1. Introduction

1.1. This document highlights evolving policies and related matters of FAO and WHO that could be of interest or relevance to the work of Codex. This document does not cover the activities related to scientific advice reported in document CX/CAC 19/42/14.

2. Matters arising jointly from FAO and WHO:

2.1. The International Food Safety Conference

2.1.1. Under the overall theme “The future of food safety – Transforming knowledge into action for people, economies and the environment”, FAO and WHO contributed, together with the World Trade Organization (WTO) and the African Union (AU) to The First International Food Safety Conference in Addis Ababa, Ethiopia on 12-13 February 2019, as well as the International Forum on Food Safety and Trade in Geneva, Switzerland on 23-24 April 2019.

2.1.2. The two international events brought together more than 1500 food safety leaders from over 140 national governments and agencies, academia, international organizations and the private sector. They highlighted the integral role of food safety in achieving the 2030 Agenda for Sustainable Development, as well as in supporting the UN Decade of Action on Nutrition.

2.1.3. In Addis Ababa, participants discussed how to align food safety strategies and approaches across sectors and borders to tackle future food safety challenges resulting from ongoing changes in climate as well as in global food production and supply systems. Amongst others, topics of discussion were the importance of increasing the investment in sustainable and safe food systems as well as the accessibility of scientific advances, innovation and digitalization, leaving no one behind. The conference also highlighted the need to empower the consumer through improved and evidence-based health and nutrition information and education.

2.1.4. In Geneva, participants further discussed the trade related issues of food safety. The Forum highlighted the continued relevance of the Codex Alimentarius as the international reference point for food standards, both in relation to public health and to trade, as well as the interlinkages between trade and food safety. Amongst others, participants discussed the challenges and opportunities arising from rapid technological change and digitalization, as well as the importance of partnerships and cross-sectoral, international approaches to keep food safe for everyone.

2.1.5. The Codex Alimentarius Commission (CAC) could support utilizing the momentum created by the International Food Safety Conference for advancing and aligning food safety strategies globally. The next round of the FAO/WHO Regional Coordinating Committee sessions will be given a chance to identify follow-up actions to the International Food Safety Conference, including any initiatives within FAO and/or WHO.

2.1.6. The outcome documents and other information are available online.

1 This document has also been included in the agenda of CCEXEC77 under agenda item 9
2 https://www.who.int/food-safety/international-food-safety-conference/
2.2 World Food Safety Day

2.2.1. The first World Food Safety Day (WFSD), adopted by the United Nations General Assembly in December 2018\(^3\), will be celebrated on 7 June 2019 under the theme “Food Safety, everyone's business". FAO and WHO have been officially designated to facilitate the observance of the WFSD in collaboration with other relevant organizations. The WFSD provides an opportunity to promote awareness and inspire actions for improving access to and availability of safer food through enhanced intersectoral collaboration. More information is available online\(^4\).

2.3 FAO/WHO’s involvement in IAEA work on radionuclides

2.3.1. FAO/WHO and IAEA continue to work together through the Steering Group on Developing Guidance on the Control of Radionuclides in Food and Drinking Water in Non-Emergency Situations (a joint IAEA/FAO/WHO Project) to develop principles for harmonized guidance on radionuclide activity concentration values in food and drinking water, in continued cooperation with relevant international organizations and national authorities.

2.3.2. This work has supported the discussions in the Codex Committee on Contaminants in Foods (CCCF). CCCF13 agreed to prepare a discussion paper to increase understanding of the presence of radioactivity in feed and food under normal circumstances and enable the Committee to determine possible follow-up actions. The FAO/WHO and IAEA work is on-going, more data will be collected through GEMS/Foods and is expected to show first results in 2020.

2.4 UN Interagency Coordination Group (IACG) on Antimicrobial Resistance

2.4.1. The Interagency Coordination Group (IACG) on Antimicrobial Resistance was convened by the Secretary-General of the United Nations after the UN High-Level Meeting on Antimicrobial Resistance in 2016. The IACG brought together partners across the UN, international organizations and individuals with expertise across human, animal and plant health, as well as the food, animal feed, trade, development and environment sectors, to formulate a blueprint for the fight against antimicrobial resistance. The Secretariat for the IACG was provided by the WHO, with contributions from the FAO, and the World Organisation for Animal Health (OIE). In April 2019, the final report of the IACG was submitted to the Secretary-General of the United Nations, entitled “No time to wait: securing the future from drug-resistant infections”\(^5\).

2.5 UN Decade of Action on Nutrition 2016 - 2025

2.5.1. The first progress report on the UN Decade of Action on Nutrition (Nutrition Decade), which was released in 2018 and was conveyed by the UN Secretary-General to the UN General Assembly during its Seventy-second session, provides an overview of the progress made in implementing the Nutrition Decade, reflecting key developments at international, regional and country levels. Following the release of the report, a UNGA resolution was adopted (A/RES/72/306) on the implementation of the UN Decade of Action on Nutrition encouraging governments and other stakeholders to make ambitious commitments with a view to intensifying their efforts and scaling up their activities under the work programme of the Decade.

2.5.2. To guide countries to translate the policies and actions recommended in the voluntary ICN2 Framework for Action into more binding, concrete country-specific commitments for action, FAO and WHO jointly published “Strengthening nutrition action: a resource guide for countries based on the policy recommendations of the Second International Conference on Nutrition”\(^6\). A joint FAO and WHO policy brief on “Driving commitment for nutrition within the UN Decade of Action on Nutrition” sets out the drivers of commitment of people and organizations in support of actions for improved nutrition.

2.5.3. Increasingly, action networks, with global or regional scope, aimed at accelerating and aligning efforts around specific topics linked to an action area of the work programme of the Nutrition Decade are being established. Norway is leading a global action network aimed at accelerating and aligning efforts around nutrition labelling. The Network was established to exchange country experiences and good practices, share successes and challenges, and provide mutual support to accelerate implementation of effective nutrition labelling policies. The governments of France and Australia hosted the launching meeting in February 2019, which provided an opportunity for interested countries from different regions of the world to present their respective country situations and share their experiences. Countries also

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\(^6\) http://www.who.int/nutrition/publications/strengthening-nutrition-action/en/

\(^7\) http://www.who.int/nutrition/publications/decade-of-action-commitment-policybrief/en/

\(^8\) https://nettsteder.regjeringen.no/foodfromtheocean/
discussed the operational aspects of the Network including a joint work plan and next steps.

2.5.4. FAO and WHO are preparing for convening a midterm review of the Nutrition Decade in 2020, with the aim of assessing the achievements in actions taken to implement ICN2 recommendations and the Work Programme of the Decade.

2.5.5. A dedicated website for the UN Decade of Action on Nutrition is now available in all six UN languages9.

2.6 FAO/WHO International Consultation on Sustainable Healthy Diets

2.6.1. During a meeting held on 12 July 2017 in Geneva, Switzerland, the Directors-General of FAO and WHO agreed that the two agencies would work closer together in the area of Healthy Diets. A dialogue between WHO and FAO on what constitutes a healthy diet was proposed, which could contribute to the UN Decade of Action on Nutrition.

2.6.2. As a follow-up, a one day meeting was held on 14 December 2017 in Geneva between the two technical departments of FAO and WHO, and it was agreed to jointly organize an International Consultation on Sustainable Healthy Diets in July 2019 at FAO Headquarters. It is planned that the consultation will provide guiding principles on healthy diets that countries and citizens can follow to achieve nutritional well-being while at the same time ensuring sustainability.

3. Matters arising from FAO

3.1 Issues Arising from the 161st Session of FAO Council

3.1.1 Selected recommendations from the 161st Session of the FAO Council (April 2019) that could be of particular interest to the CAC are noted here. Additionally, selected activities involving strategic guidance on issues of importance to food safety have also been identified. Concise explanations of the issues noted in this Section are provided in the Section that follows.

3.1.2 The FAO Council:

- stressed the need for considering all approaches regarding sustainable agriculture and food systems in the preparation of the programme of work of the Organization;
- further requested that FAO increase the funding in the PWB 2020-21, through efficiencies and cost savings without negatively impacting the delivery of the agreed programme of work, or, if necessary, from the areas of technical de-emphasis to the extent feasible for: i) FAO’s work on the International Plant Protection Convention (IPPC) and on Joint FAO/WHO Scientific Advice Programme; and ii) mainstreaming biodiversity at FAO;
- endorsed the Finance Committee’s request to explore options to fully fund the joint FAO/WHO Scientific Advice Programme and the International Plant Protection Convention (IPPC) from future budgetary transfers and to present them at the November 2019 session of the Finance Committee for consideration and approval;
- highlighted the importance of addressing antimicrobial resistance (AMR) to contribute to the 2030 Agenda for Sustainable Development, and stressed the need for continued work and maintenance of current resource allocation for addressing AMR in agriculture in all regions; and,
- welcomed the continued work of FAO in addressing antimicrobial resistance (AMR), within the context of the One Health approach; agreed on the need for further support, through extrabudgetary resources, for the Tripartite collaboration between FAO, OIE and WHO for combatting AMR.

3.2 Concise explanation of FAO Policy and related issues of relevance to Codex

3.2.1 Sustainable agriculture and food systems

3.2.1.1. Considering the challenges ahead of ensuring the availability of safe and nutritious food for all, the sustainability of agriculture and food systems is a critical element to utilize and protect existing resources. Transforming current practices in food production to a sustainable model will require changes that may affect food safety and it will be critical to ensure that food safety is maintained and improved during those transitions and built into emerging sustainable production processes.

3.2.2 Sustainable funding for the joint FAO/WHO Scientific Advice Programme

3.2.2.1. While the 158th FAO Council had agreed to allocate a certain amount of unspent funds to the joint FAO/WHO scientific advice program (CX/CAC 18/41/17), the amount of unspent funds available did not trigger the stipulations of the council decision. The 161st Council has requested FAO to ensure adequate allocation of funds from its core budget and efforts are underway to secure such funds for the 2020-2021 biennium.

9 www.un.org/nutrition
3.2.3 AMR

3.2.3.1. Strengthening efforts to address AMR has again been confirmed as a critical activity for FAO; the need to perform all activities under the lens of One Health and in coordination with WHO and OIE has been noted, while recognizing that additional extrabudgetary funds are necessary to support the work of the Tripartite.

3.3 CFS: Voluntary Guidelines for food systems and nutrition

3.3.1. The Committee on World Food Security (CFS) is an inclusive international and intergovernmental platform for all stakeholders to work together to ensure food security and nutrition for all. The Committee reports to the UN General Assembly through the Economic and Social Council (ECOSOC) and to FAO Conference. At CFS45 in 2018, nutrition featured prominently on the agenda. The Committee endorsed the Terms of Reference for the preparation of the CFS Voluntary Guidelines on Food Systems and Nutrition, in support to the UN Decade of Action on Nutrition and recognized the importance of an inclusive process leading to the adoption of the Voluntary Guidelines, open to all interested stakeholders, which will be facilitated by the CFS Secretariat with the assistance of a Technical Task Team, under the guidance of the CFS Open-Ended Working Group on Nutrition.

3.3.2. The Voluntary Guidelines are expected to provide voluntary guidance to help countries operationalizing the ICN2 Framework for Action recommendations under the umbrella of the UN Decade of Action on Nutrition and the 2030 Agenda for Sustainable Development. The TORs include coverage of food safety and quality and also make reference to the use of all previously agreed Guidelines. The Codex “community” could therefore have significant interest in participating in this work. Updates on the progress of this work can be found at the CFS website.

3.4 Food safety in the context of eradication of hunger, food insecurity and malnutrition

3.4.1. Within the strategic framework of FAO, the first Strategic Programme (SP) is to “Contribute to the eradication of hunger, food insecurity and malnutrition”. With the increasing recognition of food safety and quality as essential contributors to food and nutrition security, various initiatives are underway under this SP to strengthen the understanding of decision makers of the need to consider food safety when devising food and nutrition policies, and vice versa. Among those, a specific policy guidance note is under finalization. In addition, a review on the interactions of food systems with malnutrition, including obesity and non-communicable diseases, climate change and biodiversity, has recently been launched. The role of the microbiome is being investigated and food safety related considerations are taken into account in this review. A proposal for a side event on this issue (to be held at the margins of the 46th session of the World Food Security Committee in October 2019) is currently under discussion.

3.5 Antimicrobial resistance

3.5.1. Two additional posts created in 2017 to support the implementation of the corporate AMR programme have been filled (P1 position based in AGAH and a P3 based in AGFF). FAO has also provided a post in the Inter Agency Coordination Group (IACG) secretariat, thereby supporting the activity of the IACG sub-groups in their development of recommendations for UN progress in tackling AMR.

3.5.2. FAO has collaborated with tripartite partners on the Monitoring and Evaluation framework on AMR, intended to assess delivery of the Global Action plan on AMR (GAP) and the resulting impact. The framework articulates the indicators for which data will be collated to measure progress. Publication, which follows an extensive consultation process with experts and Member States, will take place in May 2019. One of the core vehicles through which data will be collected against the indicators is the tripartite country self-assessment questionnaire, which has now completed the third round of responses, with data under analysis.

3.5.3. FAO is also contributing to compilation of the tripartite Development and Stewardship Framework; this framework will support the development, control, distribution and appropriate use of new antimicrobial medicines, diagnostic tools, vaccines and other interventions, while preserving existing antimicrobial medicines, and promoting affordable access to existing and new antimicrobial medicines and diagnostic tools, taking into account the needs of all countries and in line with the GAP. This framework is currently undergoing revision following a Member State consultation hosted by WHO last October.

3.5.4. In May 2018, a Memorandum of Understanding (MoU)11 was signed by the Directors General of FAO, OIE and WHO to formalize and strengthen cooperation on areas of work related to the human-animal-environment interface, including AMR. Following the signature of the MoU, FAO, OIE, WHO, in collaboration with the United Nations Environment Programme (UNEP) developed a concrete Tripartite Work Plan on AMR (2019-2020) in support of the GAP and subsequently endorsed at the Tripartite Executive Meeting in Rome (February 2019). The Tripartite Work Plan on AMR has five focus areas to be achieved through multi-sector

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collaboration and it recognizes the need for UNEP to join this collaboration. The implementation of the Tripartite Work Plan on AMR (2019-2020) will assist countries to address these areas while adopting a One Health approach. FAO is actively engaged with OIE, WHO and UNDP to establish an AMR Multi-Partner Trust Fund (AMR MPTF) to support the implementation of the Tripartite Work Plan on AMR and secure consistent financing for a five-year work programme.

3.5.5. The Assessment Tool for Laboratories and AMR Surveillance System (ATLASS)\textsuperscript{12} was developed to assist countries in assessing their national surveillance system and laboratory diagnostic capacity for AMR. ATLASS has been implemented in more than 20 countries in Asia, Africa, Europe and Central Asia and will continue to be rolled out to more countries. FAO is providing training on ATLASS to build regional communities of assessors.

3.5.6. In the ASEAN region FAO has developed regional surveillance guidelines which comprehensively describe methodologies for AMR surveillance in food-borne bacteria from healthy animals intended for food consumption (Guideline #1); Additional guidelines are under development; AMR surveillance in animal pathogens recovered from clinically or sub-clinically diseased livestock and poultry (Guideline #2), AMR surveillance in aquaculture (Guideline #3), AMR Monitoring in animal settings/environment (Guideline #4); and guidelines on AMU data collection at farm level (Guideline #5).

3.5.7. FAO has identified 9 institutions\textsuperscript{13} that have been (or are in the process of becoming) designated FAO AMR Reference Centre’s, which will support FAO and FAO Member States in the implementation of activities outlined in the FAO Action Plan. An additional four institutions\textsuperscript{14} were selected as candidates to FAO Reference Centers on Aquaculture Biosecurity (including AMU and surveillance for AMR).

3.5.8. To improve the knowledge on the impact of AMR in the environment, the FAO Animal Health Service (AGAH) and Land and Water Division (CBL) are collaborating with the Joint FAO/IAEA Division of Nuclear Techniques in Food and Agriculture (AGE) to develop an isotopic analytical toolbox that provides information on the movements and fate of antibiotics through soil and water.

3.5.9. FAO Development Law Service (LEGN) has developed a methodology to assess national AMR-relevant legislation in the food and agriculture sector, including veterinary legislation, food safety, AMR in crops, environment, water and waste. FAO and OIE are working collaboratively to further develop this methodology. The methodology has been applied in 18 countries of Africa\textsuperscript{15}, Asia\textsuperscript{16} and Central Asia\textsuperscript{17}, and will be implemented in 5 countries in Latin America\textsuperscript{18} before the end of 2019.

3.5.10. A Regional Workshop on Legislation and AMU/AMR was conducted in Bangkok in March 2018\textsuperscript{19}. The workshop brought together a community of regulators and experts from the region as well as WHO, OIE, and ASEAN. Regional workshops took place also on 11-12 December 2018 in South Africa, including participants from SADC countries, as well as in Ouagadougou, Burkina Faso, on 11 March 2019. Support is planned for similar workshops in other regions and sub-regions, with one aim being to consider where and how regional harmonization of legislation can support improved management of AMR.

3.5.11. FAO legal experts are working to identify AMR-relevant legislations and policies within and across countries and building a new AMR dataset of FAOLEX (a comprehensive database of national legislation and policy in all areas under FAO’s mandate). The new dataset will facilitate access and understanding of the different legal areas relevant for AMR. Based on the above experience, experts from LEGN are developing a legislative study on AMR-related legislation, including best practices and options to strengthen regulatory frameworks on AMR.

3.5.12. Approximately 12,500 legislative texts related to food safety and consumer protection are automatically harvested by the Codex Alimentarius site from FAOLEX. Data integration has been improved such that an additional 3,500 texts have been made available in 2019. Discussions are ongoing on how best to record and incorporate feedback from national Codex focal points.

\textsuperscript{12} http://www.fao.org/antimicrobial-resistance/resources/tools/atlass/en/

\textsuperscript{13} Institutions specific for AMR from: France, Denmark, Germany, Mexico, New Zealand, Senegal, Thailand, United Kingdom and United States of America.

\textsuperscript{14} Institutions on aquaculture and biosecurity from: China, India, United Kingdom and United States of America.

\textsuperscript{15} Kenya, Ghana, Ethiopia, Tanzania, Zambia, Zimbabwe, South Sudan

\textsuperscript{16} Lao, Cambodia, Philippines, Vietnam, Bangladesh

\textsuperscript{17} Armenia, Belarus, Kyrgyzstan, Kazakhstan, Tajikistan, Ukraine

\textsuperscript{18} Guatemala, Bolivia, Peru, Ecuador, Uruguay

\textsuperscript{19} http://www.fao.org/legal/development-law/magazine-1-2018/en/#fourth
3.5.13. FAO has published an AMR Policy Review and Development Framework for Asia and the Pacific\(^{20}\). The regional guide is intended for governments to review, update, and develop policies to address AMR and AMU in animal production.

3.5.14. FAO is working in resource-limited countries in Africa and Asia to develop behaviour change pilot projects promoting good practices and prudent use of antimicrobials.

3.5.15. FAO has developed a stepwise approach tool to address AMR based on the FAO Action Plan called the “Progressive Management Pathway” (PMP) to help Member States with developing and operationalizing multi-sector ‘One-Health’ National Action Plan (NAP) to combat AMR. To achieve an optimal and sustainable use of antimicrobials, PMP expresses stages and develops in-country competencies to improve progressively better actions for improving awareness, developing monitoring and surveillance capacity, strengthening governance, promoting good practices and the prudent use of antimicrobials. The first in-country piloting of the PMP was conducted in Ghana in March 2019\(^{21}\) to be followed by Belgium, Tajikistan and Cambodia.

3.5.16. FAO launched a new AMR case study series\(^{22}\) aimed at supporting countries to learn from one another and to share experiences on the responsible use of antimicrobials. The first of these publications focuses on Denmark’s transformation in swine production from a regulatory and public/private partnership and veterinary services perspective and launched in early 2019 by the FAO DG and the Danish Minister of Environment and Food\(^{23}\).

3.5.17. FAO HQ has conducted several expert consultations and published summary reports on antimicrobial use, resistance data, and consequences in horticulture, biocide use and antimicrobial resistance in food processing and antimicrobial residues and resistance in the environment\(^{24}\).

3.6 Evaluation of FAO Strategic Programme on Inclusive and Efficient Food Systems (SP4)

3.6.1. The Evaluation of Strategic Objective 4 (SO4) in 2017 stressed the importance of further extending an integrated approach to food system development through programmes designed to foster coordinated action across technical areas. One of the seven programmes that SP4 has formulated and is implementing in response to this recommendation is the “One Health” programme, which is a programmatic umbrella to promote multi-sectoral responses to food safety hazards in the value chain, risks from zoonotic diseases, AMR, and other threats at the human-animal-ecosystem interface.

3.6.2. The integrated food system approach being promoted under SP4 stresses the need to better understand and strengthen the coordination between the various public and private sector stakeholders at all levels: the individual value chain; at the national level through support to inter-ministerial coordination by assisting in the alignment of the strategies of concerned ministries and coordination between the public and private sectors and civil society; and at the global level in the negotiation of standards, agreements and voluntary guidelines. The approach promotes greater emphasis on coordination between the global, regional, national and local levels of food system governance, as well as support to strategic partnership platforms such as the 10YFP One Planet network on Sustainable Consumption and Production, in particular its Sustainable Food Systems Programme.

3.7 FAO Committee on Fisheries: guidance on social sustainability

3.7.1. In 2018, at the 33\(^{rd}\) Session of the FAO Committee on Fisheries (COFI), Member Countries decided that guidance on social sustainability should be developed in cooperation with relevant stakeholders, including industry and fish workers’ associations, building on the experience from the development of the OECD-FAO Guidance for Responsible Agricultural Supply Chains. The issue of social conditions and decent work was discussed for the first time at the 16\(^{th}\) Session of the FAO COFI Sub-Committee on Fish Trade with full consensus among Member Countries about the importance and relevance of human and labour rights.

3.7.2. In line with the mandate from COFI to promote social sustainability in fisheries and aquaculture value chains, a number of Dialogues are being organized this year to inform relevant stakeholders on the ongoing work of the draft FAO Guidance on Social Responsibility that is being developed for presentation to the FAO COFI Sub-Committee on Fish Trade (COFI-FT) in November 2019. These Dialogues provide a unique opportunity for FAO to present the draft guidance to stakeholders in the sector and for participants to provide feedback, comments, suggestions and inputs. Thus, concerns and gaps can be addressed, making the final document more inclusive and robust when submitted to COFI-FT. The report is available online\(^{25}\).

4. Matters arising from WHO

4.1 13th General Programme of Work

4.1.1. The 71st World Health Assembly (21-26 May 2018) adopted the 13th General Programme of Work, 2019-2023, (GPW13) which will guide the work of WHO through the two coming biennia (2020-2021 and 2022-2023), consistent with the UN 2030 Agenda for Sustainable Development and its 17 Sustainable Development Goals (SDGs). The accompanying WHO Impact Framework26 will monitor the WHO’s progress towards achieving the GPW13’s "Triple Billion" targets, focusing on measurable impact indicators for people’s health at the country level.

4.1.2. The Triple Billion targets are: 1 billion more people with universal health coverage, 1 billion better protected from health emergencies, and 1 billion enjoying better health and well-being primarily through multisectoral policy, advocacy and regulation. Each of the triple billion targets in the GPW13 will be measured with composite indices. In GPW13, food safety-related work is mapped in all three “Billions”. More information is available at on the WHO webpage27.

4.2 Programme Budget 2020-2021

4.2.1. A proposed Programme Budget 2020-202128 has been presented for adoption by the 72nd World Health Assembly (20-28 May 2019).

4.2.2. Food safety-related actions taken by WHO are mapped in the following Outputs:

- Output 1.3.5 - Appropriate measures taken to contain and reduce antimicrobial resistance in the food chain
- Output 2.1.3 - Building capacities to detect and respond to food contaminations/ foodborne disease outbreaks (INFOSAN)
- Output 3.1.2 - Country-oriented activities including the policy and advocacy work to mainstream food safety in the public health agenda, the estimation of the national burden of food borne diseases, the assessment of needs, improving monitoring of food contamination and surveillance of foodborne diseases,
- Output 3.2.1 - Implementation of country projects under the Codex Trust Fund.
- Output 3.3.2 Development of international food standards by the WHO/FAO Codex Alimentarius Commission based on the scientific advice provided by WHO and FAO.

4.3 Transformation of WHO

4.3.1. In March 2019, WHO announced the most wide-ranging reforms in the Organization’s history to modernize and strengthen the institution to play its role more effectively and efficiently as the world’s leading authority on public health.

4.3.2. The changes are designed to support countries in achieving the ambitious “triple billion” targets that are at the heart of WHO’s strategic plan for the next five years: one billion more people benefitting from universal health coverage (UHC); one billion more people better protected from health emergencies; and one billion more people enjoying better health and well-being.

4.3.3. These changes include:

- Aligning WHO’s processes and structures with the “triple billion” targets and the Sustainable Development Goals by adopting a new structure and operating model to align the work of headquarters, regional offices and country offices, and eliminate duplication and fragmentation.
- Reinforcing WHO’s normative, standard-setting work, supported by a new Division of the Chief Scientist and improved career opportunities for scientists.
- Harnessing the power of digital health and innovation by supporting countries to assess, integrate, regulate and maximize the opportunities of digital technologies and artificial intelligence, supported by a new Department of Digital Health.
- Making WHO relevant in all countries by overhauling the Organization’s capabilities to engage in strategic policy dialogue. This work will be supported by a new Division of Data, Analytics and Delivery to significantly enhance the collection, storage, analysis and usage of data to drive policy change in

27 https://www.who.int/about/what-we-do/gpw-thirteen-consultation/en/
countries. This division will also track and strengthen the delivery of WHO’s work by monitoring progress towards the “triple billion targets” and identifying roadblocks and solutions.

- Investing in a dynamic and diverse workforce through new initiatives including the WHO Academy, a proposed state-of-the-art school to provide new learning opportunities for staff and public health professionals globally. Other measures include a streamlined recruitment process to cut hiring time in half, management trainings, new opportunities for national professional officers, and previously-announced improvements in conditions for interns.
- Strengthening WHO’s work to support countries in preventing and mitigating the impact of outbreaks and other health crises by creating a new Division of Emergency Preparedness, as a complement to WHO’s existing work on emergency response.
- Reinforcing a corporate approach to resource mobilization aligned with strategic objectives and driving new fundraising initiatives to diversify WHO’s funding base, reduce its reliance on a small number of large donors and strengthen its long-term financial stability.

4.3.4. WHO’s new corporate structure is based on four pillars which will be mirrored throughout the organization.

4.3.5. The Programmes pillar will support WHO’s work on universal health coverage and healthier populations. The Emergencies pillar will be responsible for WHO’s critical health security responsibilities, both in responding to health crises and helping countries prepare for them. The External Relations and Governance pillar will centralize and harmonize WHO’s work on resource mobilization, communications. The Business Operations pillar will likewise ensure more professionalized delivery of key corporate functions such as budgeting, finance, human resources and supply chain.

4.3.6. Food safety and nutrition, which were both in the Non-Communicable Diseases and Mental Health Cluster, have been brought under the UHC/Healthier Populations Division and are expected to be merged in a single department.

4.4  Relations with the International Agency for Research on Cancer (IARC)

4.4.1. At the IARC (International Agency for Research on Cancer) Governing Council Meeting on 16-18 May 2018, coordination and communication mechanisms between IARC and WHO/HQ at management and working level was discussed and an Interim Standard Operating Procedure (SOP) was endorsed as a basis for improving coordination between IARC and WHO/HQ on assessments of hazards and risks, and on the communication. The SOP will be updated based on further consultation and experience gained in its application.


4.5  Antimicrobial resistance

4.5.1. The 72nd World Health Assembly in May 2019 considered the Director-General’s report31 containing an update on the implementation of resolution WHA68.7 (2015)32 concerning the global action plan on antimicrobial resistance and the United Nations General Assembly resolution 71/3 (2016)33 concerning the political declaration of the high-level meeting of the General Assembly on antimicrobial resistance. The Assembly WHA adopted a resolution recommended by the Executive Board in resolution EB144.R11,34 which reiterates the need to address antimicrobial resistance through a coordinated, multisectoral, One Health approach.

4.5.2. The WHO Advisory Group on Integrated Surveillance of Antimicrobial Resistance (AGISAR) had its 8th meeting on 24–26 November 2018 in Utrecht, the Netherlands. It produced a revised list of critically important antimicrobials for human medicine (6th revision), which was published in May 201935. The entire work of the 8th meeting will be published36. Building on the achievements of AGISAR, a WHO/FAO/OIE Tripartite

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30 https://www.thelancet.com/journals/lanonc/article/PIIS1470-2045(19)30246-3/fulltext
35 https://www.who.int/foodsafety/publications/antimicrobials-sixth/en/
36 https://www.who.int/foodsafety/areas_work/antimicrobial-resistance/agisar/en/
Advisory Group on Intersectoral Support on AMR (T-AGISAR) is being constituted and its first meeting is expected to take place in the second half of 2019.

4.6  Third High-level Meeting of the United Nations General Assembly on the Prevention and Control of Non-communicable Diseases (New York, September 2018)

4.6.1. At this General Assembly meeting the Heads of State and Government committed to, inter alia: i) strengthen their commitment, as Heads of State and Government, to provide strategic leadership for the prevention and control of non-communicable diseases; ii) promote and implement policy, legislative and regulatory measures, including fiscal measures as appropriate, aiming at minimizing the impact of the main risk factors for non-communicable diseases, and promote healthy diets and lifestyles; iii) invite the private sector to further produce and promote food products consistent with a healthy diet, making further efforts to reformulate them in order to provide healthy and nutritious options, reducing the excessive use of salt, sugars and fats, in particular saturated fats and trans-fats; iv) invite the private sector to provide appropriate content information of those nutrients, bearing in mind international guidelines on nutrition labelling; v) invite the private sector to commit to further reduce the exposure of children to and impact on them of the marketing of foods and beverages high in fats, in particular saturated fats and trans-fats, sugars or salt, consistent with national legislation, where applicable.

4.7  WHO Nutrition Guidance Expert Advisory Group (NUGAG) Subgroup on Diet and Health

4.7.1. Carbohydrates, polyunsaturated fatty acids, and dietary patterns:

4.7.1.1. The NUGAG subgroup on Diet and Health finalized evidence-informed recommendations for carbohydrates (including dietary fibre) and polyunsaturated fatty acids (including EPA and DHA), taking into consideration not only the quality of evidence, but additional criteria including the balance of evidence on benefits and harms, values and preferences, resource implications, priority of the problems, equity and human rights, acceptability and feasibility. Several of the systematic reviews serving as the evidence base for formulation of recommendations have recently been published, including: three Cochrane reviews covering polyunsaturated fatty acids, and two covering carbohydrates, including a review published in The Lancet. Several additional reviews will be published in 2019. Regarding dietary patterns, the NUGAG Subgroup reviewed the results from the initial systematic review which is now currently being finalized, for review and discussion at the 13th meeting of the NUGAG Subgroup on Diet and Health to be held in Qingdao, China in early December 2019.

4.7.2. Saturated fatty acids, trans-fatty acids and total fat

4.7.2.1. A public consultation on the draft WHO guidelines on saturated fatty acid intake and trans-fatty acid intake in adults and children was held in May 2018. Comments have been reviewed and the guidelines are now being finalized for release in 2019. Similarly, a public consultation and subsequent release of the WHO guideline on total fat intake in adults and children are planned for 2019.

4.7.3. Non-sugar sweeteners

4.7.3.1 A public consultation and subsequent release of the WHO guideline on non-sugar sweetener use in adults and children are planned for 2019.


4.8.1 To help implement the development of evidence-informed policy guidance and measures to support Member States in creating an enabling food environment to promote healthy diets and nutrition, WHO established the WHO Nutrition Guidance Expert Advisory Group (NUGAG) Subgroup on Policy Actions, which will work alongside the NUGAG Subgroup on Diet and Health. The NUGAG Subgroup on Policy Actions will initially focus on developing three guidelines on policy actions, namely nutrition labelling policies, policies to restrict food marketing to children and fiscal policies to promote healthy diets. Developing guidelines on policy actions to promote healthy diets and nutrition will contribute greatly to the implementation of the UN Decade of Action on Nutrition (2016-2025), which aims to increase action at the national, regional and global levels to achieve commitments of the outcome documents of the second International Conference on Nutrition (ICN2). It will also contribute to achieving commitments of the Political Declaration of the third high-level meeting of the General Assembly on the prevention and control of non-communicable diseases, and ultimately the health- and nutrition-related Sustainable Development Goals (SDGs).

4.8.2. The first meeting of the NUGAG Subgroup on Policy Actions was held in Geneva, Switzerland on 11-14 December 2018. At this 1st meeting the NUGAG Subgroup discussed and finalized the scope and PICO questions to guide the undertaking of the systematic reviews and subsequently to formulate the recommendations for the policy guidelines. All systematic reviews are currently being conducted. Additional reviews are underway on the balance of evidence on benefits and harms, values and preferences, resource implications, equity and human rights, acceptability and feasibility of implementing the defined policies. The second meeting of the NUGAG Subgroup on Policy Actions is scheduled to be held in Qingdao, China in mid-
December 2019, with the objective to review and discuss the results of the systematic reviews and formulate recommendations. It is also planned to discuss and finalize the scope and PICO questions for undertaking evidence review related to school food and nutrition policies.

4.9 Updating of nutrient requirements for infants and young children under the age of 3 years

4.9.1 WHO has initiated the process of preparing to update the nutrient requirements for infants and young children under the age of 3 years. The process includes identification of existing recommended nutrient requirements and physiological bases used in setting up those requirements in different countries through compiling an extensive list of national dietary guidelines from the countries in all regions. WHO has also reviewed the recent scientific literature on both macronutrients and micronutrients. Based on the results of the literature review and compilation of national dietary guidelines, nutrients have been prioritized for updating. Currently a scoping document is being prepared to guide the preparation of required systematic reviews to assess the existing evidence for updating these nutrient requirements. Discussions are underway between FAO and WHO to undertake this update jointly in 2019.


4.10.1. The report of the second Global Nutrition Policy Review based on information and data provided by 176 Member States (91%) and one area was published in November 201837. Summary results were reported to the 70th World Health Assembly (WHA) in May 2018 as requested by WHA resolution 68.19 and also WHA decision 68(14). Results were also used in the Secretary-General’s report to the 72nd UNGA session on the implementation of the United Nations Decade of Action on Nutrition (2016–2025). More than 5,000 individual country data compiled through the Review have been uploaded to the WHO Global database on the Implementation of Nutrition Action (GINA) to update respective country information.

4.11 Elimination of industrially produced trans-fatty acids

4.11.1. Elimination of industrially produced trans-fatty acids (iTFA) from the global food supply by 2023 is a priority target of the WHO’s 13th General Programme of Work (GPW13) which guides the work of WHO during 2019 – 2023.

4.11.2. REPLACE Action Package: In May 2018, WHO launched the REPLACE action package which provides a strategic approach to eliminating iTFA from national food supplies, with the goal of global elimination by 2023. The REPLACE action package comprises an overarching technical document that provides a rationale and framework for this integrated approach to iTFA elimination, along with six modules and additional web resources38 (which will be launched in May 2019), to facilitate implementation.

4.11.3. The REPLACE modules provide technical background information and propose practical steps to support governments to achieve elimination of iTFA from their national food supply. To achieve successful elimination, governments should pass best practice legal measures (outlined in the L and E modules). The information and practical steps outlined in the other modules, can be used to support the process of iTFA elimination, as necessary.

4.11.4. Expert Consultation on Trans-Fatty Acid Assessment: The Expert Consultation on Trans-Fatty Acid Assessment was held in Geneva, Switzerland on 11–12 October 2018. The Consultation reviewed laboratory protocols for measuring trans-fatty acids (TFA) exposure in humans and TFA content in food and surveillance tools for countries to use in monitoring TFA intake in the population and TFA content in food supply with a view to increasing comparability of TFA data to monitor the impact of public health interventions and to track changes over time. These protocols and surveillance tools will be made available as part of the REPLACE modules and web resources in May 2019.

4.11.5. REPLACE Progress Report: Countdown to 2023: An annual progress report is being prepared to track progress in taking actions to achieve the global target for eliminating iTFA by 2023. The report will describe the current global, regional and national situations and changes over the past year; track progress of key policy outcomes and milestones; discuss challenges and opportunities for future action; highlight enablers and challenges of country-level elimination; and recommend strategic priorities for the next 12 months to achieve the 2023 target. The report will also highlight a number of countries that had undertaken assessments to develop country roadmaps for the complete and sustained elimination of iTFA from their national food supplies, building on the REPLACE action package. The report is scheduled to be released at the time of the 72nd World Health Assembly which will take place on 20 – 28 May 2019.

4.12 Alcohol

38 http://www.who.int/nutrition/topics/replace-transfat
4.12.1. WHO launched the Global Status Report on Alcohol and Health 2018 at the time of the UN General Assembly in New York in September 2018. The report provides:

- Data on relevance of reducing the harmful use of alcohol to Sustainable Development Goals 2030
- Currently available global policy and monitoring frameworks, strategies, and action plans
- Detailed information on the consumption of alcohol in populations, the health consequences of alcohol consumption and policy responses at global and regional levels and groups of countries with different income levels
- Trends in alcohol consumption and alcohol-related mortality and morbidity according to indicators included in the global monitoring frameworks
- Country profiles of the WHO Member States

4.12.2. The information presented in the report also address the labelling of alcoholic beverages. Countries most frequently report the requirement that alcoholic beverage labels should disclose the alcohol content (i.e. percentage of pure alcohol) of the beverage. This information is required for beer in 122 responding countries, for wine in 119 countries, and for spirits in 120 countries. High-income (85%) and low-income countries (80%) were more likely to report requiring labelling the alcohol content than middle-income countries (65-70%, depending on the beverage type).

4.12.3. Of the 164 responding countries, less than a third (47) mandated health and safety warning labels on bottles or containers.

- Of the 65 responding countries requiring either warning labels on advertisements for alcohol and/or on alcohol bottles or containers
- 23 have a legal requirement regarding the size of the warning label
- Warning labels often focus on underage drinking (41 countries) or drink–driving (31 countries)
- Only seven countries require rotation of the warning label text.

4.12.4. More information can be found on the WHO webpage³⁹.

4.12.5. WHO has also introduced in September 2018 a new alcohol control initiative called “SAFER”, to prevent and reduce alcohol-related deaths and disability. This WHO-led initiative aims to support global target of reducing harmful use of alcohol by 10% by 2025. The initiative outlines five high-impact strategies that can help governments reduce the harmful use of alcohol and related health, social and economic consequences;

- Strengthen restrictions on alcohol availability.
- Advance and enforce drink driving countermeasures.
- Facilitate access to screening, brief interventions, and treatment.
- Enforce bans or comprehensive restrictions on alcohol advertising, sponsorship, and promotion.
- Raise prices on alcohol through excise taxes and pricing policies.

4.12.6. The SAFER initiative includes three interlinked components to support country implementation:

- a WHO action package of effective alcohol policy and programme interventions;
- a WHO/UN-led programme focusing on country action; and
- a multi-stakeholder communications and advocacy campaign.

4.12.7. More information for SAFER can be found on the WHO webpage⁴⁰.

4.13 WHO Collaborating Centres

4.13.1. WHO’s activity is often supported or complemented by WHO Collaborating Centres (WHOCCs) which provide a diverse range of activities such as providing expert advice, collecting data for a report, organizing a meeting or developing a guideline.

4.13.2. The WHOCC global database (http://www.who.int/whocc/) is the official source of information on all WHOCCs. WHOCCs dealing with food safety and nutrition are listed in Annex I.

5. Recommendations

5.1. The Committee/Commission is invited to note the information given in this document and take necessary actions to best take into consideration of the policies of the parent organizations.

⁴⁰ https://www.who.int/substance_abuse/safer/en/
### Annex I List of WHO Collaborating Centres in Food Safety and in Nutrition

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<tr>
<th>CC Nr</th>
<th>Title</th>
<th>Institution</th>
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<th>Subjects</th>
<th>Types of Activity</th>
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<td>AUS-80</td>
<td>WHO Collaborating Centre for Obesity Prevention</td>
<td>Global Obesity Centre at the Centre for Population Health Research, Faculty of Health, Deakin University</td>
<td>Australia</td>
<td>Nutrition Noncommunicable diseases (NCDs) other than those specifically mentioned Diabetes</td>
<td>Research Providing technical advice to WHO Training and education</td>
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<td>AUS-110</td>
<td>WHO Collaborating Centre on Population Salt Reduction</td>
<td>The Food Policy Division, The George Institute for Global Health</td>
<td>Australia</td>
<td>NCDs other than those specifically mentioned Nutrition Health promotion &amp; education</td>
<td>Providing technical advice to WHO Implementation of WHO programmes and activities at country level Collection and collation of information</td>
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<td>CAN-87</td>
<td>WHO Collaborating Centre for Nutrition Policy for Chronic Disease Prevention</td>
<td>Department of Nutritional Sciences (DNS), University of Toronto</td>
<td>Canada</td>
<td>Cardiovascular diseases Nutrition Research policy and development</td>
<td>Research Providing technical advice to WHO Training and education</td>
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<td>CAN-98</td>
<td>WHO Collaborating Centre on Nutrition Changes and Development</td>
<td>Department of Nutrition, Faculty of Medicine, Université de Montréal</td>
<td>Canada</td>
<td>Nutrition NCDs other than those specifically mentioned</td>
<td>Research Evaluation Product development (guidelines; manual; methodologies; etc.)</td>
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<td>CHN-24</td>
<td>WHO Collaborating Centre for Food Contamination Monitoring</td>
<td>China National Center for Food Safety Risk Assessment (CFSA)</td>
<td>PR China</td>
<td>Food safety Chemical safety Environmental health and hazards other than those specifically mentioned</td>
<td>Collection and collation of information Information dissemination Outbreaks and emergencies</td>
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<td>WHO Collaborating Centre for Centre for Risk Analysis of Chemicals in Food</td>
<td>Centre for Food Safety, Food and Environmental Hygiene Department (Hong-Kong)</td>
<td>PR China</td>
<td>Food safety Nutrition</td>
<td>Collection and collation of information Training and education Organization of events (e.g. conferences; summits)</td>
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<td>WHO Collaborating Center for Research and Training on Parasitic Zoonoses</td>
<td>Section for Parasitology and Aquatic Pathobiology, Department of Veterinary and Animal Sciences, Faculty of Health and Medical Sciences, University of Copenhagen</td>
<td>Denmark</td>
<td>Neglected Tropical Diseases other than those specifically mentioned Zoonoses Food safety</td>
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<td>WHO Collaborating Centre for Antimicrobial Resistance and Foodborne Pathogens and Genomics</td>
<td>Division of Genomic Epidemiology, National Food Institute, Technical University of Denmark</td>
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<td>WHO Collaborating Centre for Listeria</td>
<td>Department of Infection and Epidemiology - &quot;Microorganisms and host barriers&quot; Group, Institut Pasteur</td>
<td>France</td>
<td>Food safety Bacterial diseases other than those specifically mentioned Health systems research &amp; development</td>
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<td>WHO collaborating Center for Typing and Antibiotic Resistance of Salmonella</td>
<td>Unité de Recherche et d'Expertise des Bactéries Pathogènes Entériques Institut Pasteur</td>
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<td>Division of Biometry and data Management, Institute for Epidemiology and Prevention Research - BIPS</td>
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<td>WHO Collaborating Centre for Research and Training for Health at the Human-Animal-Environment Interface</td>
<td>Department of Biometry, Epidemiology and Information Processing, University of Veterinary Medicine Hannover</td>
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<td>WHO Collaborating Centre for Nutrition and Health</td>
<td>Unit of Nutritional Epidemiology and Nutrition in Public Health, University of Athens Medical School</td>
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<td>WHO Collaborating Centre for Research on Nutrition and Food Technology</td>
<td>Faculty of Nutrition and Food Technology, National Nutrition &amp; Food Technology Research Institute (NNFTRI)</td>
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<td>WHO Collaborating Centre for Nutrition and Physical Activity</td>
<td>Unit for International Collaboration on Nutrition and Physical Activity, National Institute of Health and Nutrition</td>
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<td>KAZ-10</td>
<td>WHO Collaborating Centre in Kazakhstan for Nutrition</td>
<td>Institute of International Projects Kazakhstan Academy of Nutrition</td>
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<td>National Institute for Public Health and the Environment (RIVM)</td>
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<td>Department of Infectious Diseases and Immunology, Faculty of Veterinary Medicine, University of Utrecht</td>
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<td>WHO Collaborating Centre for Nutrition and Childhood Obesity</td>
<td>Food and Nutrition Department National Institute of Health Dr Ricardo Jorge</td>
<td>Portugal</td>
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<td>THA-47</td>
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