



EUROPEAN
FEDERATION OF
THE ASSOCIATIONS
OF DIETITIANS



**International
Diabetes Federation**
Europe

Zsuzsanna Jakab
Regional Director for Europe
World Health Organization
Regional Office for Europe
Scherfigsvej 8
DK-2100 Copenhagen
Denmark

Brussels, 17 June 2013

Subject : WHO European Region Food and Nutrition Action Plan 2014-2020

Dear Dr Zsuzsanna Jakab,

On behalf of the public health community organisations, signatories to this letter, we would like to express our deep support for the WHO European Region Food and Nutrition Action Plan 2014-2020 currently under preparation. We strongly welcome this much-needed continuation of a strategic approach toward comprehensive food and nutrition policies in a Region characterized by an epidemic-proportion double burden of malnutrition¹. In this regard, we consider it an important decision reflecting a weighty commitment to eliminate avoidable diseases and premature deaths, advance health and reduce health inequalities among the European population.

As the largest network of European public health NGOs, EPHA participated in an open consultation on the development of the Action Plan for the years 2014-2020; and so did many of our member organisations. However, with this support letter we would like to reiterate the principles that we consider fundamental for the Plan to be guided by:

- (1) **Universal and equitable access to nutritious food** promoted by a full recognition of the Right to Food and Nutrition Security, attention to a **social gradient in health** and to a specific focus on

¹ Under- and over-nutrition, cancer, cardiovascular disease and diabetes

- addressing the needs of **disadvantaged, most vulnerable groups** unable to make healthy dietary choices, particularly under the pressures of the ongoing economic crisis;
- (2) Use of the best available evidence for comprehensive food and nutrition policies that consider the whole so-called *obesogenic food environment* – the **accessibility, availability, affordability and acceptability of food being essential determinants of their consumption**;
 - (3) Development or strengthening of integrated food and nutrition policies, including through legislation and regulation, **in** the following areas:
 - Food marketing restrictions (on advertising and other forms of commercial promotion), including on HFSS² products and breast milk substitutes
 - Labelling standards and regulations on the use of claims on foods
 - Food availability in specific settings
 - Pricing policies to address affordability of food
 - Food composition across food supply
 - Rules to create a healthy retail environment
 - Public information and awareness campaigns
 - Nutrition education and skills
 - Nutrition counselling in primary care
 - Coherence in policy across all sectors and stages of the food supply chain
 - (4) Evidence indicates that multiple-intervention strategies are likely to be the most effective and cost-effective approach, in particular strategies that target **marketing and advertising practices**, as well as the availability and affordability of food products which contribute to diets that promote or undermine people's health outcomes.
 - (5) Substantial evidence-base shows that **voluntary/self-regulation or codes of best practice** developed by the industry are limited in their ability to promote or protect public health goals. For example, in the area of marketing to children codes are often narrow in scope and apply weak criteria meaning that they have little impact on reducing children's total exposure to marketing of unhealthy food and drinks. In fact, self-regulation is most commonly adopted by industries under threat of legislation to deflect or distract governments from intervention or as an attempt to delay or pre-empt regulation. It is the role of government to set minimum rules to protect individuals and society from harm, in particular the most vulnerable of us. It is neither realistic nor good management to presume that businesses can set aside their legal responsibilities to shareholders in order to make decisive actions against their own business interests on issues that will affect consumption, therefore their sales and profits;
 - (6) Prioritise and ensure resources for the monitoring and evaluation of policy interventions;
 - (7) Establishment of adequate **mechanisms to safeguard against potential conflicts of interest and ensure transparency and accountable governance** for food and nutrition policies at international and national levels. We firmly believe that conflicts of interest in the development of policies should be recognised and addressed at the international level in order to support the development of adequate policies as well as effective and efficient programmes. This would contribute to public confidence in the ability of governments to efficiently address public health challenges;
 - (8) **The private sector and vested interests should not be involved in the development of nutrition and health polices**, although they have a key role in the implementation process.

² Products high in saturated fats, sugar and salt

On behalf of the European public health community, we would like to warmly thank you for putting this Action Plan high on the political agenda and for working towards defending public interests over economic profits as well as protecting the most vulnerable groups in our societies.

We offer you our continuous support and collaboration on this issue, and we look forward to an ambitious strategy for the forthcoming period.

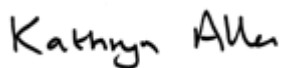
Yours sincerely,



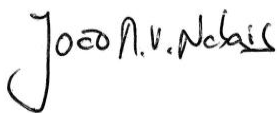
Archie Turnbull
President
European Public Health Alliance



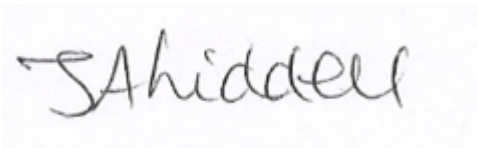
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