Global Alliance for the Future of Food: Consultation Response to the Voluntary Guidelines on Food Systems and Nutrition  
Dated 3rd February 2020

The Global Alliance for the Future of Food welcomes this opportunity to respond to this consultation. We welcome further dialogue and if you have any further questions with regards to our response please contact Patty Fong on patty@futureoffood.org or Mark Driscoll on mark@tastingthefuture.com.

About the Global Alliance for the Future of Food
The Global Alliance for the Future of Food is a strategic alliance of philanthropic foundations working together and with others to transform global food systems now and for future generations. We believe in the urgency of transforming global food systems, and in the power of working together and with others to effect positive change. Food systems reform requires that we craft new and better solutions at all scales through a systems-level approach and deep collaboration among philanthropy, researchers, grassroots movements, the private sector, farmers and food systems workers, Indigenous Peoples, government, and policymakers. Our work is guided by a set of seven principles that we believe are key to food systems transformation: healthy, equitable, resilient, diverse, renewable, inclusive and interconnected.

Our Work on Scaling Policy and Practice across the Food-Health Nexus
One of our four key programs of work focusses on Health and Well-being, in particular the ‘food – health’ nexus. This is a programme of work which aims to amplify the fundamental role that food systems play in creating health and well-being in human, animal and ecological health, making the impact of food systems on health and well-being more visible. Through our work on Health and Wellbeing we aim to see that:

a) Knowledge of and evidence for the positive and negative health externalities of food systems is bolstered leading to systemic solutions toward truly healthy, sustainable food systems.

b) Current policies that undermine healthy food systems and new policies that promote health are identified, highlighted, and promoted in order to encourage support for sustainable food and agriculture systems.

During the last 12 months we have been working with Tasting the Future on an iterative stakeholder led engagement process, involving over 100 stakeholders across food and health systems, to co-create a vision and narrative and identify key policies and practices that promote good human, animal and ecological health. Our insights and responses to this consultation draw widely from this work and our initial report entitled ‘Unravelling the Food-Health Nexus: Addressing practices, political economy, and power relations to build healthier food systems.’
The report identifies five key channels through which food systems impact health:

i) Occupational hazards
ii) Environmental contamination
iii) Contaminated, unsafe, and altered foods
iv) Unhealthy dietary patterns.
v) Food insecurity

It emphasizes the need to explore the social, structural, and environmental determinants of health associated with food systems, and identifies five co-dependent leverage points for building healthier food systems including: Promoting food systems thinking; Reasserting scientific integrity and research as a public good; Bringing the alternatives to light; Adopting the precautionary principle; and, Building integrated food policies under participatory governance.

Our more recent work has identified a set ecological, cultural and physical determinants of good health, started to explore a set indicators for good health and a set of recommended policies required to achieve good human and ecological health outcomes. We have also co-created, with a wide range of health and food system partners, a draft vision, narrative and characteristics of a food system re-orientated to regenerate positive health outcomes (We attach this in Appendix 1)

**Our General Observations/Comments to the draft VGFSyN**

Overall, we believe this is a good first draft, covering many of the policy and state level opportunities to improve nutritional and ecological health outcomes, as identified through our own food system actor engagement process. The following are a few overall comments relating to the framing, language used or issues we think the Voluntary Guidelines on Food Systems and Nutrition (VGFSyN) should cover in more detail.

1) **Ecological health narrative** – Overall there are good links with climate but an area we felt could be improved was the overarching framing highlighting how nutritional outcomes are underpinned by ecological health more generally. One of our key areas of focus is how and why ecological health underpins nutrition. Ecosystem health and human health are intricately linked in multiple complex ways. Healthy ecosystems support human health and well-being: pollution, eco-toxicity, climate change, food waste & loss, species extinction and resource depletion all undermine the life and community supporting systems which underpin production of food. Ensuring stable climate, healthy soils, functioning ecosystems and staying within the earth’s environmental limits is essential for meeting societies’ nutritional needs, and underpin good health and human well-being. Addressing ecological boundaries (soil health, biodiversity, water availability and quality, food waste, shifts in nutrient cycles) is key to addressing the determinants of health and all forms of malnutrition. Good ecological health will result in multiple health and nutritional benefits. For example, pollinator-dependent food products contribute to healthy diets and nutrition. Pollinators are under threat – sustainable and regenerative forms of agriculture can reduce risk to pollinators by helping to diversify the agricultural landscape and making use of ecological processes as part of food production.
Similarly, protecting marine food sources are critical to food security, and a main source of high quality protein for many people, yet some yield-focused, intensive agricultural systems threaten this source of nutrition by polluting waterways and marine water bodies, harming aquatic eco-systems which provide this valuable food source.

In summary, we recommend that the fundamental relationships between ecological and human health and well-being are highlighted in the voluntary guidelines.

2) Links with agroecology – We were surprised that there was little reference to agroecology. The recommendations should more firmly underline and prioritize agroecology as an agricultural system that underpins many of the human and ecosystem health issues which the guidelines are trying to address. We believe there needs to be a meaningful quantitative and qualitative shift towards agroecology acknowledging explicitly the role that agroecological approaches can play in agricultural policy and its link with sustainable nutritional outcomes. Other government policies including procurement, research and innovation programmes should also support an agroecological approach. This would address the disconnect between these voluntary guidelines and the HLPE report that developed 13 principles of agroecology, building on existing FAO work and dialogue.

3) Background and rationale – We have the following comments on the context setting chapters

i) It may be useful to include some statement to highlight that there are a number of determinants (social, cultural, physical etc,) and multiple causes of malnutrition. For example, ‘Malnutrition in all its forms has many interrelated and underlying causes that need to be addressed simultaneously. Among them, the lack of stable access to healthy and safe diets and safe drinking water, inadequate infant and young child-caring and feeding practices, poor sanitation and hygiene, insufficient education and health services, and low socio-economic status.

ii) The need to flag our food systems have increasingly affected nutritional outcomes through multiple, interconnected pathways, generating severe human and economic costs. People get sick because: 1) they work under unhealthy conditions; 2) they are exposed to contaminants in the water, soil, and air; 3) they eat certain unsafe or contaminated foods; 4) they have unhealthy diets; and, 5) they can’t access adequate and acceptable food at all times.

iii) We think some context is needed to highlight the importance of states upholding the precautionary principle – that the nutritional policies identified in these guidelines are interconnected, self-reinforcing, and systemic in nature. However, this complexity cannot be an excuse for inaction. Sustainable and healthy food systems must increasingly be understood in terms of identifying specific risk factors and weighing the collective evidence on risk factors and act accordingly — to improve health & nutritional outcomes

iv) True Cost accounting/Economics of mal-nutrition/good nutrition – States are often significantly influenced by the economics behind the policies they implement. We were surprised that there was no mention of the global or national costs of poor
nutrition or a mention of the economic benefits of nutritional programmes, without necessarily going into the detail (e.g. the costs of child stunting, healthcare costs associated with obesity, the economic costs of mal-nutrition.) For example, according to the World Bank¹, reducing stunting levels can increase a country’s overall economic productivity, as measured by GDP per capita, by 11 percent in Africa and Asia. For every dollar invested in nutrition, a country can generate $16 in returns. A short paragraph highlighting these somewhere in the guide will be important.

**Our Specific comments to the VGFSyN**

We have made a number of specific comments referencing the paragraph numbers used in the draft guidelines:

**Paragraph 10** – We agree, although there is a wider point about the interconnectedness between ecological health and nutrition so suggest adding ‘Climate change, ecological health, agriculture, and nutrition are interconnected.’ A mention on the link between marine and terrestrial biodiversity and nutrition here for example would be useful e.g. reductions of insect pollinators are increasingly impacting on the yields of key crops (three out of four crops across the globe producing fruits or seeds for human use as food depend, at least in part, on pollinators.)

An increasing body of evidence indicates that increasing levels of carbon dioxide in the atmosphere reduce levels of nutrients, such as zinc, iron, calcium, and potassium, including key food crops that provide global populations with most of our calories, including wheat, rice, millet, barley, potatoes, and rice.

**Paragraph 13** – Investment and finance changes (public & private) will be a key addition – ‘Fostering policy, institutional and behavioral changes among food system actors.’

**Paragraph 38 - 3.1.1 Building on multi-sectoral actions and coordination** – The guidelines sometimes refer to ‘stakeholders’ sometimes ‘actors’ – we found the term ‘actors’ more all encompassing and less exclusive. It’s not clear if your list of stakeholders includes ‘citizens’ – is there an assumption these are represented in ‘civil society organisations’? We believe that citizens should be included as a specific category.

The term ‘food citizenship’ was highlighted by many actors we have engaged with. They raised the importance of and the need to give people power to act meaningfully to shape positive health and nutritional outcomes more generally. Therefore, the potential to connect citizens with food, through the health agenda, is huge. Reconnecting citizens and reframing the language from ‘consumers or people who demand, choose or buy food’ to that of a citizen who can ‘participate in, create and shape food systems’, was seen a powerful lever in which to transform food systems for better health outcomes. Policy and practice based on citizen-led

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innovation, local democratic engagement and citizen advocacy are essential ingredients of a ‘good food culture’ and fundamental to addressing inequality, poverty and other determinants of health and nutrition.

**3.1.2 Promoting policy coherence by integrating nutrition into national development – a) & b)**

Should we talking about ‘sustainable’ nutrition?

**c) States should foster policy coherence across sectors to reduce all forms of malnutrition.** – Whilst we agree with this sentiment, we suggest that more specificity is required here. Actors with whom we engaged are suggesting that governments should be considering national level integrated food and farming plans/strategies/policies, linked to clear national visions as one mechanism to ensure consistency and coherence across different government departments.

**3.1.3 Instituting accountability mechanisms, monitoring and evaluation** – This section needs more clarity in order to evaluate the impact of policy and to ensure accountability. Governments need to set health and nutrition based goals, robust targets and identify a suite of qualitative and quantitative indicators for these. We emphasize the important of complimenting quantitative data with more qualitative forms of data as an important element in ensuring that the experiences of those most impacted by nutrition policies (those with ‘lived experiences’) are captured. Involving and seeking views from these disadvantaged actors, many of whom would be otherwise disconnected from decision makers, at a national or international level, is vitally important – especially so decision-makers and diverse actors can adapt them to local, regional needs, cultures etc.

We also want to stress the importance of the need for a range of indicators, covering both long-term ecosystem and human health; for example, total resource flows; sustainable interactions between agriculture and the wider economy; the sustainability of outputs; food security, nutrition, and health outcomes; livelihood resilience; ecological footprint etc. Our own research highlighted the need for a suite of indicators that use more positive frames (e.g. alongside those that focus on reducing incidence of NCDs, obesity, etc. There are key positive indicators that should be considered, such as the links with healthy soils, access (distance from nutritious / fresh food source (market, shop etc), proportion of the population with healthy weights and a range of others linked to those key determinants of good health and nutrition

**Paragraph 39 - 3.2.1 Ensuring sustainable use and management of natural resources** – We think the addition of regenerative agricultural practice should be added here - States should encourage the use of ecosystem services & regenerative agricultural practices which maintain soil biodiversity and nutrient balance and promote carbon storage.

**3.2.2 Promoting nutrition within agriculture and food production** – We feel that the importance of policies that support regenerative/agroecological approaches need to be prioritized here – the need to move towards systems with more closed nutrient recycling (manuring, green manuring etc.) and reducing the use of fertilizers, pesticides etc. is key for improving nutrition, health and well-being.
The other missing ingredient in this is an opportunity to reconnect citizens with food growing especially in urban areas. Promoting and implementing policies that support allotments, open up agricultural land in peri urban environments and ensure community agriculture/city farms etc. are key opportunities to improve access to healthy nutritious foods, particularly for the poorest urban communities.

More emphasis could be placed on greater funding/investment for agroecology, orphan crops and links between farming, health and nutrition.

3.2.3 Improving food storage, processing, transformation and reformulation – maybe refer to ‘sustainable cold storage’ – lots of innovation and research going into this an important part of preserving nutrient content of fresh produce.

c) With regards to the following point “States should incentivize private sector food actors to work towards more sustainable and safe packaging of products such as nanotechnology, waxing, plant-based wrapping, and biodegradable plastics.” We suggest think there needs to be a wider emphasis on zero-waste, circular and resource efficient / low or no impact distribution systems, including alternatives to single use packaging, especially plastics.

d) With regards to biofortification we recognize its importance in meeting the needs of certain groups with key micro-nutrient deficiencies in the short/medium term. However, we recommend that it should be part of an approach to get people to eat a greater diversity of more nutrient-rich foods in the long term. This will have other systemic advantages of building local resilience and ensuring value is created and stays within local economies.

We are also recommending an additional paragraph with a focus on supporting capacity building and investment in innovative Small and Medium Sized Enterprises (SME’s). There is a need to focus more attention on supporting the role of SME’s, particularly in LMICs, who still supply the majority of foods to households within these countries. Formal SMEs contribute up to 60% of total employment and up to 40% of national income (GDP) in emerging economies and are significantly higher when informal SMEs are included. The biggest barriers to attracting investment in healthy and nutritious food products include access to credit/finance, government regulations that promote the right enabling environment and technical help to develop new businesses that solve key food systems challenges.

40. 3.3 EQUITABLE ACCESS TO SUSTAINABLE AND HEALTHY DIETS

3.3.1 Improving physical access to nutritious food. There is a need to emphasize the state role in providing access to safe drinking water (e.g. water fountains in public spaces). This is key to reducing bottled water and bottled sugary drinks where there is no access to clean water.

3.3.2 Making nutritious food more affordable - Our findings also highlighted the importance of state social protection/welfare schemes/safety nets. Where they do exist, they should be more aligned so they are explicitly nutrition sensitive (e.g. subsidies for fruit and veg in schools, food vouchers, social security, cash transfer programmes). This should be made more explicit here.
3.3.3 Monitoring new technologies and trends for healthy diets
c) Regarding sustainability impact of new technologies we think that there is also a role for the state to ensure that citizens/people are engaged in these debates – through city panels, food policy councils and through the organization of public fora’s to test consumer appetite and identify concerns where they exist. This will then inform public funding programmes around technological innovation at all levels ensuring technology accounts and is responsive to the needs of citizens.

41. 3.4 People-Centered Nutrition Knowledge, Education and Information
We argue we should be referring to sustainable nutrition throughout – the need to link ecological and human health is, in our view, important – so ‘people-centred sustainable nutrition knowledge’ is key.

3.4.1 Putting people at the centre of nutrition knowledge, education and information – The importance of the medical profession (doctors, nurses, midwives, care providers etc.) seems to be missing as an opportunity. We identified the health sector (which in some states is publicly funded) as playing a key role in shifting the narrative moving from a curative to a preventative approach to health care – the role of ‘social prescribing’ as key (e.g. prescribing nutrition literacy classes, or time in the garden to grow food, to reduce levels of stress and prescribing healthy food). States have a role in shaping policies and practices of healthcare professions. The state also has a potential role in incentivization structures for the health insurance and pharmaceutical sectors to encourage more food based, sustainable nutrition focused preventative measures.

43. 3.6 Food Systems and Nutrition in Humanitarian Contexts

PART 4 - IMPLEMENTATION AND MONITORING OF THE USE AND APPLICATION OF THE VOLUNTARY GUIDELINES ON FOOD SYSTEMS AND NUTRITION

We agree with points 44 – 54 but think there are a few important points missing, which are key to implementation:

i) The need for cross sectoral collaborations to work with the state at multiple scales (population, sub national, national and international) to ensure coherency and consistency across nutrition/health indicator data sets – linked to reporting and monitoring SMART commitments on these targets with the involvement of civil society.

ii) There are opportunities for organisations and practitioners working within the health, sustainability and development sectors to collaborate more and align their work around some shared health goals (nutrition and ecological). Interdisciplinary collaboration is essential to navigate the complexity of the food system, health/nutrition system interactions, understand situations and formulate effective,
systemic responses which simultaneously meet immediate needs and address key determinants of health.

iii) A point which came out consistently through our research was the need to engage actors across different scales and disciplines through creating more positive visions and narratives for a food system which delivers good sustainable nutrition outcomes to enable today’s and tomorrow’s leaders at every scale to drive action towards a pro-health food system. Transformational change will not occur without a shift of narrative and mindsets and a vision for what is possible. This means a shift from narrowly focused policy and business models designed to deliver productivity, to a focus on delivering multiple ecological and human health outcomes concurrently. Diverse actors across the food system need to be supported and enabled to get involved in creating, and acting on, these new visions and narratives: including many you have identified - community and youth leaders, citizen movements and politicians working on the international stage, funders, governments and businesses and food producers.

APPENDIX 1 - PROMOTING GOOD ECOLOGICAL, HUMAN HEALTH AND ANIMAL HEALTH (V0.10)

Our Overarching Vision & Narrative

This document outlines a shared vision and narrative for a global food system which promotes good human, ecological and animal health. It has been developed using the insights, views and experiences of a diverse group of people and organisations across the world, with different roles and perspectives, and members of the Global Alliance for the Future of Food. It aims to drive more dialogue on the opportunities to accelerate the transformation of our food system – how to improve the ways food is harvested, produced, processed, distributed, eaten and disposed so they deliver both health and sustainability goals - through policy and practice.

Introduction

We know that a healthy planet provides the foundation stones for healthy, diverse and resilient ecosystems, which in turn provides the bedrock for all human and animal health and well-being. And yet, our current food system has already pushed climate change, biodiversity loss, shifts in nutrient cycles (nitrogen and phosphorus), and land use beyond safe operating planetary

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2 We have used the term ecological health as this term resonates more than the term ‘planetary health’ with key actors at a local/community level. We recognise the need to promote good ecological health in the context of the planetary emergency and the need for earth systems to stay within planetary boundaries.
boundaries\textsuperscript{3}. In addition, mal-nutrition (hunger, obesity, overweight, micro-nutrient deficiencies ) and associated rise of non-communicable diseases (e.g. diabetes, heart disease, cancers), antibiotics resistance, environmental contamination, occupational hazards and contaminated foods continue to impact on human health and place enormous financial pressures on our health systems\textsuperscript{4}. Obesity, malnutrition and NCDs are estimated to cost the global economy, $760 million, $3.5 trillion and $7 trillion respectively.

To address these challenges we need positive, inspirational visions and narratives of how we could create a food system that promotes good, human, ecological and animal health. It was Donella Meadows who said that ‘Vision is the most vital step in the policy process. If we don’t know where we want to go, it makes little difference that we make great progress. Yet vision is not only missing almost entirely from policy discussions; it is missing from our whole culture.’ This holds true for many policy discussions and decisions which are shaping the future of our food system, and our health. We hope that our vision, narrative and key characteristics which underpin them, will help a diversity actors, to see the opportunities to prioritize policies and practices which tackle the root causes (determinants) of good health and that align, human health, ecological and animal health outcomes.

**Our health-focused, food system vision:**

‘The way food is harvested, produced, processed, distributed, eaten and disposed of promotes good human, ecological and animal health and wellbeing. All actors are actively shaping and contributing to a healthy, equitable, renewable, resilient, just and culturally diverse food system’.

We recognize that there will be a need for multiple visions and narratives, that reflect cultural diversity and different priorities at different scales and within different geographies.

In order to realize this vision we need to transform today’s food system and counter prevailing powerful narratives that can guide current research, investment, policy priorities and practices across the food system.

\textsuperscript{3} https://www.stockholmresilience.org/research/planetary-boundaries/planetary-boundaries/about-the-research/the-nine-planetary-boundaries.html

\textsuperscript{4} http://www.ipes-food.org/_img/upload/files/Health_ExecSummary(1).pdf
FROM CURRENT NARRATIVE
Prioritizing yield and calories/treating ill health
The predominant prevailing narrative is one many people call a ‘feed the world’ or ‘productivist’ narrative. It is based on assumptions that we ‘need to double food production by 2050’, maximizing yields (e.g. tons of a crop per hectare) and that people, predominantly within the global North, will feed the world. Efforts to ‘minimize’ the social, health or ecological costs are considered, but seen as less important – not critical to the goal of ‘feeding the world’. This narrative has resulted in unsustainable food systems, harming human, ecological and animal health. It has encouraged the industrialization of food production, with power and influence consolidated in the hands of the few, with a focus on a few, globally traded crops. Ingredients are often transformed into animal feed or of ultra-processed food and drink products.

TO NEW NARRATIVE
Prioritizing good human, ecological and animal health
The aim is to feed a growing global population well whilst regenerating good human, ecological and animal health (and delivering global commitments such as the Sustainable Development Goals, Climate Change Commitments, the Convention on Biological Diversity and Decade for Action for Nutrition). Regenerating ecological health, operating within environmental limits and addressing a range of social and economic determinants of good health, is critical to promoting good human health: our physical & mental health, healthy growth, and empowerment of people with capacity to adapt and manage their own health.

This transition will mean challenging existing narratives and mindsets. Key decision makers (governments, investors, business, civil society, community leaders, health practitioners, farmers etc.) will need to adopt and adapt new health-focused visions, and prioritize policies and practices, which align human, ecological and animal health. This will be critical to addressing the barriers that are preventing us from replicating, scaling up and out, and supporting the many positive health initiatives already taking place on the ground (at community, local, city, regional level for example) across the food system.

For some peoples/cultures, this will involve radical changes in the way we grow, harvest, process, distribute, eat and value food. New positive health strategies, policies and practices
need to be culturally sensitive and systematically designed to address multiple determinants of good health – this includes enough nutritious, safe food; healthy places to live and work (including healthy ‘food environments’); economic opportunity; vibrant social and cultural connections and more, all of which are underpinned by healthy ecosystems and soils. Successful initiatives which are already supporting positive health outcomes need sustained support, with success stories and lessons communicated widely to key decision makers (including citizens).

**Key characteristics of the ‘feed the world’ versus ‘promoting good ecological, human & animal health’ narratives**

Table 1- Key narrative characteristics focusing on those structural changes required for food systems transformation for health (the ‘how’). Without these structural changes the ‘on-the-ground’ changes identified in table 2 (the ‘what’) will not progress beyond the small-scale.

### Existing: Prevailing ‘yield first’, treating ‘ill health’ narratives

- ‘We’ feed the world, often driven by the global North.
  - Food is seen as a commodity
  - Decision making by the ‘few’ with money, power and influence. Citizens disconnected from decision making
  - Transparency and accountability are not always clear.
  - Responsibility of the individual & little focus of addressing food environments/ underlying determinants of health

### New: Promoting good ecological, human & animal health narratives

- The world feeds itself, empowering citizens and communities to grow their own foods.
- Food systems seen as a public good (commons) with farmers/producers/ citizens/health care professionals being supported/incentivized to promote good health by government/industry in the public interest.
- Citizens participate in, create and shape food systems, directly, and through their influence on effective, democratically accountable institutions.
- Full transparency and accountability
- Shared responsibility with a focus on the ‘food environments/ underlying determinants (social, cultural, economic, commercial)

<table>
<thead>
<tr>
<th>Power, ownership &amp; accountability</th>
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<tbody>
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<td>Attitude towards risk</td>
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<tr>
<td><strong>Focus on short term risk to profits.</strong></td>
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<td><strong>Frequent disregard for high level of uncertainty around the risk of unintended health impacts.</strong></td>
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<td><strong>Siloed strategies treat human &amp; ecological health issues separately resulting in unintended negative consequences.</strong></td>
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<tr>
<td><strong>Population/society-wide policies are disconnected from local/community/citizen participation.</strong></td>
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<tr>
<td><strong>A disconnect between international/national initiatives and local/population level action</strong></td>
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<td><strong>Polluter often does not pay</strong></td>
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<tr>
<th>Measures of success/ Metrics</th>
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<td><strong>Costs to society are ‘externalized’.</strong></td>
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<tr>
<td><strong>Health impacts are not tracked, or use indicators focused on reduction of negative health impacts using quantifiable evidence driven data (e.g. reducing NCD’s, obesity).</strong></td>
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<tr>
<td><strong>Success is measured on impacts achieved in the short-term e.g. within 3-5 years.</strong></td>
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<tr>
<td><strong>GDP as the main indicator of societal progress.</strong></td>
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<tr>
<td><strong>Research resources invested primarily for commercial benefit and defense of existing narrative.</strong></td>
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<tr>
<td><strong>True Cost’ accounting is used to assess and internalize full costs and values to society.</strong></td>
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<tr>
<td><strong>Health indicators framed around positive health impacts, using diverse evidence (i.e. using both quantifiable and qualitative data e.g. lived experiences, indigenous knowledge).</strong></td>
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<tr>
<td><strong>Medium to longer term impacts are assessed and include systemic impact.</strong></td>
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<tr>
<td><strong>GDP supplemented by other health and well-being indicators.</strong></td>
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<tr>
<td><strong>Research resources invested for public good in support of transition to health promoting food system.</strong></td>
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</table>
**Table 2 - Key narrative characteristics focusing on the elements of the food system that must change – the ‘on-the ground’ differences which deliver positive health impacts.**

<table>
<thead>
<tr>
<th>Existing: Prevailing ‘yield first’, treating ‘ill health’ narratives</th>
<th>New: Promoting good human, ecological, animal and health narratives</th>
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<tbody>
<tr>
<td>• A focus on a few high yield crops and animals as globally traded commodities.</td>
<td>• A focus on a diversity of culturally appropriate foods, mostly, but not exclusively on plants.</td>
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<tr>
<td>• Practices that deliver efficiency—defined as greater quantities at low cost—take priority (e.g., homogenization &amp; monocultures; agrochemical use, low-wage, unsafe work).</td>
<td>• Regenerative, agroecological, circular approaches, avoiding waste and enabling decent livelihoods.</td>
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<tr>
<td>• A focus on extracting constituents of whole foods (starches, sugars, proteins, oils) and assembling them with additives into nutritionally unbalanced ultra-processed food and drink products.</td>
<td>• Resilient trading models including more localized forms of production and processing. (adds value locally)</td>
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<tr>
<td>• Waste as a by-product of a linear process.</td>
<td>• Food processing focused on increasing duration of whole foods and making their preparation easier.</td>
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<tr>
<td>• Food insecurity (lack of access resulting in hunger, malnutrition, obesity).</td>
<td>• Closed loop systems with zero waste.</td>
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<tr>
<td>• Health and ecosystem impacts of food are often externalized with healthy, sustainable foods more expensive.</td>
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then animal nutrition, then nutrient recycling for food production.

<table>
<thead>
<tr>
<th>Systems and practices treating ill health and that take a curative approach to health care provision.</th>
<th>A focus on the conditions that promote good health and a preventative approach to health care provision.</th>
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<tbody>
<tr>
<td>A focus on individual responsibility for good health.</td>
<td>A focus on population-level public health policies/approaches addressing the social/commercial/ environmental/cultural determinants of health and well-being</td>
</tr>
<tr>
<td>Poor animal welfare conditions treating animals as commodities</td>
<td>Good animal health treating animals as sentient beings</td>
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**Turning Narratives into action**

Our narrative, which is by design macro (global) in nature, will need to be adapted/developed according to the needs of place and decision makers. A stakeholder led and regionally focused engagement process is needed to identify key stakeholders/actors/decision makers (citizens, communities, organizations, private sector, and government), who can then develop culturally relevant and locally owned visions, policies and practices that create the most significant contribution to restoring good health. We recognize there needs to be some tying together of regional narratives to motivate national and multi-national action, policy and practice.

For specific audiences a ‘toolkit’ can be added which translates the above tables into sector specific actions and practices for governments, the health sector or for businesses, for example.