



The International Diabetes Federation (IDF) response to the draft political declaration of the ICN2 prepared by the FAO and WHO Secretariats, March 2014

The International Diabetes Federation (IDF) is an umbrella organization of over 230 national diabetes associations in 170 countries and territories. It represents the interests of the growing number of people with diabetes and those at risk. As a founding federation of the NCD Alliance, IDF fully supports and reinforces all comments made in the NCD Alliance submission.

The International Diabetes Federation (IDF) believes that the ICN2 draft political declaration is a very comprehensive and valuable document and welcomes the opportunity to comment on it. In this response, IDF answers to the document from the diabetes perspective.

General comments on the draft political declaration and its vision, paragraphs 1-3

1. IDF welcomes that malnutrition in all its forms is acknowledged as one of the greatest threats to health and well-being. However, we request that **overconsumption**, defined as population-wide increased consumption of energy-dense food products, is **listed as a form of malnutrition together with undernourishment, micronutrient deficiencies and unbalanced diets**.
2. IDF shares the concern regarding the moderate progress in reducing malnutrition since ICN1 in 1992 and would like to add the following facts and figures to show this modest improvement more explicitly:
 - Despite the decrease in children chronic and acute under nutrition, the figures remain unacceptably high. This situation needs to be addressed without delay as, apart from its immediate and devastating consequences, **an adverse nutritional status early in life is among the risk factors for developing diabetes and other non-communicable diseases (NCDs) later in life, with profound effects on life expectancy**.
 - **The prevalence of obesity** worldwide is escalating and far from being controlled. It **has doubled since 1980**, affecting 10% of men and 14% of women in 2008¹. More than half a billion adults worldwide are obese, being at an increased risk of developing diabetes and NCDs.
 - IDF estimates that **8.3% of adults – 382 million people – have diabetes worldwide in 2013**. The number of people with type 2 diabetes, which risk factors include obesity and poor diet and accounts for about 90% of the total, is increasing in every country. **If we do not take action now, the number of people with diabetes will rise up to 592 million within 25 years**.
 - Socio-economic factors have a key influence on the nutritional status both among and within countries, which has a direct impact on diabetes and NCDs. Maternal overweight and obesity at the time of pregnancy, which is a risk factor for childhood obesity and gestational diabetes (GDM), have increased steadily in LMICs since 1980. Most overweight children younger than five years (32 out of 43 million worldwide in 2011) live in LMICs and are at a particular risk of adult obesity, diabetes and NCDs². **This trans-generational transmission of obesity is, among other factors, fuelling the diabetes epidemic in the LMICs, where 80% of the total number of people affected by diabetes live**.

¹ Global Health Observatory (GHO). http://www.who.int/gho/ncd/risk_factors/obesity_text/en/

² Maternal and child under nutrition and overweight in low-income and middle-income countries. The Lancet 2013. <http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2813%2960937-X/fulltext>



3. IDF request that this paragraph specifies that **nutritious food (and not only “food”) availability, affordability and accessibility are key determinants for all forms of malnutrition**. The benefits attained from the greater consumption of vegetables, fruits, meat and dairy over recent years in the developing countries have been overshadowed by an even higher global increase in the consumption of processed food and beverages, rich in sugars, saturated and trans-fat and salt.

Comments on the background and analysis provided in the political declaration, paragraphs 4-20

4. **IDF suggests that dietary risk factors may account for more than 10% of the global burden of disease and disability, as stated in this paragraph**. Of the estimated 8.3% of adults that have diabetes in 2013 about 90% are affected by type 2 diabetes, which has obesity as one of its main risk factors. For this reason, we believe that 10% is a low figure that does not comprehensively reflect the global burden of disease and disability.
5. IDF agrees that nutritional needs change during the life cycle and suggests that this paragraph has to reflect that **nutritional choices at all stages of life have long-term health consequences**. IDF also recommends including elderly people among the groups that have specific nutritional needs.
7. We recommend dividing this paragraph into two: one on the overweight-related commitments and another one on under nutrition commitments. In the current paragraph the overweight-related commitments (halt the increase in the prevalence of overweight in children under five and reverse the rise in obesity and diabetes) are hidden between the markers more closely linked with under nutrition. We also believe that **the commitment “halt the increase in the prevalence of overweight in children under five” needs to be stronger**, and propose “reverse the rise in the prevalence of overweight in children under five” instead.
9. IDF strongly recommends that this paragraph **adds “marketed” to the list of procedures food undergoes within the food systems**, as it has an obvious impact on nutrition and consumer choices and preferences.

IDF applauds the content of the rest of the paragraphs, specially the proposals of nutrition as a goal of all developing countries, empowering the consumers to make healthy food choices and facilitation of healthy food practices by Governments. IDF recognises that nutrition policy and programmes are generally poorly developed; we also support that Governments should take responsibility for leadership in nutrition and that an effective coordination across all stakeholders is needed to tackle this issue.

Comments on the proposed commitments, paragraphs 21-23

21. IV. IDF would like this commitment to reflect that **nutritious food needs to be more accessible, affordable and acceptable than it is now, while poorly nutritious food needs to become less affordable**. Only this will help achieve our goal of the healthier choice becoming the easiest one for consumers around the world.