

July 2020



ACCESS TO
NUTRITION
INITIATIVE

Nutrition responses from food and beverage companies to the Covid-19 pandemic

Report I: Framework
July 2020



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Acknowledgements

The ATNI Covid-19 project is being supported by the UK Department for International Development.

This Covid-19 quarterly report, underlying methodology development, research and stakeholder consultations was conducted by the Access to Nutrition Initiative Covid-19 project team, which consists of Estefania Marti Malvido, Fiona Kirk, Nikolaus Kelnreiter, Mark Wijne and Paul Vos, along with external consultants Katy Cooper (author) and Marije Boomsma (leading project management).

As outlined throughout the report, the ATNI team drew on the expertise and knowledge of various organisations who provided valuable input during the consultation phase. We would like to thank each of these stakeholders for their support.

ATNI wishes to thank the team at Kummer & Herrman for their hard work on the design and formatting of this report.

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1. Summary

The Access to Nutrition Initiative (ATNI) is committed to support the food industry's contribution to addressing the world's nutrition challenges, leveraging the power of the private sector to provide accessible and affordable healthy food to all. Private-sector accountability is essential during the Covid-19 pandemic: the impact of the virus has highlighted the food industry's crucial role in ensuring manufacturing, supply and affordability of food to consumers worldwide in the face of rising malnutrition, and this is coupled with a renewed concern about the importance of good nutrition for good health. The world is also at the start of a unique and urgent opportunity to reorient the food system towards a more healthy, equitable and sustainable future: a chance for the world to build back better.

ATNI has developed a Framework to identify action (and inaction) by food and beverage manufacturers in response to this crisis. It is not intended to form the basis of a benchmark or Index of action on Covid-19, but instead adds an explicit Covid-19 lens to all of ATNI's work. The Framework presents ways in which Covid-19 can be integrated across all ATNI's existing Categories for action by food manufacturers – and is, in effect, a set of recommendations for companies. The reporting on the Framework can also be used by other stakeholders to understand the industry response in greater depth, and it highlights examples of ways in which companies can take action.

The situation is rapidly changing as the virus tightens and weakens its hold and shifts across geographies, but some themes to the responses of the food industry have already become apparent during the first few months of the crisis. Short-term responses are most evident, such as donations (food, but also monetary donations and personal protective equipment) and efforts to protect the workforce (including financial support). To date, there is relatively little evidence of systematic shifts towards greater long-term resilience or a new normal – but this will continue to be part of ATNI's research in the coming months. As the medium term moves to the long term, there is an opportunity for the companies to be part of a transformation towards a healthy and sustainable food system.

ATNI also undertook a consultation process of key stakeholders – including UN agencies, industry associations, non-governmental organisations and academics – which identified some core concerns around the response to Covid-19 and some hopes for a future 'new normal'. These include genuine engagement in overcoming inequity (with a focus on the populations most vulnerable to Covid-19), greater involvement in nutrition and wellbeing of the value chain (particularly of small- and medium-sized enterprises), and empowering the workforce to ensure that they are healthier and more resilient against any future crisis or shock.

This document – the first of four quarterly reports on the Framework – introduces the Framework: the need for it, the rationale and aims, its scope, the process by which it was developed, a summary of the consultations with key stakeholders and some initial themes and examples. Annex 1 reproduces the Framework itself in full.

Box 1: Examples of areas for action

Based on the research to date, including an extensive stakeholder consultation, areas in which companies can and should take action are:

- forming a strategic response to the Covid-19 pandemic – both to react to the immediate crisis and to build resilience and sustainability into the future;
- support the workforce and supply chain;
- ensure that any donations of food or other contributions are healthy, needs-based, developed in consultation with local partners, do not establish inappropriate parallel food systems and (in the case of donations of infant formula) do not breach the International Code of Marketing of Breast-Milk Substitutes; and
- ensure that the response to Covid-19 does not adversely affect ongoing efforts in areas such as responsible marketing and reformulation towards healthier products.



2. The Covid-19/nutrition nexus

Covid-19 has thrown into sharp relief the weaknesses of the global food system. Even prior to the crisis, the world was facing major problems of food insecurity and the triple burden of malnutrition: 820 million people living without sufficient food,¹ undernutrition including 149 million stunted children and 49.5 million wasted children under five,² 2 billion with micronutrient deficiencies³ and 2 billion estimated to have overweight or obesity.⁴ The effects on food security are being felt even in high-income settings but are particularly acute among vulnerable populations and in the poorest countries of the world, exposing the fragility of local and global food systems.⁵ This can then exacerbate the impacts of the pandemic: undernourished people have lower immunity and this, like poor metabolic health (such as obesity and diabetes), can be linked to worse Covid-19 outcomes.⁶

Even once the acute crisis has passed, there will be significant longer-term secondary impacts, including unemployment, falls in GDP, mental health issues, challenges to children's education – and increased hunger. Every percentage point drop in global GDP is expected to result in an additional 700,000 stunted children⁷ and the World Food Program estimates that a further 130 million people will be pushed into acute hunger in 2020.⁸

Covid-19, rather than acting as the 'great equaliser' that some initially thought it to be, is exposing systemic social injustice and inequity,⁹ epitomised by the global Black Lives Matter movement. It is essential that the impact of nutrition on populations vulnerable to Covid-19 is considered¹⁰ (such as older people, those with underlying conditions and specific ethnic populations). The growing realisation that good nutrition is a key aspect of resilience may prove to be a major catalyst for change in the food system and far beyond, particularly in combination with climate change. It could, for example, have implications for social protection systems (including unemployment benefit and the living wage) and for public-private partnership.

The repercussions of Covid-19 and malnutrition are not only more serious among lower-income groups but also amplify inequity in low-, middle- and high-income countries. There is a collective responsibility to act on this, with the food industry playing a key role. Ensuring equitable access to safe, nutritious, affordable food, and promoting breastfeeding, should be core to food and beverage companies' responses during and after the pandemic, helping to build a more resilient population.

The operating environment is changing rapidly and dramatically, including sudden shifts in demand (and consequently in business activity). This is likely to divert the direction of strategic travel for the food industry in the short-to-medium term, and quite possibly permanently – whether the product mix, workforce health and safety, the way in which small- and medium-sized enterprises (SMEs) are engaged, or resilience to emergencies. Over time, the emergency response to Covid-19 will blur into what becomes a new normal. There is an immediate and urgent window of opportunity to ensure that changes to the food system precipitated by Covid-19 are negotiated in the short term in ways that promote healthy nutrition and, over the longer term, become part of moves to 'build back better'.

[“Strengthening accountability has now become urgent if we want to prepare our food systems for future shocks and avoid a reversal of gain. The food industry has an important role to play in making healthy and sustainably produced food accessible, affordable and desirable. ATNI's accountability Framework is a valuable tool to help hold the food industry accountable for producing and marketing healthier food products.”](#)

Dr. Renata Micha, Co-Chair of the Global Nutrition Report's Independent Expert Group and Research Associate Professor at Tufts University



3. Rationale for the ATNI Framework on Covid-19

3.1 Background

The extent and depth of the repercussions of the Covid-19 crisis have made clear the need to complement ATNI's regular and ongoing work to monitor the food-industry contribution to address malnutrition in all its forms with **an additional tool: the ATNI Covid-19 Framework**. This will allow for systematic gathering of relevant information about the response to the pandemic, enabling ATNI and other interested stakeholders to understand the actions of large food and beverage manufacturers worldwide.

3.2 Audience and aims

The Framework is intended to be used by three key audiences: the food industry, other stakeholders (including investors, NGOs and funders) and internally by ATNI. Over time, the Framework will enable ATNI and other stakeholders to compare the food industry's pre-Covid-19 strategy, commitments and action with during- and post-Covid, enabling a clearer consideration of the additionality of the pandemic (whether that impact is positive or negative). It will shine a light on whether and how companies are internalising and formalising the changes necessitated by Covid-19, and how these are being reported.

3.2.1 Aims of the Framework for the food industry

- The Framework is a **tool and a guide in itself**. It takes as its start point that the Covid-19 crisis is likely to impact across all the Categories of the existing ATNI Indexes (see section 5, below), and the indicators can already be seen as early recommendations to the food industry.
- ATNI will highlight both **good and poor practice**, with the examples of positive action acting to inspire, engage and direct companies that are not yet taking a leading role in alleviating the consequences of the pandemic.

3.2.2 Aims of the Framework for other stakeholders

- Stakeholders including investors, NGOs and donors can use the Framework as **an accountability tool** to examine and better understand the role of the private sector in light of the Covid-19 crisis and within the context of global malnutrition.
- The Framework can be used to **inform other monitoring/accountability mechanisms** to measure aspects of companies' contributions to food systems in crisis contexts, including and going beyond Covid-19.
- The reporting on the Framework can be used as a source of best practice on which to draw for inspiration and encouragement.

3.2.3 Aims of the Framework for ATNI

- The Framework provides the basis for ATNI's **mapping, monitoring and analysis** of the food manufacturing sector throughout the Covid-19 crisis, enabling a greater understanding of the operating environment and reaction to the pandemic across ATNI's other areas of work (see Box 2).
- ATNI anticipates that the Framework and reporting will provide a **platform and process to accelerate dialogue** with the companies: as the crisis develops and new information emerges, ATNI will maintain open and ongoing communication with relevant stakeholders.



Box 2: Applying a Covid-19 lens to other ATNI projects

The structure established by the Framework will contribute an important extra layer to all ATNI work for as long as Covid-19 and its repercussions continue: this is not a short-term addition to ATNI's work. Learning from the Framework may ultimately lead to the addition of Covid-19-specific indicators to the Global Index and country Spotlights, as the response to the pandemic becomes embedded across companies' business strategies. However, research for the next iteration of the Global Index – due to publish in 2021 – has already begun and therefore will not include Covid-19 indicators, although ATNI expects to include a separate chapter or section on Covid-19 in the Indexes.

It is anticipated that Covid-19 will also be an angle included in forthcoming ATNI initiatives, including: the Nutrition Business Monitor tool for SMEs (being developed for initial use in Nigeria and Bangladesh in 2020); action research on a) access and affordability of healthy food and b) nutrition quality of complementary foods for young children; the first retailer Access to Nutrition Index (building on the UK Supermarket Spotlight report published in 2019); and a set of Investor Expectations on Nutrition, Diets and Health, on which investors can draw when engaging with the private sector on appropriate action and engagement on the provision of healthier diets for all.

ATNI also anticipates that the Covid-19 pandemic will be a stimulus to generate further debate and incentives (such as through the new Investor Expectations) to accelerate changing the food system, which could link into ATNI's forthcoming work on the Nutrition for Growth Summit (due to have been held in Japan in December 2020 but now postponed) and the Food Systems Summit (slated for 2021) – including establishing an accountability framework and monitoring hub for pledges and commitments made by companies at these events.

3.3 Reporting of findings

ATNI will report findings quarterly on its website: this first report presents the Framework; the second will set out the company assessments and overall analysis; the third and fourth reports will be deep dives into specific aspects of the Covid-19 response (for example, a regional snapshot). However, in contrast to ATNI's other work, the Framework will not lead to a benchmark or Index, nor will it provide a comprehensive overview of everything companies did or are doing in response to Covid-19. Instead, it is an instrument that will give ATNI and other stakeholders insights into the reactions of the food industry, identifying areas to scale up and flagging areas of concern.

3.4 Looking to the future

As the crisis develops and new information emerges, ATNI will maintain open, ongoing communication with relevant stakeholders, including the food and beverage companies, to consider their main concerns and recommendations. Over time, ATNI expects the response to Covid-19 gradually to become internalised, formalised and reported on by the food industry. The timescale of the project (April 2020 to March 2021) means that it will track the direction of travel as interventions become more structural (strategic) and less ad hoc (such as emergency donations), moving towards a new normal in which Covid-19 interventions become embedded company behaviour.

The Framework may be adapted as new issues surface over time and new evidence around best-practice responses becomes clear.

ATNI hopes that the quarterly reporting will encourage strategic change, going beyond short-term philanthropy, with companies inspired to take the approach set out in the Framework forward. ATNI also hopes that it could be used to guide the emergency response to future crises – a pandemic has been predicted for decades and this is not the last that the world is likely to see.



4. Scope

4.1 Deep-dive scan into selected companies

The primary focus of the Framework will be the food and beverage companies that ATNI's Global and Spotlight Indexes have assessed (see Annex 3): the world's 25 largest food and beverage manufacturers, and the 11 largest manufacturers in the United States and 16 in India. ATNI will also collate the actions by baby food manufacturers, focusing on the 10 companies included in the forthcoming ATNI Global Index. Each of the total of 39 companies' websites will be monitored by ATNI's analysts (who already have in-depth knowledge of the companies) using the indicators within the Covid-19 Framework, and the companies will be encouraged to provide to ATNI further information on their Covid-19 response. These company assessments will form the basis of the second quarterly report and will cover the period from the start of the crisis to mid-August. Further monitoring will continue thereafter and will inform the third and fourth reports.^a

The research will differ from ATNI's usual methodology in that it will not include information requested from companies under non-disclosure agreements (although this may act as an incentive to the companies to publish more material publicly). ATNI will not verify all the information, as resources do not permit this level of scrutiny. However, information from the companies will be triangulated with reporting from third-party sources and companies will be invited to share information with ATNI, and ATNI hopes that the companies will be able to use the Framework to structure their own response to the pandemic.

The research will enable stakeholders to understand the actions of the 39 Index companies, but will not score or rank them in a quantitative way, allowing for a necessarily more flexible approach than that taken for ATNI's full Index assessments. Scoring is neither possible nor desirable because:

- a) there is not yet clear international guidance on how companies should respond; and
- b) the policy and science environments are changing so rapidly that any attempts to quantify changes would be immediately out of date.

ATNI will, however, present qualitative comparisons and highlight case studies.

Box 3: Nutrition-specific and nutrition-sensitive actions

The research will cover Covid-19-related measures as they impact directly and indirectly on nutrition. This includes 'nutrition-specific' actions^b (such as micronutrient fortification and breastfeeding promotion) as well as other direct nutrition-related actions that companies can take such as reformulation or restriction of product ranges or marketing under lockdown. Measures that indirectly impact on nutrition include 'nutrition-sensitive' interventions^c that aim to improve the underlying determinants of nutrition.

Within this Framework, therefore, a broader range of company actions will be considered that address underlying determinants of nutrition but do not directly address the production or marketing of (un)healthy products; these include mitigating supply-chain disruptions, donating or distributing personal protective equipment (PPE) and key issues around social inequity (such as commitments to a living wage for employees or to work with government on social protection for vulnerable populations). The research will also seek out examples of existing nutrition-related progress being halted or reversed – for example, if reformulation efforts are slowed or the implementation of labelling requirements delayed.

^a It is to be decided whether a second deep-dive scan will be performed on the 39 companies during the year for which this initiative is initially funded.

^b 'Nutrition-specific' interventions are defined as those that directly address inadequate dietary intake or disease – the immediate causes of malnutrition: World Bank, *Improving Nutrition through Multisectoral Approaches* (Washington, DC: International Bank for Reconstruction and Development, International Development Association of The World Bank, 2013).

^c 'Nutrition-sensitive' interventions or development are defined as efforts that, within the context of sector-specific objectives, also aim to improve the underlying determinants of nutrition (adequate food access, healthy environments, adequate health services, and care practices), or aim at least to avoid harm to the underlying or immediate causes, especially among the most nutritionally vulnerable populations and individuals: World Bank, *ibid.*



“It is always vital to support compliance with policies and practices that fully protect children’s nutrition, including in the context of Covid-19. We welcome ATNI’s commitment to track and hold businesses to account.”

Bernadette Gutmann, UNICEF South Asia

4.2 Beyond the deep-dive scan

In addition, where resources permit and/or when selected third-party sources might point to strong cases by companies beyond the 39 manufacturers, action by other companies or country subsidiaries will be included, including an anticipated focus on key developing markets. ATNI has, since April 2020, been undertaking research into the impacts of Covid-19 to achieve this broader understanding of the actions of other food companies. This is more light touch, delving regularly into a wide variety of third-party sources, which are listed below in section 8.^d

- Systematic checks of specific third-party sources from both private sector and international organisations. Google, media sources and social media sources are scanned to ensure that up-to-date examples are identified in this fast-moving environment in which the companies are operating. Third-party sources will also be used to identify relevant illustrative examples of good practice from retailers.
- Major news outlets are scanned using Google alerts for the 39 companies and for recent stories that illustrate trends or major developments.
- Social media will be scanned to ensure that up-to-date examples are identified in this fast-moving environment in which the companies are operating, with Twitter being used as the main social media tool to identify insights and examples. A number of key accounts are checked weekly (for example, NGOs and academic institutions that are tracking the actions of food companies, such as the NCD Alliance) and appropriate hashtags have been identified.

This scanning will also enable a form of triangulation of the information received from the 39 companies, which ATNI will scrutinise as far as possible using information in the public domain.

The new Framework also goes beyond the remit of the existing Indexes to actions by the manufacturers that affect the value chain – both up the supply chain (for example, small- and medium-sized enterprises (SMEs), commodity traders, agricultural producers or raw material / inputs suppliers) and further down the chain (including retailers, which have important impacts on food security for consumers). These other actors in the value chain – while not being systematically assessed as part of the deep dive – may also provide examples of good/poor practice from which learning can be applied elsewhere, and these will be included as short case studies, as appropriate. SMEs, for example, are being impacted in many ways by Covid-19, but could also be used by larger companies as a bridge to overcome disruption in local supply chains. Note that the food service and out-of-home segments are outside the scope of the Framework.

The research will also focus on the response of companies addressing populations vulnerable to Covid-19 (see Box 4). As section 2 (above) made clear, many will now face a double vulnerability, as existing forms of malnutrition are exacerbated by the direct and indirect effects of Covid-19 and also by widening levels of societal inequality.

^d ATNI is aware that there are existing repositories of company actions and is keen to avoid duplication; the consultation process (see Annex 2) was used to request information about any existing repositories or other sources of information, which were then added to the list of sources for regular checking.



Box 4: Vulnerable and priority populations

In its existing Indexes, ATNI uses the overarching term 'priority populations' to assess whether companies commit to addressing the needs of groups experiencing or at higher risk of experiencing all forms of malnutrition than the general population, as defined by public authorities in the markets in which companies are present, and as relevant to the companies' product portfolios and activities.

This report and the Framework introduce a new term: 'populations vulnerable to Covid-19'. This allows for a layering of double vulnerability of malnutrition and Covid-19. In the case of Covid-19, this can be direct (for example, populations at high risk of poor disease outcomes i.e. older people and those with underlying conditions, including people living with obesity) or indirect (such as lower socioeconomic groups who are less able to weather financial shocks, those without access to health care, or those in living conditions or employment where Covid-19 precautions are impossible to maintain). These populations are found across all countries, whether high-, middle- or low-income.

The timescale of the initiative – one year, in the first instance – means that it may not be possible to capture the longer-term trends. For example, investment in food innovations (creating more nutritious and environmentally sensitive products in reaction to the need for greater resilience) are likely to take longer to materialise. Consideration will also be given to the inclusion of some of the Covid-19 indicators in future full Index assessments.

However, as food and beverage companies continue to develop their responses to the crisis, this approach will enable ATNI and others to follow the ways in which activities and programmes inform companies' longer-term strategies and action.

Box 5: Limitations/challenges

- The information included in the reporting will not be verified to the same extent as that included in the Global and Spotlight Indexes: it will not be possible to track, review in detail or verify the overwhelming amount of information that is available in the public domain or to engage with the companies on their actions, which may, for example, mean that it is hard to assess the motivations for and impact of issues donations or financial assistance. However, ATNI will be as objective as possible, providing information from the company but also including third-party perspectives (such as from UN agencies and civil society organisations).
- The Covid-19 crisis is a fast-moving situation, which makes actions of companies particularly hard to assess: information in the public domain is likely to be lagging behind.
- ATNI can assess only a limited number of large companies and cannot assess the actions of all companies or of actions being undertaken in-country by the subsidiaries of the larger companies. However, third-party sources will be used to find examples from other companies, and ATNI will investigate certain areas or upcoming themes more in-depth in subsequent quarterly reports (which may include specific geographic areas or the impact of Covid-19 on SMEs).
- It is a challenge to separate reporting of action from a specific market from that reported by the company's global HQ, particularly as reporting is likely to be more extensive from high-income countries than low/middle-income countries (LMICs). However, ATNI will be able to use existing contacts in LMICs in which it is already undertaking research for Spotlight Indexes and other projects (including Nigeria, India and Mexico) and also to draw on other existing information sources and streams, such as Scaling Up Nutrition (SUN) pilot projects in Bangladesh and Nigeria for the SME perspective.



5. Framework development

5.1 Outline

The Framework is made up of eight Categories (that align with the Categories in the Global and Spotlight Indexes), within which there are a total of 25 indicators, plus a further four indicators for manufacturers of breast-milk substitutes and complementary food.

For the purposes of the Framework and for researching the actions of companies, ATNI takes a wider approach to assess aspects that may directly or indirectly impact on nutrition, including 'nutrition-sensitive' approaches (see Box 3, above). This means:

- a) focusing primarily on activities that address the immediate and underlying factors affecting nutrition outcomes – such as ensuring affordability of healthy products even as supply chains are interrupted, committing not to inappropriately market unhealthy products to young audiences in lockdown, or supporting breastfeeding arrangements in the workplace during the crisis; but also
- b) going beyond this, in some Categories, to consider broader actions that influence the health and wellbeing of food systems and consumers everywhere – such as mitigating supply-chain disruptions and supporting SMEs, or donating or distributing personal protective equipment.

The complete Framework – Categories, subcategories, indicators and rationale – appear as Annex 1 to this report. It is a living document that may be amended following the initial detailed assessments of companies and as the appropriate response to Covid-19 becomes clearer. The explanation of each Category below includes comments drawn from the consultation process (see also Annex 2).

5.2 Category A: Governance and leadership

This Category covers three subcategories of governance and leadership: the development / implementation / scope of a **nutrition-sensitive strategy**, the **management systems** governing it, and the **reporting** against it.

- If the response to Covid-19 is to be informed and strategic, rather than ad hoc, a strategy must be integrated into core business and management systems, carefully implemented, drawing on internationally recognised guidance as it is (or becomes) available.
- A strategy to support organisations across the value chain, including SMEs and suppliers – through, for example, provision of operational support to address Covid-19 challenges or of flexible or deferred payment – is an important nutrition-sensitive action, helping to guarantee the continuing provision not only of nutrition to the manufacturers' own customers but potentially also to have a broader stabilizing effect on the food supply.
- Aspects of a strategy that will (where possible) be captured include whether the company explicitly commits to supporting populations vulnerable to Covid-19 (such as people with underlying conditions, those with low socioeconomic status, or the older population) and the timescale of the strategy.
- Public reporting is essential to inform stakeholders of activities and commitments to mitigate the impact of Covid-19 – including reporting on progress and follow-up. This provides an opportunity for ATNI and others to hold companies to account if they fall short.



Infant and young child nutrition

examines whether companies help to promote and support breastfeeding during the pandemic and whether they market their products in line with the International Code of Marketing of Breast-milk Substitutes. This Category is specific to companies that manufacture products for infants and young children – both breast-milk substitutes (BMS) and complementary food (CF).

Category A: Governance and leadership

examines the development/implementation/scope of a nutrition-sensitive strategy in response to Covid-19, the management systems governing it, and the reporting against it.

Category G: Engagement

looks at responsible and transparent engagement with government on Covid-19, as well as appropriate consultation and collaboration with other stakeholders (e.g. industry associations/ NGOs).

Category B: Safe and healthier products

examines company's fortification efforts and addresses the extent to which companies made any changes to their portfolio or otherwise to prioritize production of healthier products in response to Covid-19.

Covid-19 Framework

Identify (in)action by food and beverage companies in response to Covid-19

Category C: Affordability and accessibility

addresses affordability and accessibility of healthy products, including donations, particularly in relation to prioritization of populations vulnerable to Covid-19 and its impacts.



Category F: Nutrition labelling and claims

addresses the extent to which companies work to ensure that current nutrition and health claims and labelling-related practices are safeguarded and ensures potential new claims are not misleading in relation to Covid-19.

Category E: Protecting employees and promoting healthy lifestyles

looks at companies' commitments to support health, safety and/or nutrition of employees and value chain partners, as well as their development of consumer/community education programs.

Category D: Responsible marketing

focuses on the extent to which companies take particular care to ensure that responsible marketing commitments across all markets are upheld or strengthened during the Covid-19 crisis, especially in relation to children. It also takes into consideration the increased use of e-commerce/online purchasing.



5.3 Category B: Safe and healthier products

This Category has just one broad subcategory (**safe and healthier products**).

- It addresses the extent to which companies changed their product portfolios, nutrition criteria/nutrient-profiling systems or made other changes to prioritise production of healthier products in response to Covid-19.
- Companies should uphold or reaffirm existing fortification commitments to ensure that attention to this effective and cost-efficient strategy is not reduced. Further, when companies disclose other approaches to addressing vulnerable Covid-19 populations at high risk of adverse nutrition impacts with healthy and appropriate products, it is important these are evidence-based.

5.4 Category C: Affordability and accessibility

This Category addresses **affordability and accessibility of safe and healthy products**, including donations.

Companies should ensure that healthier products are accessible and affordable, particularly prioritising populations vulnerable to Covid-19 and its impacts. This includes:

- a commitment to secure the accessibility and affordability of healthy products, for example by not increasing the price of healthier products (or even a commitment to lower prices) despite the economic shocks of Covid-19; and
- taking concrete action to improve the accessibility and affordability of healthy products, for example through partnerships in the value chain – including with suppliers or retailers.

Particular care should be taken in the emergency phase around **donations**, including:

- a commitment to donate only products of high underlying nutritional quality, as guided by national/regional guidelines; and
- donating products according to established need – for example, through collaborating with governments or with NGOs – so as not to establish parallel systems and undermine local markets.

Notes:

1. Donation of infant and young child nutrition is dealt with explicitly in the final Category in the Framework.

5.5 Category D: Responsible marketing

This Category has two subcategories: **general marketing** and **marketing to children**. It requires companies to take particular care to ensure that responsible marketing commitments across all markets are upheld or strengthened during the Covid-19 crisis, especially in relation to children. There are also indications that e-commerce/online purchasing has been a significant shift in the early stages of the pandemic, which underscores the need to address inappropriate marketing online.

- The ATNI Global and Spotlight Indexes focus particularly on compliance with international standards. This Category looks for specific commitments to and changes in company policies and practices as a response to Covid-19 – both positive and negative change.
- Digital marketing is a particularly pressing issue during lockdown when children are unable to attend school or to play outside, and so may be spending increased periods of time online – and are therefore at greater risk of exposure to inappropriately targeted marketing.

Notes:

1. Responsible marketing of infant and young child nutrition is dealt with explicitly in the final Category in the Framework.
2. Inappropriate branding of donations fall under Category C.



5.6 Category E: Protecting employees and promoting healthy lifestyles

This Category has three subcategories: **employee health and wellbeing** (committing to implementing guidance on preventing Covid-19 in the workplace and taking all steps needed to protect the workforce), **value-chain health and wellbeing** (a subcategory additional to those in other ATNI Indexes, which recognises that a nutrition-sensitive approach requires action to be taken higher up the value chain if good nutrition is to continue to be delivered during the Covid-19 crisis and beyond), and **consumer/community (educational) programs**.

- Commit to resilience across the value chain: implementing guidance on preventing Covid-19 and secondary impacts **in the workplace**, taking action to support health, safety and/or nutrition of its **value-chain partners**, and support (unbranded) awareness programs for **consumers** in response to the crisis.
- The consultations for this Framework indicated that in-company discussions around the need for an empowered, resilient, healthy and safe workforce have dramatically changed since the Covid-19 crisis: there is likely to be much more attention in coming years on support of employee health and wellbeing.
- Companies can and should take action specifically related to nutrition, including providing support for mothers to ensure that they can breastfeed safely in the workplace.
- Taking a nutrition-sensitive approach is particularly important in this Category, going beyond health, safety and nutrition to making a commitment to protect companies' own workforce (for example, through a remuneration policy that safeguards jobs and income, such as furlough schemes or the introduction of or continued commitment to a living wage) and supports supply chain partners. This could include support for social protection schemes or action to support employees with children.

5.7 Category F: Nutrition labelling and claims

This Category has just one broad subcategory (**nutrition labelling and claims**). There are already examples of companies beginning to link their product labelling and health claims to Covid-19.

- The research in this Category will address the extent to which companies work to ensure that current nutrition and health claim and labelling-related practices are safeguarded (i.e. standards are not lowered). Further, potential new claims should not be misleading in relation to Covid-19 for example, products that purport without evidence to be immune boosting or where fortification is marketed on the grounds of being protective against Covid-19.
- Note that there is currently no international guidance on what an evidence-based health claim could be, because the pandemic is in its early stages and the evidence is not yet available – but over the coming months the evidence may build, so this is an element of future-proofing the Framework.

5.8 Category G: Engagement

This Category has two subcategories: **lobbying and influencing policymakers** and the broader **stakeholder engagement and partnerships**. This is about responsible and transparent engagement with government on Covid-19, and appropriate consultation with other stakeholders (e.g. industry associations / NGOs)

- A focus on whether and how companies are lobbying government, which could be positive (for example, lobbying for appropriate and safe reopening of markets) or negative (such as calling for delays on implementation of labelling requirements). ATNI also aims to monitor if and how companies play a role in temporary relaxation of nutrition-related rules/standards because of Covid-19.
- Companies may respond to government requests for support – for example, to strengthen social safety nets or improve food security. Social protection is the primary mechanism to which people (particularly the most vulnerable) turn when they are struggling economically, so any links between the private sector and social protection during the Covid-19 emergency will be instructive.
- Companies should consult with or collaborate with international organisations, academic experts and/or NGOs to inform their nutrition-sensitive strategies and interventions. Further, companies could harness the collective power of the industry by leading or joining industry-wide initiatives to address Covid-19-related nutrition challenges.



5.9 Category on infant and young child nutrition

This Category is specific to companies that manufacture products for infants and young children – both breast-milk substitutes (BMS) and complementary food (CF) (see list in Annex 3).

- Companies must help to promote and support exclusive breastfeeding for the first six months of life and continued breastfeeding for two years or more, and support the introduction of safe, appropriate complementary foods at no earlier than six months of age. Therefore, they must market their products in line with the International Code of Marketing of Breast-milk Substitutes¹¹ and all relevant subsequent World Health Assembly (WHA) resolutions. Although some have raised concerns about the safety of breastfeeding during the coronavirus pandemic, UNICEF advises it is safe – and highly beneficial – if proper hygiene precautions are taken. Companies must therefore be particularly assiduous in ensuring that their marketing adheres to the recommendations of the Code and consider doing more to protect breastfeeding during this emergency period beyond those it would normally take.
- In particular, companies should not aim to make direct or indirect contact with pregnant women or mothers. Emergencies must not be used as an opportunity for increased or inappropriate marketing. Labels must provide full, accurate and clear guidance on product preparation; health and nutrition claims must not be made on or in relation to products.
- Donation of BMS by manufacturers has been shown to lead to increased use of substitutes and a reduction in breastfeeding. Therefore, donations of BMS, CF and feeding equipment, including bottles and teats, must be made in line with the Code and relevant WHA resolutions, and with WHO and UNICEF guidance on feeding in emergencies.¹²
- The explicit focus on complementary food reflects the recent expansion of the Global Index methodology to incorporate assessment of the recommendations of WHA 69.9.
- There may also be examples of good/poor practice by retailers, whose marketing should also be explicitly governed by the Code and all relevant subsequent WHA resolutions.



6. Emerging themes

April–June 2020

“There is no better time to drive this agenda for promoting healthy Covid-19 responses by the global consumer goods industry”

Sharon Bligh, The Consumer Goods Forum

6.1 The first few months

ATNI's in-depth research into company behaviour will be undertaken in July/August 2020, but research of third-party sources has been ongoing since April 2020. This, combined with intelligence drawn from stakeholder consultation interviews (see Annex 2), is already demonstrating some clear themes, several of which are drawn out below. ATNI intends to track a small number of topics across all the reports to capture the way in which the food industry progressively moves towards a new normal.

The Covid-19 pandemic has had both direct effects (such as on the health of the workforce) and indirect effects (through the effects of lockdown and changing consumption patterns). Among the short-term impacts on food sales are sharp rises in items such as oils, rice, pasta and noodles at the start of lockdown, and suggestions that there have been falls in categories of foods eaten 'on the go' and impulse buys or premium products such as ice cream.¹³ For example, in its latest company earnings report, Nestlé notes 'Confectionery and ice cream posted a sales decline, reflecting reduced gifting and impulse buying.'¹⁴ The acute response in higher-income countries (where the pandemic began) is now shifting to a longer-term response in these countries, but the geography affected by the virus is shifting, with countries such as India and Brazil currently (late June) bearing much of the burden.

It is also noticeable that, following an initial flurry of Covid-19 actions – such as measures to support the workforce and pledges on donations – reporting on company responses seems to have slowed. This is reflected in initial active monitoring of company action by some sources, such as The Consumer Goods Forum's Covid-19 case studies covering the period March–May 2020 – which in June/July seems to be followed by more attention on reopening and comeback scenarios to return to a new normal. Longer-term responses by companies – such as that demonstrated by BRF in Brazil, which as early as March established a permanent multidisciplinary committee with experts and specialist to monitor the Covid-19 situation¹⁵ – are less in evidence to date.

There is no room for complacency or inaction: evidence already suggests that Covid-19 is increasing the prevalence of hunger in vulnerable countries. At a high-level UN event on humanitarian action (the ECOSOC Humanitarian Affairs Segment 2020), the FAO Director-General noted that 'The COVID-19 pandemic poses a clear and present danger to food security and nutrition, especially to the world's most vulnerable communities.' The impact of Covid-19 is already evident: in the Central African Republic, by early June there had already been an 11% increase in acute food insecurity and in Somalia, 3.5 million people – three times the number at the start of the year prior to the pandemic – are projected to face a crisis in the coming months.¹⁶ In addition, 'deteriorating employment conditions and other factors may have pushed as many as 45 million people into acute food insecurity since February 2020, the majority of whom (33 million) reside in South and Southeast Asia, and most of the remainder in Sub-Saharan Africa.'¹⁷ High-income countries are also feeling the effects of the economic impacts of Covid-19: in the UK one in four adults have been reported as struggling to pay for food.¹⁸



6.2 The changing environment

6.2.1 Consumer behaviour

Consumer behaviour around food – along with other aspects of all our lives – has significantly changed since the start of the Covid-19 pandemic, in response to changes in livelihoods, lifestyle and everyday living, such as lockdown, work/school closures and restrictions on travel. A survey by the International Food Information Council's annual Food & Health Survey in June 2020 found that 85% of Americans have made at least some change in the food they eat or how they prepare it as a result of the pandemic, with a third claiming to have increased snacking.¹⁹ In another survey of 23,000 consumers across 18 countries, 38% said they increased snacking in April 2020 compared to the previous month, and 50% snacked more in May than in April.²⁰

Nutrition stakeholders have expressed their concerns around increased consumption of highly processed foods; for example, an editorial in the *British Medical Journal* notes that 'During the Covid-19 pandemic an increase in food poverty, disruptions to supply chains, and panic buying may have limited access to fresh foods, thus tilting the balance towards a greater consumption of highly processed foods and those with long shelf lives that are usually high in salt, sugar, and saturated fat.'²¹

In some cases, snacking under lockdown is reported to have increased²² – of unhealthy products (for example as reported in a German study²³) but also with examples of healthy shifts in diet (for example among Spanish consumers²⁴) – and the sale of snacks and non-perishable foods may have grown at the expense of fresh foods and high-protein foods.²⁵ However, there is also increasing awareness of the importance of good nutrition in reducing susceptibility to and poor outcomes from Covid-19 (for example, obesity is a clear risk factor for poorer outcomes²⁶). This is driving a trend towards functional or immunity-boosting foods as consumers worry about the impact of nutrition on their health – market insight firm Mintel, for example, has noted growing interest in functional food in France²⁷ and the UK,²⁸ and FIA and others have cited an increase in demand for vitamin supplements in the Philippines and Thailand, and vitamin-rich foods such as fruit and vegetables in Indonesia.²⁹

Some companies are launching products in response to this – such as a Mother Dairy 'butterscotch-flavoured haldi milk' that is claimed to boost immunity because of the added turmeric that contains curcumin; the company says it followed recommendations issued by the local ministry on preventive health measures for boosting immunity.³⁰ Real caution is urged about any health claims related to Covid-19, as these can easily be deceptive: industry, government and academia should work together to investigate immunity-boosting ingredients, with calls (including from governments³¹) to be cautious, responsible and evidence-based in making any such claims.

Covid-19 has rapidly accelerated demand for online deliveries of fresh and packaged products, as e-commerce provides a distribution channel for consumers during lockdown.³² For example, Alibaba predicts a boom in China's retail digitisation and a rise in healthy food options.³³ There are also examples of 'direct to consumer' online stores/e-commerce sites being established (such as by PepsiCo in the United States³⁴) and new partnerships in online delivery (such as Nestlé partnering with Deliveroo Essentials in the UK during lockdown to deliver snacks directly to homes³⁵) – but, as these examples show, the foods offered through these services are not necessarily of healthy products.

6.2.2 The marketing environment

Companies have launched new marketing campaigns and advertising in response to Covid-19, such as branded home activities and challenges for children, linking brands to work-from-home trends and encouraging 'comfort' eating.³⁶ Some of these have been criticised: in the UK, for example, Kellogg's brand Pringles removed advertising on a popular fitness YouTube channel at the end of May after complaints of irresponsible practices on marketing to children.³⁷ Ferrero is using social media to promote physical activity indoors through its unbranded CSR program, 'Kinder Joy of Moving'.³⁸

At the end of March, Edelman communications firm completed a study on the role of brands during the pandemic across 12 markets, which found 65% of respondents agreeing that a brand's response to the crisis will have a significant impact on the likelihood of purchasing in the future.³⁹



6.2.3 The policy/regulatory environment

The policy and regulatory environment is a clear driver of change in the food sector, through the introduction of lockdown measures (with consequent impacts such as restricted access to shops and markets for consumers and restrictions on travel for employees) and guidance on safety in the workplace (including hygiene and social distancing).

In addition, there are cases of derogation of government standards/measures that normally promote healthy eating and protect food safety and labelling standards. These have been relaxed for economic reasons and/or to safeguard supply chains or to avoid food loss and waste – for example, in the United States, the Food and Drug Administration has repeatedly rolled back food rules, including allowing manufacturers to substitute ingredients without relabelling.⁴⁰ This has concerned nutrition NGOs and other stakeholders and it will be crucial in the future to track whether such relaxations are re-tightened following the immediate crisis.

The introduction of regulation to improve healthier diets has also been affected: for example, a bill in the Scottish Government to tackle sales of unhealthy food (e.g. banning multi-buy offers and removing junk food displays at checkouts) has been postponed, to the frustration of campaigners – although it is claimed that this is to 'take stock', given the Covid-19 pandemic, to see if a more wide-ranging plan is needed.⁴¹ In Mexico, however, calls by industry in late March for a six-month delay on the introduction of new labelling requirements on unhealthy products were denied by the government.⁴²

The Philippines is also considering implementing higher sugar taxes and additional new taxes on food high in salt and trans fat, specifically to offset costs due to Covid-19.⁴³



6.2.4 The investor reaction

Investors are responding to the Covid-19 pandemic in calling for responsible action to be taken by companies, including those in the food and beverage industry.

For example, the Interfaith Center on Corporate Responsibility (ICCR) has issued a series of statements and letters,⁴⁴ including a March 2020 Investor Statement on Coronavirus Response, signed by a group of 335 investors, including a five-point plan for businesses to protect workers during the crisis.⁴⁵ In June 2020, the ICCR sent a letter to 14 manufacturers and retailers, asking them 'to consider scaling up efforts to protect the health and safety of both their employees and customers and to ensure that value chains continue to function as expeditiously as possible while recognizing the challenges related to food production and the safety of their workforce', to address both short-term demands on the food supply chain and to strengthen long-term business practices.⁴⁶

The Principles for Responsible Investment (PRI) has been taking a phased response to Covid-19 as the situation develops, using blogs, webinars, podcasts, a bulletin setting out how responsible investors should respond, and the establishment of two engagement groups on the short- and long-term implications of the virus.⁴⁷

6.3 Health of the workforce

“Safety first” is the first priority for all our members.’

Industry association representative, ATNI consultation process

The importance of health and wellbeing of the workforce has become central to business operations in an unprecedented way, as illness from the virus, self-isolation/quarantine and mental health issues (coupled with transport difficulties in lockdown and child-care responsibilities) combine. The renewed focus on employee health and resilience was highlighted throughout ATNI's consultation process: 'It has in the past been difficult to get real leadership behind this – but this has dramatically changed.'

Actions that companies can and should take (see, for example, WHO/FAO's interim guidance, *COVID-19 and Food Safety: Guidance for Food Businesses*⁴⁸) include workforce protection (PPE, good hygiene facilities, ensuring social distancing etc.) and production flexibility. Changes in remuneration, securing employment contracts and guaranteeing wages are also key to ensuring the livelihoods and wellbeing of employees (and the wider value chain – see section 6.4 below).

There is no evidence that Covid-19 itself can be transmitted through handling or consuming food, and the virus cannot grow on food – but the working environment can itself be high risk, and failures to safeguard the health of the food industry workforce during the Covid-19 crisis (also therefore increasing the risk to food supply and distribution) have received media attention in both high-income and lower-income countries. The meat-processing sector has shown itself to be a particularly dangerous working environment for Covid-19 infection because of the low ambient temperatures, high humidity and close proximity of workers – and workers are low-paid and often migrants, who may not be willing to raise concerns.⁴⁹ An outbreak among 1,500 workers at a Tönnies facility in North Rhine–Westphalia, Germany, in late June led to the reinstigation of stricter lockdown measures in the local community of Gütersloh,⁵⁰ Brazilian food producer JBS was ordered to test all workers for Covid-19 at a meat plant in Rio Grande do Sul,⁵¹ and as of 15 June at least 320 meatpacking and food processing plants in the United States had confirmed cases of Covid-19.⁵²

However, many companies are making efforts to protect their employees across a range of areas – for example:

- on 21 April Danone committed to provide support for its employees worldwide until 30 June, including health/childcare/quarantine support and a specific bonus for all employees working on site during the pandemic;⁵³
- in April Nestlé guaranteed 12 weeks of regular wages for all hourly and salaried staff affected by temporary stoppages;⁵⁴



- General Mills is offering employees working at manufacturing plants enhanced benefits including daily bonuses, additional paid leave to cover family, health and work situations, and consultations to address childcare concerns.⁵⁵

6.4 Resilience in the value chain

Companies are playing an important role in maintaining the movement of safe and nutritious foods along the value chain to reach communities in need. The pandemic response has placed particular strain on the supply chain, with shortages of labour and inputs affecting access and affordability of healthy food for consumers. In addition, many farms have been forced to destroy large quantities of foods as a result of these challenges and difficulties in accessing markets⁵⁶ and post-harvest loss in Sub-Saharan Africa is escalating because of Covid-19 related supply chain disruptions.⁵⁷

In India, for example, the supply chain was severely disrupted by a combination of measures: the sudden implementation of lockdown, a reduced labour force, production shutdown, price variation of raw materials (exacerbated by limited inter-state traffic) and cash-flow issues.⁵⁸

As an example of an early response to the pressures on the supply chain, in late March Unilever announced €500 million cash flow to support its extended value chain. This included early payment for vulnerable SME suppliers and extending credit to selected small-scale retail customers.⁵⁹

A survey commissioned for a Food Industry Asia / PwC report in April 2020 set out the extent of the impact of the pandemic on supply chains in the region, which was already experiencing food-security challenges even before the current crisis.⁶⁰ 100% of businesses surveyed reported that supply-chain disruption for raw materials/ingredients was one of the top three challenges they face as a result of Covid-19 – and small-holder farmers make up over 60% of labour in the sector in the ASEAN region. In sub-Saharan Africa, these impacts are likely to intensify. A GAIN and SUN survey of SMEs across 17 low-and middle-income countries found that 81% reported needing financial support; the majority of respondents were from Bangladesh, Nigeria and Kenya.⁶¹

Over time, however, in some regions supply chains may have become more resilient: a report by FIA and Oxford Economics, published in June 2020,⁶² suggests that the food supply chain had, to date, remained resilient in the Asia-Pacific region, with limited evidence of impacts of the pandemic of lockdown on supply shortages or price pressures. Policy measures are cited as having been crucial in keeping the system flowing – although it notes that some governments are seeking to ‘protect’ their domestic consumers to the potential costs of producers and consumers in other countries.

6.5 Donations

In the weeks following the start of the Covid-19 crisis, many companies within the food industry announced donations, either of food or financial support – sometimes specifically to populations particularly vulnerable to the impacts of the virus, for example:

- PepsiCo India partnered with foundations and local authorities to distribute both cooked meals and dry food rations to over 8,000 vulnerable families.⁶³
- Cargill is working with NGOs across markets including Brazil, the Philippines and Venezuela to support food banks and developed boxed emergency food for vulnerable families.⁶⁴

A commonly missing element in the reporting of these donations is any indication of the healthiness of the donations – for example, ATNI has not yet found reference to the use of a nutrient profiling system in deciding on the contents of a donation. Unhealthy product donations or marketing can reinforce, rather than overcome, underlying inequalities, and there are examples of unhealthy products being donated (such as a donation by Mondelez of 71 tonnes of biscuits and chocolate to the India FoodBanking Network to distribute in 12 Indian cities⁶⁵).

Donations to health workers have also been seen in many parts of the world. However, it is not clear that this is a response to a local need – and the donations often seem to be of packages of food products that are not wholly healthy.



Further examples of donations include:

- Krispy Kreme in the UK was criticised by nutrition campaigners for a donation of half a million doughnuts to National Health Service workers and other key workers;⁶⁶
- Grupo Bimbo (Mexico) delivered 2.5 million lunch boxes to health workers in public hospitals across Mexico – a one-off donation beginning in April. It is not clear what was included in these lunch boxes;⁶⁷
- Danone Mexico donated 800kg of yoghurt a week over 12 weeks to health professionals in four public hospitals;⁶⁸
- Hindustan Unilever Limited in India committed to donating 150,000 packs of Horlicks products fortified with iron to healthcare workers in 12 cities, claiming to help to provide Covid-19 immunity (which also relates to warnings against health claims on immunity – see section 6.2.1, above);⁶⁹
- Ajinomoto del Peru donated food products to the value of approximately US\$110,000 (30 tons of food, including more than 64,000 packages of instant noodles and 2.5 million packages of seasonings) through the Hombro a Hombro initiative run by Asociación Soluciones Empresariales Contra la Pobreza (Innovations for Poverty Action) and Instituto Nacional de Defensa Civil (National Institute of Civil Defense), which assists 500,000 vulnerable Peruvians.⁷⁰

There may also be a shift in company response towards geographies that are coming under increasing pressure from Covid-19, as higher-income countries begin to come out of the first wave. These go well beyond a nutrition-specific approach: for example, in May Nestlé in Côte d'Ivoire donated two ventilators (complementing the 18 ordered by the government in addition to the four already available for a country of 25 million people)⁷¹ and the announcement in June of \$17 million from the Coca-Cola company and its Foundation for a range of initiatives, including the production and free distribution of 30,000 litres of alcohol sanitiser across several countries in Africa by Coca-Cola Beverages Africa (Uganda and Ethiopia), Bralima (DRC), Les Brasseries du Congo (Congo) and the Nigerian Bottling Company (Nigeria).⁷²





6.6 Breastfeeding promotion

In the early stages of the pandemic, some mothers, caregivers and healthcare professionals were uncertain about the safety of breastfeeding and the risk of Covid-19 infection. International organisations, governments and NGOs have responded strongly to these concerns with information and education campaigns, such as those from UNICEF⁷³ or Mexico's Instituto Nacional de Salud Pública.⁷⁴

It is essential during the pandemic that companies that make breast-milk substitutes, and other foods and drinks for infants and young children, adhere strictly to the International Code on Marketing of Breast-Milk Substitutes and all subsequent relevant WHA resolutions – including WHA 69.9 (collectively known as the Code). There is substantial concern among stakeholders that baby food companies are using the pandemic to promote their brands and their products in many ways. The Code recommends that information about breast-milk substitutes is provided to consumers by governments and health experts, not by the companies that make them, because they have a conflict of interest.

Stakeholders such as the International Baby Food Alliance Network (IBFAN) and the NCD Alliance⁷⁵ (the latter crowdsourced examples for 10 weeks to 10 July) are tracking and highlighting cases where they believe that baby food manufacturers, have violated the Code. While there are many more, the following are some examples from around the world found in the few months since the start of the pandemic:

- Danone has been criticised for breaching the Code by launching a program in India for parents to enable them to talk directly with midwives, doulas and nutritionists, and to provide information online through recorded videos by doctors on how to feed babies during the pandemic, as well as articles etc. Danone responded to criticism by saying that it subscribes to a strict policy about formula promotion, is committed to protecting breastfeeding and to providing parents with science-based and factual information to make the nutritional choices best suited to their individual situation. IBFAN reports that the company has removed some, but not all, of the videos.⁷⁶
- In April, Save the Children Philippines launched a campaign to encourage local government units, private organisations, NGOs and individuals to adhere to the existing laws prohibiting the distribution of infant formula.⁷⁷
- Some baby formula manufacturers have clarified that they will not donate formula – for example, Gerber in the United States (owned by Nestlé) has rejected 'rumors' that it is 'giving away free formula in response to out-of-stock situations'.⁷⁸ However, in Pakistan the Punjab Provincial Disaster Management Authority tweeted that Nestlé Pakistan had pledged to donate Lactogrow, a breast-milk substitute, among other products, and which the company retweeted. If the company did make such donations, this would be in contravention of the Code;⁷⁹ Nestlé denied doing so.⁸⁰
- The local government in Chicago put out a 'call to action' for donations of baby 'essentials' from Chicago residents and corporations to support communities most adversely impacted by Covid-19. A local non-profit will serve as a centralised donation hub. The mayoral press release notes that Abbott has donated over 140,000 servings of infant formula.⁸¹ This is a contravention of the Code; governments have been urged by WHA to ensure that any required breast-milk substitutes are purchased, distributed and used according to strict criteria. Companies should refrain from making donations even when requested, to demonstrate their commitment to adhere to the Code.⁸²
- Several companies – including Abbott, Danone and Nestlé – have offered webinars⁸³ to healthcare professionals in various countries about managing nutrition and health during the pandemic, the invitations for which carried product branding in some cases. While the Code allows BMS manufacturers to provide scientific and factual information to health workers about their products, if any promotional messages were shared, this would be in contravention of the Code.
- In Mexico and Peru, Abbott's advertisements for Similac growing-up milk claim that it strengthens children's immune systems against 'viruses and bacteria';⁸⁴ health claims are not allowed under the Code.



7. Future reports

7.1 Introduction

There will be four quarterly reports across this year-long initiative. The first (this current document) introduces the Framework and the processes behind it. The remaining three will focus on different aspects of the findings. All the reports, however, will cover both high-income and low-income settings, with a focus on vulnerable populations. The reporting does not set out to establish recommendations; rather, the reports will together present a picture of the changes precipitated by Covid-19 over time and in different geographies, illustrated with examples that are both typical (to demonstrate a trend) but also that are atypical (outliers).

7.2 Second report (est. date of publication early October 2020)

The second report will concentrate on the results of the deep-dive into 39 food manufacturers (listed in Annex 3), following research into their response to the Covid-19 crisis during summer 2020 (see section 4, above). Unlike in ATNI's other Indexes, the information will not be used to 'score' or benchmark the companies, and this will be clearly indicated with disclaimers. Instead, the information will be **aggregated to provide an early indication of the trends over the first six months of the Covid-19 response** across all nine Categories of the Framework.

In addition, the research will be selectively used **to highlight examples of good/poor practice**, drawn from the deep dive and described in more detail. These selected examples will be further researched to provide a more nuanced view of their impact, with potential sources including NGOs. This extra information will allow ATNI to indicate how the company actions have been received and implemented in practice.

Supplementary to the information from the deep-dive, ATNI's ongoing, regular checks of third-party sources will allow for wider trends and themes to be identified and reported upon. This may include, for example, the role of retailers in ensuring accessibility and affordability of healthy food products.

7.3 Third report (est. date of publication December 2020)

The structure and theme of the third report will be determined over the next few months, as the Covid-19 epidemic progresses and the response develops. Research into the third-party sources will continue on an ongoing basis and ATNI hopes that the companies with which it communicates regularly will provide further information on their response as it develops. Updates of the themes identified in the second report will be included.

However, this report will also be an opportunity to take a more detailed look at a particular aspect or aspects of the Covid-19 response. This is to be determined nearer the time, as the situation is currently rapidly changing and it is too soon to predict where the areas of most interest and relevance may lie, but possibilities include:

- a country spotlight, particularly if there is a country where the response has been very evident. Ideally, ATNI would highlight a low- or middle-income country where the Covid-19 response may have been different from the high-income response; for example, ATNI has already (through its existing research) established good contacts in India, Nigeria, Bangladesh and Mexico, including through the SUN Business Network, so would be well placed to gain a greater understanding of the first nine months of the crisis in one or some of these markets;
- a company deep-dive, for example if one or two companies have taken significantly greater steps towards an emerging 'new normal',
- greater detail on a specific theme that has been identified through the research and which seems to be pointing the way to a new normal – for example, a) investing in the workforce and the supply chain to ensure better health both in the short term but also to provide greater resilience over the longer term and particularly in emergency situations or b) the response of companies to new standards imposed by government during the crisis or c) the reaction in terms of product formulation – e.g. a shift towards fortified foods/nutraceuticals;



- a focus on a specific Category, looking at the indicators and at the broader company and societal responses – for example, the impact of Covid-19 on the production and marketing of infant and young child nutrition; and
- an investigation into a specific part of the food system beyond food manufacturing – for example, retailers.

7.4 Fourth report (est. date of publication March 2021)

The fourth report, at the end of the year of funding for this initiative, will continue to update on major themes across the Categories, drawing on the third-party research – but will also hope to provide a more detailed look at the emerging structural trends and provide an opportunity to provide a stocktake at the end of the first year of the pandemic. It may include a timetable of some of the key company actions mapped against key points in the wider response to Covid-19.

This final report may be able to give an indication of what the 'new normal', post-Covid-19, will be, which will enable ATNI to develop provisional recommendations as to an appropriate response for the future.



8. Sources

8.1 Interviews with key stakeholders

Consultations were held on Zoom with representatives from: The Consumer Goods Forum, the Department for International Development (UK), Directorate-General for International Cooperation (DGIS), Food Industry Asia, Food Foundation, GAIN, Global Nutrition Report, The Hunger Project, International Food Policy Research Institute (IFPRI), International Medical Corps, the Netherlands Enterprise Agency (RVO), Save the Children Netherlands, UNICEF, Wageningen Centre for Development Innovation, World Business Council on Sustainable Development and the World Food Program.

See also Annex 2.

8.2 Information repositories and other third-party sources

The following third-party sources are drawn on by ATNI during the research process.

Bakery and Snacks ⁸⁵	FoodBev ⁹⁷	New Food Magazine ¹⁰⁷
Business Fights Poverty ⁸⁶	FoodPolitics ⁹⁸	Nielsen ¹⁰⁸
Consumer Goods Forum ⁸⁷	FoodTank ⁹⁹	Rudd Center for Food Policy and Obesity ¹⁰⁹
Devex ⁸⁸	Global Nutrition Cluster ¹⁰⁰	SUN (Scaling Up Nutrition) ¹¹⁰
Euromonitor ⁸⁹	International Baby Food Action Network (IBFAN) ¹⁰¹	UNICEF ¹¹¹
Food and Agriculture Organization (UN) ⁹⁰	International Food and Beverage Alliance (IFBA) ¹⁰²	UNSCN ¹¹²
Food and Land Use Coalition ⁹¹	International Food Policy Research Institute (IFPRI) ¹⁰³	US RTK ¹¹³
Food Drink Europe ⁹²	Just Capital ¹⁰⁴	World Business Council on Sustainable Development ¹¹⁴
Food Industry Asia (FIA) ⁹³	Just Food ¹⁰⁵	World Food Program ¹¹⁵
Food Navigator ⁹⁴	NCD Alliance/SPECTRUM ¹⁰⁶	World Health Organization ¹¹⁶
Food Navigator Asia ⁹⁵		World Obesity ¹¹⁷
Food Navigator USA ⁹⁶		

8.3 Twitter

ATNI uses Tweetdeck, a social media dashboard application for management of Twitter accounts, to track particular hashtags or other search terms. Hashtags specific to the Framework initiative that are being followed include:

- #COVID Food and Beverage
- #COVID Food Insecurity
- #COVID Food Industry

Additional and time-sensitive hashtags are also being followed (which are used in the nutrition community), such as #EndHunger and #WorldBreastfeedingWeek.

ATNI has also established a Twitter 'list' that includes users such as the NCD Alliance, IBFAN and others tweeting regularly on nutrition issues but specifically on Covid-19; this is updated regularly.



8.4 Selected guidance

March 2020

ILO, *COVID-19 and the World of Work: Impact and Policy Responses*¹¹⁸ (18 March)

- There are two immediate goals: health protection measures and economic support on both the demand- and supply-side.
- Proactive, large-scale and integrated measures across all policy areas are necessary to make strong and sustained impacts.
- Building confidence through trust and dialogue is crucial in making policy measures effective.
- Three key pillars to fight Covid-19 based on International Labour Standards:
 - protecting workers in the workplace;
 - stimulating the economy and labour demand; and
 - supporting employment and incomes.

WHO, *Mental Health and Psychosocial Considerations during the COVID-19 Outbreak*¹¹⁹ (18 March)

- This document includes a number of reference to the importance of nutrition for mental health:
 - Healthcare workers: try to use helpful coping strategies such as ensuring sufficient rest and respite during work or between shifts, eat sufficient and healthy food, engage in physical activity, and stay in contact with family and friends.
 - Old underlying health conditions: be prepared and know in advance where and how to get practical help if needed, like calling a taxi, having food delivered and requesting medical care.
 - People in isolation: exercise regularly, keep regular sleep routines and eat healthy food.

FAO, *Maintaining a Healthy Diet during the COVID-19 Pandemic*¹²⁰ (27 March)

- Eat a variety of foods within each food group and across all the food groups / Eat plenty of fruits and vegetables / Consume a diet rich in whole grains, nuts, and healthy fats such as in olive, sesame, peanut or other oils rich in unsaturated fatty acids / Watch your intake of fats, sugar, and salt / Continue to practise good food hygiene / Drink water regularly / Limit consumption of alcohol / Reduce the risk of unnecessary food waste / Additional healthy lifestyles (exercise etc).

FAO, *COVID-19 and the Risk to Food Supply Chains: How to Respond?* (29 March)¹²¹

1. Expand and improve emergency food assistance and social protection programs.
2. Give smallholder farmers support to both enhance their productivity and market the food they produce, also through e-commerce channels.
3. Keep the food value chain alive by focusing on key logistics bottlenecks.
4. Address trade and tax policies to keep the global trade open.
5. Manage the macroeconomic ramifications.

UNICEF Global Nutrition Cluster, *Infant and Young Child Feeding in the Context of COVID-19*¹²² (30 March)

1. Programmes and services to protect, promote and **support optimal breastfeeding** (early and exclusive) and age-appropriate and safe complementary foods and feeding practices should remain a critical component of the programming and response for young children in the context of Covid-19.
2. Mothers with suspected or **confirmed Covid-19 and isolated at home should be advised to continue recommended feeding practices with necessary hygiene precautions during feeding.**
3. Alignment and coordination in the mitigation plans across nutrition, health, food security and livelihood, agriculture, WASH, social protection and mental health and psychosocial support to focus on reaching infants and young children in the context of Covid-19.
4. Actions through relevant systems (Food, Health, WASH, and Social Protection) should prioritise the delivery of preventive services to mitigate the impact of the pandemic on young children's diets and wellbeing with strong linkages to early detection and treatment of child wasting.



5. **Full adherence to the International Code of Marketing of Breast-milk Substitutes and subsequent WHA resolutions** (including WHA 69.9 and the associated WHO Guidance on ending the inappropriate promotion of foods for infants and young children) in all contexts in line with the recommendations of IFE Operational Guidance.
6. **Donations, marketing and promotions of unhealthy foods** – high in saturated fats, free sugar and/or salt – **should not be sought or accepted.**

Business Fights Poverty, *Business and COVID-19: Supporting the Most Vulnerable*¹²³ (March 2020)

- This document emphasises corporate responsibility to respect human rights and provides a framework for how businesses can support the most vulnerable.
- The framework is structured in three impact areas, lives, livelihoods, and learning, which businesses can act upon through their corporate, philanthropy or policy engagement activities. Examples include:
 - support small-scale suppliers, such as through changing payment terms and conditions to address short-term cashflow issues; and
 - engage with governments to understand and mitigate food security risks alongside health risks.

April 2020

UNICEF / ILO / UN Women, *Family-friendly Policies and other Good Workplace Practices in the Context of COVID-19: Key Steps Employers can Take*¹²⁴ (6 April)

- Implement flexible work arrangements.
- Support working parents with childcare options that are safe and appropriate in the context of Covid-19.
- Prevent and address workplace risks by strengthening occupational safety and health measures.
- Provide guidance and training on occupational safety and health measures and hygiene practices.
- Encourage workers to seek appropriate medical care in cases of fever, cough and difficulty breathing.
- Support workers coping with stress and personal safety during the Covid-19 outbreak.

FAO/WHO, *COVID-19 and Food Safety: Guidance for Food Businesses*¹²⁵ (7 April)

- Includes sections on: Food workers: awareness of Covid-19 symptoms / Preventing the spread of Covid-19 in the work environment / Use of disposable gloves / Physical distancing in the work environment / Covid-19 illness in the workplace / Transport and delivery of food ingredients and food products / Retail food premises / Open food display in retail premises / Staff canteens

WFP / FAO / UNICEF, *Mitigating the Effects of the COVID-19 Pandemic on Food and Nutrition of Schoolchildren*¹²⁶ (7 April)

- **Context:** aimed at providing preliminary guidance to national and local authorities, school administrators and staff and implementing partners on how to take short-term measures to support, transform or adapt school feeding programmes in their efforts to safeguard the food security and nutritional status of school-aged children during the Covid-19 pandemic.
- Recommendations for school actors and partners working at school level, including civil society and private sector:
 - support schools to rapidly assess needs and identify areas for collaboration in terms of food supply, preparation and delivery;
 - consider mechanisms to provide families with dry take home rations to ensure uninterrupted food supply to children despite closures;
 - if feasible and safe, coordinate for meal preparation and/or delivery;
 - offer multiple collection points for families to avoid large gatherings;
 - organise online networks and maps, using digital tools to help coordinate approaches and responses (identify key gaps and duplication of efforts); and
 - to the extent possible, **avoid providing meals or food products with low nutrition content that do not meet nutrition needs.**



UNICEF, *Response to COVID-19: Guidance Note on Financial Contributions or Contributions in-kind from Food and Beverage Companies, Version 2*¹²⁷ (29 April)

- 'During the COVID-19 emergency an impact-focused and a risk-informed approach to engagement with the food and beverage sector is a must. It is important to ensure that **any possible financial contributions or CIK [contributions in kind] from the food and beverage sector adhere to UNICEF policies, are needs-based rather than donor-driven, guarantee adequate nutritional quality of the diet, and minimize reputational risk to the organizations involved.**'
- Recommendations:
 - Do not engage in cause-related marketing on foods and beverages.
 - Foods and beverages high in saturated fats, sugar and/or salt should not be sought or accepted as CIK for distribution.
 - Other forms of market/consumer facing engagements with food and beverage companies are highly sensitive and may undermine UNICEF's current programming and credibility in maternal and child nutrition. Any possible engagements such as these should be strictly evaluated on a case-by-case basis, considering potential risks, the company portfolio and sales data.
 - Companies that manufacture BMS should continue to be excluded from any CIK, funding engagements or co-branded partnerships. Donations of breast-milk substitutes (BMS), complementary foods and feeding equipment, including bottles and teats, should not be sought or accepted for distribution.
 - UNICEF should continue to advocate for access to nutritious, safe, affordable and sustainable diets during Covid-19 and provide guidance to countries.

OECD, *COVID-19 and the Food and Agriculture Sector: Issues and Policy Responses*¹²⁸ (29 April)

- Strong, flexible supply chains – from farm to fork – are essential to keep the food system functioning; what can policymakers do?
 - Keep international markets in agriculture and food products open, transparent and predictable.
 - Minimise the avoidable trade costs of measures to prevent the spread of Covid-19.
 - Address labour constraints in the food supply chain.
 - Ensure health and food safety throughout the food chain.
 - Facilitate the movement of food products – including through alternative channels.
 - Ensure the food and nutrition needs of vulnerable populations are met – now and in the future.
 - Looking ahead, Covid-19 offers an opportunity to enhance the resilience, sustainability, and productivity of the agriculture and food sector.
 - Learn from the crisis to increase preparedness for future shocks.
 - Support the transition to a more resilient agricultural sector and food system.

May 2020

United Nations, *UN Global Humanitarian Response Plan for COVID-19*¹²⁹

- The plan states: 'The COVID-19 pandemic is directly affecting food systems by impacting food supply and demand. It is decreasing purchasing power while affecting the capacity to produce and distribute food. Millions of African smallholder farmers who grow fruits and vegetables for export have lost access to global markets as flights are cancelled and borders restricted. The disruption of supply chains is also affecting the import of agricultural inputs such as seeds, fertilizers and insecticides. As movement restrictions are imposed, agricultural input supply chains are impacted at critical times in the season, reducing informal labourers' access to farmlands, wages, area of land cultivated and harvesting capacity, and constraining transport of goods to processing facilities and/or markets. Immediate impacts tend to be more severe for fresh food leading to food losses, reduction of income and deterioration in nutrition, especially among the already vulnerable population... Availability of perishable food commodities such as fruits, vegetables and fresh milk (critical to nutrition in a country experiencing desperately high levels of acute malnutrition) is also in short supply in many markets.'



June 2020

United Nations, Policy Brief: The Impact of COVID-19 on Food Security and Nutrition¹³⁰ (9 June)

- This policy brief suggests **three mutually reinforcing sets of priority actions** to address the immediate, near- and medium-term needs to protect people during and beyond the crisis, and – ultimately – to reshape and build resilient food systems.
 - First, mobilise to save lives and livelihoods, focusing attention where the risk is most acute: ensure relief and stimulus packages reach the most vulnerable.
 - Second, strengthen social protection systems for nutrition: protect the most vulnerable population groups, as well as women who play key roles in the household and essential services delivery / tailor nutrition-sensitive social protection programs.
 - Third, invest in a sustainable future: transforming food systems / laying the foundation for a more inclusive, green and resilient recovery / using the opportunity of the Secretary-General hosted Food Systems Summit in 2021.
- It references the *Global Humanitarian Response Plan for COVID-19* (above), requirements for which, updated in May, have risen from an initial \$2.01 billion to \$6.7 billion.

BSR, How to Respect Human Rights During the COVID-19 Crisis: Recommendations for the Food, Beverage and Agriculture Sector¹³¹ (11 June)

- BSR is a global non-profit organisation that works with its network of more than 250 member companies and other partners to build a just and sustainable world.
- 'In light of the COVID-19 crisis, food, beverage and agriculture companies have the opportunity to renew their commitments to protecting the wellbeing of their employees and workers throughout their extended value chains, as well as the communities which they serve through their strategic and immediate decisions in combatting the global pandemic.'

WHO, 'Asks' to the Private Sector in the Response to COVID-19¹³² (11 June)

- 'The Strategic Preparedness and Response Plan and COVID-19 Strategy update outline public health measures needed to support countries to prepare for and respond to COVID-19. In this effort, the private sector has a critical role to play locally, nationally and globally. The following "Asks" have been prepared for businesses to take concrete actions.'
- It details short asks across four areas: protect your stakeholders; protect your business; essential supplies; financial.

WHO, Breastfeeding and COVID-19¹³³ (scientific brief, 23 June)

- Based on initial results on a living systematic review, the WHO recommends that mothers with suspected or confirmed Covid-19 should be encouraged to initiate or continue to breastfeed and to continue nurturing mother-infant interaction. The brief recommends 'mother and infant should be enabled to remain together while rooming-in throughout the day and night and to practice skin-to-skin contact'. In addition, the brief recommends counselling mothers on the benefits of breastfeeding, which 'substantially outweigh the potential risks for transmission'.
- The brief states that even though '1 of the 3 infants of mothers with viral particles in breast milk had COVID-19, it was unclear through which route or source the infant was infected'. However, it is still not clear whether the virus can or cannot be transmitted through breast milk.
- Given the health benefits of breastfeeding, the brief concludes that breastfeeding and nurturing mother-infant contact are especially important when health and other community services are themselves disrupted or limited. The WHO recommends adherence to infection prevention and control measures to prevent contact transmissions. 'Based on available evidence, WHO recommendations on the initiation and continued breastfeeding of infants and young children also apply to mothers with suspected or confirmed COVID-19.'

Committee on World Food Security High-level Panel of Experts, Food Security and Nutrition: Building a Global Narrative towards 2030¹³⁴ (25 June)

- As a result of the Covid-19 pandemic, the HLPE was asked to urgently prepare an issues paper on the potential impact of the pandemic on global food security and nutrition for an extraordinary meeting of the



Committee on World Food Security. It is anticipated that the issues paper on Covid-19 will continue to be updated by the HLPE, as needed.

- 'The COVID-19 pandemic has revealed and exacerbated the challenges that food systems were already facing and made it obvious that urgent and radical reforms are needed to guarantee the fundamental human right to adequate food for all.'
- 'More broadly, it is imperative that post-COVID-19 food systems build greater resilience... supporting more diverse production, market and processing arrangements that have greater flexibility in the face of disruptions, and **ensuring greater agency and equity for food system workers and those whose food security is most affected by food system disruptions.**'

Global Panel on Agriculture and Food Systems for Nutrition, *COVID-19: Safeguarding Food Systems and Promoting Healthy Diets*¹³⁵ (29 June)

- This is the latest policy brief released by the Global Panel on Agriculture and Food Systems, an independent international group of leaders that works with international, multisector stakeholders to help governments in low- and middle-income countries develop evidence-based policies that make high-quality diets safe, affordable and accessible.
- This brief discusses key Covid-19 impacts on food systems, from food production to shifts in dietary patterns. The report states: 'Feeding populations in the longer term requires well-functioning and efficient food systems.' In this respect, it highlights three key requirements: 1) recognise that food systems have many components and should all receive adequate support from policymakers 2) business throughout the food system should remain viable and 3) address the fundamental changes necessary to transform the food system.
- The report includes 10 priorities to help policymakers mitigating the effects of the pandemic on food systems, focusing on consumer-focused actions and measures in support of resilient supply chains and food systems.



Annex 1: The Framework

Nutrition responses from food and beverage companies to the Covid-19 pandemic

The Access to Nutrition Initiative (ATNI) is committed to support the food industry's contribution to addressing the world's nutrition challenges, leveraging the power of the private sector to provide accessible and affordable healthy food to all. ATNI has developed this Framework to identify action (and inaction) by food and beverage manufacturers in response to the Covid-19 crisis worldwide.

ATNI Covid-19 Framework

Please note that this is a living document – we welcome comments and suggestions from stakeholders and may adapt it in the future to reflect the impacts of the Covid-19 pandemic.

Areas [Adapted ATNI Index Categories]	Indicators	Rationale for inclusion
A. Governance and leadership		
Nutrition-sensitive strategy	<ol style="list-style-type: none"> 1. Does the company have a nutrition-sensitive strategy¹³⁶ in response to Covid-19 and is this implemented? 2. Has the company made any adjustments to their existing nutrition strategy based on Covid-19? 3. Does the company commit/pledge to align to evidence-based external guidelines/recommendations on Covid-19 as these are (or become) available? 4. Does the company address specific countries or populations vulnerable to Covid-19¹³⁷ at high risk of adverse nutrition/health impacts? 5. Does the company include in its strategy financial, in-kind or other support to help maintain operational stability of SMEs in its value chain in response to Covid-19? 	<p>While preventing and mitigating Covid-19 short-term effects (including those specific to nutrition), a company can deliver long-term impact if its activities are integrated into its core business and management system as well as philanthropic strategy. Having a nutrition-sensitive strategy can help a company contribute to improved food security and nutrition in a sustainable way during the crisis and beyond.</p> <p>If a response to Covid-19 is to be informed and implemented strategically and carefully, drawing upon internationally recognized guidance is required.</p> <p>The Framework will monitor whether the company explicitly commits to support populations vulnerable to Covid-19 at high risk of adverse nutrition/health impacts, covering low- and medium- and higher- income settings.</p> <p>Leadership and collaboration are required to support small and medium-sized enterprises (SMEs) that are particularly affected by the crisis.</p>
Management systems	<ol style="list-style-type: none"> 6. Has oversight of the company's Covid-19 nutrition-sensitive response been assigned formally? 	<p>Nutrition-related challenges are more likely to be prioritized as the company allocates resources, tracks performance and assigns responsibility.</p>



Reporting	7. Does the company report publicly on its nutrition-sensitive Covid-19 response, including progress updates?	Informing stakeholders of companies' activities improves accountability
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B. Safe and healthier products

Safe and healthier products	<p>8. Has the company changed its product portfolio, nutrition criteria/nutrient-profiling system or made other changes to prioritize production of healthier products in response to Covid-19?</p> <p>9. Does the company reaffirm its fortification commitments or disclose other evidence-based approaches to addressing vulnerable Covid-19 populations at high risk of adverse nutrition impacts with healthy and appropriate products?</p>	<p>Movement restrictions, stockpiling, loss of incomes, supply chain disruptions, etc., led to supply and demand side shocks. Companies can prioritize investment and innovation in healthy and appropriate foods and beverages to ensure their products address the ongoing nutrition crisis.</p> <p>As a result of Covid-19, in some markets citizens have lost access to healthier products while others are turning to immunity-boosting products. In response, companies might decide to launch new products and/or postpone new developments.</p> <p>It is important that companies are transparent in their reporting and clarify whether any changes to the product portfolio (including micronutrient fortification) improve healthiness according to evidence-based nutrient-profiling systems.</p> <p>Although there are no current indications that food safety and/or food safety management systems are under particular pressure due to Covid-19, this aspect is considered under indicator 8 and changes in approach will be tracked.</p>
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C. Affordability and accessibility

Affordability / accessibility of healthy products	<p>10. Has the company taken action to secure or improve the accessibility / affordability of healthy products in response to Covid-19 and value chain challenges?</p> <p>11. Does the company commit to only donate healthy products to populations vulnerable to Covid-19 at high risk of adverse nutrition/health impacts?</p> <p>12. Does the company collaborate with NGOs/governments when donating products to ensure donations are needs-based?</p>	<p>The economic shocks of the pandemic, price-gouging, etc., will lead to more people, especially in low- and- middle income settings, unable to afford nutrient-rich foods. Food manufacturers can ensure their healthier products are accessible and affordable, especially to vulnerable populations. For example, companies can partner with retailers to address this need by offering healthier options at competitive prices and work with governments to contribute to social protection efforts.</p> <p>Food and beverage manufacturers must prioritize the accessibility of healthier products. As packaged foods and ready-to-eat meals can contain high levels of sugar, fat and salt, it is important that companies ensure that food to be donated (in addition to meeting hygienic and safety requirements) provides adequate nutrition and is available on a needs basis.</p>
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		<p>In addition, any branding of donations should be minimised and appropriate.</p> <p>Food and beverage manufacturers can contribute by donating products of high underlying nutritional quality, including those that are fortified according to international standards, as relevant. National nutritional guidelines should be used as guidance.</p> <p>The Framework will capture differences (if any) in commitments and actions in high-income and in low-and-middle income settings. The Framework will also monitor good practice and poor practice with regards to donations.</p> <p>Clarify whether the company is working with government (e.g. to support social protection programmes) or on parallel initiatives.</p>
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D. Responsible marketing

General marketing	13. Has the company committed to safeguard its responsible marketing practices during the crisis and/or implemented new initiatives responsibly?	Commitments should be published on company websites. The Framework will capture good and poor practices – e.g. to market 'comfort foods' more actively now in relation to the pandemic.
Marketing to children	14. Has the company committed / confirmed ongoing commitments not to market unhealthy products to children during the crisis (including through digital channels)?	Commitments should be published on company websites. During lockdown and social restrictions, children may be spending more time online or watching television; therefore, it is imperative that food companies are taking steps beyond those it normally takes to ensure that its businesses uphold its marketing to children commitments across all markets.

E. Protecting employees and promoting healthy lifestyles

Employee health and wellbeing	<p>15. Has the company committed to adopt international/national guidance in relationship to Covid-19 and the workplace?</p> <p>16. Has the company taken action to support health, safety and/or nutrition of its employees, including during lockdowns and as part of reopening strategies, in relation to Covid-19?</p> <p>17. Has the company made a commitment and/or changed its remuneration policy with the goal of safeguarding jobs/income and livelihoods of its employees?</p> <p>18. Has the company committed to support breastfeeding and provide special employee arrangements during the crisis?</p>	<p>Companies have a responsibility to mitigate Covid-19 risks in the workplace and protect employees. The majority of food industry workers do not have the opportunity to work from home. Food manufacturers should reinforce personal and manufacturing hygiene measures and principles to mitigate risk of being contaminated with the virus.</p> <p>Personal protective equipment needs to be used appropriately and the food industry is strongly advised to introduce physical distancing and stringent hygiene and sanitation measures and promote frequent and effective handwashing and sanitation at each stage of processing, manufacturing and marketing.</p>
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		<p>In addition, companies must ensure that employees have access to accurate information about Covid-19.</p> <p>Beyond these measures, companies can and must safeguard jobs/incomes, paid leave and access to good nutrition for its employees.</p> <p>Mothers who do not have indications of Covid-19 should continue breastfeeding, while applying all the necessary actions to protect against the infection; women with suspected or confirmed Covid-19 can also continue to breastfeed, taking appropriate precautions.</p>
Value-chain health and wellbeing	19. Has the company taken action to support health, safety and/or nutrition of its value-chain partners?	<p>Companies have an opportunity to renew commitments to support employee health and wellbeing extending to partners throughout the supply (and wider value) chain.</p> <p>This could include provision of PPE, nutrition-related information/education, food provision etc.</p>
Consumer / community (educational) programs	20. Does the company support unbranded educational/ awareness programs related to nutrition, healthy diets and lifestyles in response to the crisis?	<p>People should be enabled to eat a variety of foods, plenty of fruits and vegetables, whole grains, etc. In addition, it is imperative that regular physical activity is maintained wherever possible. Food companies can help spread education and awareness campaigns related to the importance of healthy and balanced diets/lifestyles during and after the crisis.</p> <p>Companies can prioritize 'double-duty' programs – i.e. those that simultaneously reduce the risk of nutritional deficiencies while preventing overweight/obesity and related diseases.</p> <p>Clarify whether programs are designed and/or implemented independently.</p>

F. Nutrition labelling and claims

Nutrition labelling and claims	21. Has the company committed to safeguard its nutrition labelling and nutrition and health claims practices during the crisis and/or implemented new initiatives responsibly?	<p>Companies must safeguard labelling standards and should not use the crisis as an opportunity to deviate from existing labelling commitments. As evidence-based guidelines are published on nutrition and Covid-19, these must be followed.</p> <p>While health claims are however regulated in some markets so may not be relevant to assess, this is not the case globally. Companies should ensure that they do not make unfounded health or nutrition claims in relation to Covid-19, e.g. in relation to immune-boosting effects. Any use of claims should be strictly evidence-based and in all cases compliant with applicable regulation and Codex Alimentarius guidance.</p>
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G. Engagement

<p>Lobbying and influencing policymakers</p>	<p>22. Has the company publicly responded to government / authority requests for support in the Covid-19 response?</p> <p>23. Is the company trying to influence policymakers to take decisions in response to Covid-19?</p>	<p>This framework aims to capture actions from companies to lobby/influence policymakers in relation to the Covid-19 situation. Examples could have positive or negative health implications and may include providing product donations / paid for products in government programs, taking action to keep supply chains open, taking action in specific settings, lower labelling or other nutrition-related standards, etc.</p> <p>Companies might engage with governments in support of fighting Covid-19, such as contributing to food-based safety nets or supply of additional fortified products.</p>
<p>Stakeholder engagement and partnerships</p>	<p>24. Does the company provide examples of consulting or collaborating with international organizations, NGOs, academic experts etc. to inform its Covid-19 nutrition-sensitive interventions and/or strategy?</p> <p>25. Is the company publicly supporting or leading industry wide initiatives to address Covid-19 related nutrition challenges?</p>	<p>Companies can consult and engage with relevant expert organizations to ensure that strategies and activities are informed and balance potential risks.</p> <p>The Framework will capture the actions of companies through relevant industry associations.</p>

Infant and young child nutrition (selected companies only)

	<p>26. Has the company taken action to support local expert organisations or programmes that support breastfeeding in response to the Covid-19 crisis?</p> <p>27. Does the company state a commitment to uphold its own policy on BMS marketing and/or The International Code of Marketing of Breast-milk Substitutes and all subsequent, relevant World Health Assembly resolutions, during the Covid-19 crisis?</p> <p>28. Does the company report examples of taking any steps beyond those it normally takes to ensure that its businesses uphold its BMS Marketing policy in all markets during the Covid-19 crisis, including in relation to product donations?</p> <p>29. Has the company taken any action in response to Covid-19 to increase its offering of healthy complementary foods?</p>	<p>During the crisis, companies must continue to promote and support exclusive breastfeeding in the first six months of life, and continued breastfeeding to age two years and beyond, as well as the introduction of appropriate complementary foods from six months of age, and no earlier. WHO recommends that mothers with suspected or confirmed COVID-19 should be encouraged to initiate or continue to breastfeed. The benefits of breastfeeding substantially outweigh the potential risks for transmission¹³⁸.</p> <p>While all BMS manufacturers should commit to implementing the Code in full, few that currently have a BMS marketing policy apply it globally and to all types of products. Typically, their policies apply only in higher-risk markets and to certain types of products. At a minimum, companies must ensure that they continue to uphold all provisions of their policies. They should not, for example, increase their advertising or marketing of their BMS products; rather they should redouble their efforts to ensure that it is all compliant with the Code.</p>
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Donations of BMS by manufacturers has been shown to lead to increased use of substitutes and a reduction in breastfeeding. Therefore, donations of BMS, complementary foods and feeding equipment, including bottles and teats, should be made only in line with the Code and relevant WHA resolutions, and with WHO and UNICEF guidance on feeding in emergencies¹³⁹. Any donations made under these conditions should not carrying branding relating to a proprietary product covered by the scope of The Code.

Companies should continue to respect The Code and not increase their efforts to contact mothers directly. Some mothers might have questions about breastfeeding during the pandemic and worry about contracting or spreading the virus through their milk to infants. Nevertheless, companies should make sure not provide such advice directly to mothers and leave it to professionals in the health care system to provide practical feeding support and infant and young child feeding counselling to parents.



Annex 2: Consultation process

Comments in *italics* are drawn from the consultation.

Introduction to the consultation

In June 2020, following the development of the draft ATNI Covid-19 Framework, ATNI organised Zoom/MS Teams consultations over a period of two weeks. ATNI's approach is regularly to consult on our research methodologies, and this consultation has been an important factor in that process, too.

Discussions were held with representatives of industry organisations, UN agencies and NGOs. Comments were also sought from ATNI board members. All were sent, in advance, an introduction to the Framework and the draft Framework itself.

The consultation was held with:

- Business Consultancy Group (representatives of Food Industry Asia, The Consumer Goods Forum and the World Business Council on Sustainable Development);
- Department for International Development (UK);
- Directorate-General for International Cooperation (DGIS – within the Dutch Ministry of Foreign Affairs);
- Food Foundation (UK);
- GAIN;
- Institute of Development Studies (UK);
- International Food Policy Research Institute (IFPRI);
- Netherlands Nutrition Working Group (representatives of the International Medical Corps, RVO, Save the Children Netherlands, The Hunger Project, UNICEF Netherlands and the Wageningen Centre for Development Innovation);
- Tufts University (US);
- UNICEF;
- World Food Program;
- and ATNI board members.

The aim of the consultation was to inform the scope of the initiative as a whole and to gather concrete suggestions for the Framework and indicators themselves. It was used to ascertain whether and how the Framework could add value to those working in the nutrition space, avoiding duplication of others' efforts (because many initiatives have sprung up simultaneously since the start of the Covid-19 crisis in early 2020).

Overall, the Framework was well received, and many useful comments and suggestions were made. This report a) summarises the themes and concerns that emerged, b) sets out the changes made to the Framework as a result of the consultation, and c) lists some of the suggestions for disseminating the Framework that were offered during the discussion.

Themes and concerns raised

Some of the stakeholders were interested to know how the information will be used, so this is now clarified in the introduction to the Framework in this first quarterly report.

All understood that a benchmarking/index would not be appropriate and that any calls for a ranking should be rejected. There will be significant grey areas around what the companies say they are doing and what the impact is, and it will not be possible to unpick this with the resource available, particularly given the rapid changes that are taking place as Covid-19 progresses.

An aim of the consultation was to ask what areas of the Framework are of most interest and relevance to the stakeholders. These included:



- the consequences of Covid-19 on inequity (including social and racial injustice), and how these play out differently in high/low/middle-income countries, including issues of social protection;
- how affordability is achieved during the acute and longer-term phases of Covid-19, particularly for vulnerable populations;
- ensuring that marketing and donations of breast-milk substitutes during the Covid-19 crisis adhere strictly to the WHO Code;
- whether the longer-term Covid-19 response includes a recognition of the importance of improving access to and affordability of a healthier product portfolio;
- larger food companies' commitments to and impact on their value chain, particularly SMEs, around Covid-19: *'You will add real value by going into the supply chain'* – and whether this becomes part of longer-term movements towards a more resilient supply chain;
- workforce resilience and empowerment;
- policy impacts and the interplay between the business response to Covid-19 and the response of local/national government: *'because you are case-study driven, you can pick the ones that most clearly show the interaction between government and business, and use this to illustrate it'*;
- how best to pivot the food industry to deal with the longer-term impacts of Covid-19 (including a commitment to 'build back better') in a sustainable way; and
- how learning from the emergency response to Covid-19 could be used in future crises.

The ways in which the research will be presented were discussed:

- 'Framing of the Framework' is crucial, within the context of Covid-19 but also of the systemic social and racial injustice that the virus has exposed.
- It should be clearly stated that this is supplementary to ATNI's existing Index processes – that it is an additional Covid-19 lens, rather than replacing any of the ongoing work.
- Be sure to present both sides of the story, balancing the companies' own presentations of their actions with third-party reporting by way of comparison. An editorial description of what 'good practice' might look like (e.g. what companies can and should do by way of nutrition or of support for the value chain) would provide valuable context.
- Those familiar with ATNI's existing Indexes may be expecting this to be a benchmarking exercise, so it must be very clearly stated that this approach is using examples of company action and amalgamated data, rather than a ranking – perhaps there should be an explanatory disclaimer on each page or under each example.
- Over time, the reports should take the economic aftermath of Covid-19 into account – and be clear on the ways in which Covid-19 affects different geographies and different times.
- It would be helpful if the sources used are shared in the reporting, as stakeholders can themselves then follow up and/or track areas of interest. Several sources were also shared with ATNI during the consultation, which have been included both in the research and are listed in section 8 above.
- Bringing in lived experience could clarify whether an initiative has had a positive effect on those at whom it was aimed: *'Speaking to the group that experiences the outcome [of a company action] can help to get around whether the action is PR or has real impact.'*

Some notes of caution were sounded, in particular to be very careful before identifying a 'trend' and drawing conclusions from it, because there will be information that is hard to assess and that will be changing over time: *'you do not know the background and the information is always lagging behind'*.

One of those consulted suggested four different axes through which company actions can be viewed:

- 1) food: healthy versus unhealthy options
- 2) pledges: distinguishing actions from words (i.e. going beyond mere commitment)
- 3) actions: are they large scale or small scale?
- 4) duration: are they short term or long term (i.e. short-term leverage versus long-term strategic change)



Impact of the consultation on the Framework

Several changes were made to the Framework and indicators following the consultation. In addition, many more general comments were noted and included (particularly incorporated within section 2 above), which provide context for stakeholders. This wider context also, importantly, guides the ATNI analysts who a) are working daily on gathering third-party information about the food environment and Covid-19 and b) will undertake the research into the 39 companies subject to the deep-dive.

Among the changes made to the introduction to the Framework are: highlighting the social/racial injustices that have been thrown into sharp relief by Covid-19; a greater focus on the issue of how an emergency response to Covid-19 will blur into a longer-term 'new normal'; and to clarify the timing of the initiative (i.e. initially funded for a year from April 2020).

Changes to the Framework itself as a result of the consultation include:

- Category A: change to indicator 1 to distinguish whether a company has as nutrition-sensitive strategy in response to Covid-19 from whether it has implemented such a strategy.
- Category A: additions to indicator 4 ('Does the company have a strategy to support SMEs in its supply chain in response to Covid-19?')
- Category B: amalgamation of an indicator on food safety measures into Category E
- Category B: new indicator on fortification
- Category E: clear separation of indicators on health and wellbeing of employees, value chain and consumers
- Category E: inclusion in the rationale to 'Consumer/community (educational) programmes' that this should capture whether educational/awareness programmes are designed/implemented independently of the food companies that support them (i.e. unbranded)
- Category G: an additional indicator to capture the role companies play in engaging with government on the national response
- Category Infant and young child nutrition: clarification to make it clear that companies must not have contact with pregnant women or breastfeeding mothers
- Category Infant and young child nutrition: addition of a separate indicator on complementary foods.



Annex 3: The 39 companies included in the deep-dive research

Companies	HQ	ATNI Global Index 2021	ATNI US Index 2021	ATNI India Index 2020	BMS 2021*
Abbott Laboratories Inc.	USA				✓
Adani Wilmar Ltd.	India			✓	
Ajinomoto Group	Japan	✓			
Arla Foods amba	Denmark	✓			
BRF S.A.	Brazil	✓			
Britannia Industries Ltd.	India			✓	
Campbell Soup Company	USA	✓	✓		
China Mengniu Dairy Co.	China	✓			✓
ConAgra Brands	USA	✓	✓		
Danone S.A.	France	✓			✓
Emami Agrotech Ltd.	India			✓	
Feihe International Inc.	China				✓
Ferrero Group	Italy/ Luxembourg	✓			
General Mills, Inc.	USA	✓	✓		
Groupe Lactalis S.A.	France	✓			
Grupo Bimbo, S.A.B de C.V.	Mexico	✓			
Gujarat Cooperative Milk Marketing Federation (Amul)	India			✓	
Hatsun Agro Product Ltd.	India			✓	
Inner Mongolia Yili Industrial Group	China	✓			✓
ITC Ltd.	India			✓	
Karnataka Co-operative Milk Producers' Federation Ltd. (KMF)	India			✓	
Kellogg Company	USA	✓	✓		
Keurig Dr Pepper	USA	✓	✓		
Koninklijke FrieslandCampina	Netherlands	✓			✓
Marico Ltd.	India			✓	
Mars, Inc.	USA	✓	✓		
Meiji Holdings Co., Ltd.	Japan	✓			
Mondelez International, Inc	USA	✓		✓	
Mother Dairy Fruit & Vegetable Pvt Ltd.	India			✓	
Nestlé S.A	Switzerland	✓	✓	✓	✓
Parle Products Pvt. Ltd.	India			✓	
PepsiCo, Inc.	USA	✓	✓	✓	✓
Reckitt Benckiser Group PLC (RB)	UK				✓
Suntory Beverage & Food Ltd.	Japan	✓			
Tamilnadu Co-operative Milk Producers' Federation Limited (Aavin TCMPPF)	India			✓	
The Coca-Cola Company	USA	✓	✓	✓	
The Kraft Heinz Company	USA	✓	✓		✓
Tingyi Cayman Islands Holding	China	✓			
Unilever PLC/N.V.	UK/Netherlands	✓	✓	✓	

* Companies that manufacture breast-milk substitutes (BMS) and/or complementary foods (CF), selected for BMS/CF assessment 2021.



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¹³⁶ 'Nutrition-sensitive' interventions are defined as efforts that, within the context of sector-specific objectives, also aim to improve the underlying determinants of nutrition (adequate food access, healthy environments, adequate health services, and care practices), or aim at least to avoid harm to the underlying or immediate causes, especially among the most nutritionally vulnerable populations and individuals: World Bank, *Improving Nutrition through Multisectoral Approaches* (2013 <https://openknowledge.worldbank.org/handle/10986/16450>). This Framework will cover Covid-19-related measures as they directly and indirectly impact on nutrition. Measures that indirectly impact on nutrition include 'nutrition-sensitive' interventions that aim to improve the underlying determinants of nutrition. A broader range of company actions will be considered that address underlying determinants of nutrition but do not directly address the production or marketing of (un)healthy products; these include mitigating supply-chain disruptions, donating or distributing personal protective equipment (PPE) and key issues around social inequity (such as commitments to a living wage for employees or to work with government on social protection for vulnerable populations).

¹³⁷ The term 'populations vulnerable to Covid-19' looks at vulnerability to Covid-19 on top of ATNI's priority populations of those at high risk of malnutrition. In the case of Covid-19, this can be direct (e.g. populations at high risk of poor disease outcomes) or indirect (such as lower socioeconomic groups who are less able to weather financial shocks). These populations are found across high-, middle- and low-income countries.

¹³⁸ WHO, *Clinical Management of COVID-19: Interim Guidance* (27 May 2020)

<https://www.who.int/publications/i/item/clinical-management-of-covid-19>

¹³⁹ WHA Resolutions have clarified that in instances where children require BMS in the healthcare system then BMS should be purchased not donated. WHA Resolution 47.5 stated that governments must take measures 'to ensure that there are no donations of free or subsidized supplies of breast-milk substitutes and other products covered by the International Code of Marketing of Breast-milk Substitutes in any part of the health care system'; WHA Resolution 63.23 emphasised 'the need to minimize the risks of artificial feeding, by ensuring that any required breast-milk substitutes are purchased, distributed and used according to strict criteria': see UNICEF et al., *Infant and Young Child Feeding in the Context of COVID-19* (Brief No. 2 (v1), 30 March 2020) <https://www.unicef.org/media/68281/file/YCF-Programming-COVID19-Brief.pdf>, UNICEF, *Response to Covid-19: Guidance Note on Financial Contributions or Contributions In-kind from Food and Beverage Companies* (Version 2, 29 April 2020) <https://www.nutritioncluster.net/sites/nutritioncluster.com/files/2020-05/COVID-Guidance%20on%20financial%20contributions%20and%20contributions%20in%20kind%20by%20FB.pdf>, and IFE Core Group, *Infant and Young Child Feeding in Emergencies: Operational Guidance for Emergency Relief Staff and Programme Managers* (Version 3.0, October 2017) https://www.enonline.net/attachments/3127/Ops-G_English_04Mar2019_WEB.pdf

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