The International Food & Beverage Alliance Comments
on the draft Montevideo Roadmap 2018-2030 on NCDs as a Sustainable Development Priority
(version dated 9 August 2017)

The International Food & Beverage Alliance (IFBA) welcomes the opportunity to provide comments in the web-based consultation on the draft outcome document, entitled the Montevideo Roadmap 2018-2030 on NCDs as a Sustainable Development Priority, (the Montevideo Roadmap or Roadmap) to be considered by Member States at the WHO Global Conference on NCDs, to be held 18-20 October 2017 in Montevideo, Uruguay.

The International Food & Beverage Alliance is a group of twelve multinational companies – The Coca-Cola Company, Danone, Ferrero, General Mills, Grupo Bimbo, Kellogg’s, Mars, McDonald’s, Mondelēz International, Nestlé, PepsiCo and Unilever – who share a common goal of helping people around the world achieve balanced diets and healthy, active lifestyles.

We are committed to ensuring our businesses create and preserve the long-term sustainability and health of the environment and communities we serve to achieving the Sustainable Development Goals (SDGs).

Formed in 2008 in response to the World Health Organization’s (WHO) call to action in the 2004 Global Action Plan on Diet, Physical Activity and Health, CEOs of the founding members of IFBA voluntarily committed to work together to implement a set of global commitments designed to address the rising challenges of obesity and diet-related NCDs:

- Continuous product improvement, through reformulation and innovation and portion size control;
- Responsible marketing, including limitations on marketing to children;
- The provision of nutrition information to consumers; and
- The promotion of healthy lifestyles, in the workplace and in communities around the world.

Since that time, IFBA members have made substantial progress in addressing nutrition-related concerns. Tens of thousands of products have been reformulated or developed with less fat, sugar, salt and calories and ingredients considered beneficial for good health have been added – whole grains, fibre, fruits and vegetables, low-fat dairy. Nutrition information has been increased and simplified with front-of-pack labelling and new digital tools and technologies. Marketing communications to children have been restricted and re-focused on the promotion of healthier options. We have introduced workplace wellness programmes and extended our collaborations with governments and other stakeholders to promote healthier lifestyles in communities around the world.
We recognize there is more work to be done and strive to work collaboratively with governments and the public health community to do more.

**General Comments**

We note that many of the proposed actions in the *Montevideo Roadmap* reflect WHO and UN strategies on the prevention and control of NCDs, strategies for achievement of the SDGs and efforts to accelerate progress in the realization of these goals.

The fundamental aim of the *Roadmap* is to provide guidance to Member States on how to achieve SDG target 3.4 – the reduction of premature mortality from noncommunicable diseases (NCDs) by one-third by 2030 – through a set of actions designed to address the challenges countries face in achieving SDG 3.4, enhance policy coherence and ensure the availability of cost-effective, affordable and evidence-based NCD interventions.

In general, we support this agenda and the whole of government and health in all policies approach. We also support a “whole of society” approach to developing policies to address SDGs.

WHO and UN strategies recognize that an effective response to improve public health requires a whole of society approach – it is a fundamental principle of the 2030 Agenda for Sustainable Development, the 2011 Political Declaration of the High-level Meeting of the General Assembly for the Prevention and Control of Noncommunicable Diseases, the WHO Global Action Plan for the Prevention and Control of NCDs, 2013-2020 and the Decade of Action on Nutrition. We believe in order to activate actions on NCDs and SDGs in an expeditious fashion, guidance on how to foster joint work across sectors, particularly beyond the health sector and across stakeholders is necessary. We believe the *Roadmap* can be strengthened by including a specific commitment to adopt a whole of society approach and a commitment to develop a common understanding of what it means to implement such an approach. We all learn by best example. Governments must take the lead on this in order to articulate and implement comprehensive strategies for their national priorities and circumstances.

We are encouraged by the drafters’ recognition of the significant role non-State actors, including the private sector, play in the advancement and promotion of public health and the need to engage constructively with this group and increase opportunities for meaningful collaborations. Achieving policy coherence and an enabling environment for sustainable development requires the engagement of all sectors and all stakeholders.

Our experience with multistakeholder collaborations and public-private partnerships has proven the value of constructive engagement. We share the view of Member States expressed in the recently adopted *Ministerial declaration of the high-level political forum on sustainable development*, that “a stronger commitment to partnership and cooperation is needed to achieve the Sustainable
Development Goals.” ¹ We believe the draft Roadmap should include an affirmative statement reflecting the need for an even greater commitment to SDG 17.

The draft notes in Paragraph 3 that one of the major obstacles to achieving SDG 3.4 is the lack of capacity in addressing the conflicting public health goals and private sector objectives. We do not agree with the view that public health interests and private sector interests are in conflict. The food and non-alcoholic beverage industry is committed to actively participating with all stakeholders in the development and implementation of effective interventions necessary to address the shared concern of NCDs.

We also note the levels of mistrust aimed at the private sector generally as evidenced in the draft with references to industry interference and the suggestion of the establishment of a UN Commission on NCDs and the Law (para 19). We want to reinforce the fact that the private sector is a key contributor to the public health agenda and shares the same overall goal with the public health community of achieving global public health. Good health equals good business. We believe strongly that the Roadmap must give priority to the progress needed between industry and governments as they seek to align private sector agendas with national NCDs response.

Our industry can make important contributions to positive health outcomes and we strive to work collaboratively with the public health community to do more. The SDGs are predicated on the fundamental principle of collaboration among governments, civil society and the private sector. It is critical that governments see industry as a willing and effective partner. We must find ways of working and trusting each other in order to maximize the contributions of all stakeholders. We recommend that the draft Roadmap include a commitment to create a culture of engagement conducive to effective cooperation with all stakeholders based on inclusiveness, openness and shared values. We also suggest the ongoing recognition when such engagements and collaborations deliver progress in communities and for public health.

Specific Comments

Reinvigorate political action

Paragraph 6: The draft propose the prioritization of the most cost-effective and highest impact interventions. We would recommend that this be deleted and replaced with a reference to the WHO Global Action Plan for the Prevention and Control of NCDs, 2013-2020 and the recently revised and

endorsed Appendix 3 which includes 88 interventions that underwent CHOICE analysis based on cost effectiveness.

Increase significantly the financing of national NCD responses and international cooperation

Paragraph 15: The draft proposes that national NCDs responses consider interventions that have the capacity to generate revenues such as the taxation of certain consumer products. IFBA members do not oppose regulation per se. Rather, it is a question of what type of regulation is appropriate, proportionate, and workable and what the ultimate impacts will be. And there are many views as to the effectiveness of such measures on diet and health outcomes. An analysis by the McKinsey Global Institute of 74 interventions to address obesity that are being discussed or piloted around the world found that the highest-impact intervention areas are portion control and product reformulation, while taxation delivers among the lowest impact. 2 In our view, further work is needed to assess the impact as well as the implementation approaches of fiscal measures before these are recommended and activated.

Increase efforts to engage sectors beyond health

Paragraph 20: We support the need to raise awareness on health and wellbeing throughout society and increase access to education through the school environment. We believe the private sector has a role to play in promoting nutrition education and healthy lifestyles in the communities we serve and in 2008 committed to collaborate with governments, civil society and other stakeholders to help raise consumer awareness on balanced diets and promote greater physical activity and healthier lifestyles. Since that time, we have been working to support hundreds of initiatives around the world, including school-based programmes to raise nutrition, health and wellness awareness of school-age children and help teachers and families to promote healthy eating and living; sporting and other athletic events and activities promoting physical activity among children and young people; and community-based programmes and targeted marketing and education campaigns that raise awareness and promote behavior change. All IFBA members have workplace wellness programmes to promote healthy eating awareness and behaviours conducive to a healthy, active lifestyle. A number of these programmes have been recognized by independent evaluators as effective in delivering employee and business benefits, providing a healthy workplace, reduced absenteeism and increased productivity. In our work with the WHO Global Coordination Mechanism on the Prevention and Control of Noncommunicable Diseases, we have shared our technical expertise, best practices and peer-reviewed materials of our programmes and welcome the opportunity to share our learnings with other stakeholders.

Paragraph 22: We are committed to helping develop and implement effective interventions to improve diets. Although IFBA members are global businesses and present in most countries around the world, in many countries, local small and medium enterprises dominate the food sector. We believe that effective engagement must include local and regional operators. In our work, in order to address the unique needs of different countries and optimize the local impact of our overarching global strategy and commitments, we are establishing local food and beverage industry groups and have committed to share our knowledge, expertise and best practices in an effort to encourage local manufacturers to join us in adopting a similar diet and health improvement strategy. However, we believe that a multistakeholder approach led by government where government can engage industry as a whole – multinationals, small and medium enterprises - will achieve the greatest impact and we are committed to helping in these efforts.

Seek measures to address the negative impact of products and environmental factors harmful for health and strengthen the contribution and accountability of the private sector

Paragraph 24: We welcome the commitment to “enhancing national capacity to engage constructively with the private sector for NCD prevention and control in a way that maximizes health gains.” As mentioned above, as members of the food industry, we do not share the view that our interests are in conflict with public health objectives. We share the same goal with the public health community of achieving global public health. We believe the private sector can do much to encourage and support national action, but together we must develop a blueprint for effective engagement. We are ready to engage constructively to determine a path forward.

Paragraph 25: The drafters acknowledge the need to develop coordinated and coherent policies and strengthen evidence-based regulatory frameworks and to align private sector incentives with public health goals. We agree. Interventions must be supported by strong scientific evidence of what works and why. We need to understand what types of policy initiatives are likely to be most effective and cost-effective. And, collectively, we must take action to identify common areas of opportunity and alignment. We are convinced that much can be achieved with an open exchange and transparent dialogue, collaborative agenda-setting, clarification of the role of the private sector in its contribution to NCDs and an enabling environment, led by governments.

Paragraph 26: The recommended actions on product formulation, the provision of nutrition information and restrictions on marketing to children are actions we support and have been implementing on a voluntary basis for many years. We provide consumers with a wide range of products and help them in composing a balanced diet. We have developed policies to reduce sugar, fat and salt and - to eliminate industrially-produced trans fat by the end of 2018 - and increase key nutrients considered beneficial for good health. We are reducing calories by offering small and/or reduced portion sizes and providing portion guidance. We provide clear, fact-based nutrition
information using a variety of tools and media, including on-pack labelling, point-of-sale materials, company website and social media apps. Our global principles on nutrition labelling, which are in line with national regulations and guidance and CODEX Alimentarius, provide that our product packages display the key nutrients of public health concern – sugars, salt, fats and trans fats. We display calories front-of-pack and wherever possible, the product’s contribution to an overall diet, including the percentage of the daily reference intake guidance for one or more key nutrients. Our global policy on marketing communications to children is in line with the objectives of the WHO Set of Recommendations on the Marketing of Foods and Non-alcoholic Beverages to Children. We hope, by our example, to encourage other industry players and sectors to all do their part.

**Paragraph 28:** We agree that government leadership is key to ensuring effective reporting and evaluation of the implementation of private sector commitments and their contribution to national NCDs responses. However, in order to provide the complete landscape of NCD interventions whereby progress is measured and reported on, we would recommend that this paragraph be revised to provide that the reporting and accountability mechanisms also extend to the commitments made and initiatives undertaken by governments and civil society. We believe that transparency across all stakeholders is key to ensuring accountability and progress. We also believe that the effectiveness of such evaluation and reporting mechanisms must start with a framework based on sound evidence.

**Paragraph 30:** The draft calls on the WHO to consider establishing a commission to address the “commercial determinants of health”. We recognize it is important to examine how economic systems impact health outcomes, whose interests are aligned with public health objectives and whose are not, and what can be done to overcome obstacles in this area. In addition, there are many factors to consider, including the hugely diverse nature of the economic contributors, the level of awareness of NCDs and their implications for and within a specific industry and from one country to another. We also believe it is necessary to address the “political determinants of health.” We recommend broader consideration be given to these issues before including this recommendation in the Roadmap.

**Reinforce the role of non-State actors**

**Paragraphs 31 and 32:** We appreciate that the draft Montevideo Roadmap recognizes the role non-State actors, including the private sector, have to protect and promote public health. We welcome increased opportunities for meaningful participation in building coalitions and alliances for the prevention and control of NCDs and in support of the achievement of SDG 3.4. In terms of providing guidance on such engagement, we would recommend that reference be made to the WHO Framework of Engagement with Non-State Actors (FENSA).

**Paragraph 33:** The Roadmap calls on the private sector to contribute to addressing NCDs as a development priority, in the context of the achievement of the SDGs, and in particular, SDG 17 which
recognizes the importance of multistakeholder partnerships for mobilizing and sharing knowledge, expertise, technologies and financial resources to support the achievement of the SDGs. We are committed to achieving the SDGs and stand ready to embrace the call. IFBA members have a long and successful history of sharing their expertise and resources in support of public health initiatives, with governments and civil society. Our experience has shown that collaborative actions represent one of the most cost-effective ways to address public health challenges. Achieving policy coherence and collaborations that engage the private sector requires a systematic approach, an alignment of goals and objectives, an agreed set of actions and an enabling environment led by governments. Defining the role of the private sector is a critical first step. We believe the draft Roadmap can be improved by including a commitment on the part of governments to work with non-State actors, including the private sector, to develop an agreed blueprint for collaboration.

Continue relying on WHO’s leadership and key role in the global response to NCDs

Paragraph 35: We support the call on WHO to strengthen its capacity to provide technical and policy advice and enhance multistakeholder engagement and dialogue. We respect WHO’s normative, standard setting role. Over the years, IFBA members have provided technical expertise, for example on salt reformulation, or on our understanding on how consumers relate to diet, in dialogues convened by WHO to help inform the development of policy. We believe participation in multistakeholder mechanisms like the WHO Global Coordination Mechanism or the SaltSmart Consortium, a highly effective multistakeholder working group established by the Pan American Forum for Action on NCDs (PAFNCND) in 2012 and committed to reducing salt consumption across America – both of which IFBA is a member of – provide unique opportunities for constructive dialogue, the sharing of best practices and meaningful collaboration. We hope that there will be further opportunities for engagement in such multistakeholder collaborations.

Final Comments

Achieving the goal of reducing premature mortality by one-third by 2030 will require a whole of society effort with the full engagement of all stakeholders, a coherent and sustained alignment of efforts, “win-win” based terms of reference, an agreed set of actions, transparency and accountability and measured progress towards stated objectives. We remain optimistic about the ability to work collaboratively and in unity to contribute “in shaping a world free of the avoidable burden of NCDs”.

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