

# Trends in Calorie Intake from Sugar-Sweetened Beverages and Sugar-Sweetened Snacks in Ethiopia (2010-2016)

## BACKGROUND

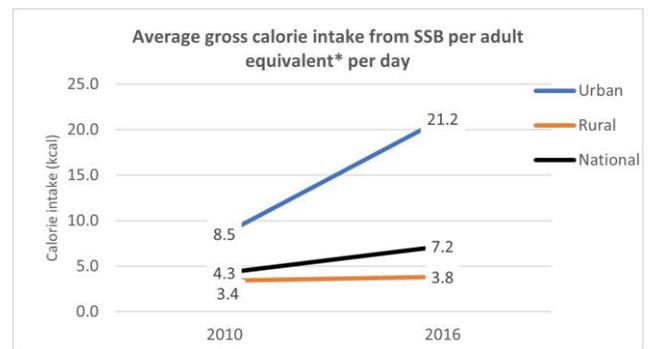
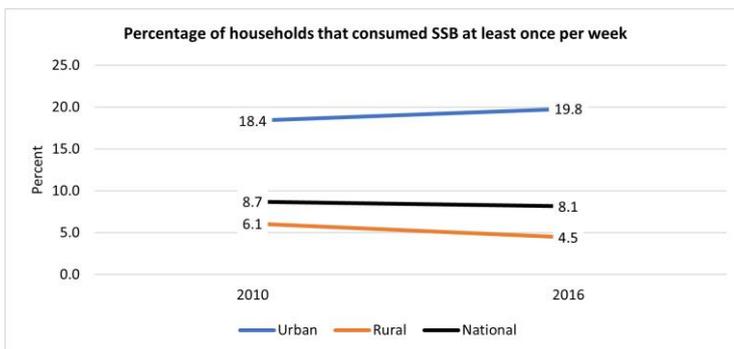
Sugar-Sweetened Beverages (SSB) and Sugar-Sweetened Snacks (SSS) have little nutritional value. High intake of SSB and SSS has been linked to weight gain, the risk of type 2 diabetes, the development of dental caries, increasing fatty liver, the risk for cardiovascular disease, and some types of cancers. The World Health Organization (WHO) strongly recommends reducing the consumption of free sugars throughout the life course. The recommendation for adults and children is to consume less than 10% of daily total energy, which is roughly about 50g of sugars. It also recommends a further reduction to 5% of total daily energy intake for additional health benefits.

Limited information is available in Africa on the intake of SSB and SSS. This evidence gap also exists in Ethiopia. Therefore, the aim of this secondary data analysis in Ethiopia, is to generate evidence on the trends in the consumption of SSB and SSS by region, residence (urban versus rural), and by expenditure quintile between 2010 and 2016.

This analysis used data from the 2010/11 and 2015/16 Household Consumption Expenditure Survey. For both rounds, food consumption and expenditure data were collected at the household level for a reference period of one week, with a recall period of 3-4 days.

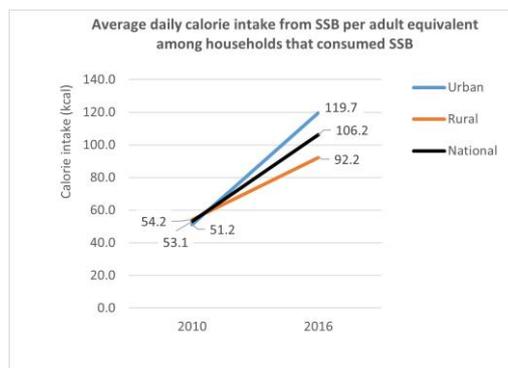
## KEY FINDINGS

**SSB:** Between 2010 to 2016 the percentage of households that consumed SSB at least once a week, increased in urban areas but showed a minor decrease nationally and in rural areas. Whilst a substantial increase in the average daily calorie intake from SSB was observed nationally as well as in urban and rural areas.

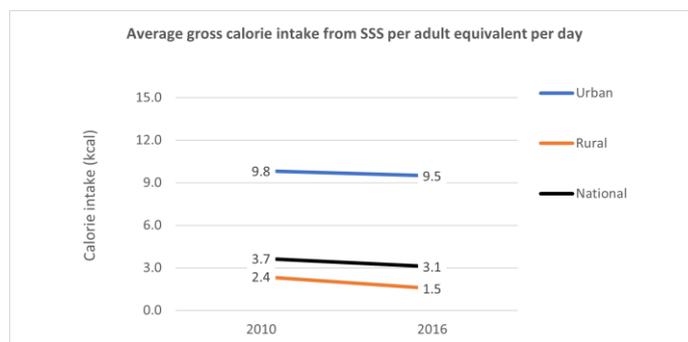
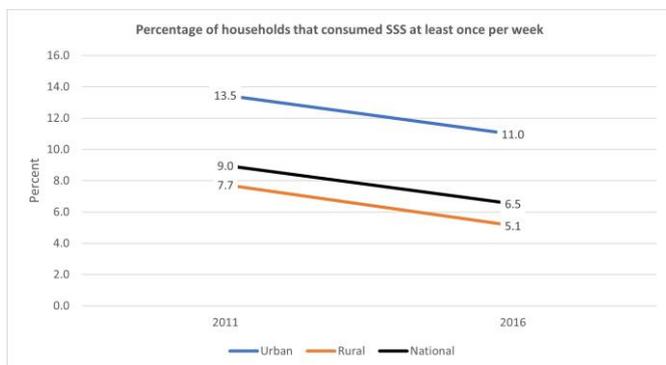


\*Adult equivalent is calculated by dividing each household's average daily caloric intake by household members adjusted for age and sex.

However, among populations who consumed SSB, the average calorie intake from SSB increased substantially nationally and in urban and rural areas.

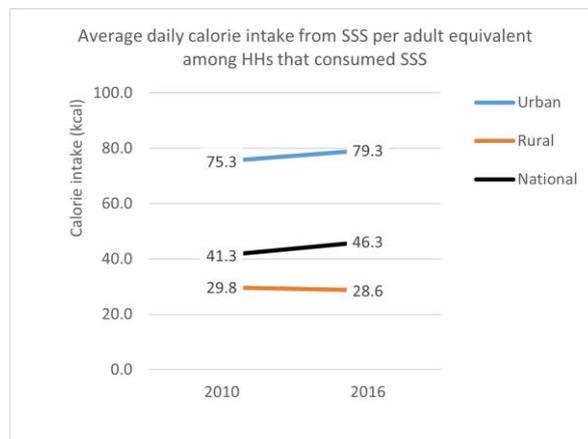


**SSS:** Both the percentage of households that consumed SSS and their average daily calorie intake from SSS decreased nationally and in urban and rural areas.



However, among those populations who consumed SSS, the average calorie intake from SSS increased nationally and in urban areas.

Overall, the average daily calorie intake from SSB and SSS was not high. This might be because only a small percentage of households consume these foods. However, among those households who consumed SSB and SSS, the share of calorie intake from these beverages and snacks were higher and increased over time.



## CONCUSSIONS AND RECOMMENDATIONS

- Although the consumption SSS has slightly increased in urban areas, the contributions of these foods to daily caloric intake were negligible.
- These findings indicate that dietary patterns with regards to SSB and SSS have not significantly changed.
- Ethiopia is still in the early stages of the nutrition transition and actions should be taken to prevent the shift to unhealthy diets.
- Interventions that address the double burden of malnutrition are needed to steer the nutrition transition into a direction where under-nutrition and micronutrient deficiencies are addressed, without an increase in the diet related NCDs.

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