



JOINT FAO/WHO FOOD STANDARDS PROGRAMME

CODEx ALIMENTARIUS COMMISSION

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MATTERS ARISING FROM FAO AND WHO¹

(Prepared by WHO)

1. Matters arising from WHO

1.1 2nd Global Nutrition Policy Review (2016 – 2017)

Following the first Global Nutrition Policy Review (2009 - 2010) (http://www.who.int/nutrition/publications/policies/global_nut_policyreview/en/), WHO conducted the second Global Nutrition Policy Review (GNPR2) in 2016 – 2017. 177 countries (91%) responded to the Review. The outcomes of the GNPR2 help taking stock on the progress towards achieving the commitments of the ICN2 Rome Declaration and also serve as a baseline for monitoring country actions to achieve the aims of the Decade of Action for Nutrition (2016 – 2025). Summary results were reported to the 70th World Health Assembly (WHA) in May 2017 as requested by WHA resolution 68.19 and also WHA decision 68(14). The final report is currently being prepared for publication. All individual country data will be uploaded to the WHO Global database on the Implementation of Nutrition Action (GINA) as soon as the report is released.

1.2 WHO Global database on the Implementation of Nutrition Action (GINA)

In the context of the Decade of Action on Nutrition (2016 - 2025), countries and partners are encouraged to make SMART commitments. These are either new commitments or strengthened existing commitments which are already included in countries' existing national policies. To monitor these SMART commitments and track their implementation, WHO/FAO are currently developing a repository to be integrated within the WHO Global database on the Implementation of Nutrition Action (GINA) (<https://extranet.who.int/nutrition/gina/>). GINA, which was launched in 2012, currently contains more than 1,800 national policies and 2,500 programme actions being implemented in countries. These data come from three sources, notably WHO's regular monitoring activities (e.g. surveys, reports from WHO Regional/Country Offices, desk reviews), information from partners (that maintain databases of nutrition related policies or that support the implementation of nutrition programmes and actions in countries), and information by registered users through a wiki-approach.

1.3 Global Nutrition Monitoring Framework to track progress of Global Nutrition Targets

1.3.1 In 2014, Member States approved the Global Nutrition Monitoring Framework (GNMF) on Maternal, Infant and Young Child Nutrition, including six core outcome indicators to track progress against the six Global Nutrition Targets adopted by the World Health Assembly in 2012. The monitoring framework has a core set of indicators, to be reported by all countries and an extended set of indicators, from which countries can draw to design national nutrition surveillance systems fitting their specific epidemiological patterns and programme decisions. Countries are recommended to include within their national monitoring framework the core set of 21 indicators contained within the GNMF.

1.3.2 Timely and credible data are essential for governments and other stakeholders for decision-making, better use of resources and efficient implementation of programmes that address nutrition priorities. In collaboration with other health and environmental sectors and the WHO-UNICEF Technical Expert Advisory group on nutrition Monitoring (TEAM), WHO has developed operational guidance for 21 GNMF indicators so that the Global Nutrition Targets can be monitored systematically across countries. The operational guidance manual will be available by end of 2017. Furthermore, WHO provides technical support to countries through national and regional workshops, followed by more in-depth collaboration, to help them to align their national nutrition monitoring framework with the GNMF indicators. This is important to move towards operationalization

¹ This document has also been included in the agenda of CCEXEC75 under agenda item 12.1

of better monitoring and reporting at the country-level so that effects of nutrition programmes can be measured and used in a timely way to improve programmes and also contribute to better monitoring of the global nutrition targets and other indicators of the GNMf.

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

At the 11th meeting held in Brijuni, Croatia in July 2017, the NUGAG Subgroup reviewed and discussed the results of the final systematic reviews of the evidence related to the intake of CHO (in particular, fibre and starch), non-sugar sweeteners and PUFA (including EPA and DHA) and formulated evidence-informed recommendations for all three topics. This included detailed discussion of criteria in (in addition to the quality of the evidence) to be considered when moving from evidence to recommendations (i.e. the balance of evidence on benefits and harms, values and preferences, resource implications, priority of the problems, equity and human rights, acceptability and feasibility). The guidelines on CHO, non-sugar sweeteners and PUFA are being drafted by the WHO Secretariat while waiting for all the background systematic reviews to be published. Regarding dietary patterns, the NUGAG Subgroup discussed several methodological approaches that could be used to assess dietary patterns, taking into consideration the definition and characteristics determined at the 9th meeting of the NUGAG Subgroup on Diet on Health. Currently the work is underway to undertake systematic reviews.

1.5 WHO Nutrition Guidance Expert Advisory Group (NUGAG) Subgroup on Policy Actions

WHO issued call for experts in April – May 2017 to identify experts to serve as members of the WHO Nutrition Guidance Expert Advisory Group (NUGAG) Subgroup on Policy Actions, which will work alongside the NUGAG Subgroup on Diet and Health to develop evidence-informed policy guidance and measures to support Member States in developing enabling policy environments to promote healthy diet and nutrition and prevent obesity and diet-related NCDs. NUGAG Subgroup on Policy Action will start guideline development in 4 policy action areas (i.e. nutrition labelling, fiscal policies, marketing and trade and investment). Preparations for these scoping documents are currently underway and it is planned that the first meeting of the NUGAG Subgroup on Policy Action will take place later in 2018.

1.6 WHO draft guidelines: Saturated fatty acids and trans-fatty acids intake in adults and children

WHO launched a public consultation on its draft Guidelines: Saturated fatty acid and trans-fatty acid intake for adults and children on 4 May 2018 (<http://www.who.int/nutrition/topics/sfa-tfa-public-consultation-4may2018/en/>). The development of these draft guidelines is part of WHO's efforts to update dietary goals for the prevention of NCDs, established in 1989 by the WHO Study Group on Diet, Nutrition and Prevention of Noncommunicable Diseases and later updated by the 2002 Joint WHO/FAO Expert Consultation on Diet, Nutrition and the Prevention of Chronic Diseases. WHO has previously released guidelines on intake of sodium, potassium and free sugars and development of guidelines on intake of total fat, polyunsaturated fatty acids, carbohydrates other than sugars (including starch quality, dietary fibre and fruits and vegetables), non-sugar sweeteners and dietary patterns is underway. The public consultation is open until 1 June 2018.

1.7 WHO guideline: Protecting, promoting and supporting breastfeeding in facilities providing maternity and newborn services

This guideline provides global, evidence-informed recommendations on protection, promotion and support of optimal breastfeeding in facilities providing maternity and newborn services, as a public health intervention. It is intended to contribute to discussions among stakeholders when selecting or prioritizing appropriate actions in their efforts to achieve the Sustainable Development Goals and the global targets for 2025 as put forward in the Comprehensive implementation plan on maternal, infant and young child nutrition, endorsed by the Sixty-fifth World Health Assembly in 2012, in resolution WHA65.6, the Global strategy for women's, children's, and adolescents' health (2016–2030), and the Global Strategy for infant and young child feeding. The document presents the key recommendations, a summary of the supporting evidence and a description of the considerations that contributed to the deliberations and consensus decision-making.

1.8 WHO guideline: Assessing and managing children at primary health-care facilities to prevent overweight and obesity in the context of the double burden of malnutrition. Updates for the integrated management of childhood illness (IMCI)

As part of its response to the global epidemic of obesity, WHO has issued guidelines to support primary healthcare workers identify and manage children who are overweight or obese. Specifically, all infants and children aged less than 5 years presenting to primary health-care facilities should have both weight and height measured in order to determine their weight-for-height and their nutritional status according to WHO child growth standards. Comparing a child's weight with norms for its length/height is an effective way to assess for both wasting and overweight. Where infants and children are identified as overweight, WHO recommends providing counselling to parents and caregivers on nutrition and physical activity including promotion and support for exclusive breastfeeding in the first 6 months and continued breastfeeding until 24 months or beyond. If children are obese, they should be further assessed and an appropriate management plan should be developed. This can be done by a health worker at primary health-care level, if adequately trained, or at a referral clinic or local hospital. Additionally, moderate wasting and stunting are potential risk factors for children becoming overweight or obese. Within these populations, and until there is a more definitive evidence base, to avoid increasing the risk of overweight and obesity WHO recommends not to provide formulated supplementary foods on a routine basis to children who are moderately wasted or stunted.