

Invited Speakers

Responding to the dual burden of nutritional diseases

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The dual burden of nutritional diseases encompasses the problems caused by malnutrition and micronutrient deficiencies and the chronic, noncommunicable diseases of adults. The rapidity of the nutritional transition means that many low and middle income countries must now respond to both sets of diseases. Malnutrition caused almost 4 million deaths and contributed to many more in 2000, most of which occurred in Africa and South East Asia. Chronic diseases, especially heart disease, stroke, cancer and chronic respiratory diseases, make up approximately 60% of global mortality and almost 50% of the global burden of disease. These conditions are the leading cause of disease burden in all but the African Region of WHO. The causes of the chronic diseases are well known and are essentially the same in all regions. Population-based interventions are available to reduce the risk of both malnutrition and the chronic diseases. Unfortunately, the global response to these major public health problems have been inadequate despite malnutrition being one of the Millennium Development Goals.

Upon request by its Member States, WHO has, over the past two years, developed the Global Strategy on Diet, Physical Activity and Health. A revised version of the Strategy was endorsed by the World Health Assembly in May 2004. One major criticism of the Global Strategy was its lack of attention to malnutrition and micronutrient deficiencies, despite the fact that it was developed in response to Member States concerns with the chronic diseases of adults. WHO is committed to strengthening its work on malnutrition. The dual burden of nutritional diseases requires a dual response at global, national, community and family levels.

The Global Strategy provides WHO Member States with a comprehensive range of policy options from which to choose. The strategy suggests recommendations for action by all stakeholders: Member States, WHO, NGOs, the private sector and UN agencies. Key principles are proposed to guide the development of strategies to address unhealthy diets and physical inactivity: best available scientific evidence, comprehensiveness, multi-sectoral and multidisciplinary approaches, a life course approach, addressing poverty, gender and culture sensitivities, and the accountability of all stakeholders to achieving success. The strategy sees governments assuming a steering role in changing the environment to support their populations and individuals to improve their nutritional and physical activity patterns. It stresses the importance of building on existing structures and national mechanisms rather than creating new ones. It suggests that effective national legislation and appropriate infrastructure are critical for introducing effective policies. The main policy recommendations of the strategy are for countries to: develop national dietary and physical activity guidelines; provide accurate and balanced information to consumers, in particular with regard to nutrition labeling, nutrition and health claims; address issues related to marketing of foods, especially to children. The strategy recommends that countries review and evaluate their food and agriculture policies to be consistent with a healthy and adequate diet.

WHO's goal is to advance public health worldwide. This goal can only be met through decisive and coherent action which in many countries requires complex interventions addressed to both mal- and over-nutrition. An effective response requires sustained political commitment, and broader, multi-level involvement with all relevant stakeholders worldwide.