

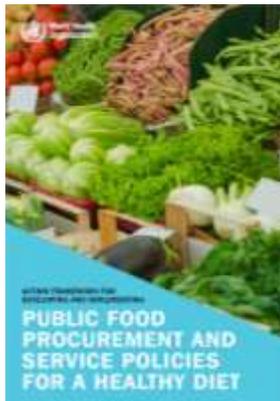


WORKSHOP 

on

WHO ACTION FRAMEWORK FOR DEVELOPING AND IMPLEMENTING

# PUBLIC FOOD PROCUREMENT POLICIES for A HEALTHY DIET



**ETH** zürich



# WORKSHOP OUTLINE



Introductory Session and address by the Chief Guest



Keynote Presentation



Panel Discussion



Feedback/Agency Commitment



Way forward: formation of Taskforce



Conclusion



Address by the Chair



# WHY

## Procurement of HEALTHY DIET

IN PUBLIC SETTING IS SO *imminent*

# **NCDs are on the rise, due to Unhealthy Diets:**

*Urgent and Complex Public Health Challenges Globally and in Bangladesh*

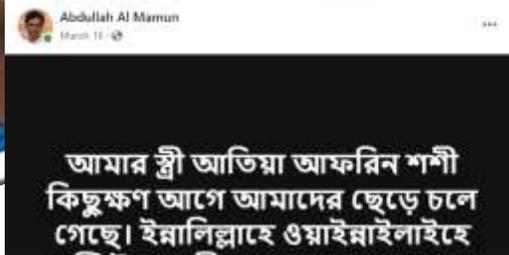
- **Cardiovascular Diseases (CVD)**
- **Cancers**
- **Chronic Respiratory Diseases**
- **Diabetes & Chronic Kidney Diseases (CKD)**
- **Liver Diseases**
- **Digestive Diseases**
- **etc.**

**86%**

of these premature  
deaths occur in low-  
and middle-income  
countries



# CONSEQUENCES OF UNHEALTHY DIETS: PREMATURE DEATHS



# FOOD ADULTERATION AND CONTAMINATION IS WIDESPREAD IN BANGLADESH RESULTING IN OUTBREAK OF NONCOMMUNICABLE DISEASES (NCDs) AND DEATHS

70%

70% of all deaths in Bangladesh attributed to NCDs(cancer, heart, kidney, liver diseases, type 2 diabetes, obesity etc.), mostly due to consumption of **unhealthy food** (source: icddr,b; WHO).

74%

The cost of healthcare has increased 74% in 2020 from 2012 (Source: (WHO)).

80<sup>th</sup>

Bangladesh Ranks 80<sup>th</sup> in Global Food Security Index 2022 (Source: The Economist)

85%

NCDs are quite rampant in Bangladesh, for instance, there are 1.5 million cancer patients with 150,000 dying each year. Every year another 200,000 people become victim of cancer (WHO). 10 million people suffering from diabetes, about 1.0-1.2 million from kidney disease, and about 20-22% suffering from heart disease (icddr,b). There were about 13.14 million cases of diabetes in Bangladesh in 2021. 70% people are suffering Gastrointestinal Diseases. 1 out of 5 adults have **hypertension**. **More than 85% people are sick.**



The Daily Star



**More than**



**people are sick in  
Bangladesh**

**Demography\***

0-39	: 71.47%
0-49	: 82.56%
50-above:	17.44%
60-above:	9.25%

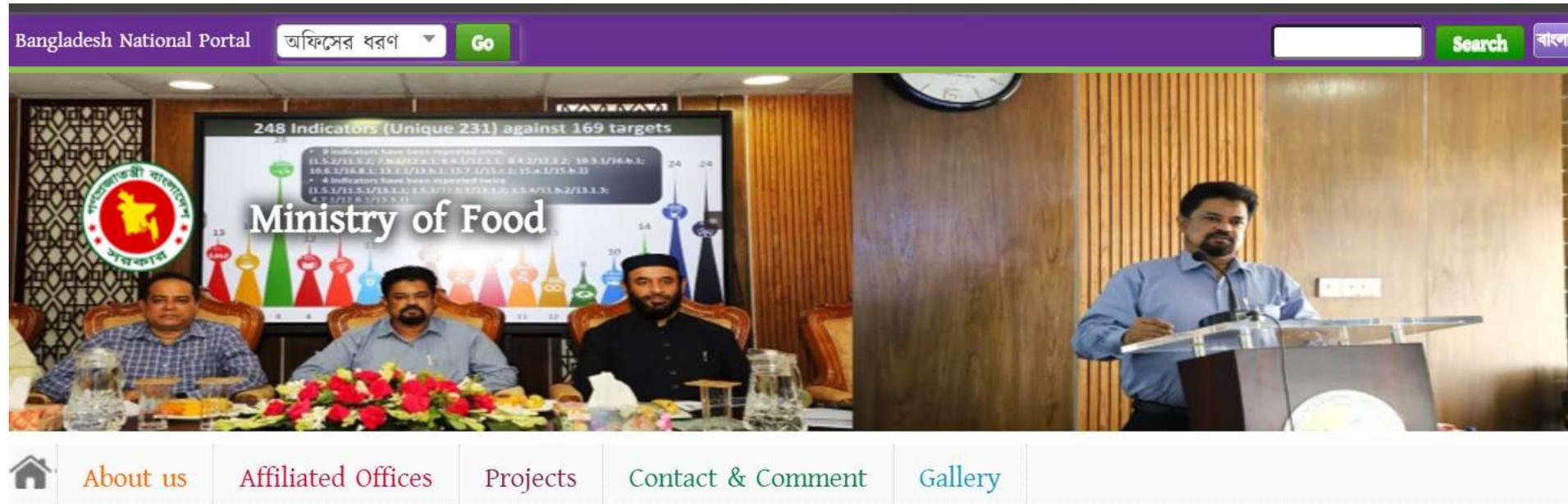
(BBS 2022)

INTRO

# Healthy Diet

Aligned with SDGs 2 & 3, 2030





## Vission & Mission

### Vision

Ensure dependable and sustained food security for all at all times.

### Mission

Ensure adequate and stable supply of safe and nutritious food through integrated public food management.

# UNHEALTHY DIET: A Global Problem

**Unhealthy diet continues to be a leading risk factor for death and disability globally**

(1). Around **8 million deaths every year** are attributable to excess consumption of food high in sodium and salt, sugars and fats (particularly trans-fatty acids – trans fats), and by **inadequate consumption of whole grains, pulses, vegetables and fruits.**

(2). Unhealthy dietary practices prevail across different population groups and geographical regions. For example, **school-aged children seldom meet recommended fruit and vegetable intake**, frequently consume **sugar-sweetened beverages**, and **often eat at fast-food outlets.**

Rapidly changing food environments, with **increased availability of unhealthy food**, are not conducive to promoting healthy diets. **Obesity, and maternal and child undernutrition are responsible for an additional 8 million deaths (4,5).** Together, these risks contribute to around **one third of all deaths**, and result in costs for **individuals, families, communities and governments in terms of illness, disability, health expenditures and lost productivity.**



Production



Processing

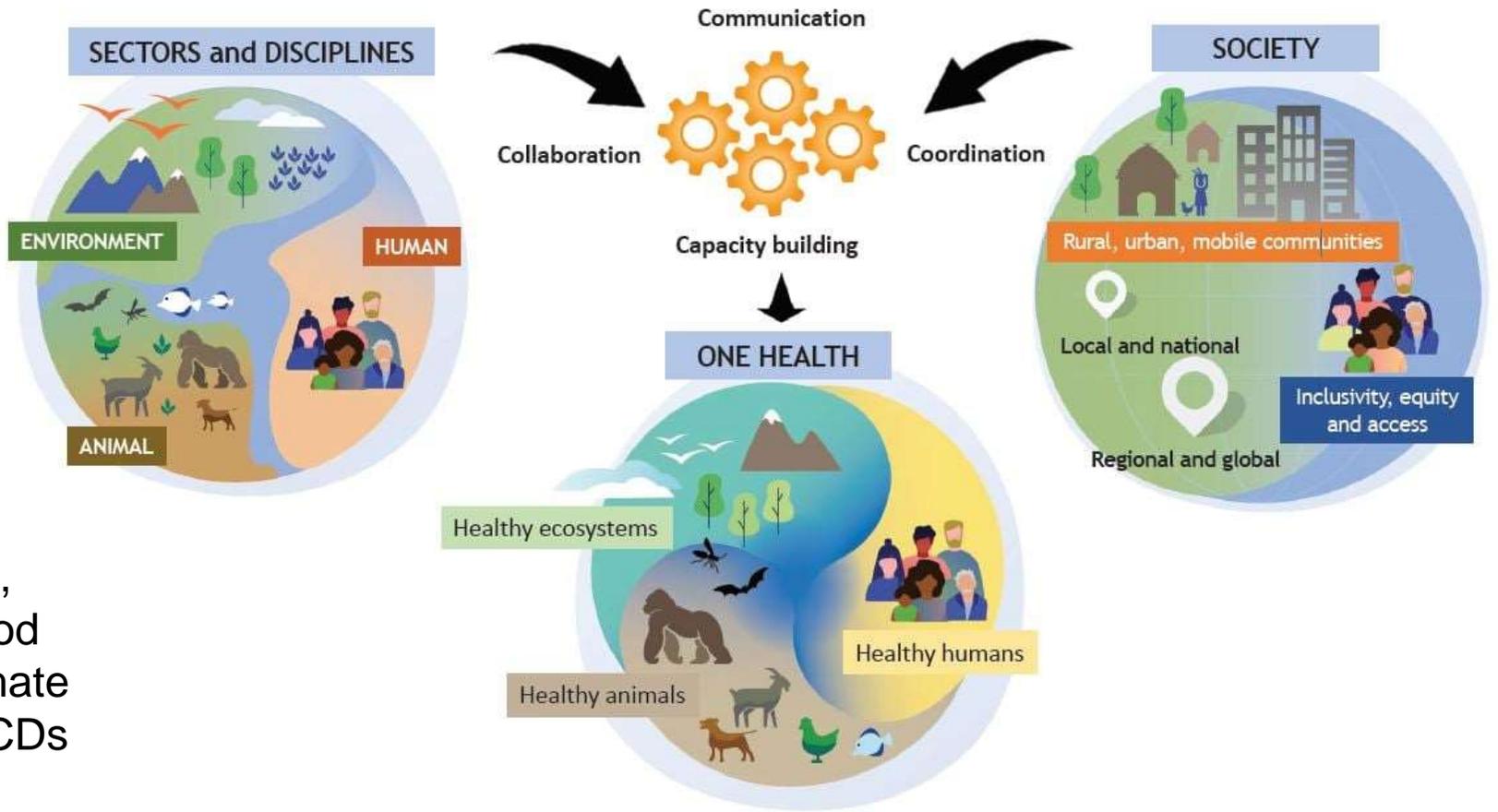


Distribution



Consumption

Malnutrition,  
Hunger, Food  
Waste, Climate  
Change, NCDs



# Healthy Diet & Food System

A close-up photograph of a fresh vegetable display. In the foreground, there are several crates and baskets filled with various produce: bright red tomatoes, green beans, purple carrots, and large green leafy vegetables like lettuce and spinach. The background shows more crates and baskets, creating a sense of abundance and freshness.

 World Health Organization

**ACTION FRAMEWORK FOR  
DEVELOPING AND IMPLEMENTING  
PUBLIC FOOD  
PROCUREMENT AND  
SERVICE POLICIES  
FOR A HEALTHY DIET**

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# Executive summary

- **Unhealthy diets** is responsible for **millions of deaths** and **lost years of good health** *annually*.
- **Urgent action is needed to stop the growing consumption of foods and beverages** that lead to unhealthy diets. Of greatest concern are **excess consumption of sodium and salt, sugars and fats, particularly trans-fatty acids (trans fats); and low consumption of whole grains, pulses, vegetables and fruits.**
- Governments worldwide have a **unique opportunity and responsibility to lead by example through the implementation of healthy public food procurement** and service policies, requiring that **all foods and beverages served or sold in public settings** contribute to the promotion of healthy diets.
- By ensuring that healthier foods and beverages are offered, governments can enable the population to consume healthy diets. **This will reduce the burden of all forms of malnutrition, and premature death and disability from preventable diet-related noncommunicable diseases.**

# What is a Healthy Diet?

A healthy diet helps to **protect** against **malnutrition** in all its forms, as well as **noncommunicable diseases (NCDs)**, including **diabetes, heart disease, stroke and cancer**.

*Healthy food stuffs are mostly agroecologically grown in local areas.*



# World Health Organization



**Trans fats –  
Saturated Fat**  
*Eating  
saturated fat  
increases the  
level of  
cholesterol in  
the blood and  
the risk of heart  
disease*

### **Trans fats in your food**

- Commercial baked goods, such as cakes, cookies and pies.
- Shortening.
- Microwave popcorn.
- Frozen pizza.
- Refrigerated dough, such as biscuits and rolls.
- Fried foods, including French fries, doughnuts and fried chicken.
- Nondairy coffee creamer.
- Stick margarine.

## HEALTHY PUBLIC FOOD PROCUREMENT AND SERVICE POLICY

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A policy adopted by government that sets criteria for the service and sale of food in public settings and/or government expenditure on food (including purchases and subsidies) to promote healthy diets.

In this action framework:

- “food” refers to any foods, beverages, ingredients, meals or snacks covered by the policy;
- “procurement and service” refers to the entire process of purchase, subsidy, provision, distribution, preparation, service and sale; and
- “policy” refers to policies, strategies, directives, legislation, rules, standards or guidelines – mandatory as well as voluntary, and with or without enforcement mechanisms.

# Benefits of Healthy Public Food Procurement

Healthy public food procurement and service policies can also contribute to -

- increased productivity and educational attainment;
- create purchasing power

which can increase demand for, and availability of-

- healthier food and reduce costs;
- strengthen local food systems by promoting purchasing from local producers; and
- improve health equity across populations.

# Healthy Public Food Procurement

Healthy public food procurement and service policies can apply to **meals and snacks served and sold through many government institutional settings**, such as schools, public hospitals, childcare facilities, correctional facilities and government workplaces.

They can also apply to food venues and programmes, including **cafeterias, vending machines, tuck-shops, social support feeding programmes, meetings, conferences and sports events.**



# Healthy Public Food Procurement Policy

A **healthy public food procurement and service policy** establishes **nutrition criteria** to increase the availability of foods and beverages that promote healthy diets, and/or limit or prohibit the availability of foods and beverages that **contribute to unhealthy diets**.

**Effective nutrition criteria are mandatory, specific and enforceable, and applicable to all government food purchases and all food served or sold in public settings.**

Although each country will tailor its exact **nutrition criteria** according to its context and population, the criteria should, at a minimum, incorporate the **core principles of healthy diets** listed in the box below.

## NUTRITION CRITERIA

core principles of healthy diets



## NUTRITION CRITERIA

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A set of criteria, standards or rules that specify what food will be allowed to be served or sold in a specific public setting and/or purchased by the government. These may be nutrient- or food-based criteria, or other criteria related to preparation methods or service modalities. Such criteria may apply to foods or beverages, including meals and snacks, or be based on portion size or cooking methods.

Governments may also want to develop other criteria for public food procurement and service – for example, for safer food handling and preparation, and sustainable purchasing of local or seasonal food.



## CORE PRINCIPLES OF HEALTHY DIETS:

- ✓ Limit the intake of free sugars.
- ✓ Shift fat consumption away from saturated fats to unsaturated fats, and eliminate industrially produced trans fats.
- ✓ Limit sodium consumption and ensure that salt is iodized.
- ✓ Increase consumption of whole grains, vegetables, fruits, nuts and pulses.
- ✓ Ensure the availability of free, safe drinking water.

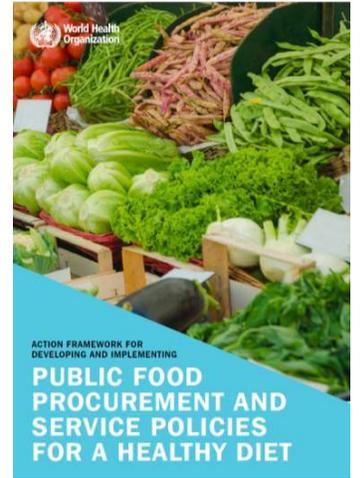
# ACTION FRAMEWORK

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This action framework provides -

- **an overview of how to develop** (or strengthen),
- implement, assess compliance with, and
- evaluate, the effectiveness of  
**a healthy public food procurement and service policy.**

It is intended for **use by government policy makers or programme managers working on public food procurement or service**, at either a **national or a subnational level**, including at regional, provincial and city levels. *Governments may tailor this action framework to develop a feasible policy scope that meets their needs and local context.*



# ACTION FRAMEWORK

**Section 1:** Policy **preparation** outlines key steps to take when preparing to develop or revise a healthy public food procurement and service policy.

**Section 2:** Policy **development** describes key steps of the policy development process, particularly the process of defining the purpose, scope, and nutrition and other criteria to be included in the policy.

**Section 3:** Policy **implementation** reviews key steps to support and ensure full policy implementation, highlighting that a clearly defined implementation strategy is critical to success of the policy.

**Section 4:** Monitoring, **enforcement** and evaluation guides the process of monitoring and enforcing the policy, as well as conducting a policy evaluation to determine whether the policy is being effectively implemented.

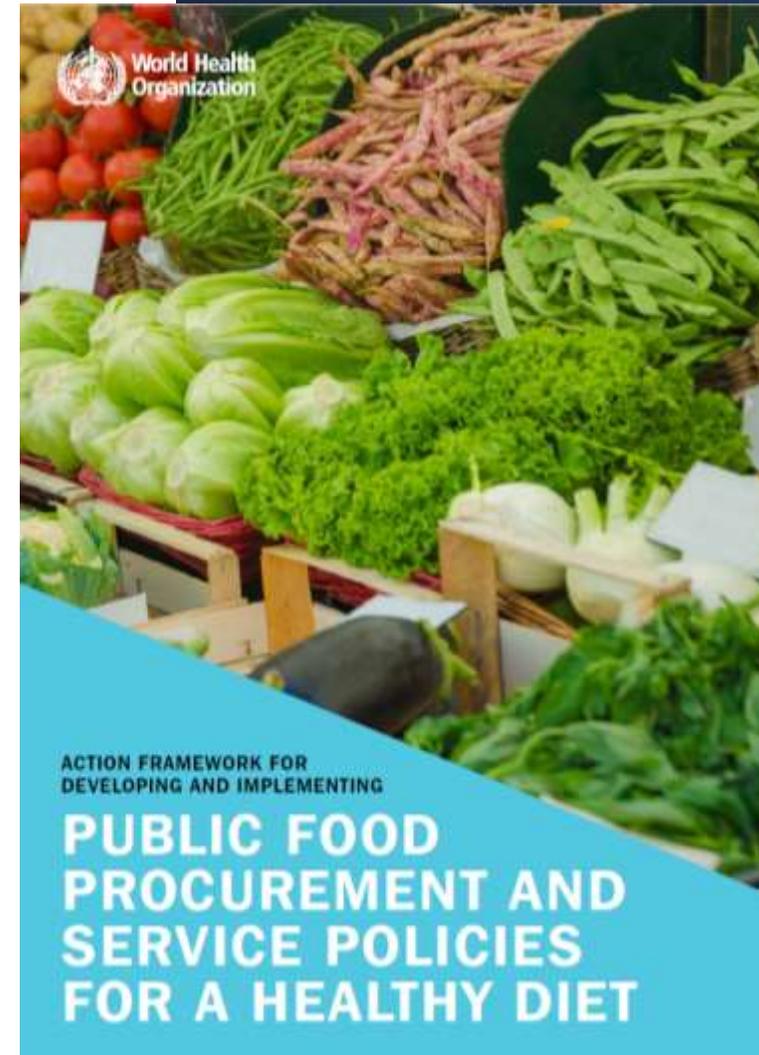
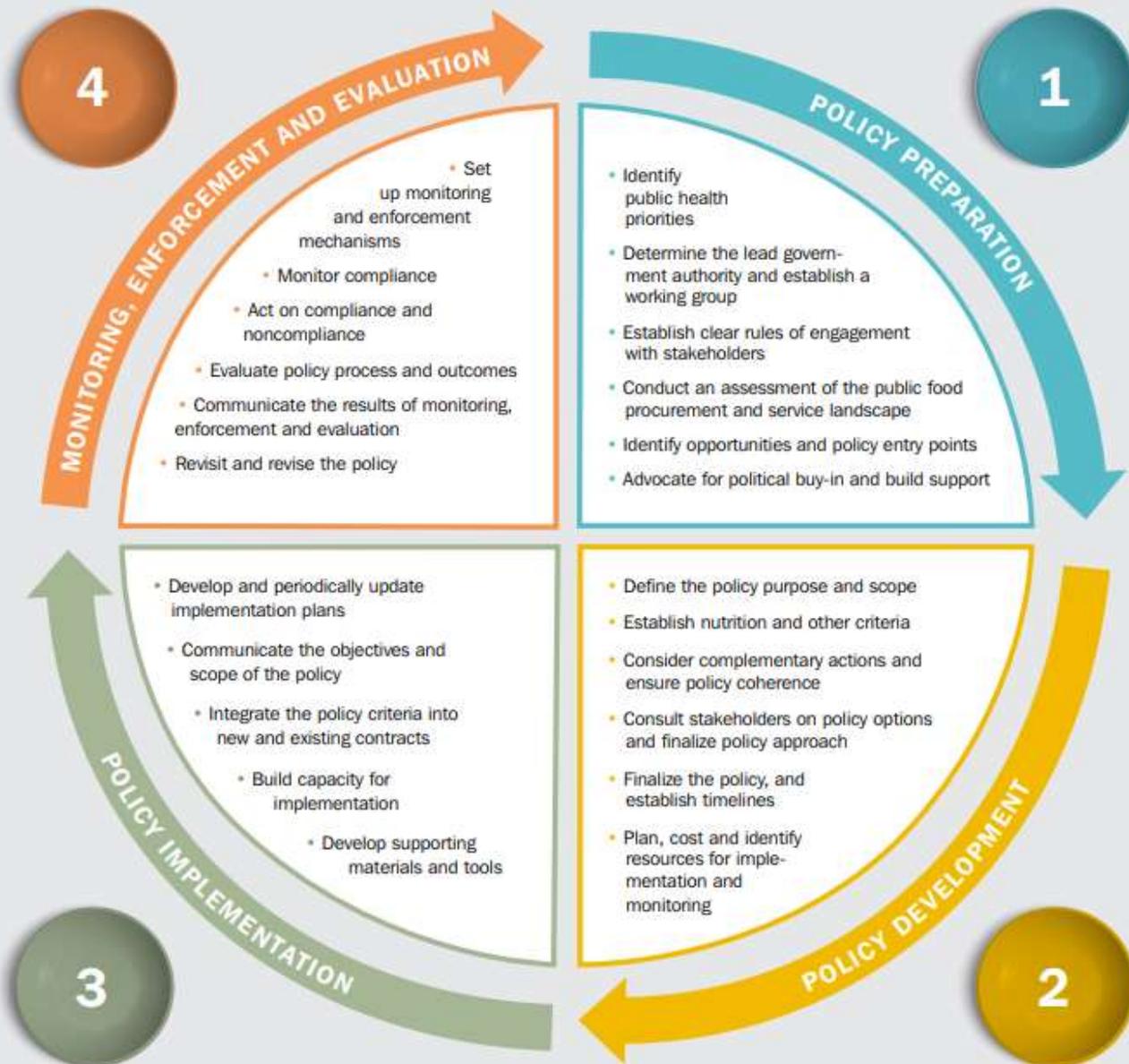
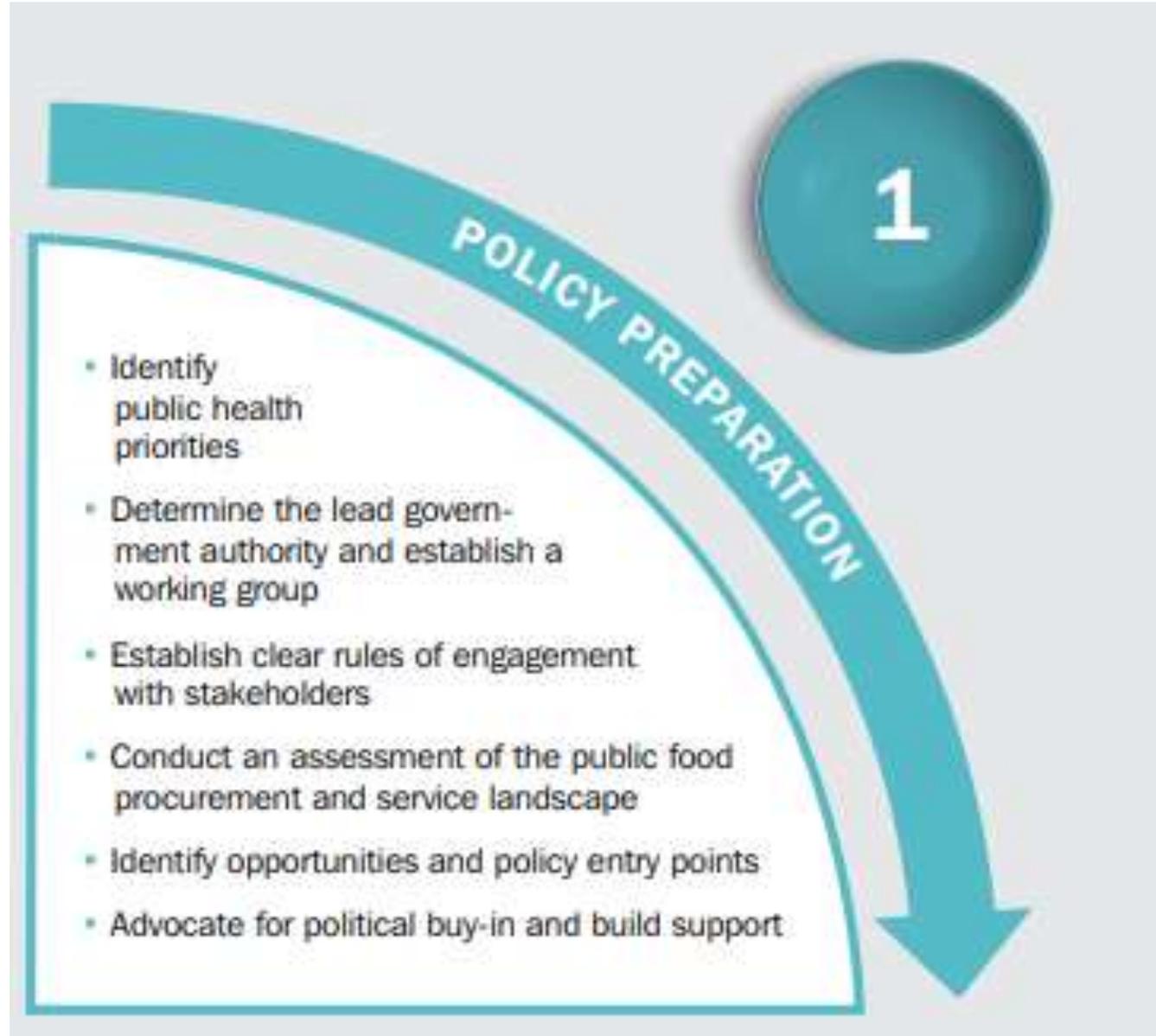
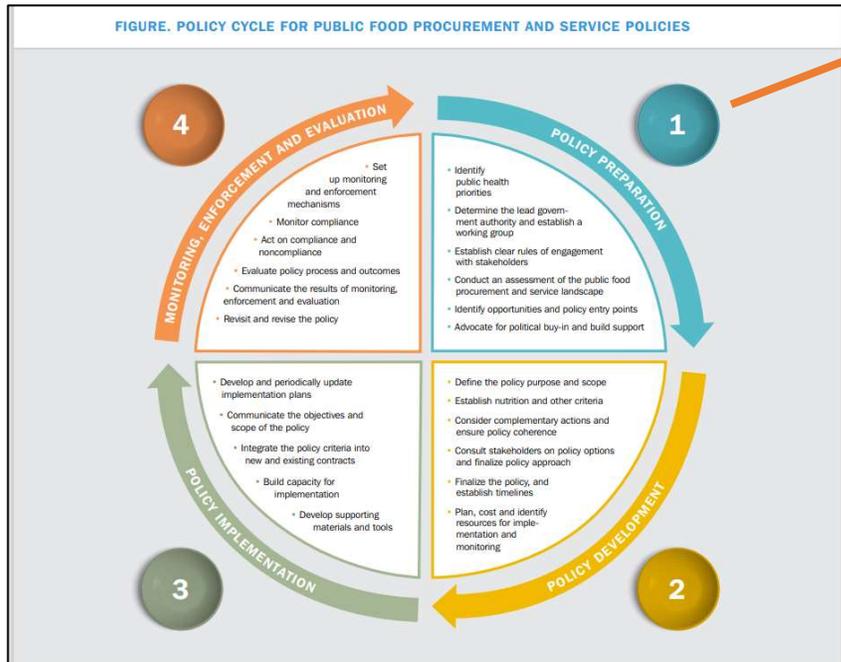


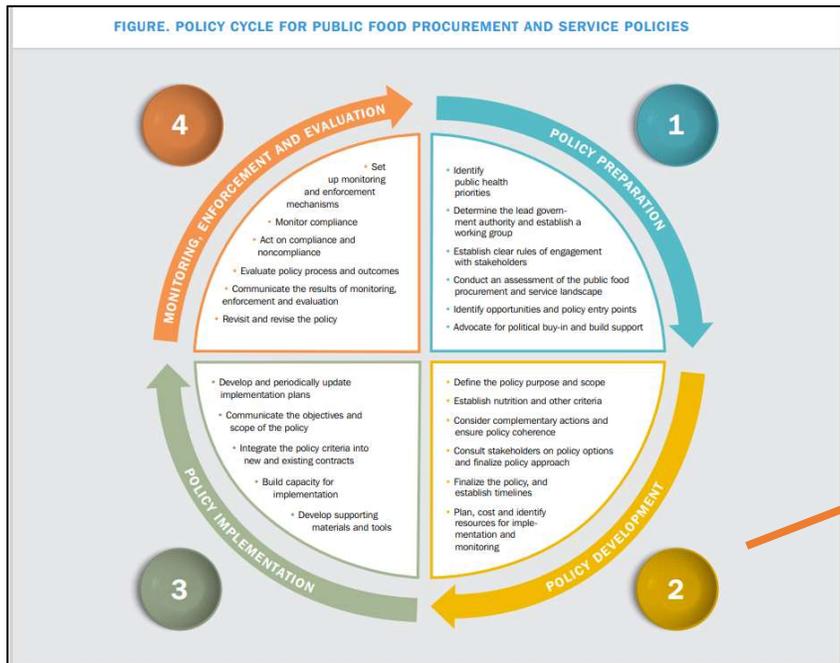
FIGURE. POLICY CYCLE FOR PUBLIC FOOD PROCUREMENT AND SERVICE POLICIES



# Policy PREPARATION



# Policy DEVELOPMENT



- Define the policy purpose and scope
- Establish nutrition and other criteria
- Consider complementary actions and ensure policy coherence
- Consult stakeholders on policy options and finalize policy approach
- Finalize the policy, and establish timelines
- Plan, cost and identify resources for implementation and monitoring

POLICY DEVELOPMENT

2

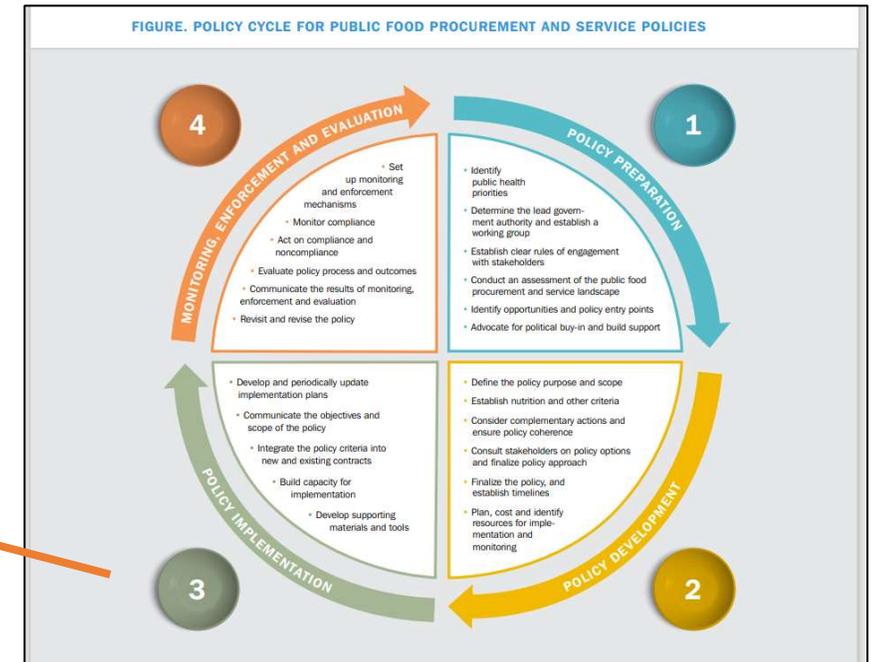
# Policy IMPLEMENTATION

- Develop and periodically update implementation plans
- Communicate the objectives and scope of the policy
- Integrate the policy criteria into new and existing contracts
- Build capacity for implementation
- Develop supporting materials and tools

POLICY IMPLEMENTATION

3

FIGURE. POLICY CYCLE FOR PUBLIC FOOD PROCUREMENT AND SERVICE POLICIES

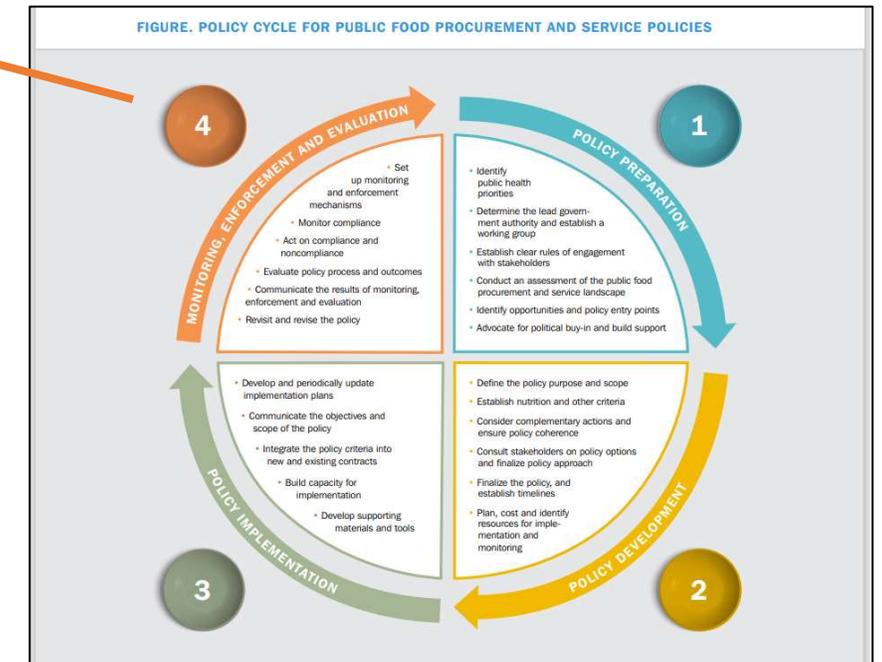


# 4

## MONITORING, ENFORCEMENT AND EVALUATION

- Set up monitoring and enforcement mechanisms
- Monitor compliance
- Act on compliance and noncompliance
- Evaluate policy process and outcomes
- Communicate the results of monitoring, enforcement and evaluation
- Revisit and revise the policy

# MONITORING ENFORCEMENT & EVALUATION



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## Instances of Implementation WHO Action Framework

Countries such as **Srilanka, Brazil, Bahrain, Slovenia, Singapore, Slovenia, the Republic of Korea, Samoa, Chile, Denmark, Uruguay, Cabo Verde** and local government authorities i.e. **New York City, Quito Municipality of Ecuador, and others** have incorporated WHO Action Framework for Healthy Food Procurement.



# Way Forward

- 1. Formation of a multisectoral task force** composed of representatives from Government, NGOs, private sector, and community organizations to drive the implementation of WHO Action Framework for healthy public food procurement policies.
  - 2. Identified key areas of collaboration** across sectors, such as linking healthy food procurement with sustainable farming practices and improving nutrition education in schools.
  - 3. A strategic advocacy plan** focusing on policy reform to prioritize public procurement of nutritious, locally sourced food **is formulated.**
- 



World Health Organization



Thanks for your patient hearing!

ACTION FRAMEWORK FOR DEVELOPING AND IMPLEMENTING

**PUBLIC FOOD**