

G7 International Symposium on Food Security and Nutrition
Tokyo, Japan, 25 – 26 October 2016

Panel Discussion Theme 2: Improving nutrition by a person-centered approach

Meeting the challenge of new era for food security and nutrition

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Ever changing global contexts

□ Emerging issues impacted on health and nutrition in 80s – 90s

- Nutrition transition: increasing overweight/obesity & nutrition-related NCDs
- Fetal programming of chronic diseases
- HIV/AIDS
- Biotechnology — GM foods
- Micronutrients beyond the big three
- Food safety (i.e. BSE)
- SARS, bird flue, H1N1
- ⋮
- AMR, etc

□ Continuously changing context and focus of global macropolicy environment related to food and nutrition

- 1990 – Child Summit
- 1992 – International Conference on Nutrition (ICN)
- 1996 – World Food Summit
- 1999 – PRSPs
- 2000 – MDGs
- 2001 – WFS+5 (2001)
- 2002 – Building a World Fit for Children / WHO Global Strategy on food safety / WHO Global Strategy on infant and young child feeding
- 2004 – WHO Global Strategy on diet, PA and health
- 2006 – Repositioning Nutrition (WB)
- 2007 – Ending Child Hunger & Undernutrition (setting up REACH initiative)
- 2008 – Food price crisis, Pacific Health Summit, Lancet Nutrition Series on maternal & child undernutrition

– G8 Global nutrition challenge – MCH (Health Experts' meeting)

Global context

□ Nutrition has gained considerable attention in the international community in recent years as a result of:

- Scaling-Up Nutrition (SUN) movement (2008)
- Adoption of CIP-IYCN and 6 Global Nutrition Targets by WHA in 2012
- Adoption of 9 voluntary Global NCD Targets and Global NCD Action Plan by WHA in 2013
- High-level Nutrition for Growth Compact (N4G) in 2013
 - Global Nutrition Report launched in 2014 to monitor N4G commitment accountability
 - Progress to be measured in Rio in 2016, in Rome in 2017 (?), in Tokyo in 2020 (?)



- ICN2 in November 2014
 - Adopted 6 global nutrition targets
 - Adopted diet & nutrition-related NCD targets



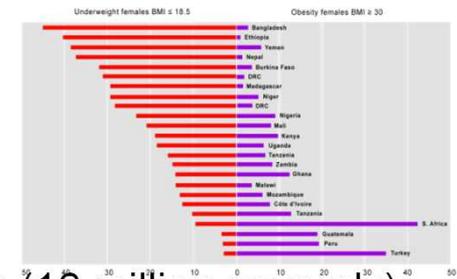
Global context

□ Today, important agreements exist:

— The double burden of malnutrition exists in the same countries, in the same communities, in the same household and even in the same individuals

— Multiple forms of malnutrition exist

- 795 million people chronically hungry
- 159 million stunted children and 50 million wasted children (16 million severely)
- over two billion people suffer from micronutrient deficiencies
- 41 million overweight children under five years of age and over 600 million obese and almost two billion overweight adult:



— There are important differences in the distribution of different forms of malnutrition, but the trends are similar

Global context

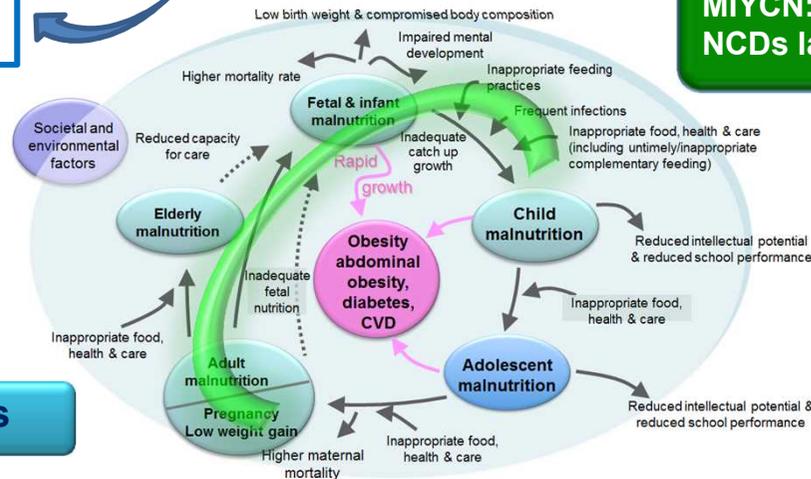
□ Today, important agreements exist:

- Increasing recognition of the links between early childhood nutrition and development of obesity and diet-related NCDs later in life
(i.e. metabolic efficiencies serving well in condition of fetal undernutrition become maladaptive in the obesogenic environment leading to the development of: 1) abnormal lipid profiles; 2) altered glucose and insulin metabolism; 3) overweight & obesity)
- Focusing on the 1st 1000 days is critical in addressing the double burden of malnutrition

Need for "lifecourse approach"

MIYCN: The 1st step in preventing NCDs later in life

Lifecourse: causal links

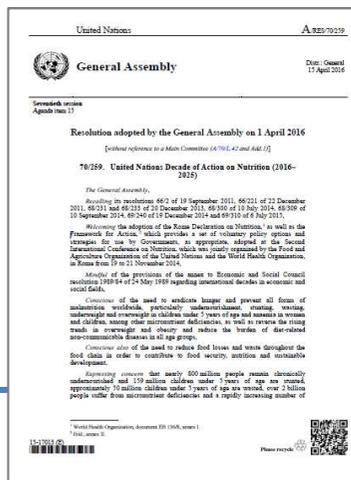


Global context



□ Nutrition has gained further momentum as a result of:

- **SDG** adopted Global Nutrition Targets (Goal 2, Target 2.2) in September 2015
 - End all forms of malnutrition, address the nutritional needs throughout the lifecycle, give universal access to safe and healthy food sustainably produced and ensure universal coverage of essential nutrition actions
- UNGA proclaiming **Decade of Action on Nutrition (2016 – 2025)** in April 2016
 - Ensure engagement of a whole of governments, international organizations & various stakeholders to facilitate effective implementation of ICN2 FFA with clear timeline
 - Mainstream multisectoral nutrition action across various domains of SDGs to facilitate their achievement
 - Allow a coherent reporting of the progress in tackling malnutrition in all its forms across multiple geographies and food systems

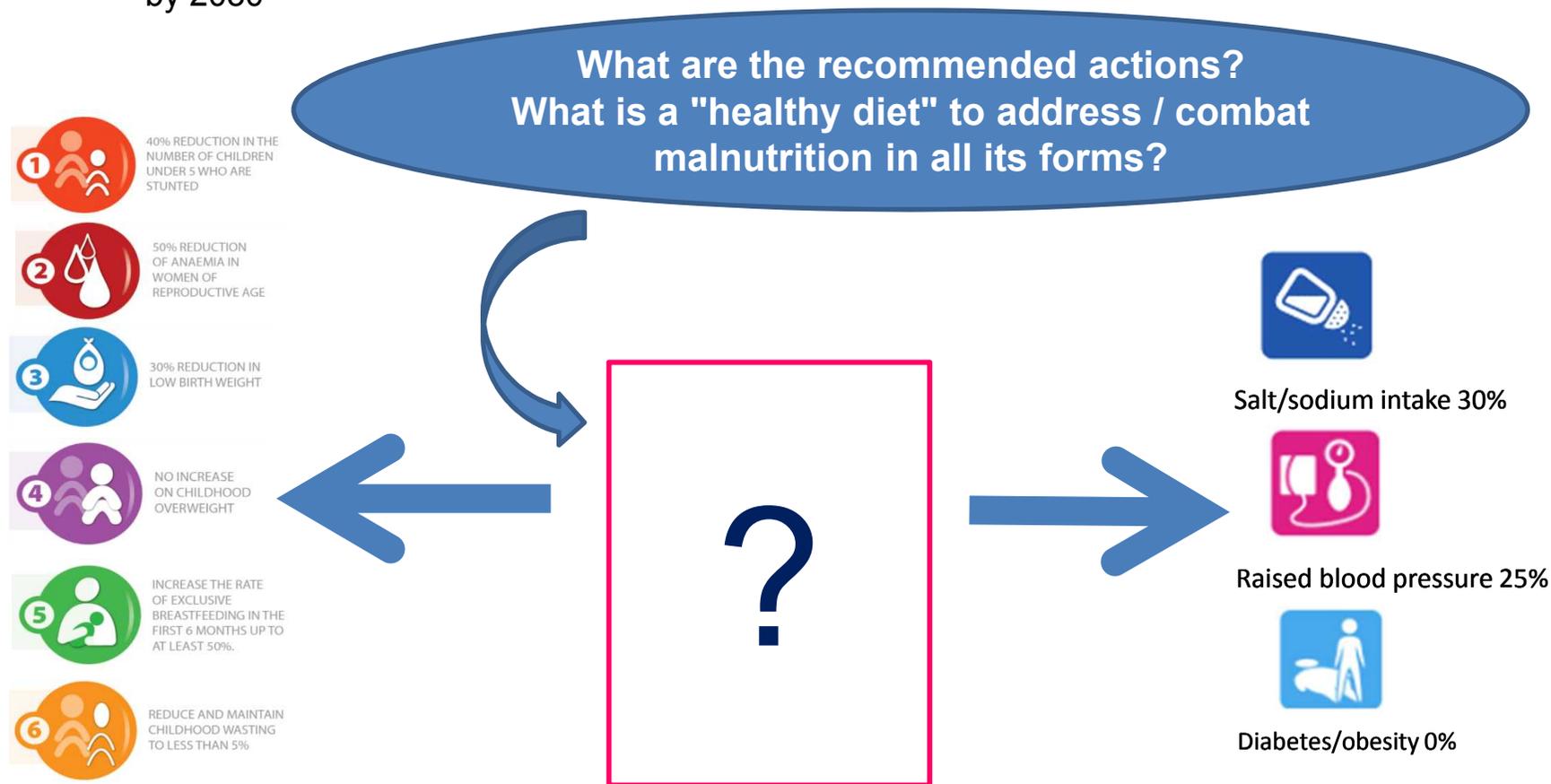


Goal: Increase activities conducted at the national, regional and global levels to implement the recommended actions included in the ICN2 Framework for Action aimed at **achieving the global targets for improving maternal, infant and young child nutrition and for NCD risk factor reduction** to be achieved by 2025 and the corresponding SDG targets to be achieved by 2030



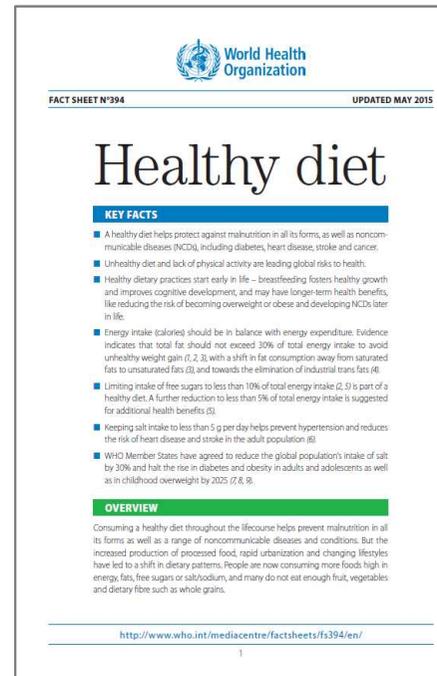
Global context

- **UNGA resolution** --- "Increasing activities to implement the **recommended actions** included in the ICN2 Framework for Action aimed at **achieving the global targets for improving maternal, infant and young child nutrition and for NCD risk factor reduction** to be achieved by 2025 and the corresponding SDG targets to be achieved by 2030"



A healthy diet according to WHO

- ❑ **Breastfeed** exclusively babies for the first 6 months and continuously breastfeed until two years and beyond
- ❑ **Energy** intake should **balance** energy expenditure
- ❑ Keep **total fat** intake to less than 30% of total energy intake, with a shift in fat consumption away from **saturated fats** to **unsaturated fats**, and towards the elimination of industrial **trans fats**
- ❑ Limit intake of **free sugars** to less than 10% (or even less than 5%) of total energy intake
- ❑ Keep **salt** intake to less than 5 g/day
Eat at least 400g of **fruit and vegetable** a day



Translating into food-based dietary guidelines (FBDGs)

- ❑ Are tools for communication and education
 - Promoting desirable food consumption patterns
 - promoting desirable food consumption patterns
 - promoting nutritional well-being
 - preventing and controlling diet-related diseases

- ❑ Should be based on scientific evidence on diet and health relationship

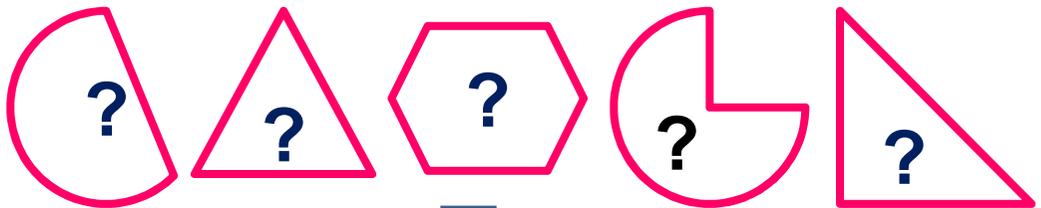
- ❑ Should be part of an integrated strategy to improve food security, nutrition and health

- ❑ Serve as a tool for implementing food & nutrition policies & programmes

- ❑ Serve as guidance for food, agriculture, and trade policies



What should a healthier food supply look like to support the dietary goals to address / combat malnutrition in all its forms?



- 1 40% REDUCTION IN THE NUMBER OF CHILDREN UNDER 5 WHO ARE STUNTED
- 2 50% REDUCTION OF ANAEMIA IN WOMEN OF REPRODUCTIVE AGE
- 3 30% REDUCTION IN LOW BIRTH WEIGHT
- 4 NO INCREASE ON CHILDHOOD OVERWEIGHT
- 5 INCREASE THE RATE OF EXCLUSIVE BREASTFEEDING IN THE FIRST 6 MONTHS UP TO AT LEAST 50%.
- 6 REDUCE AND MAINTAIN CHILDHOOD WASTING TO LESS THAN 5%



Saturated fat ⬇️
 Unsaturated fat ⬆️
 Trans fat ⬇️
 Sugars ⬇️
 Animal source foods ⬆️⬇️
 Fruit and vegetables ⬆️
 Ultraprocessed foods
 Fortified food ...



- Salt/sodium intake 30%
- Raised blood pressure 25%
- Diabetes/obesity 0%

2nd International Conference on Nutrition

Rome, 19 – 21 November 2014

Over 2,200 participants including:

- Representatives from more than 170 governments
- Heads of State and Government and Royals
- 85 Ministers and 23 Vice-Ministers from Foreign Affairs, Agriculture and Health
- 100 Members of Parliament
- 30 representatives of the UN System and IGOs
- 150 representatives from civil society
- 100 representatives from the private sector, consumer associations, and producer organizations
- Many opinion leaders, researchers, and development experts



Outcome documents

1. Rome Declaration on Nutrition
2. Framework for Action

The vision:

- **coherent policies**
- coordinated action among different actors and sectors
- diversified, balanced and healthy diet
- empowerment of consumers
- national health systems integrating nutrition
- special attention to women

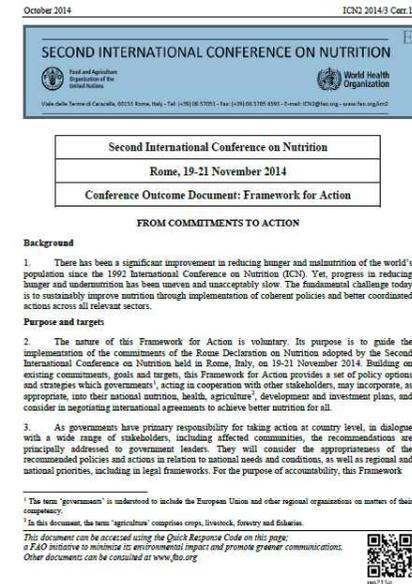


ICN2 Declaration: 10 Commitments

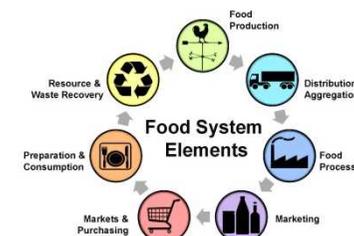
- ① Eradicate hunger and prevent all forms of malnutrition
- ② Increase investments
- ③ Enhance sustainable food systems
- ④ Raise the profile of nutrition
- ⑤ Strengthen human and institutional capacities
- ⑥ Strengthen and facilitate, contributions and action by all stakeholders
- ⑦ Ensure healthy diets throughout the lifecourse
- ⑧ Create enabling environment for making informed choices
- ⑨ Implement the commitments through the Framework for Action
- ⑩ Integrate vision and commitments into the post-2015 agenda

Framework for Action 60 policy and programme options

- Enabling environment for effective action
- Sustainable food systems promoting healthy diets
- International trade and investment
- Nutrition education and information
- Social protection
- Health systems delivery of direct nutrition interventions
and health services to improve nutrition
- Water, sanitation and hygiene
- Food safety



Policy coherence



Addressing production

Recommendation 10: Promote the diversification of crops including underutilized traditional crops, **more production of fruits and vegetables**, and appropriate production of animal-source products as needed, applying sustainable food production and natural resource management practices



Addressing distribution

Recommendation 11: Improve **storage, preservation, transport and distribution technologies** and infrastructure to reduce seasonal food insecurity, food and nutrient loss and waste

Addressing trade

Recommendation 18: Improve the availability and access of the food supply through **appropriate trade agreements** and policies and endeavour to ensure that such agreements and policies do not have a negative impact on the right to adequate food in other countries



Addressing consumer behaviours

Recommendation 21: Conduct appropriate **social marketing campaigns** and lifestyle change communication programmes to promote physical activity, dietary diversification, consumption of micronutrient-rich foods such as **fruits and vegetables**, including traditional local foods and taking into consideration cultural aspects, better child and maternal nutrition, appropriate care practices and adequate breastfeeding and complementary feeding, targeted and adapted for different audiences and stakeholders in the food system



Addressing food environment in public institutions

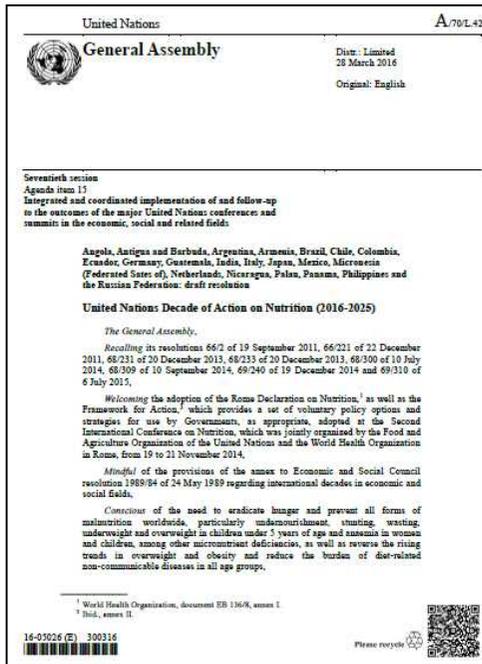
Recommendation 16 : Establish **food or nutrient-based standards to make healthy diets and safe drinking water accessible in public facilities** such as hospitals, childcare facilities, workplaces, universities, schools, food and catering services, government offices and prisons, and encourage the establishment of facilities for breastfeeding



Decade of Action on Nutrition

ICN2 recommended that the UN General Assembly endorse the Rome Declaration and Framework for Action and consider declaring a Decade of Action on Nutrition for 2016-2025

April 2016



- i) implement the commitments of this Declaration through the Framework for Action which will also contribute to ensuring accountability and monitoring progress in global nutrition targets;
 - j) give due consideration to integrating the vision and commitments of this Declaration into the post-2015 development agenda process including a possible related global goal.
16. We call on FAO and WHO, in collaboration with other United Nations agencies, funds and programmes, as well as other international organizations, to support national governments, upon request, in developing, strengthening and implementing their policies, programmes and plans to address the multiple challenges of malnutrition.
17. We recommend to the United Nations General Assembly to endorse the Rome Declaration on Nutrition, as well as the Framework for Action which provides a set of voluntary policy options and strategies for use by governments, as appropriate, and to consider declaring a Decade of Action on Nutrition from 2016 to 2025 within existing structures and available resources.

Decade concept

The Decade will provide an umbrella for all relevant stakeholders to consolidate and align nutrition actions across different sectors and facilitate coherent policy processes across the areas identified in the ICN2 outcome documents

Decade content : 6 pillars

- Sustainable food systems for healthy diets
- Enabling food and breastfeeding environments
- Aligned health systems providing universal coverage of essential nutrition actions
- Social protection and nutrition education
- Trade and investment for improved nutrition
- Review, strengthen and promote nutrition governance and accountability

Making SMART commitments

Specific, Measurable, Achievable, Relevant and Time-bound (SMART) so that they can be tracked and monitored taking into account existing indicators

Example

FFA R29: Adapt and implement the International Code of Marketing of Breast-milk Substitutes and subsequent relevant World Health Assembly resolutions

The Head of Government/Minister of Health will acknowledge adequate breastfeeding as the highest priority for the Government to combat the double burden of malnutrition and makes the following commitment(s) :

- Example 1– By 2017, a legislation will be established that introduces the provisions of the International Code of marketing of breastmilk substitutes
- Example 2 - By 2017, a functional unit will have been established (in the Ministry of Health) to effectively and actively monitor, implement and enforce sanctions in case of violations, with a first report produced by the end of 2018.

Commitments : what and how

- ❑ Country-specific commitments for action will vary across countries as they would **reflect national priorities** and depend on the country's nutrition situation, and current food and health systems.
- ❑ FAO and WHO are preparing a resource guide to assist countries in translating the ICN2 FFA 60 recommended actions into country specific SMART commitments for action on nutrition.
- ❑ The commitment submission process will be continuous during the Decade; commitments are expected to be signed off by high-level representatives of countries before being submitted to the joint FAO/WHO Secretariat of the UN Decade of Action on Nutrition
- ❑ For public accountability, the submitted **commitments will be tracked** on a regular basis by country self-assessments through an open access database co-facilitated by the joint FAO/WHO Secretariat of the UN Decade of Action on Nutrition.



www.who.int/nutrition/gina

WHO Global Database on the Implementation of Nutrition Action (GINA)

- ❑ Contains **more than 1,500 policies & 2,500 actions**
 - Policy (policies, strategies, action plans, legislations)
 - Action (programmes and interventions) including:
 - Target group, coverage, delivery mechanism
 - Implementing partners
 - Lessons learnt and best practices

Policy environment and main gaps

Policies

- Most countries have nutrition policies, but **they do not:**
 - Address challenges of the double burden of malnutrition
 - Address nutrition challenges throughout lifecourse
 - Include evidence-informed actions comprehensively
 - Address underlying and basic causes of malnutrition
- Food security strategies seldom include nutrition goals or actions

Coordination

- Coordination mechanisms exist in most countries, but **they do not:**
 - Address existing challenges
 - Anchor in high-level policy making frameworks e.g. PMO

Implementation

- Most countries implement some key interventions at national scale, but **they do not:**
 - Implement a comprehensive set of essential nutrition actions at scale
 - Implement adequately the Int'l Code of Marketing of BMS
 - Reach women before pregnancy with micronutrient interventions
 - Address adequately risk factors for obesity and diet-related NCDs

Monitoring and evaluation

- Most countries conduct national surveys, but **they do not:**
 - Include relevant indicators
 - Disaggregate data sufficiently to address inequities
 - Conduct surveys routinely in a timely manner
 - Use collected data inform policy

Source : WHO, 2013. Global Nutrition Policy Review

2nd Global Nutrition Policy Review (2016)

□ Main aim is to:

Compile the updated information on countries' progress in implementing actions to achieve the Global Nutrition Targets 2025 (and diet-related NCD targets 2025) and implementing ICN2 commitment and the Decade of Action on Nutrition

□ Covering the action areas related to:

1. Policies, strategies and plans relevant to nutrition
2. Coordination mechanisms for nutrition
3. National capacity for nutrition
4. Nutrition actions, programmes and measures being implemented
 - Maternal, infant and young child nutrition
 - School health and nutrition programmes
 - Promotion of healthy diet and prevention of overweight, obesity and diet-related NCDs
 - Vitamin and mineral nutrition
 - Prevention and treatment of acute malnutrition
 - Nutrition and infectious disease

An example of countries' exhibited commitment to improve food environment for their populations

□ Countries (and cities) implementing or considering taxation of sugar-sweetened beverages (SSBs):

- Colombia
- Hungary
- Ireland
- Philippines
- Mexico
- Portugal
- Samoa
- South Africa
- Tonga
- UK
- Cities in US



Codex work taking into consideration of NCDs

GUIDELINES ON NUTRITION LABELLING

Updated in 2015

PURPOSE OF THE GUIDELINES

To ensure that nutrition labelling is effective:

- in providing the consumer with information about a food so that a wise choice can be made;
- in providing a means for conveying information of the nutrient content of the food;
- in encouraging the use of sound nutrition principles in the formulation of the food;
- in providing the opportunity to include supplementary nutrition information.

To ensure that nutrition labelling does not describe a product or present information in a misleading, deceptive or insignificant in any manner.

To ensure that no nutrition claim is made without nutrition labelling.

3. NUTRIENT DECLARATION

3.1 Application of nutrient declaration

3.1.1 Nutrient declaration should be mandatory for all prepackaged foods for which nutrition or health claims, as defined in the *Guidelines for Use of Nutrition and Health Claims (CAC/GL 23-1997)*, are made.

3.1.2 Nutrient declaration should be mandatory for all other prepackaged foods except where national circumstances would not support such declarations. Certain foods may be exempted for example, on the basis of nutritional or dietary insignificance or small packaging.

3.2 Listing of nutrients

3.2.1 Where nutrient declaration is applied, the declaration of the following should be mandatory:

3.2.1.1 Energy value; and

3.2.1.2 The amounts of protein, available carbohydrate (i.e. dietary carbohydrate excluding dietary fibre), fat, saturated fat, sodium⁸ and total sugars; and

3.4.4.2 NRVs-NCD

Intake levels not to exceed

Saturated fatty acids 20 g^{8,9}

Sodium 2 000 mg¹⁰

Intake levels to achieve

Potassium 3 500 mg¹⁰

⁸ This value is based on the reference energy intake of 8370 kilojoules/2000 kilocalories.

⁹ The selection of this nutrient for the establishment of an NRV was based on "convincing evidence" for a relationship with NCD risk as reported in the report *Diet, Nutrition and the Prevention of Chronic Diseases*. WHO Technical Report Series 916. WHO, 2003.

¹⁰ The selection of these nutrients for the establishment of an NRV was based on "high quality" evidence for a relationship with a biomarker for NCD risk in adults as reported in the respective 2012 WHO Guidelines on sodium and potassium intake for adults and children.

Codex work increasingly requested to be coherent & align with WHO policies and guidelines

CODEX ALIMENTARIUS COMMISSION

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Agenda Item 1

JOINT FAO/WHO FOOD STANDARDS PROGRAMME

EXECUTIVE COMMITTEE OF THE CODEX ALIMENTARIUS COMMISSION

74th Session

FAO Headquarters, Rome, Italy, 20-23 June 2016

PROVISIONAL AGENDA

Item	Subject	Document
1.	Adoption of the Agenda	CX/EXEC 16/71/1
2.	Critical Review (Draft Standards and Related Texts for Adoption; Monitoring of Standards Development; and Proposals for the Elaboration of New Standards and Related Texts)	
3.	Codex work on antimicrobial resistance - Comments	
4.	Codex Work Management and Functioning of the Executive Committee- Comments	
5.	Codex Strategic Plan 2014-2019: General Implementation Status	
6.	Preparation of Codex Strategic Plan 2020-2025	
7.	Codex Budget planning (2016-17) and report on expenditures (2014-15)	
8.1	FAO/WHO Scientific Support to Codex (report on activities)	
8.2	FAO/WHO Scientific Support to Codex (budget and expenditure)	
8.3	FAO/WHO Scientific Support to Codex (increasing sustainability)	
9.1	Applications from International Non-governmental Organizations for Observer Status in Codex	
9.2	Applications from International Non-governmental Organizations for Observer Status	
10.	Relations between FAO and WHO policies, strategies and guidelines and Codex work	
11.	Discussion paper on antimicrobial resistance correspondence	

CODEX ALIMENTARIUS COMMISSION

Food and Agriculture Organization of the United Nations

World Health Organization

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Agenda Item 10

JOINT FAO/WHO FOOD STANDARDS PROGRAMME

EXECUTIVE COMMITTEE OF THE CODEX ALIMENTARIUS COMMISSION

71st Session

FAO Headquarters, Rome, Italy, 20 - 23 June 2016

RELATIONS BETWEEN FAO AND WHO POLICIES, STRATEGIES AND GUIDELINES AND CODEX WORK¹

(Prepared by FAO and WHO)

Introduction

1. The 38th Session of the Commission, when considering the adoption at Step 8 of the the Addition of Essential Nutrients to Foods, took note of the reservations expressed by 3.3.2 that the Codex should support the implementation of relevant WHO guidelines to protect public health. The Representative of WHO informed the Commission that FAO the issue of how best and in what way Codex could support or interact with the p guidelines of FAO/WHO and that resulting recommendations would be presented to next session through the Executive Committee as appropriate.²

2. This document recapitulates the provisions on the relations between FAO/WHO and t Commission as seen in the Statutes and Rules of Procedure (paras 3-5), recalls some e between FAO/WHO and Codex in recent years (para. 8) and provides a brief analy gained in those examples (paras 7-13), and, in conclusion, suggests a way forward.

Relations between FAO/WHO and the Commission as defined in Codex Statutes and Rules of Procedure

3. The Codex Alimentarius Commission was established by Resolution 12/61 of the FAO Conference in November 1961 and Resolution WHA16.42 of the World Health Assembly in May 1963. As the executive organ of the Joint FAO/WHO Food Standards Programme, the Commission is a joint body of FAO and of WHO. As far as FAO is concerned, the Commission is one of the bodies that fall under Article VI of the FAO Constitution.

4. The Statutes of the Codex Alimentarius Commission entered into force after adoption by the FAO Conference and by the World Health Assembly and were subsequently revised by the same in 1966 and 2006.³

¹ In accordance with Article 9 of the Statute, the Commission adopted its Rules of Procedure, which were

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Agenda Item 1

JOINT FAO/WHO FOOD STANDARDS PROGRAMME

CODEX ALIMENTARIUS COMMISSION

39th Session

FAO Headquarters, Rome, Italy, 27 June - 1 July 2016

PROVISIONAL AGENDA

Item	Subject	Document
1.	Adoption of the Agenda	
2.	Report by the Chairperson on the 71 st Session of the Executive Committee	
3.	Final adoption of Codex texts at Steps 8, 5/8 and 5A - Comments	
4.	Adoption of Codex texts at Step 5 - Comments	
5.	Revocation of Codex texts	
6.	Proposals for New Work	
7.	Discontinuation of Work	
8.	Amendments to Codex Standards and Related Texts	
9.	Codex Work Management and Functioning of the Executive Commi - Comments	
10.	Relations between FAO and WHO policies, strategies and guideline and Codex work	

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Agenda Item 10

JOINT FAO/WHO FOOD STANDARDS PROGRAMME

CODEX ALIMENTARIUS COMMISSION

39th Session

FAO Headquarters, Rome, Italy, 27 June - 1 July 2016

RELATIONS BETWEEN FAO AND WHO POLICIES, STRATEGIES AND GUIDELINES AND CODEX WORK¹

(Prepared by FAO and WHO)

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Meeting the challenge of new era for food security and nutrition

- ❑ Need to **look at the commitments seriously** – Making commitments is one thing, but being able to deliver on them has proven more problematic
 - Each decade had its solemn government pledges to eliminate hunger and reduce all forms of malnutrition
 - World declarations have increased in scope, details and multiple reaffirmation of concern and an updated “to do” list
 - Even when political commitment is present, there is little ‘buy-in’ from senior officials especially outside of health and agriculture

- ❑ Need to **strengthen capacities**
 - To understand and respond to the increasing complexity of food and nutrition policy development, programme designing and implementation

- ❑ Need to **strengthen evidence-informed policy-making**
 - Research should not be carried out in a vacuum
 - Evidence produced must be relevant to those working in the field
 - It has to form part of a linkage process, taking into account all the factors that might encourage or impede its usefulness in the domain of policy-making and decision-making

Meeting the challenge of new era for food security and nutrition

- ❑ Need for **bold action** to improve food environment and food system to meet nutrition challenge
 - Global context is changing and countries are ready
e.g. SSB taxation, Codex

- ❑ Need for **"revolutionary" interaction** among stakeholders
 - Each has a role to play and a responsibility to fulfil — scientists, governments, international, bilateral and nongovernmental organizations, the private sector, communities and individuals at the grassroots level



Through addressing these:

- ❖ *Could the Decade of Action serve as a tipping point for implementing coherent global policy action?*
- ❖ *What could G7 do to create this tipping point?*