SIX LESSONS FROM THE PANDEMIC

A VIEW FROM MENUS OF CHANGE®

Our 2020 Menus of Change Leadership Summit: Virtual Series, held in the midst of the worst global, infectious disease pandemic in 100 years, presents a unique opportunity to consider lessons from this crisis that connect to the two other parallel crises that have motivated this initiative since its inception: the global epidemic of chronic disease and the outlook for planetary health. In this year’s Menus of Change year in review, we look at issues and trend lines from the past year in nutrition, public health, and the environment through the lens of the pandemic to further inform our agenda for change.

1. Decades of poor food choices and dietary patterns have significantly increased the risk of adverse outcomes from the COVID-19 pandemic, including additional tens of thousands of likely, preventable deaths.

- The many links between poor food choices and dietary patterns and the risk of chronic disease are strong and continue to grow. Multiple analyses suggest that between 19 and 24 percent of premature deaths globally are potentially avoidable by improvements in diet quality; additional premature deaths result from obesity and inactivity.

- The most visible consequence of poor diets and lifestyle—and resulting obesity—continues to increase unabated, now affecting 42 percent of adults.

- Evidence from the past year shows that the decades long progress in reduction of heart disease and multiple cancers is being reversed in younger generations. Barring major changes, these generations will carry those increases in risks as they get older. As had been predicted, life expectancy has decreased for three of the last four years; opioids have accelerated this decline but poor diets and lifestyle are key long-term drivers of this trend.

- A highly disproportionate number of deaths due to COVID-19 have occurred in people with obesity, diabetes, hypertension, and heart disease; the exact percent of deaths that could have been avoided without these contributing factors is not yet clear but is substantial.

- The pandemic has also vividly exposed the great disparities in income and race that we have seen increasing over recent decades; death rates from COVID-19 are far higher in African Americans and some other minorities. Many factors contribute to this excess mortality including riskier jobs, more crowded housing, the need to use public transportation, and the lack of access to affordable healthcare, but poor diet quality and its consequences also contribute. Social and racial inequality drives all of this.

- Our healthcare system has responded heroically to the pandemic in the face of inadequate supplies and testing material. However, we have been spending far more than any other country on health care, largely ignoring that much of the burden on our system is due to treatment of conditions that are largely preventable. This financial burden has displaced resources that should be invested in disease prevention and actions to reduce climate change.

2. We were late in mobilizing an adequate response to the acute COVID-19 threat despite well-established understanding in the scientific and public health communities about how best to prevent and control infectious disease outbreaks.

- As a nation, we were slow-footed in our early—and continuing—response to the pandemic, which was an acute, highly visible event when it first surfaced in China. This despite consensus in the scientific and public health communities that we were vulnerable to such a devastating outbreak, that we barely missed a much more lethal pandemic from SARS, and that we needed to strengthen our preparations and control methods. We were warned in advance about a possible, new pandemic—for years—and yet we ignored those warnings. And when the fire broke out, we waited too long to call the fire department.

- This highlights the parallel need for yet more energetic responses to the global burden of chronic disease and projected climate and other planetary health impacts which are longer, slower and less obvious to many in the making, and therefore harder to mobilize concern and action around.

- Chefs and foodservice operators should not hold back in acting given the abundance of evidence on the need to change our menus and our food choices. Rather than waiting for increased consumer demand or government policy change, the foodservice industry has a chance to more widely embrace innovation and lead an evolution in consumer preferences that will better secure our future and minimize unwanted business disruption as a result of not anticipating that future.
3. Without regard for politics, death tolls, economic pain, or personal preferences and aversions, infectious disease pandemics—like weather-related disasters and the impacts of the global burden of chronic diseases and climate change—will play out according to fundamental laws of chemistry, biology, and physics.

Many people may not like hearing that some of their food choices will increase their risk for obesity, diabetes or other chronic disease conditions, but a refusal to hear and change will neither stop the course of their disease nor lower their risk of premature mortality.

As a country, we need to depoliticize matters of public health—whether it’s about what constitutes safe behavior during an infectious disease pandemic or strategies to prevent and control chronic disease and environmental degradation. Economic issues are also critical, but should be considered separately and not confused with the science of chemistry, biology, and physics.

4. While an adequate federal and global response is critical to success in pandemic control, nevertheless state, local, and private sector actions in this crisis demonstrate that leadership in the U.S. can arise from many sources.

As with the pandemic, leadership towards a better, healthier, more sustainable food system is emerging across the country, at the state and municipal levels and in the private sector.

Chefs, restaurateurs, and foodservice business leaders are increasingly showing through their innovation that better food choices—built around plant-forward menus and market baskets—can be delicious and appealing. They should collaborate with local and regional government and business leaders to help to scale that innovation.

Consumer attitudes toward increasing plant-forward food choices are trending in the right direction, making it easier for chefs and operators to favor this area of innovation. Some of the pre-COVID-19 data captured by the CIA-Harvard Chan School Plant-Forward by the Numbers describes this shifting business landscape of change.

5. The pandemic exposed many weak links and misplaced priorities in our food system, revealing that for the long-term we don’t have sufficient resilience designed into that system to withstand greater disruption from climate change.

The pandemic has laid bare the inadequacy of long-standing efforts to prioritize and facilitate cheap animal protein production. If meat and other animal protein were to make up a much smaller slice of our food purchasing, these foods could potentially be priced higher so as better manage the health and welfare of sector labor and not externalize environmental and other costs—all while not inflating overall food budgets.
We need to do a much better job of making fruits and vegetables, legumes and nuts, whole grains and other minimally processed, plant-sourced foods more accessible to all, with more widely distributed culinary skill sets about how to make those foods truly appealing to everyone.

Strategies to build resilience in the face of disruption from climate change will demand nothing less. And early, widespread adoption of plant-forward dietary patterns—and restaurant menus—can help prevent, not simply mitigate, the worst predicted impacts of that climate change.

The adverse impacts of climate change to the U.S. and global food system—if we don’t change course—cannot be predicted precisely, but are likely to be severe and include effects of extreme heat, drought, fires, shifting plant disease patterns, and political instability from population displacement.

6. Especially given the dynamics of the modern age, disease prevention and control—like the imperative to secure sustainable planetary health—is ultimately a global challenge and demands integrated global responses.

An infectious disease pandemic ultimately knows no borders in prevention and control.

Chronic disease is now an urgent, global issue because of the nature of global business, food marketing practices, and lifestyle trends.

Climate change and planetary environmental degradation clearly knows no borders.

All of these must be addressed globally at all levels of government, including inter-governmental cooperation. Similarly, global cooperation among chefs, food system innovators, and forward-thinking business leaders is essential. Further, chefs need to engage policymakers around the world in jointly articulating a goal of including deliciousness in plant-forward food choice advocacy and innovation that is accessible, affordable, and not viewed as elitist.

Many national and international reports in recent years have recognized the connections between food, health, and environment, and in 2021, UN Secretary-General António Guterres will convene a Food Systems Summit to raise global awareness and secure global commitments and actions that transform food systems to resolve not only hunger, but to reduce diet-related disease and heal the planet.

CONCLUSIONS

This year, we are meeting in highly unusual circumstances. At some unclear time, some uncertain combination of vaccines, new treatments, and adaption will allow us to gather in person once again at the CIA in Hyde Park. I greatly look forward to that time. However, if this only represents getting back to normal—doing what we did before the pandemic—that will be a bad outcome. Our path before the pandemic was leading to a future that would be disastrous for our children and grandchildren: a degraded planet, inhabited by unhealthy populations with gaping inequality and political instability.

We need to make major changes in almost everything that we do to avoid that future. Here we focus on food and food systems because we can make a unique and critical contribution, but we also need to build a green infrastructure, including our energy and transportation systems and buildings, as quickly as we can.

This has to begin with ending our denial of pandemics, the epidemic of obesity and chronic disease, huge social inequalities, and other realities facing our national and global institutions. If we can do that, and we work together to find solutions, I know that we have the knowledge, creativity and skills—including culinary insight and inspiration—that can create a future that is far healthier, more sustainable, and more just than what we have today. This will take time, and that is all the more reason to redouble our efforts now.

—Walter Willett, MD, DrPH, Past Chair, Department of Nutrition, and Professor of Nutrition and Epidemiology, Harvard T.H. Chan School of Public Health; Professor of Medicine, Harvard Medical School; Chair, CIA-Harvard Menus of Change Scientific and Technical Advisory Council, and Co-Chair, EAT-Lancet Commission