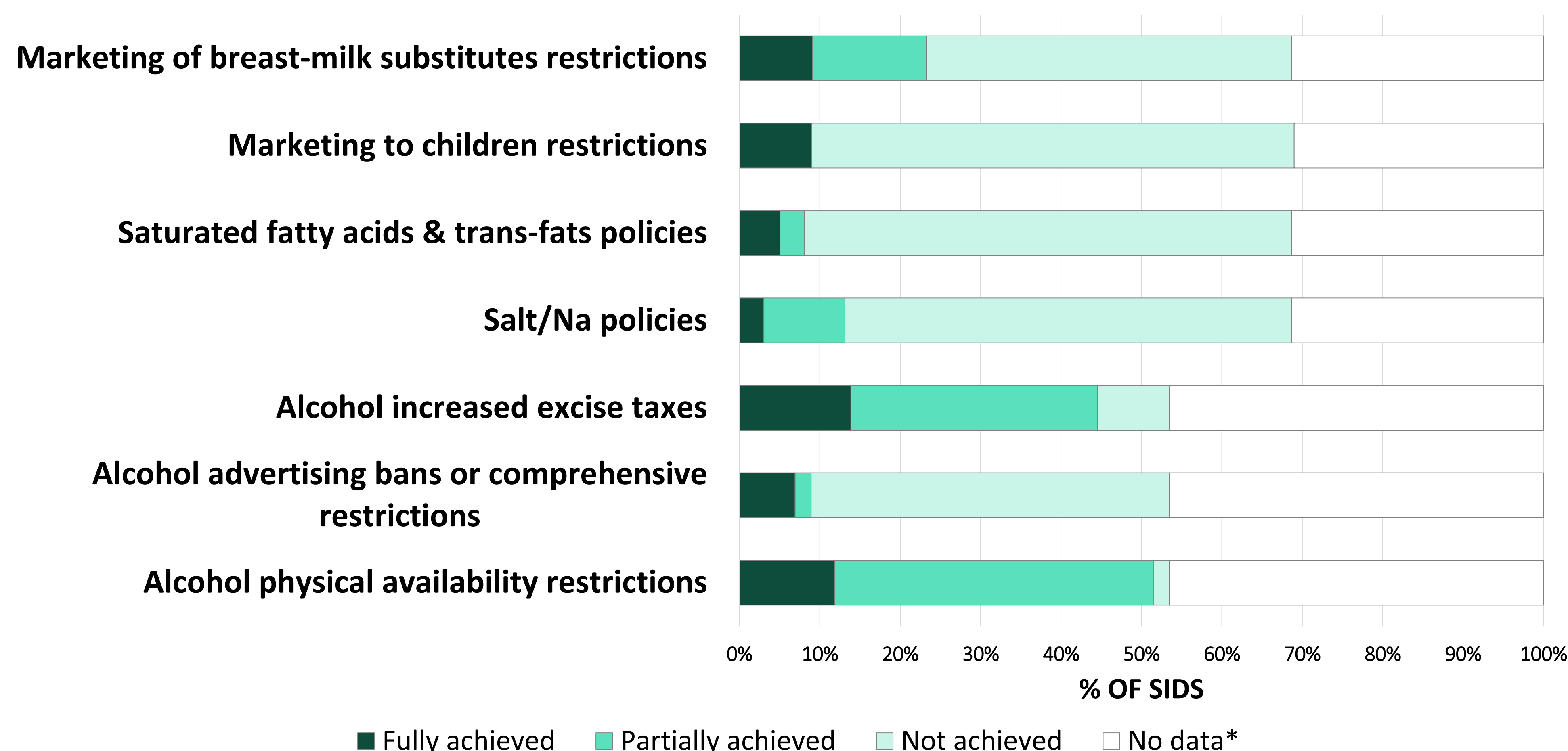


Figure: Percent of nutrition policies achieved in SIDS.

