Evidence for government action on Nutrition

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The global nutrition challenge is the double burden of undernutrition and overweight.
Stunting prevalence and number affected in developing countries

Source: Department of Nutrition, World Health Organization
Children's overweight increasing more rapidly in LMI countries

Source: WHO
90% of premature deaths from NCDs occur in developing countries

**Annual number of deaths in the world**

- **High-income countries**
  - Group III - Injuries: 5.9M
  - Group II – Other deaths from noncommunicable diseases: 0.9M
  - Group I – Communicable diseases, maternal, perinatal and nutritional conditions: 1.1M

- **Upper middle-income**
  - Group II – Premature deaths from noncommunicable diseases (below the age of 60), which are preventable: 3.0M

- **Lower middle-income**
  - Group II – Premature deaths from noncommunicable diseases (below the age of 60), which are preventable: 3.3M
  - Group I – Communicable diseases, maternal, perinatal and nutritional conditions: 3.0M

- **Low-income countries**
  - Group II – Premature deaths from noncommunicable diseases (below the age of 60), which are preventable: 6.8M
  - Group I – Communicable diseases, maternal, perinatal and nutritional conditions: 13.6M

**Source:**

Annual number of deaths in the world

90% of premature deaths from NCDs occur in developing countries.
NCDs are the third largest global risk in terms of likelihood

"A problem neither the developed world nor the developing world can afford"

(WEF Global Risk 2010 Report)
Why are developing countries more affected?

Populations in low- and middle-income countries

Globalization of trade and marketing
Rapid urbanization
Population ageing
Poverty

Increased exposure to risk factors

Increased prevalence of non-communicable diseases

Limited access to effective and equitable health-care services

More than 7 million people die each year before the age of 60 in developing countries from non-communicable diseases
Changes in food systems

Source: FAO, 2004
The food crisis

- Dramatic rise of food prices coupled with shortages of food stocks, seeds, fertilizers, finance and high fuel prices threat global food and nutrition security
- Creates various humanitarian, human rights, socio-economic, health and political-related challenges
- Rise of food prices not due to any specific climate shock or other emergency
- Results from cumulative effects of long-term trends e.g. lack of agricultural sector investment, rising demand for food due to economic growth, trade distorting subsidies, bio-fuels
Policy response, successful achievements and persisting challenges

1 2 3
Rationale for government intervention

"… people do not always behave rationally. Neither are markets as efficient, fair, and conducive to healthy outcomes as some would like to see them. In most contemporary societies, we look to governments to protect and even increase public welfare. Whether through regulation, taxes, or education, or some combination of these, governments can play a significant part in affecting the choices we make and the outcomes that result from those choices."

Source: Sassi, 2010
Global policy response

1. Reducing trans fatty acids and salt
2. Restricting availability of energy dense foods and high calorie non-alcoholic beverages
3. Increasing availability of healthier foods including fruits and vegetables
4. Practice of responsible marketing to reduce impact of unhealthy foods to children
5. Making healthy options available and affordable
6. Providing simple, clear and consistent food labels that are consumer friendly
7. Reshaping industry to introduce new products with better nutritional value
8. Making physical activity accessible in all settings
The European Charter on Counteracting Obesity

- Individuals alone are not responsible - changing the social, economic and physical environment
- Responsibility of government across sectors
- Involvement of all stakeholders
- Portfolio of interventions designed to change the social, economic and physical environment
- Portfolio of policy tools (from legislation to public/private partnerships)
- International coordination
- Special focus on children and on disadvantaged socioeconomic population groups
Regional Nutrition Strategies


Eastern Mediterranean
draft nutrition strategy and plan of action 2010-2019

AFRICAN REGIONAL NUTRITIONAL STRATEGY
2005-2015
Reduction of trans fatty acids

- Experiences in Denmark, Canada and USA are showing that removal of industrially produced trans fatty acids (TFA) from the dietary chain is feasible.
- Replacing 2% of the energy from TFA with polyunsaturated fat is estimated to reduce coronary heart disease by 7 to 8%.
Salt reduction in Finland
Childhood obesity control in Sweden

• 4th graders in Karlstad, Umeå, Västerås Ystad
• Significant decrease in obesity

Trends not evenly distributed across the social gradient

Obesity boys

%

Source: report by Lager et al, FHI
A portfolio of actions

- Product formulation
- Offer in public institutions
- Catering
- Offer on the market
- Price, taxation and subsidies

- Marketing
- Labeling
- Information
Global overview of interventions to prevent overweight

- Food-based dietary guidelines
- Nutrition counseling in PHC
- Promotion of fruit and vegetable intakes
- Regulations on marketing to children
- Reduction of salt
- Workforce-based interventions
- Measures to affect food prices
Interventions in OECD and other EU countries by sector

Source: OECD/WHO Europe survey of national policies to tackle unhealthy diets and sedentary lifestyles
Categories of government action

• actions aimed at improving the breadth or the attractiveness of choice options, relative to a free market situation;
• actions to modify preferences based on characteristics of choice options other than price;
• actions to increase the price of selected choice options;
• banning of selected choice options.

Source: Sassi, 2010
Interventions in OECD and other EU countries by category

Source: OECD/WHO Europe survey of national policies to tackle unhealthy diets and sedentary lifestyles
Why success inadequate

• Policy not comprehensive
• Policy coherence across sectors e.g agriculture
  – Health considerations play little part in decisions farmers make about production, or agricultural ministries make about policy
  – The health sector often fails to reach out to the agricultural sector
• Policy not operationalized
• Policy not implemented
  – Resources
  – Global, national and local obstacles
An agenda for moving food and nutrition policy

1. Sectoral policies
2. Health Impact Analysis
3. Monitoring and evaluation
   4. Best buys
   5. Policy tools
   6. Advocacy
Policy challenges in agriculture

• pressure to deliver more food, better-quality and health enhancing foods in a sustainable way
  – 50% more food needed by 2020
  – Animal source foods: meat, dairy
  – Oil crops: coconut, palm, olive, canola, rapeseed, …
  – Fruit and vegetable
  – Diversified diet
  – Micronutrient enriched crops

• Sustainabilty: use of water, fuel, agricultural inputs
Policy challenges in trade

• Adaptation of exemption clauses of WTO
• Investments
• Shortening value chain
• Intellectual property rights
Policy challenges in welfare

Improve daily living conditions

Tackle the inequitable distribution of power, money, and resources

Measure and understand the problem and assess the impact of action

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Ottawa, 25-26 October 2010
Health Impact Analysis

1) Improved knowledge about determinants of health and improve the evidence base for future studies

2) Inform decision-makers and affected people about health impacts + capacity building, empowerment & partnerships

3) Adjustment of proposed policies or projects “healthy public policies”

4) Proactive management of inequalities in health
Monitoring and evaluation for accountability and to strengthen the evidence base

- Monitoring implementation of policies and programmes
- Evaluation of effects of policy changes on dietary consumption patterns
- Intervention research in settings
Health outcomes at the population level (average effects per year)

Source: OECD, 2010
Nutrient profiling

Nutrient profiling is “the science of categorising foods according to their nutritional composition”

Source: O’Neil, 2004
Nutrient profiling required to support food and nutrition policies

• Labelling policies
• Marketing policies
• Trade policies
• Agricultural development policies
• Food procurement policies
Relationship between nutrient profiling and FBDGs
Mobilizing a global response

- 2000: Global Strategy for the Prevention and Control of Noncommunicable Diseases
- 2003: Global Strategy to Reduce the Harmful Use of Alcohol
- 2004: Set of Recommendations on the Marketing of Foods to Children
- 2008: Ministerial Meetings (Beijing, Doha)
- 2009: Doha Declaration
- 2010: ECOSOC Ministerial Declaration
- 2010: Global Strategy to Reduce the Harmful Use of Alcohol
- 2010: Set of Recommendations on the Marketing of Foods to Children
- 2010: UN General Assembly resolution A/RES/64/265
- 2011: UNSG Report on NCDs
- 2011: NCD Summit

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Thank you

For more information

http://www.who.int/nutrition/en/index.html