

How Advocacy Drives Policy: A Case Study on Childhood Obesity Prevention
Initiatives in Barbados

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such as Experiential Learning Funding from UTM. Both her research and teaching connect to the fulfilment of the Sustainable Development Goals.

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INTRODUCTION

This paper examines the process of how advocacy can create tangible change through policy, by investigating Barbados' childhood obesity prevention measures.

Context

Barbados is a Small Island Developing State in the Caribbean - a region with some of the highest Non-Communicable Diseases (NCDs) and obesity rates in the world (Sobers & Samuels 2019). In Barbados, two-thirds of the population is overweight or obese, with one-third of all children falling into that category (Healthy Caribbean Coalition, 2023; World Obesity, 2022). These statistics are particularly jarring because obesity is linked to the development of NCDs later in life (Healthy Caribbean Coalition 2023).

Recognizing obesity as a major concern for the region, Barbados, along with other member states of the Caribbean Community (CARICOM), held the world's first summit dedicated to NCDs in Port of Spain, Trinidad and Tobago (Kirton et al. 2018). This resulted in the issuing of the 'Port of Spain Declaration: Uniting to stop the epidemic of chronic NCDs' in 2007, consisting of commitments for NCD prevention and control spanning government, civil society and private sectors (Kirton et al. 2018). These commitments included school interventions to increase physical activity and promote balanced diets. When evaluated, Barbados was found to have the highest level of compliance with the Port of Spain Declaration across the CARICOM countries (Samuels & Unwin, 2018). Barbados has seen multiple policy changes addressed directly at childhood obesity prevention. These include a tax on sugar-sweetened beverages in 2015 and a

new School Nutrition Policy that was rolled out in 2023. These policy measures have been implemented as a result of years of campaigning on the part of civil society organizations. The two most prominent civil society organizations that are closely examined in this report are the Heart and Stroke Foundation of Barbados and the Healthy Caribbean Coalition. These organisations seek to increase awareness about the dangers of non-communicable diseases, educate the public, serve as consultants for the government, and lobby for change.

By examining Barbados' advocacy-based policy towards childhood obesity prevention measures as a case study, we can extract actionable insights from its success as a model that can be used in other countries, addressing obesity and NCDs.

Factors Influencing Childhood Obesity Rates

One of the key questions answered by the participants in this study was about what they perceived to be the largest reasons and contributors to the high rates of obesity. We received a wide range of answers, including diet and food preference, the influence of Western nations on the Barbadian food environment, sedentary lifestyles, and high cost of living.

Diet and Food Preferences

A general consensus amongst participants was that the Barbadian diet is not necessarily balanced. It is usually a large portion size with starchy foods and high fats, salt, and carbohydrates. “Within Barbados, we eat a lot of starch and yes, we eat some fruits and veg in between, but it mainly is a very heavy starch diet. [On] the average plate there are two to three starches on plates” expressed one participant. Another participant stated that “[Bajan] tradition is

to have your breakfast, lunch is a big lunch, with rice and peas or macaroni pie or, it's a heavy meat, starch, maybe a little salad or vegetables on the side, but it's a heavy meal." Bajan foods also tend to be higher in sugar content, as a result of sugar being a major crop throughout Barbados' history. "Sugar is a major part of our culture in Barbados; a lot of the national dishes that we hold dear are high in sugar," said one of the participants. Another participant recalled that "If a child cried, the parents would give the child sugar water, so, the taste for sugar would have been developed from a very young age," making it that much harder to reduce sugar intake in adulthood. These quotes illustrate a general food preference for calorific foods, sustained consumption of which can lead to obesity and other related health issues.

Westernisation and Fast-food Culture

Given Barbados' close proximity to the West, and its reliance on imported food, "whatever is happening in North America impacts [Barbados], so food, what is the taste in North America [is going to trickle down to us] [such as] burgers, fries, soft drinks, and chocolates." Bajan food is thus heavily influenced by Western food practices - making fast food a popular alternative to a home-cooked meal. For instance, a locally owned fast food chain, Chefette, is well-known and loved - as evidenced by a perpetually long drive-thru line. Chefette's marketing, targeted particularly to children, ensures its success and the brand's popularity, which in turn makes high-calorie fast food more convenient than healthier options.

Sedentary Lifestyles

A significant contributor to the present obesity problem is the increase in sedentary lifestyles with less exercise and sports. "Back in the day, children were very active. They would make their

own toys and they would use their roller carts. Do a lot of skipping, marbles, and cricket. And, simply just running foraging for fruits like dunks and tamarin. They used to go to the sea a lot. Now, if I compare it with what's happening today, because of the [technological] devices, they do not engage in as much physical activity. We've moved from one end of the spectrum to the other, where they were very active and they would go outside and play, now to being indoors, playing on a device” expressed a participant. Participants also noted that there are very few physical activity facilities and resources, thus limiting the ability to pursue sports formally. Despite physical education being mandated in schools, there seem to be limited movement opportunities outside these physical education classes.

High Cost of Living

Many of the participants strongly asserted that the cost of living in Barbados was incredibly high. “Barbados is a more expensive territory... it was always known in the region as a higher cost of living than a lot of the other islands.” Despite this, many participants made the argument that a high cost of living is not mutually exclusive to affordable, healthy food options. Many participants articulated that there are many options for healthy food that are locally grown, and thus cheaper (as they do not have to be imported), but the public continues to perceive costly, imported fruits and vegetables as the only nutritious options. “Now there's a perception in Barbados that healthier foods are, are more expensive. It's a perception because the reality is that you can get healthier foods. Not necessarily what you think is healthier foods, but you know, you can get healthier options. You know, local vegetables, local fruits, local produce. It is accessible. You just have to make the time for it.” This highlights the need for better public education on food choices, and the promotion of local produce.

Childhood obesity in Barbados is not the consequence of one factor, choice or industry alone, it is the culmination of an array of cultural, dietary, and socio-economic contributors. Thus, the solutions to this problem must also be multi-faceted, adequately dealing with the complexity of the problem.

METHODOLOGY

Literature Review

Our research question originated from an investigation of the existing literature. We discovered that there is a need for more scholarship on how civil society and government interact to develop successful interventions that target childhood obesity in Barbados. Additionally, we wanted to learn about whether the cultural and historical context of Barbados impacted the way interventions, programming and policies were received by the general public.

The Interviews

Research ethics approval was obtained from both the University of Toronto and the University of the West Indies, Cave Hill. With the help of our partners at HSFb and HCC, we recruited participants through purposive and snowball sampling. Using 30-minute to 1-hour semi-structured interviews, we met with 30 stakeholders. They included government policymakers, secondary school alumni, leaders of civil society organizations and faith-based organizations, healthcare workers, academic experts, and members of the private sector.

Data Collection

We conducted in-person interviews in Barbados, at a predetermined private location convenient for the participant. We also used the Zoom platform to conduct virtual interviews. With the consent of the participant, interviews were recorded for audio and/or video. Audio-video recordings of the interviews were stored on an encrypted and password-protected FIPPA (Freedom of Information and Protection of Privacy Act)-compliant server SharePoint folder for a

period of 48 hours. Before deletion, each recording was transcribed into a separate encrypted SharePoint document. All personal identifying information was de-identified prior to transcription. Using the transcripts as a guide, we developed a codebook that collected overarching themes from across the interviews which became the basis for the findings of this report.

CIVIL SOCIETY INTERVENTION APPROACHES

Throughout the research process, we discovered the multiple types of initiatives that have been partaken that address the needs of Barbadian youth in the context of childhood obesity. Most notably, the Heart and Stroke Foundation of Barbados, alongside their partners under the Barbados Childhood Obesity Prevention Coalition (BCOPC), developed various styles of interventions that impacted current children, and targeted making lasting changes through government policy. The following are the various methods of childhood obesity prevention taking place within Barbados.

In 2019, the Heart and Stroke Foundation of Barbados joined forces with like-minded organizations in order to address the need for creation advocacy and intervention in the childhood obesity space. "One of the successes of this project [the Barbados Childhood Obesity Prevention Committee] and this work in obesity prevention has been the ability to amass a whole heap of players both within the health and the non-health sector." The BCOPC includes more than 30 civil society organizations, including but not limited to organizations like the Diabetes Association, the Healthy Caribbean Coalition, religious organizations, and sports associations. The coalition also includes individual leaders, passionate about creating healthier environments for the children of Barbados.

“[The BCOPC] has also allowed for co-branding of activities so that people see them, there's both governmental and civil society support activity. This has also allowed them to brand and support our specific

activities um that we are doing. To present a united voice on various media programs that we actually do together, so there's uh a unified voice.”

Through the BCOPC, the initiatives that have been pursued have been able to be successful in reaching diverse groups of the population.

Media Campaigns

A key front that has been used to fight against the rates of childhood obesity and more broadly non-communicable diseases is through media campaigns. As one interviewee mentioned:

“Constant public awareness, constant advertising, constant advocating for policy spending your money in reaching out to people and, giving them the facts and telling them what's happening.”

Creating awareness of the consequences of childhood obesity is key.

“We do strong mass media campaigns at least twice a year that sends the messages 360, pervasive through radio, through TV, through print, supported by other advocacy that we do via the media during that period of time, that really speaks about the issues and the risk of NCDs and how those risks manifest and what we need to do better.”

Ultimately, if the general population does not understand the risks of childhood obesity then it will be difficult for government policy to take place in a way that creates an environment of acceptance.

Examples of the type of media campaigns that have been done can be seen throughout the country. As we walked throughout the Bridgetown area, we spotted billboards at bus stops and park benches that highlighted how sugary drinks can be detrimental to the health of everyday Barbadians. The media campaign, titled “Are We Drinking Ourselves Sick?” created the opportunity to question current dietary preferences and their connection to health. An earlier media campaign that was pursued by the Heart and Stroke Foundation of Barbados included “Switch it Up, Protect our Children” in 2019, which was run on all major media platforms, including newspapers, national TV, radio, social media and physical outdoor advertising. This was done in collaboration with the George Alleyne Chronic Disease Research Centre (Heart and Stroke Foundation of Barbados, 2019).



Both media campaigns highlight the importance of using diverse mediums to sensitize the public to health-related topics.

Whilst health media campaigns are a great way to develop knowledge about the implications of noncommunicable diseases, whether or not they help to counteract the constant bombardment of advertisements for fast foods is debatable. Many participants noted how pervasive the fast food

industry is in targeting children. “Specifically in Barbados where we have like, things that you would use to learn, like big size rulers or, I'm trying to think of other examples, or murals with the [fast food] brand so again [children are] seeing this every single day, permanently in their school environment.”

Another participant explained how fast food industries are able to develop such persaving advertising: “One of the biggest issues that we have is the [food] industry. The industries pump a lot of money into advertising their products. So, it's beautiful, it's colourful, it's attractive, it's not healthy.” In an unequal fight, fast food industries are able to invest much more funding, something many participants believe can only be managed through government policy. “There is a suite of taxation policies that the government has now to think outside the box to say, ‘what are these policy tools that we're going to use to incentivize industry to move in the [right] direction?’”

Another method that was used to address childhood obesity was the development of 6 model schools that could be used as examples of what a School Nutrition Policy could look like. A member of the Heart and Stroke Foundation helped illustrate the thought process of developing this program:

“We need to get these sugar-sweetened beverages out of school. We need to get this marketing of all these unhealthy things out of schools. So we thought, you know what, let's use a few of the schools in Barbados to actually put a program into. So that we can show the government, in other words, we're galvanizing support for the policy that we are asking for, so with that, we created what we call the Model Schools program. We chose six schools, um, four secondary schools and

two primary schools. These schools agreed to be forerunners in the creation of a policy-based healthy school environment that would allow us to first evaluate the process, the challenges and best practices towards the creation of a healthy school environment. We wanted to present a template of legislative policy framework to guide the school nutrition.”

An alumnus of one of the model schools, St. Michael School, commented on what their time was like during the transition period of creating healthier practices within the school.

“And I think the year before [becoming a model school], the canteen... was pretty much fast food. And then I think when we became a model school, sometimes they will have baked chicken instead of like fried chicken that kind of stuff... They also stopped the selling of sweet drinks. That's a big thing here... They stopped selling those and they only sold fresh juices. Snacks were banned from the canteen. So like they sold fruit. It was a big change and I think we all felt it at the time. Yeah, definitely was a big change.”

The model schools ran sensitization sessions for both parents and teachers, interventions for students, development of wellness clubs, creating healthy competitions as well as monitoring the progress of the various initiatives taking place in the schools (Model School Concept & Roll Out (n.d)). The importance of this intervention was elucidated by one participant:

“Because what [the Model School program] said to us is that it can be done, it can be done in this culture, and it can be maintained. And it is one of the things that we pointed to when other schools said, you know, ‘this can't be done. How are you gonna do it?’ We said, ‘Well we have a model already. And you know, basically, this is how you can do it.’”

The model school program provided the necessary support needed for the development of the

current National School Nutrition Policy, but alongside the program, the constant pressure on the government by the BCOPC with open letters and media campaigns played a significant role in government involvement.

HSFB additionally partnered with U-Report Barbados to develop outreach activities, create polls on health and other relevant topics, and access youth ambassador networks. "UReport Barbados, which is a joint initiative between the United Nations Children's Fund and the Ministry of Youth Sports and Community Empowerment in Barbados. And we're a tool that collects the opinions and views of young people between the ages of 13 to 29 using social media like WhatsApp, Instagram, Twitter, Facebook, etc. We create and collect data, and then that data then goes on to inform policy and the decisions of policymakers. So it's a way for young people to use their voice to influence the positive development of their communities. We've done some with the Heart and Stroke Foundation around the school nutrition policy, healthy eating."

GOVERNMENT ACTION

“I think this government has done well in terms of health space and Barbados, and they're leading the way in the entire Caribbean. I think they're genuinely leading the way in the entire Caribbean.”

A direct consequence of years of advocacy by civil society can be seen through the gamut of government interventions and policies, aimed at childhood obesity reduction or overall health improvement, that have been implemented in the past few years. These policies take a comprehensive approach to tackling obesity by targeting children and adults; promoting healthy eating and exercise; by improving proactive and reactive methods of combating obesity. Some of the most influential policy changes include the new National School Nutrition Policy, a Tax on Sugar-Sweetened Beverages, and the introduction of a tax-free basket of goods through the Social Compact Program. These measures have been discussed in detail below, highlighting the specific advocacy measures that made these policies possible.

National School Nutrition Policy

The National School Nutrition policy was approved in May 2022 and implemented in February 2023. It was rolled out as a collaboration between the Ministry of Health and Wellness and the Ministry of Education and aimed at improving the nutritional environment within private and public schools. The policy includes a major modification to the food environment by setting standards and regulations that prohibit foods and beverages deemed unhealthy, including all sugar-sweetened and fizzy drinks. These standards apply to all the food sold within schools (in

canteens or by vendors) as well as to the food that students bring to school. In addition to nutritional standards, this policy also mandates a physical education and nutritional curriculum that teaches students about the importance of exercise and eating healthy. Improvements are also being made to the physical activity facilities to support and encourage physical education. A reactive measure is also being implemented in the form of annual health and nutrition assessments of all school children to help in the timely identification and treatment of nutrition-related problems.

The School Nutrition Policy (SNP) is a directly scaled-up version of the Heart and Stroke Foundation of Barbados' Model School Program, which implemented similar measures and saw great success. With the Model Schools serving as a proof of concept, civil society organizations had increased advocacy to the government to get a nationalized policy passed. These efforts succeeded and civil society was invited to consult on policy matters, highlighting the collaborative nature of policy-making in Barbados. This policy was, however, not without pushback. To public stakeholders, including; teachers, parents, canteen vendors and students the new measures felt jarringly extreme and unanticipated. Teachers believed the policy would leave them to unnecessarily monitor their students, stating they: "can't spend a whole day policing what the child eats or drinks." Considerable efforts were undertaken in order to sensitize the public to the benefits of the SNP by various government ministries, HSFB, the National Non-Communicable Diseases Commission, HCC, United Youth Leaders of Barbados, and prominent community leaders. "We've had a couple of these programs to sensitize the public about the NCDs and in particular the Barbados School Nutrition Policy. We are having PTA meetings. This is continuous. So parents are showing interest in knowing what the school

nutrition policy is about. Principals have been sensitized about the policy and they were supposed to inform their teachers. However, as reinforcement, the Ministry of Education had a mass meeting for teachers.”

Sugar-Sweetened Beverage Tax

In 2015, a 10% tax on all sugar-sweetened beverages was implemented across Barbados, following the approval of similar taxes in Mexico and Chile. This tax was subsequently raised to 20% in April 2022. An observational study that examined the impact of the 10% tax concluded that such a tax reduced the consumption of sugar-sweetened beverages and increased the sale of bottled water. It also observed that the tax led to some substitution effect - with buyers now purchasing cheaper alternatives of sugary beverages instead of expensive name-brand options (Alvarado et al., 2019).

The implementation of the SSB tax, and its increase, is seen as a huge win by civil society organizations, as it was a consequence of years of advocacy and campaigning. Such a fiscal measure was useful in not only reducing sugary beverage consumption but also in raising awareness about the harms of excess sugar in one's diet. Secondary aims of the tax also include raising funds (ideally used directly towards health measures and disease prevention) and encouraging manufacturers to reformulate products with decreased sugar content. The civil society hopes that the tax will lead to more regulation measures, like mandated front-of-package labelling requirements for all packaged foods that display nutritional information in a clear manner. A participant stated that “the [BCOPC] has been fighting for like front-of-package

labelling, those types of initiatives bringing our producers up to global standards and in line with the global trends.”

Tax-free Basket of Goods and Outreach Interventions

The government introduced a basket of goods with a zero-rated Value-Added-Tax (VAT). The primary purpose of this basket was to mitigate the effects of inflationary price surges. The basket included basic staples in the Barbadian diet, such as flour, rice and pasta but also nutritious goods such as fruits and vegetables. As one participant explained, the goal of the basket is to: “shield the consumers from the higher global prices, [and] to make sure that the basket was so configured that it at least had some healthy choices inside of there.” Although a good start, many participants believe there is a greater need for more diverse nutritious food options in the basket to give greater autonomy to families.

Over the years, the government has also introduced and conducted many outreach and sensitization programs, aimed at increasing awareness about obesity and compliance with health policies. This includes encouraging physical activity in schools through HYPE (Healthy Youth through Physical Education) Days, essay and poster-making competitions for students to increase knowledge on nutrition, and vendor training to ensure increased healthy food options in canteens (and compliance with the School Nutrition Policy).

Barbadian policymaking in the health space today is decisively collaborative - with the various sectors leaning on each other for support, expertise, and implementation power. This is aided by a government that places great emphasis on the fight against non-communicable diseases like

childhood obesity. Increased political will and collaboration between civil society, the private sector and the government have led to advocacy measures being more easily translated into actionable policies.

PUBLIC PERCEPTIONS AND SENSITIZATION

The group of participants that were interviewed in this project, all experts in their respective fields, echoed a deep and clear concern for the potential harms of childhood obesity in the short and long term across Barbados. They highlighted the link between unhealthy food and exercise patterns in youth, with non-communicable diseases later in life that can severely decrease quality of life, remove people from the workforce, and increase public spending on healthcare. The participants propagated a sense of urgency and action-oriented mindset when dealing with childhood obesity so that potential future harms can be minimized.

However, this urgency and deep understanding of the problem is not necessarily prevalent across the general population. Participants speculated that although there is increasingly more awareness, the public doesn't quite grasp the severity and gravity of Barbados' obesity and non-communicable diseases problem. "There are parents that when they get the information, they really are appalling, they try to make change. And then there are parents that are, they're not moved. They see the statistics and they say, 'well, this doesn't apply to my child cause my child is slim and I don't see a problem right now'." voiced a health expert. Some of this can be explained by different societal preferences in Barbados. For example, in the Caribbean "a fuller figure is deemed attractive," leading to parents not seeing the risks of childhood weight gain or taking any action.

Fast food culture and overall westernization of food have had an immense impact on Barbados. Participants testified to the differences in eating habits now, compared to when they were

children. A frequent observation was the massive size of drive-thru lines at fast food restaurants, like the popular local chain - Chefette. Traditionally, Barbadians would cook at home on Sundays, but now the packed fast food establishments suggest otherwise. A participant commented, “On Sundays, that's usually when you get like a home-cooked meal. But I see, now, like a lot of persons are at, like, fast food restaurants, buying food on Sundays.” Alongside calorie-dense fast food, meals are often accompanied by sugary sodas or juices, adding to the problem. Another significant concern is the large amount of ultra-processed food that is consumed in a typical Barbadian diet. According to the World Cancer Research Fund, Small Island Developing States in the Caribbean (like Barbados) import in excess of 80% of what they consume, and the majority of the imports are processed foods that are high in sugar, fat and sodium (Wetzel, 2022).

The normalization of fast food and sodas led to mixed reactions to policy changes like the School Nutrition Policy. While this policy received the full support of civil society organizations and the government, its rollout was perceived as sudden by some of the public. Teachers protested that they would have to “police” students’ food choices, canteen workers perceived that their profits would decrease, and parents thought that the government was trying to control people too much. A participant noted, “Teachers will say, well, I can't spend a whole day policing what the child eats or drinks.” A mixture of town halls, vendor training sessions, and public advertising helped ease some of these initial tensions and growing pains. Similar reactions were observed when the Sugar-Sweetened Beverage tax was first implemented. Certain members of the public dubbed the policy as ineffective or simply as a “cash grab” for the government. However, adequate sensitization by the government and civil society showcased the need for such a tax and brought

the public around. The reactions to these policy changes highlight the need for public buy-in. Public consultation, sensitization and adequate lead time are thus essential to the initial success or failure of such policies. “There's definitely a need for a lot more sensitization, education and awareness in society”

CONCLUSION

The childhood obesity prevention initiatives in Barbados are an exemplar of a holistic approach and demonstrate what can happen if government, civil society and the private sector work collaboratively and positively in order to pursue a goal, reminiscent of the 17th sustainable development goal, “Partnership for the Goals.” When different groups come together despite their diverse missions for one issue, the ability to reach a larger population in a more efficient way is possible. One person explained how the responsibility lies with all sectors of society. “It's everybody's, it's everybody's. It's not strictly the medical professionals need to do it, but everyone needs to do it. And for me, that's my goal. I think everybody should be a messenger here.” From religious establishments to small businesses, everyone has a part to play. When the burden is dispersed, the task becomes much more feasible.

While it is important for various sectors to play their part, the importance of government involvement cannot be understated. In a Small Island Developing State like Barbados, government interventions can counteract the massive sway the private sector has on the food options for its population. While most interviewees were proud of the progress the country has made so far, they are cognizant of the fact the work is not done. In fact, it has just started. “The thing with childhood obesity and you know broader NCDs is we have to be in it for the long haul. People will not see a change tomorrow. That's the thing with the healthy food policy advocacy is we know how incredible the results can be if implemented. Even though we have gained quite a bit of political support for those policies, but I'm just saying with childhood obesity efforts it takes time.” This acknowledges that Childhood Obesity prevention policies and

interventions are investments in the future. There may be an immediate cost, such as a shift in cultural habits, but the return is a healthier, happier and more productive Barbados.

This paper was completed in the context of a greater study of the Childhood Obesity Prevention Initiatives in Barbados with the Reach Alliance. For greater detail and scope, we direct you to the [Reach Alliance website](#) where our larger case study report will be published.

WORKS CITED

Alvarado, M., Unwin, N., Sharp, S. J., Hambleton, I., Murphy, M. M., T. Alafia Samuels, Suhrcke, M., & Adams, J. (2019). Assessing the impact of the Barbados sugar-sweetened beverage tax on beverage sales: an observational study. *International Journal of Behavioral Nutrition and Physical Activity*, 16(1). <https://doi.org/10.1186/s12966-019-0776-7>

Healthy Caribbean Coalition. (2023). Congratulations on the Implementation of Barbados National School Nutrition Policy, <https://www.healthycaribbean.org/congratulations-on-the-implementation-of-barbados-national-school-nutrition-policy/>.

Kirton, J., Knight, W.A., Hospedales, C.J., Hippolyte, .D., Kulik, J. (2018). Regional and global impacts of the 2007 Port-of-Spain Declaration on noncommunicable diseases. *Rev Panam Salud Publica.*, 42, e194.

Model School Concept & Roll Out. (n.d.), <https://www.hsfbarbados.org/wp-content/uploads/2021/09/Model-School-Concept-Final.pdf>.

Samuels TA, Unwin N. (2018). The 2007 Caribbean Community Port-of-Spain Declaration on noncommunicable diseases: an overview of a multidisciplinary evaluation. *Rev Panam Salud Publica.* 42, e193.

Sobers, N. & Samuels, T.A. (2019). Diet and childhood obesity in small island developing states. *The Lancet: Child & Adolescent Health*, 3(7), 445-7.

Wetzel, M. (2022, April). *Analysing the Barbados tax on sugary drinks* | *WCRF International*.
WCRF International.

<https://www.wcrf.org/good-health-doesnt-need-to-be-taxing/#:~:text=Barbados%20has%20doubled%20the%20excise,cancer%20on%20the%20Caribbean%20country>

World Obesity. (2022). Report Card Barbados,

<https://data.worldobesity.org/country/barbados-17/report-card.pdf>.