Summary report on the

## Elimination of trans fatty acids in the Eastern Mediterranean Region

WHO-EM/NUT/287/E

Cairo, Egypt 10–11 August 2020



## Summary report on the

# Elimination of trans fatty acids in the Eastern Mediterranean Region

Cairo, Egypt 10–11 August 2020



#### © World Health Organization 2021

Some rights reserved. This work is available under the Creative Commons Attribution-NonCommercial-ShareAlike 3.0 IGO licence (CC BY-NC-SA 3.0 IGO; https://creativecommons.org/licenses/by-nc-sa/3.0/igo).

Under the terms of this licence, you may copy, redistribute and adapt the work for non-commercial purposes, provided the work is appropriately cited. In any use of this work, there should be no suggestion that WHO endorses any specific organization, products or services. The use of the WHO logo is not permitted. If you adapt the work, then you must license your work under the same or equivalent Creative Commons licence. If you create a translation of this work, you should add the following disclaimer along with the suggested citation: "This translation was not created by the World Health Organization (WHO). WHO is not responsible for the content or accuracy of this translation. The original English edition shall be the binding and authentic edition".

Any mediation relating to disputes arising under the licence shall be conducted in accordance with the mediation rules of the World Intellectual Property Organization.

**Suggested citation**. Summary report on the elimination of trans fatty acids in the Eastern Mediterranean Region. Cairo: WHO Regional Office for the Eastern Mediterranean; 2021. Licence: CC BY-NC-SA 3.0 IGO.

Sales, rights and licensing. To purchase WHO publications, see http://apps.who.int/bookorders. To submit requests for commercial use and queries on rights and licensing, see http://www.who.int/about/licensing.

**Third-party materials**. If you wish to reuse material from this work that is attributed to a third party, such as tables, figures or images, it is your responsibility to determine whether permission is needed for that reuse and to obtain permission from the copyright holder. The risk of claims resulting from infringement of any third-party-owned component in the work rests solely with the user.

**General disclaimers**. The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by the World Health Organization in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by the World Health Organization to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization be liable for damages arising from its use.

## Contents

1.	Introduction	1
2.	Summary of discussions	3
3.	The way forward	5

#### 1. Introduction

Noncommunicable diseases (NCDs) are the leading cause of mortality globally, responsible for almost 68% of deaths in the WHO Eastern Mediterranean Region, and unhealthy diet is a major contributor to this. Countries are therefore working towards reducing diet-related NCD risk factors, including the consumption of trans-fatty acids (TFA). The Eastern Mediterranean Region has one of the highest levels of TFA in its food supply.

Replacing industrially-produced TFA (iTFA) with healthier fats/oils is feasible and cost-effective, and elimination of iTFA by 2023 is a global and regional priority for WHO. In May 2018, WHO launched the REPLACE action package to eliminate industrially-produced trans fat from the global food supply through strategic action in six areas:

- Review dietary sources of industrially-produced trans fat and the landscape for required policy change.
- Promote the replacement of industrially-produced trans fat with healthier fats and oils.
- Legislate or enact regulatory actions to eliminate industrially-produced trans fat.
- Assess and monitor trans fat content in the food supply and changes in the trans fat consumption of the population.
- Create awareness of the negative health impact of trans fat among policy-makers, producers, suppliers, and the public.
- Enforce compliance with policies and regulations.

Best-practice regulatory measures include setting mandatory limits such as a ban on the production or use of partially hydrogenated oils (PHOs), an iTFA limit of 2% of total fat, or both a PHOs ban and an iTFA limit. PHOs and iTFA should be defined, with no exceptions, and all food product categories and facilities should be included, with no

#### Page 2

exceptions or limited exceptions that pose no health risk. Labelling is also a crucial tool and labelling rules on packaged food should require an ingredients list with TFA/PHOs clearly identifiable, a nutrition information table with the TFA levels clearly indicated, and appropriate conditions on TFA-free claims.

As part of providing technical support and regulatory capacity-building to the countries of the Eastern Mediterranean Region, a (second) virtual training workshop was held in August 2020. The workshop aimed to provide countries with technical guidance from WHO and Resolve to Save Lives (an initiative of the global public health organization Vital Strategies).

### Its specific objectives were to:

- identify progress, enablers and barriers to eliminating TFA in countries;
- build capacity and relationships with partners working on TFA regulations in the Region;
- facilitate cross-regional learning amongst nutrition focal points, experts and stakeholders; and
- identify specific support needs and create follow-up plans to provide technical support.

The meeting was facilitated by Dr Ayoub Al-Jawaldeh, Regional Adviser in Nutrition at the WHO Regional Office, the REPLACE Team and WHO headquarters. It was attended by nutrition focal points from countries and representatives from academia and civil society. Fifteen countries shared updates on their progress towards TFA elimination, with several reporting significant progress at all stages of the policy cycle.

Page 3

## 2. Summary of discussions

The meeting focused on the recommended best-practices in TFA policies, including:

- mandatory 2% limits limiting iTFA to 2 g per 100 g of total oils and fats in all foods; and
- a mandatory national ban on the production or use of PHOs as an ingredient in all foods.

The choice of which of these policies is most appropriate depends on the specific context in a country.

Global progress over the past 12 months was outlined, including best-practice TFA policies coming into effect in two countries (Lithuania and Saudi Arabia) and being passed in two other (Brazil and Turkey). In addition, draft policies that meet the best practice criteria have been proposed and notified in India and Nigeria. In total, 14 countries had best practice TFA policies being implemented in 2020, and 40 countries had measures that would come into effect by 2022. Most countries do not, therefore, have policies in place yet and most policy action to date has been in higher-income countries in the WHO Americas and European regions. Consequently, there is still a long way to go to achieve global elimination by 2023.

Countries reported a wide range of barriers that have hindered progress in TFA elimination. The conditions created by the COVID-19 pandemic and, in some countries, ongoing political or economic instability have exacerbated these challenges.

Several enablers or solutions for accelerating progress were identified. Policy preparation could be facilitated by compiling evidence, publishing technical reports, mapping existing legislation, building on

## WHO-EM/NUT/287/E Page 4

existing national nutrition policies/strategies, calculating costs/benefits of alternative policies, and establishing or strengthening multisectoral coordination mechanisms. During the policy development phase, progress can be accelerated by having strong regulatory bodies, writing strong, comprehensive, legally-sound and enforceable rules, and building political support. Policy implementation could be facilitated by educating stakeholders and providing guidance on compliance and enforcement of the rules. Finally, monitoring can be strengthened by including a monitoring and evaluation mechanism within regulatory measures and strengthening laboratory capacities.

Countries requested further technical support and guidance on advocacy, enforcement, laboratory capacity, analytical methodology and communication. Another key issue that was discussed concerned the provision of technical guidance for companies on replacing iTFA with healthy, cost-effective alternatives. It was noted that multisectoral collaboration is critical to being able to implement effective action.

Regional cooperation is also important and a regional action plan for the elimination of iTFA from the food supply in the Eastern Mediterranean Region by 2023 is being developed. The action plan will set out the capacity-building, technical support and other needs, and the ways in which WHO and Resolve to Save Lives can support countries in their efforts.

#### Page 5

## 3. The way forward

Potential enablers and solutions to support countries in the implementation of TFA elimination policies were identified. These can be categorized according to their place in the policy cycle.

- 1. In the preparation phase, enablers or solutions could include:
  - compiling evidence and publishing technical reports;
  - mapping existing laws/legislation and building on existing national nutrition policies/strategies;
  - calculating costs/benefits of alternative policies; and
  - establishing a multisectoral technical committee and building on existing coordination mechanisms.
- 2. During the policy development phase, the following measures might be useful to enable progress or provide solutions:
  - having strong regulatory bodies;
  - writing strong, comprehensive, legally-sound and enforceable rules; and
  - building political support (e.g. support of parliamentarians, other ministers beyond health).
- 3. During the policy implementation phase, the process could be facilitated by educating stakeholders and providing guidance on compliance and enforcement of the rules.
- 4. Monitoring and evaluation could be supported by:
  - ensuring that a monitoring and evaluation mechanism is included as part of national legislation or regulation; and
  - the strengthening of laboratory capacities.

