

Supplementary Table 1: Search strategy, Ovid MEDLINE

	Results
1 (Afghanistan or Benin or {Burkina Faso} or Burundi or {Central African Republic} or Chad or Comoros or {Democratic Republic of Congo} or Eritrea or Ethiopia or Gambia or Guinea or {Guinea Bissau} or Haiti or Liberia or Madagascar or Malawi or Mali or Mozambique or Nepal or Niger or Rwanda or Senegal or {Sierra Leone} or Somalia or {South Sudan} or Tanzania or Togo or Uganda or Zimbabwe or Angola or Armenia or Bangladesh or Bhutan or Bolivia or {Cabo Verde} or Cambodia or Cameroon or Congo or Djibouti or Egypt or {Ivory Coast} or {Cote d ivoire} or {El Salvador} or Georgia or Ghana or Guatemala or Honduras or India or Indonesia or Jordan or Kenya or Kiribati or Kosovo or {Kyrgyz Republic} or Lao or Lesotho or Mauritania or Micronesia or Moldova or Mongolia or Morocco or Myanmar or Nicaragua or Nigeria or Pakistan or {Papua New Guinea} or Philippines or {Sao Tome Principe} or {Solomon Islands} or {Sri Lanka} or Sudan or Swaziland or Eswatini or {Syrian Arab Republic} or Syria or Tajikistan or {Timor Leste} or Tunisia or Ukraine or Uzbekistan or Vanuatu or Vietnam or {West Bank Gaza} or Yemen or Zambia or Albania or Algeria or {American Samoa} or Argentina or Azerbaijan or Belarus or Belize or Bosnia or Bosnia or Herzegovina or Botswana or Brazil or Bulgaria or China or Colombia or {Costa Rica} or Cuba or Dominica or {Dominican Republic} or Ecuador or {Equatorial Guinea} or Fiji or Gabon or Grenada or Guyana or Iran or Iraq or Jamaica or Kazakhstan or Lebanon or Libya or Macedonia or FYR or FYROM or Malaysia or {Marshall Islands} or Mexico or Montenegro or Namibia or Nauru or Panama or Paraguay or Peru or {Russian Federation} or Russia or Samoa or Serbia or {South Africa} or {St Lucia} or {St Vincent the Grenadines} or Suriname or Thailand or Tonga or Turkey or Turkmenistan or Tuvalu or Venezuela).mp. [mp=title, abstract, heading word, drug trade name, original title, device manufacturer, drug manufacturer, device trade name, keyword, floating subheading word, candidate term word]	95303
2 (LIC* or {low income econom*} or {low* income countr*} or LMIC* or {low middle income countr*} or {upper middle income econom*} or {upper middle income countr*} or {developing countr*} or {developing econom*} or {developing world countr*} or {global south}).mp. [mp=title, abstract, heading word, drug trade name, original title, device manufacturer, drug manufacturer, device trade name, keyword, floating subheading word, candidate term word]	229516
3 Developing Countries/	77387
4 Poverty Areas/ or slum*.mp.	8253
5 ({Food Environment*} or {Food desert*} or {Food swamp*} or {Foodscape*} or {Obesogenic environment*} or {Nutrition* environment*}).mp. [mp=title, abstract, heading word, drug trade name, original title, device manufacturer, drug manufacturer, device trade name, keyword, floating subheading word, candidate term word]	4249
6 1 or 2 or 3 or 4	327302
7 5 and 6	214
8 limit 7 to yr="2000 - 2020"	195

Supplementary Table 2: Quality appraisal – National Heart, Lung and Blood Institute (NHLBI) checklists**NHLBI Checklist: Cross Sectional and Cohort Studies¹**

Article	Score	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12	Q13	Q14
Alves, 2019	Fair	Y	Y	N/R	Y	N	N/A	N/A	Y	N	N/A	C/D	N/A	N/A	Y
Assis, 2019	Good	Y	Y	Y	Y	Y	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Azeredo, 2016	Good	Y	Y	Y	Y	N	N/A	N/A	N/A	Y	N/A	Y	N/A	N/A	Y
Backes, 2019	Good	Y	Y	Y	Y	Y	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Barrera, 2016	Good	Y	Y	N	N	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Bekker, 2017	Fair	Y	Y	N/R	Y	N	N/A	N/A	N/A	Y	N/A	Y	N/A	N/A	N
Camargo, 2019	Poor	Y	N	N/R	Y	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Charoenbut, 2018	Good	Y	Y	Y	Y	Y	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Chor 2016	Good	Y	Y	Y	Y	Y	N/A	N/A	N	Y	N/A	Y	N/A	N/A	Y
Corrêa, 2018	Good	Y	Y	Y	Y	Y	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Cunningham-Myrie,2020	Good	Y	Y	Y	Y	Y	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Curioni, 2020	Good	Y	Y	Y	Y	N	N/A	N/A	N	Y	N/A	Y	N/A	N/A	Y
Dake, 2016	Good	Y	Y	N/R	Y	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Darfour-Oduro, 2020	Good	Y	Y	Y	Y	N	N/A	N/A	N/A	Y	Y	Y	N/A	N/A	Y
Da Silva	Good	Y	Y	Y	N	Y	N/A	N/A	N/A	Y	N/A	Y	N/A	N/A	Y
deFreitas, 2019	Fair	Y	Y	N/R	Y	N	N/A	N/A	N/A	Y	N/A	Y	N/A	N/A	Y
Duran, 2015	Good	Y	Y	Y	Y	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Fernandes, 2017	Fair	Y	Y	N/R	Y	N	N	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Goncalves, 2019	Fair	Y	Y	Y	Y	Y	N/A	N/A	N/A	N	N/A	Y	N/A	N/A	Y
Goryakin, 2015	Good	Y	Y	N	N	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Guo, 2018	Good	Y	Y	N/R	Y	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Guo, 2019	Good	Y	Y	N/R	Y	N	N/A	N/A	Y	Y	Y	Y	N/A	N/A	Y
Hall, 2020	Good	Y	Y	N/R	Y	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Hua, 2014	Poor	Y	Y	N/R	Y	N	N/A	N/A	Y	Y	N/A	C/D	N/A	N/A	N
Jaime, 2011	Good	Y	Y	Y	Y	Y	N/A	N/A	Y	Y	N/A	C/D	N/A	N/A	Y
Kelly, 2014	Poor	Y	Y	N	Y	N	Y	N/A	C/D	Y	N/A	Y	N/A	N/A	N

Kivuyo, 2020	Good	Y	Y	Y	C/D	Y	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Kroll, 2019	Fair	Y	Y	Y	Y	N	N/A	N/A	N	Y	N/A	Y	N/A	N/A	N
Leite, 2017	Good	Y	Y	Y	Y	Y	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Leme, 2017	Good	Y	Y	Y	Y	Y	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Li, 2011	Good	Y	Y	Y	Y	N	N/A	N/A	N/A	Y	N/A	Y	N/A	N/A	Y
Liu, 2014	Poor	Y	N	N/R	N/A	N	C/D	N/A	Y	C/D	N/A	Y	N/A	N/A	Y
Liu, 2020	Good	Y	Y	Y	Y	Y	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Machado, 2017	Good	Y	Y	C/D	Y	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Matozinhos, 2015	Good	Y	Y	Y	Y	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Mendes, 2013	Good	Y	Y	Y	Y	N	N/A	N/A	N/A	C/D	N/A	Y	N/A	N/A	Y
Mendonça, 2019	Good	Y	Y	Y	Y	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Menezes, 2018	Fair	Y	Y	Y	Y	N	N/A	N/A	Y	C/D	N/A	Y	N/A	N/A	N
Menezes, 2018	Good	Y	Y	Y	Y	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Miller, 2016	Good	Y	Y	Y	Y	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Nogueira, 2018	Good	Y	Y	Y	Y	Y	N/A	N/A	N/A	Y	N/A	Y	N/A	N/A	Y
Nogueira, Luana Romao, 2020	Good	Y	Y	Y	Y	Y	N/A	N/A	N	Y	N/A	Y	N/A	N/A	Y
Norbu, 2019	Poor	Y	N	N/R	Y	N	N/A	N/A	C/D	C/D	N/A	Y	N/A	N/A	N
Ochoa-Meza, 2017	Good	Y	Y		Y	Y	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Oyeyemi, 2012	Good	Y	Y	Y	Y	N	N/A	N/A	N	Y	N/A	Y	N/A	N/A	Y
Patel, 2018	Good	Y	Y	Y	N/R	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Pessoa, 2015	Good	Y	Y	Y	Y	Y	N/A	N/A	N	Y	N/A	Y	N/A	N/A	Y
Rossi, 2018	Fair	Y	Y	Y	Y	N	N/A	N/A	N	C/D	N/A	Y	N/A	N/A	Y
Seto, 2019	Fair	Y	Y	C/D	Y	N	N/A	Y	Y	Y	Y	Y	N/R	Y	Y
Trinh, 2020	Fair	Y	N	N/R	N/R	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Vedovato, 2015	Good	Y	Y	Y	Y	Y	N/A	N/A	N	Y	N/A	Y	N/A	N/A	Y
Velasquez-Melendez, 2013	Good	Y	Y	Y	Y	N	N/A	N/A	N	Y	N/A	Y	N/A	N/A	Y
Wang, 2012	Fair	Y	Y	Y	Y	N	C/D	Y	Y	Y	Y	Y	N/R	N	Y
Watson, 2013	Fair	Y	Y	N	Y	N	N/A	N/A	N	Y	N/A	Y	N/A	N/A	Y
Wertheim-Heck, 2019	Good	Y	Y	Y	Y	Y	N/A	N/A	N/A	Y	N	Y	NA	N/A	Y
Widiyanto, 2018	Fair	Y	Y	Y	Y	N	N/A	N/A	N	N	N/A	Y	N/A	N/A	Y

Wijnhoven, 2014	Good	Y	Y	Y	Y	Y	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	N
Xu, 2013	Fair	Y	Y	Y	Y	N	Y	Y	Y	C/D	Y	Y	N/A	N	Y
Yazdi-Feyzabadi, 2017	Good	Y	Y	Y	Y	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Zhang, 2012	Fair	Y	Y	Y	Y	N	N/A	N/A	N	Y	N/A	Y	N/A	N/A	N
Zhang, 2016	Poor	Y	Y	N/R	Y	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	C/D
Zhang, 2020	Good	Y	Y	Y	N	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Zheng, 2013	Poor	Y	C/D	C/D	C/D	N	N/A	N/A	Y	N	N/A	Y	N/A	N/A	N
Zhou, 2017	Good	Y	Y	Y	Y	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Zhou, 2020	Good	Y	Y	Y	Y	N	N/A	N/A	Y	Y	N/A	Y	N/A	N/A	Y
Zuccolotto, 2015	Fair	Y	Y	Y	Y	Y	N/A	N/A	N	N	N/A	Y	N/A	N/A	Y

¹NHBLI Checklist: observational and cohort studies (1. Was the research question or objective in this paper clearly stated? 2. Was the study population clearly specified and defined? 3. Was the participation rate of eligible persons at least 50%? 4. Were all the subjects selected or recruited from the same or similar populations (including the same time period)? Were inclusion and exclusion criteria for being in the study pre-specified and applied uniformly to all participants? 5. Was a sample size justification, power description, or variance and effect estimates provided? 6. For the analyses in this paper, were the exposure(s) of interest measured prior to the outcome(s) being measured? 7. Was the timeframe sufficient so that one could reasonably expect to see an association between exposure and outcome if it existed? 8. For exposures that can vary in amount or level, did the study examine different levels of the exposure as related to the outcome (e.g., categories of exposure, or exposure measured as continuous variable)? 9. Were the exposure measures (independent variables) clearly defined, valid, reliable, and implemented consistently across all study participants? 10. Was the exposure(s) assessed more than once over time? 11. Were the outcome measures (dependent variables) clearly defined, valid, reliable, and implemented consistently across all study participants? 12. Were the outcome assessors blinded to the exposure status of participants? 13. Was loss to follow-up after baseline 20% or less? 14. Were key potential confounding variables measured and adjusted statistically for their impact on the relationship between exposure(s) and outcome(s)?). **Abbreviations:** C/D, cannot determine; N, no; N/A, not applicable; N/R, not reported; Y, yes.

NHLBI Checklist: Case-control studies²

Article	Score	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
Setiyaningsih, 2019	Poor	Y	N	N	N	N/R	Y	N/R	Y	N	N	N/R	Y

²NHBLI Checklist: case-control studies (1. Was the research question or objective in this paper clearly stated and appropriate? 2. Was the study population clearly specified and defined? 3. Did the authors include a sample size justification? 4. Were controls selected or recruited from the same or similar population that gave rise to the cases (including the same timeframe)? 5. Were the definitions, inclusion and exclusion criteria, algorithms or processes used to identify or select cases and controls valid, reliable, and implemented consistently across all study participants? 6. Were the cases clearly defined and differentiated from controls? 7. If less than 100 percent of eligible cases and/or controls were selected for the study, were the cases and/or controls randomly selected from those eligible? 8. Was there use of concurrent controls? 9. Were the investigators able to confirm that the exposure/risk occurred prior to the development of the condition or event that defined a participant as a case? 10. Were the measures of exposure/risk clearly defined, valid, reliable, and implemented consistently (including the same time period) across all study participants? 11. Were the assessors of exposure/risk blinded to the case or control status of participants? 12. Were key potential confounding variables measured and adjusted statistically in the analyses? If matching was used, did the investigators account for matching during study analysis? **Abbreviations:** C/D, cannot determine; N, no; N/A, not applicable; N/R, not reported; Y, yes.

NHLBI Checklist: Controlled intervention studies³

Article	Score	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12	Q13	Q14
Aghdam, 2018	Poor	Y	C/D	N/R	N	N	N	C/D	Y	Y	N/R	Y	N/R	C/D	Y
Bandoni, 2011	Fair	Y	C/D	N/R	N	N/R	Y	Y	Y	N/R	N/R	Y	Y	N/R	Y
Bonvecchio-Arenas, 2010*	Poor	Y	C/D	N/R	CD	N/R	C/D	C/D	C/D	C/D	C/D	C/D	C/D	C/D	C/D
Chawla, 2017	Fair	Y	C/D	N/R	N	N	Y	N	N	N/R	Y	Y	C/D	N/R	Y
Safdie, 2013	Fair	Y	C/D	N/R	N	N/R	N	C/D	C/D	Y	Y	Y	Y	C/D	Y
Shamah Levy, 2012	Fair	Y	C/D	N/R	N	Y	N	Y	Y	Y	N/R	Y	N	Y	Y
Steyn, 2015	Poor	Y	C/D	N/R	N	N/R	N/R	Y	Y	N/R	N/R	Y	N	N/R	Y
Yazdi-Feyzabadi, 2018	Poor	N	C/D	N/R	N	N/R	N/R	N/A	N/A	N	N	Y	Y	Y	N

³**NHLBI Checklist: controlled intervention studies** (1. Was the study described as randomized, a randomized trial, a randomized clinical trial, or an RCT? 2. Was the method of randomization adequate (i.e., use of randomly generated assignment)? 3. Was the treatment allocation concealed (so that assignments could not be predicted)? 4. Were study participants and providers blinded to treatment group assignment? 5. Were the people assessing the outcomes blinded to the participants' group assignments? 6. Were the groups similar at baseline on important characteristics that could affect outcomes (e.g., demographics, risk factors, co-morbid conditions)? 7. Was the overall drop-out rate from the study at endpoint 20% or lower of the number allocated to treatment? 8. Was the differential drop-out rate (between treatment groups) at endpoint 15 percentage points or lower? 9. Was there high adherence to the intervention protocols for each treatment group? 10. Were other interventions avoided or similar in the groups (e.g., similar background treatments)? 11. Were outcomes assessed using valid and reliable measures, implemented consistently across all study participants? 12. Did the authors report that the sample size was sufficiently large to be able to detect a difference in the main outcome between groups with at least 80% power? 13. Were outcomes reported or subgroups analysed pre-specified (i.e., identified before analyses were conducted)? 14. Were all randomized participants analysed in the group to which they were originally assigned, i.e., did they use an intention-to-treat analysis?). **Abbreviations:** C/D, cannot determine; N, no; N/A, not applicable; N/R, not reported; Y, yes.

*Note this study is a second report of the study reported in Safdie, 2013. These are counted as one study in the narrative synthesis and awarded a “fair” based on quality appraisal of Safdie 2013.

Supplementary Table 3: Excluded articles from full-text screening

1.	Almeida LB, Scagliusi FB, Duran AC, et al. Barriers to and facilitators of ultra-processed food consumption: perceptions of Brazilian adults. <i>Public health nutrition</i> 2018;21(1):68-76. doi: https://dx.doi.org/10.1017/S1368980017001665
2.	Anggraini R, Februhartanty J, Bardosono S, et al. Food Store Choice Among Urban Slum Women Is Associated With Consumption of Energy-Dense Food. <i>Asia-Pacific journal of public health</i> 2016;28(5):458-68. doi: https://dx.doi.org/10.1177/1010539516646849
3.	Anzo A, Klassen-Wigger P, Luna-Carrasco J, et al. Impact of a digital facebook campaign on the purchase and consumption of food in Mexican families with children under 12 years: A social marketing strategy. <i>Annals of Nutrition and Metabolism</i> 2017;71(Supplement 2):331-32. doi: http://dx.doi.org/10.1159/000480486
4.	Arifin NA, Majid HA, Zainol R. The association of food outlets surrounding schools with obesity profiles among Malaysian adolescents. <i>Medical Journal of Malaysia</i> 2017;72(Supplement 1):86.
5.	Athar P. The silent sheep revolution. <i>Rural 21</i> 2019;53(2):25-26.
6.	Bae SG, Kim JY, Kim KY, et al. Changes in dietary behavior among adolescents and their association with government nutrition policies in Korea, 2005-2009. <i>Journal of Preventive Medicine & Public Health</i> 2012;45(1):47-59. doi: 10.3961/jpmph.2012.45.1.47
7.	Batis C, Rodriguez-Ramirez S, Ariza AC, et al. Intakes of Energy and Discretionary Food in Mexico Are Associated with the Context of Eating: Mealtime, Activity, and Place. <i>Journal of Nutrition</i> 2016;146(9):1907S-15S. doi: 10.3945/jn.115.219857
8.	Becker HV, Eaton JC, Iannotti LL. Changing food environments and health outcomes: Quantifying the nutrition transition in global nutrition research. <i>FASEB Journal</i> 2017;31(1 Supplement 1)
9.	Beery M, Adatia R, Segantin O, et al. School food gardens: fertile ground for education. <i>Health Education (0965-4283)</i> 2014;114(4):281-92. doi: 10.1108/HE-05-2013-0019
10.	Boonchoo W, Hayashi F, Takemi Y. Exploring the effect of dietary intake to weight status of preadolescents in urban setting using a new proposed food group classification-evidence from Thailand. <i>Annals of Nutrition and Metabolism</i> 2017;71(Supplement 2):740-41. doi: http://dx.doi.org/10.1159/000480486
11.	Boonchoo W, Takemi Y, Hayashi F, et al. Dietary intake and weight status of urban Thai preadolescents in the context of food environment. <i>Preventive Medicine Reports</i> 2017;8((Boonchoo, Takemi, Koiwai, Ogata) Graduate School of Nutrition Sciences, Kagawa Nutrition University, 3-9-21, Sakado, Saitama 350-0288, Japan(Boonchoo) Bureau of Nutrition, Department of Health, Ministry of Public Health, Nonthaburi 11000, Thailand(Hayash):153-57. doi: http://dx.doi.org/10.1016/j.pmedr.2017.09.009
12.	Boone-Heinonen J, Diez-Roux A, Goff DC, et al. The neighborhood energy balance equation: Does food environment + physical activity environment = obesity? The cardia study. <i>Obesity</i> 2011;19(SUPPL. 1):S53. doi: http://dx.doi.org/10.1038/oby.2011.222
13.	Bridle-Fitzpatrick S. Food deserts or food swamps?: A mixed-methods study of local food environments in a Mexican city. <i>Social Science & Medicine</i> 2015;142:202-13. doi: 10.1016/j.socscimed.2015.08.010
14.	Brown B, Noonan C, Nord M. Prevalence of food insecurity and health-associated outcomes and food characteristics of Northern Plains Indian households. <i>Journal of Hunger and Environmental Nutrition</i> 2007;1(4):37-53. doi: http://dx.doi.org/10.1300/J477v01n04_04
15.	Cerdan CDC, Medina IPP, Salazar CSC, et al. Evaluation of the nutritional quality of refreshments and nutritional status of an elementary school student population in Veracruz, Mexico. <i>Nutricion Clinica Y Dietetica Hospitalaria</i> 2018;38(3):85-92. doi: 10.12873/383caballero
16.	Choudhury S, Headey DD, Masters WA. First Foods: Diet Quality among Infants Aged 6-23 Months in 42 Countries. <i>Food Policy</i> 2019;88
17.	Cochrane T, Yu Y, Davey R, et al. Associations of built environment and proximity of food outlets with weight status: Analysis from 14 cities in 10 countries. <i>Preventive Medicine</i> 2019;129:N.PAG-N.PAG. doi: 10.1016/j.ympmed.2019.105874

18. Colozza D, Avendano M. Urbanisation, dietary change and traditional food practices in Indonesia: A longitudinal analysis. <i>Social Science & Medicine</i> 2019;233:103-12. doi: 10.1016/j.socscimed.2019.06.007
19. Corsi A, Englberger L, Flores R, et al. A participatory assessment of dietary patterns and food behavior in Pohnpei, Federated States of Micronesia. <i>Asia Pacific Journal of Clinical Nutrition</i> 2008;17(2):309-16.
20. Dahinten SL, Castro LE, Zavatti JR, et al. Growth of school children in different urban environments in Argentina. <i>Annals of Human Biology</i> 2011;38(2):219-27. doi: 10.3109/03014460.2010.515949
21. de Castro PCPJ, Nobre AA, de Castro IRR, et al. DOES CONTEXT INFLUENCE BRAZILIAN WORKERS' BODY MASS INDEX? RESULTS FROM THE ELSA-BRASIL STUDY BASELINE. <i>Annals of Nutrition & Metabolism</i> 2017;71:319.
22. de Villiers A, Steyn NP, Draper CE, et al. Implementation of the HealthKick intervention in primary schools in low-income settings in the Western Cape Province, South Africa: a process evaluation. <i>BMC Public Health</i> 2015;15(1):818-18. doi: 10.1186/s12889-015-2157-8
23. Debela BL, Demmler KM, Klasen S, et al. Supermarket food purchases and child nutrition in Kenya. <i>Global Food Security</i> 2020;25(Department of Agricultural Economics and Rural Development, University of Goettingen, Goettingen, Germany.) doi: http://dx.doi.org/10.1016/j.gfs.2019.100341
24. Downs SM, Glass S, Linn KK, et al. The interface between consumers and their food environment in Myanmar: an exploratory mixed-methods study. <i>Public Health Nutrition</i> 2019;22(6):1075-88. doi: 10.1017/S1368980018003427
25. Du WW, Su C, Wang HJ, et al. Food environment characteristics and health implication among chinese adults. <i>Annals of Nutrition and Metabolism</i> 2013;63(SUPPL. 1):958. doi: http://dx.doi.org/10.1159/000354245
26. Duran AC, Ricardo CZ, Mais LA, et al. Conflicting Messages on Food and Beverage Packages: Front-of-Package Nutritional Labeling, Health and Nutrition Claims in Brazil. <i>Nutrients</i> 2019;11(12):2967-67. doi: 10.3390/nu11122967
27. Elorriaga N, Gutierrez L, Chaparro RM, et al. PERCEPTIONS OF PRICE AND STORE AVAILABILITY OF FRUIT AND VEGETABLE AND THEIR ASSOCIATIONS WITH FRUIT AND VEGETABLE INTAKE AMONG ADULTS IN FOUR SOUTH AMERICAN CITIES. <i>Annals of Nutrition & Metabolism</i> 2017;71:817.
28. Estima CCP, Bruening M, Hannan PJ, et al. A cross-cultural comparison of eating behaviors and home food environmental factors in adolescents from Sao Paulo (Brazil) and Saint Paul-Minneapolis (US). <i>Journal of nutrition education and behavior</i> 2014;46(5):370-5. doi: https://dx.doi.org/10.1016/j.jneb.2014.01.007
29. Ferguson EL, Watson L, Berger J, et al. Realistic Food-Based Approaches Alone May Not Ensure Dietary Adequacy for Women and Young Children in South-East Asia. <i>Maternal & Child Health Journal</i> ;23(1):55-66. doi: 10.1007/s10995-018-2638-3
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