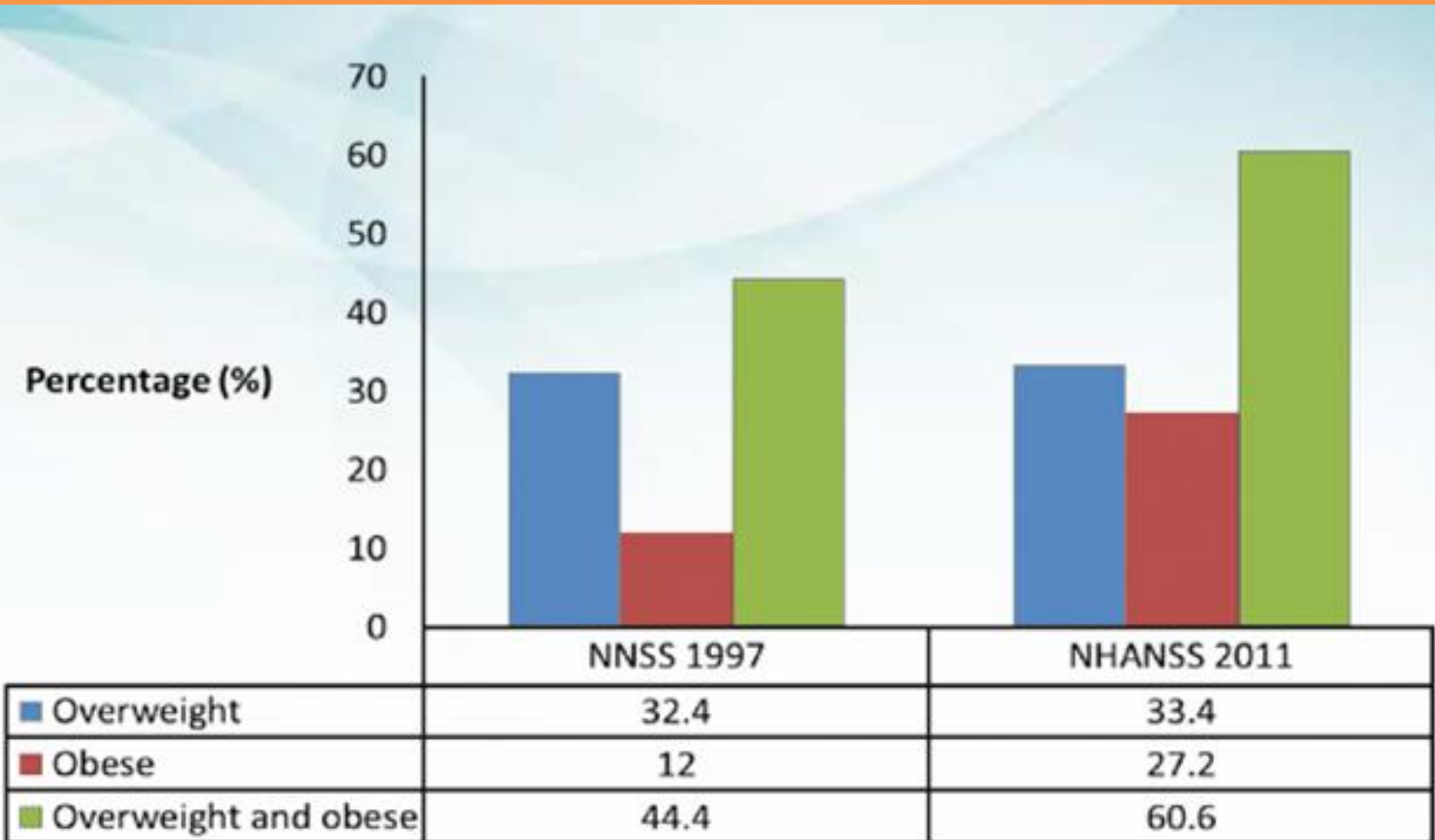




کمنترین کصیحتن
MINISTRY OF HEALTH
BRUNEI DARUSSALAM

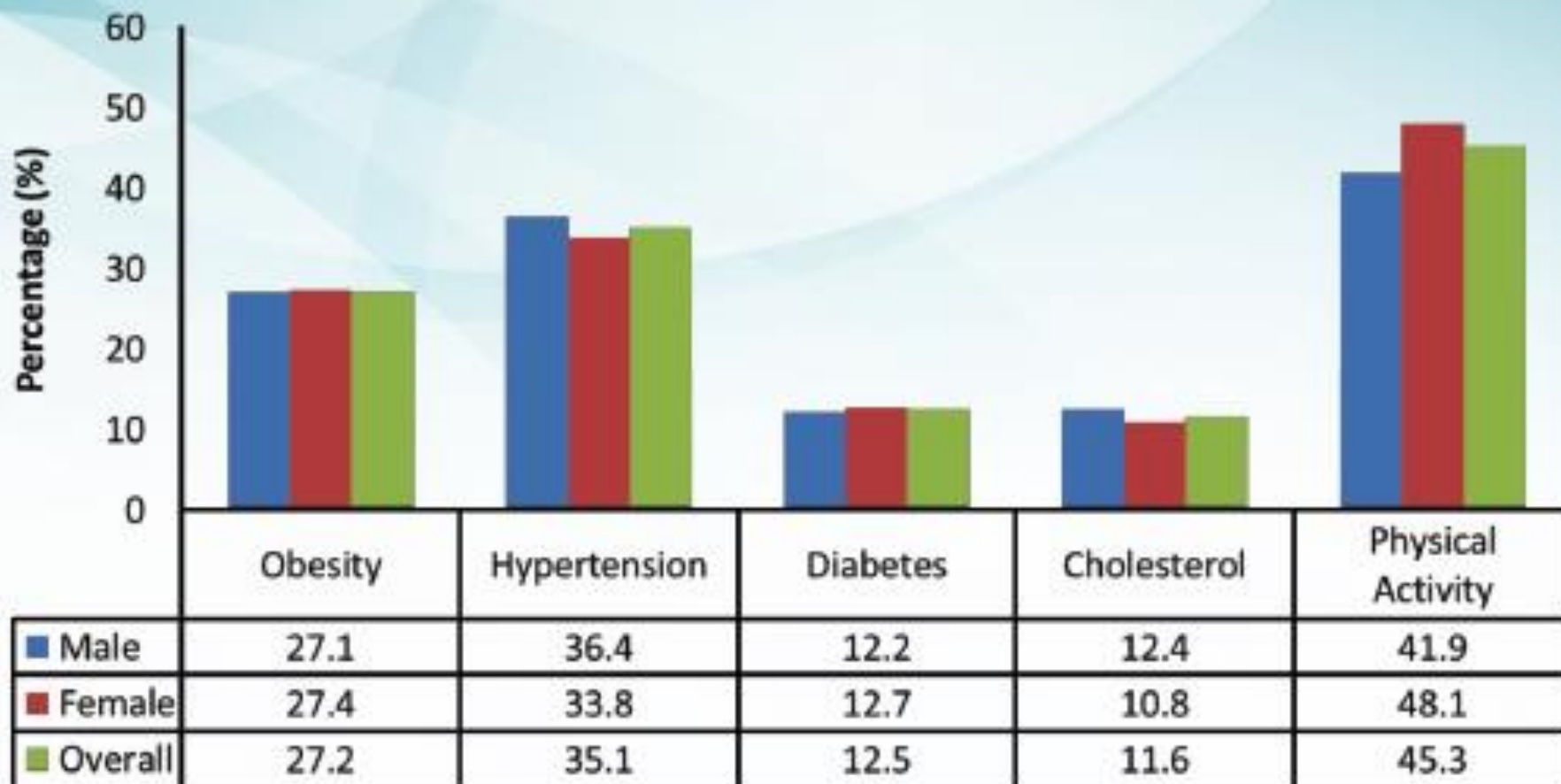
SUGAR-SWEETENED BEVERAGES AND THE HEALTH OF THE POPULATION IN BRUNEI DARUSSALAM

National Health and Nutritional Status Survey 1997 and 2011



National Health and Nutritional Status Survey 2011

Figure 12: Prevalence of Obesity, Hypertension, Diabetes, Hypercholesterolemia and Physical Activity in Adults in Brunei Darussalam from NHANSS (preliminary data)



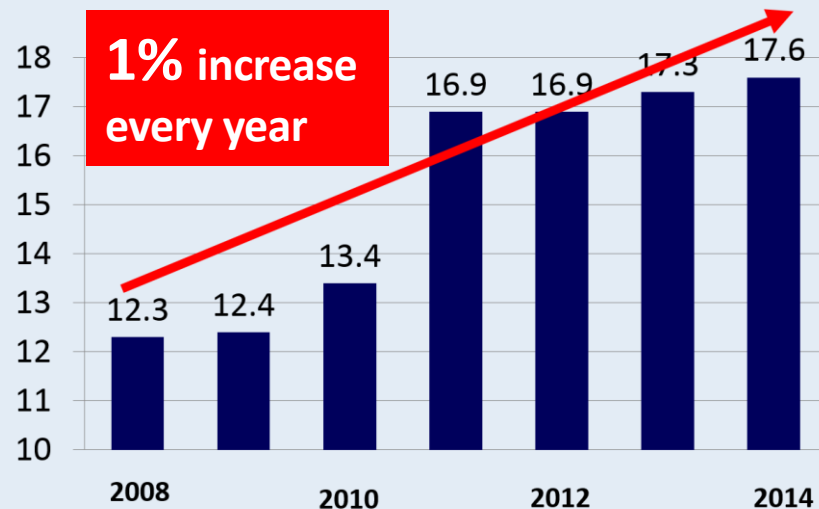
Obesity among school children in Brunei Darussalam

Nutritional Status

SCHOOL HEALTH (YEAR 1, 4, 6 and 8 only)	PERCENTAGE OF STUDENTS SCREENED FOR WEIGHT STATUS (%) (2009 - 2013)				
	2009	2010	2011	2012	2013
1. Normal weight	68.9	67.1	49.7	43.7	55.6
2. Overweight	14.0	14.7	11.5	12.1	13.9
3. Obese	12.4	13.4	16.9	16.9	17.3
4. Severe Underweight	8.2	11.3	4.0
4. Underweight	4.7	4.8	13.8	15.9	9.3

Note:
In 2013, the Total Number of School Target Population is 17,602 for Year 1, 3, 4 & 6 and 8,041 for Year 8.

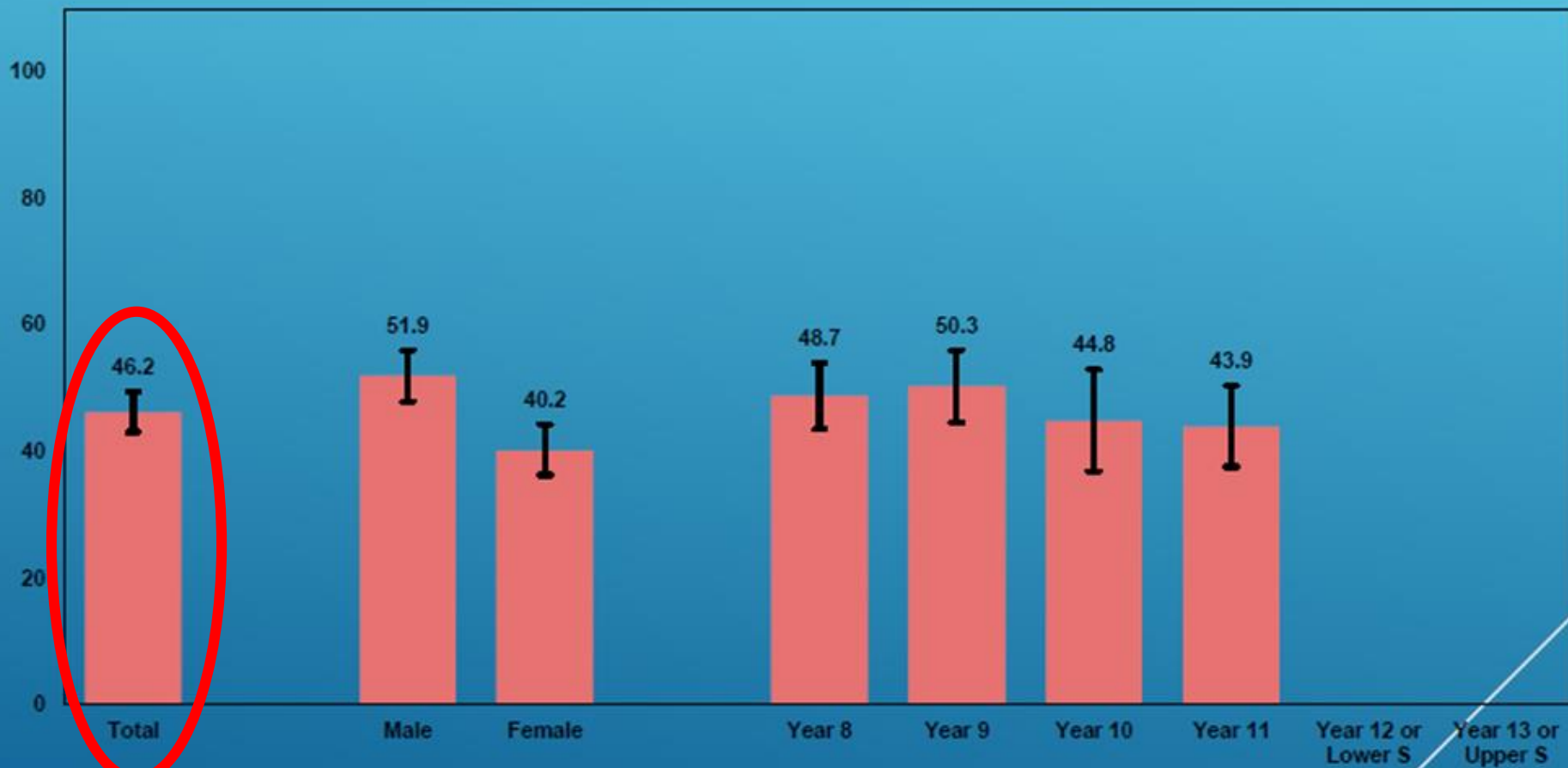
Source:
School Health Services, Ministry of Health



Half of our school children are either obese or overweight

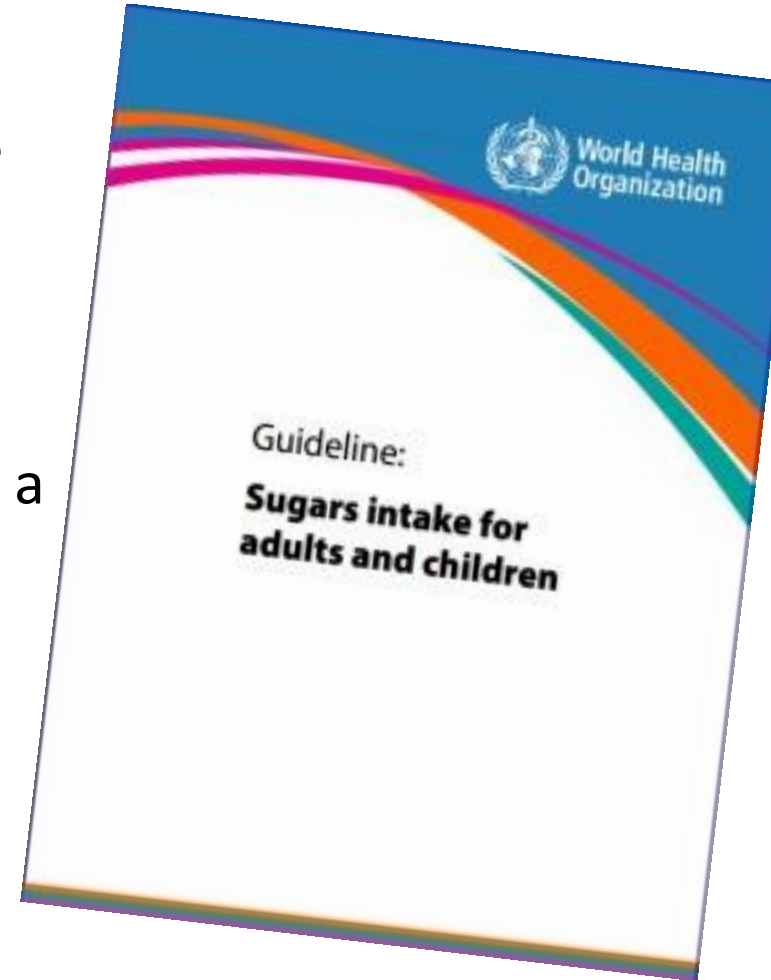
46% of student population drink sugar-sweetened beverages on a daily basis

Percentage of students who usually drank carbonated soft drinks one or more times per day during the past 30 days



WHO Recommendation of free sugars

- The World Health Organization (WHO) recommends reducing the intake of free sugars to less than 10% of total energy intake for both adults and children. A further reduction of 5% would provide additional benefit.
- For an average adult requiring 2000 kcal a day, 10% energy from sugar is 200 kcal. This is equivalent to about 50 grams of sugar or 12 teaspoons.
- 5% energy from free sugar is equivalent to 100 kcal (25 grams of sugar or 6 teaspoons of sugar).



Evidence on the link between SSB and Obesity

- An epidemiological study consisting of participants from 75 countries revealed a significant association between **sugar-sweetened beverages and overweight and obesity** (Basu et al., 2013).
- A meta-analysis of randomized controlled trials and prospective cohort studies, comprising of 30 RCTs and 38 prospective cohort studies, showed that in trials of adults, reduced intake of dietary sugars was associated with a decrease in body weight and that **increased sugars intake was associated with body weight gain**.
- A meta-analysis of the prospective cohort studies revealed that **the risk of being overweight and obese after one year follow-up increased significantly among children with the highest intake sugar-sweetened beverages compared with those with the lowest intake** (Te Morenga et al., 2012).
- A systematic review and meta-analysis of randomized controlled trials and prospective cohort studies showed that **sugar-sweetened beverages consumption promotes weight gain in children and adults** (Malik et al., 2013).
- A reviewed of sugar-sweetened beverages by the Scientific Advisory Committee on Nutrition (SACN) also revealed that **consumption of sugars-sweetened beverages, as compared with non-calorically sweetened beverages, resulted in weight gain and an increase in BMI in children and adolescents**.
- Evidence also documented that **reducing the intake of sugar-sweetened beverages may reduce weight gain in overweight children** (Malik 2013; de Ruyter 2012; Ebbeling 2012).

Evidence on the link between SSB and Diabetes

- Numerous evidence suggest a link between **sugar-sweetened beverages and type 2 diabetes** (Stanhope 2012, Weed 2011, Malik 2012).
- Findings from a meta-analysis of nine prospective cohort studies indicated a **positive association between sugar-sweetened beverages and type 2 diabetes risk** (Greenwood et al., 2014).
- A more recent meta-analysis comprising of eight prospective studies indicated that intake of **sugar-sweetened beverages (1-2 servings per day compared to less than 1 serving per month) was associated with an elevated risk of type 2 diabetes.**
- The meta-analysis also revealed that **high intake of sugar-sweetened beverages was associated with the risk of developing metabolic syndrome**, a strong predictor of type 2 diabetes (Imamura F, 2015).

Beverages Exempted From Excise Duty: Opportunity for beverage industry to collaborate with HPC

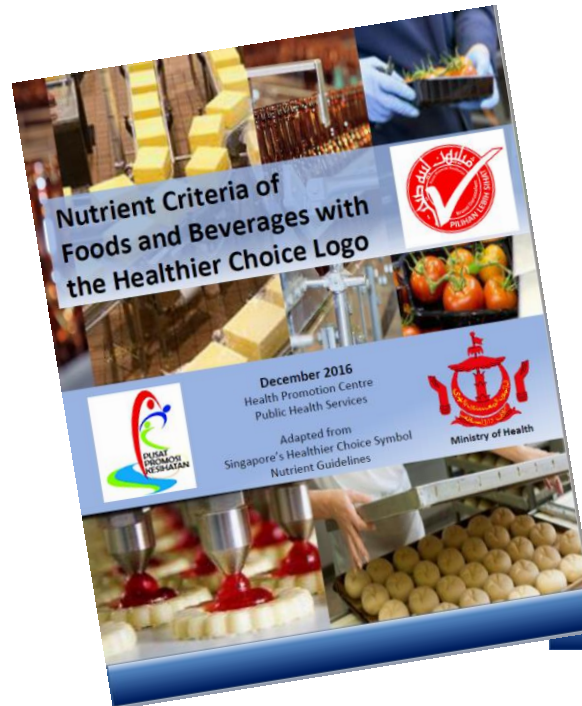
Category	Total Sugar (g/100ml)
Malted or chocolate beverages	≤ 8.0
Soy milk/ beverage	≤ 7.0
Sweetened beverages	
• Non-carbonated beverages, tea, coffee	≤ 6.0
• Isotonic beverages	≤ 6.0
• Juice drink (at least 10% of fruit juice)	≤ 6.0
• Carbonated beverages	≤ 6.0

**Beverages meeting the Nutrient Criteria
are exempted from tax**

Healthier Choice Logo



For products to be eligible to display the logo, products must first meet the Nutrient Criteria (you may contact Health Promotion Centre for the booklet). Application for the logo is currently free-of-charged



Introduction

More and more consumers are aware about the importance of good health and nutrition. A survey conducted at supermarkets in Brunei Darussalam showed that 94% of consumers agreed to have healthy foods and beverages made available in the supermarkets. To help facilitate food and beverage industry to meet the consumers' demand, the Ministry of Health with the support of our stakeholders has developed a Healthier Choice initiative.

Healthier Choice Logo

To help consumers easily identify healthy foods and beverages, a 'Healthier Choice Logo' has been developed. Products bearing the logo indicate that the products meet a set of nutrient criteria for healthy foods and beverages.



Healthier Choice Logo - to help consumers identify healthy foods and beverages at a glance

MOH is encouraging manufacturers to produce foods and beverages with less sugar, salt and fat.



Expected Impact on Taxing Sugar-Sweetened beverages

- Price of less sugar drink and bottle water cheaper than high sugar drink
- A reduce consumption of beverages with high sugar
- Increase consumption of water and beverages with less sugar
- Increase availability of beverages with less sugar
- Increase awareness on the magnitude of problem; diabetes and obesity
- Reduce prevalence of obesity
- Reduce prevalence of type 2 diabetes and complications associated with uncontrolled type 2 diabetes i.e. amputation due to gangrene and kidney failure.