

Summary of recommendations for the prevention of other NCDs

Exposure	Recommendations	To prevent
Cereals (grains), roots, tubers and plantains	Choose fibre-rich wholegrains for most grain servings	CVD [63, 152]
Vegetables, fruit, pulses (legumes), nuts, seeds, herbs and spices	Suggested intake of 2 to 3 servings of fruit per day, 2 to 3 servings of vegetables per day, and 30 grams of unsalted nuts per day	CVD [63]
	Include legumes in the diet to improve overall iron intake	Iron-deficiency anaemia [92]
Fibre	Include sufficient consumption of dietary fibre	CVD [63]
Meat, fish and eggs	Include fish one to two times per week, one of which should be oily fish	CVD [63]
	Include small portions of meat, poultry or fish to increase the iron content of a diet	Iron-deficiency anaemia [92]
	Include meat, chicken, fish and eggs in diet	Included in national dietary guidelines for many countries [154]
Fats and oils	Limit intake of saturated fatty acids to less than 10 per cent of total energy intake	CVD [63]
	Avoid consuming trans-unsaturated fatty acids	Type 2 diabetes mellitus [152, 153]
		CVD [63, 152]
Salt and sugar	Restrict salt intake to less than 5 grams per day	CVD [155]
	Choose foods with less sodium and prepare foods with little or no salt	CVD [152]
	Limit or cut back on beverages and foods with added sugars	Type 2 diabetes mellitus [88]
Milk and dairy products	Include milk and dairy products daily, preferably low-fat versions	Included in national dietary guidelines for many countries [154]
Water, fruit juices, soft drinks and hot drinks	Discourage consumption of sugar sweetened beverages	Type 2 Diabetes mellitus and weight gain [88]
		CVD [63]
Alcoholic drinks	Limit or discourage consumption of alcoholic drinks	CVD [63] Osteoporosis [156]
Food production, processing, preservation and preparation Dietary constituents and supplements	Cook vegetables rich in vitamin C, folate and other water-soluble or heat-labile vitamins minimally in small amounts of water in order to enhance iron absorption	Iron-deficiency anaemia [92]
	Iron and folic acid supplementation may be needed to ensure adequate levels in areas with widespread prevalence of iron deficiency anaemia	Iron-deficiency anaemia [92]
	Ensure adequate calcium intake and adequate supply of vitamin D, including supplements if diet is insufficient	Osteoporosis [68, 156, 157]
Dietary patterns	Healthy eating pattern – follow a healthy eating pattern across the lifespan	CVD, diabetes, overweight and obesity [75, 152]
	Exclusive breastfeeding for infants for first 6 months of life	Protection against chronic diseases [144]
Physical activity	At least 150 minutes a week of moderate-intensity physical activity, such as brisk walking (additional benefits occur with more physical activity)	CVD [63, 158] Type 2 diabetes mellitus [153]
	Regular weight-bearing and muscle-strengthening exercise to improve agility, strength, posture and balance	Bone health [68, 158]
Weight gain, overweight and obesity	Achieve and maintain a healthy weight	CVD, Type 2 diabetes mellitus [63]

Example policy options¹ to promote healthy diets, physical activity, breastfeeding and reduce alcohol consumption, overweight, obesity and cancer, drawn from existing strategies, frameworks and plans [18, 136–144]^{*}

Note: Policy options need to be mindful of trade law obligations. Not all policy options outlined in the table are supported by the same level of evidence.

	Diet	Alcohol	Physical activity	Breastfeeding ²
Health-enhancing environments	(Food and drink environment)	(Food and drink environment)	(Built environment)	(Environments that support breastfeeding)
Labelling and packaging	<ul style="list-style-type: none">● Nutrient lists on packaged food● Clearly visible interpretive nutrition labels and warning labels on packaged foods● Calorie and nutrient labelling on menus and displays in out-of-home venues● Rules on nutrient claims and health claims on packaged food	<ul style="list-style-type: none">● Labels describing alcohol content (per cent of pure alcohol)● Labels describing calories, ingredients and serving sizes● Prominent, clearly worded warning labels on drinks to indicate alcohol-related harm	<ul style="list-style-type: none">● Prompts and cues in the environment to promote movement (e.g. signage to encourage stair use, signage for parks)	<ul style="list-style-type: none">● Labels on breastmilk substitutes on the appropriate use of the product, so as not to discourage breastfeeding● Labels on breastmilk substitutes to include a statement of the superiority of breastfeeding, a statement that the product should be used only on the advice of a health worker and instructions for appropriate preparation● Labels on breastmilk substitutes warning consumers that use can reduce breastfeeding, which has been linked to increased risk of cardiovascular disease and certain types of cancers in women● Plain (unbranded) packaging with no marketing claims
Healthy and safe schools, workplaces, public institutions and health facilities	<ul style="list-style-type: none">● Nutrition standards for food and drink available in preschools, primary, secondary and tertiary schools● Fruit and vegetable initiatives in schools● Bans specific to vending machines in schools● Nutrition standards for food and drink available in workplaces, health facilities and public institutions● Nutrition standards in social support programmes	<ul style="list-style-type: none">● Restrictions on alcohol consumption in educational buildings, workplaces and health facilities	<ul style="list-style-type: none">● Initiatives that optimise opportunities for physical activity (including walking and cycling to and from school) and active play, before and after school, during recess and lunch breaks, and reduce sitting during class lessons● School design guidelines that ensure adequate provision of accessible and safe environments for children to be physically active (e.g. play areas, recreational spaces), reduce sitting (e.g. activity permissive classrooms) and support walking and cycling to and from educational institutions● Multi-component workplace physical activity programmes● Labour and workplace policies that support physical activity● Infrastructure that facilitates activity by providing appropriate end of trip facilities (e.g. showers, bike racks)● Computer prompts and signage on desks in the workplace and schools to break up sitting	<ul style="list-style-type: none">● Implementation or expansion of the baby-friendly hospital initiative in health systems● Maternity protection legislation, including mandatory paid maternity leave● Policies that encourage and support women to breastfeed in the workplace and in public (e.g. lactation rooms, nursing breaks)
Fiscal policies	<ul style="list-style-type: none">● Health-related taxes, e.g. on sugary drinks and unhealthy foods● Increased/decreased import tariffs on specified foods● Targeted subsidies for healthy food● Incentives to support agricultural systems changes	<ul style="list-style-type: none">● Excise taxes on alcoholic drinks, graduated by volume of ethanol, that are reviewed regularly● Minimum pricing for alcoholic drinks sold in retail establishments and licensed premises	<ul style="list-style-type: none">● Incentives, tax deductions and targeted subsidies to support participation in physical activity (e.g. increase access to recreation facilities)● Parking and public transport policies that encourage active transport● Tax incentives to encourage workplaces to implement active travel policies for staff to use alternative forms of transport● Congestion charges and fuel levies	<ul style="list-style-type: none">● Maternity leave cash benefit
Marketing restrictions	<ul style="list-style-type: none">● Restrictions on all forms of food and drink marketing to children, including advertising, promotion and sponsorship● Restrictions of all forms of food and drink marketing in schools, including advertising, promotion and sponsorship	<ul style="list-style-type: none">● Bans or restrictions on alcohol marketing and advertising across all types of media and sponsorship, particularly marketing that reaches large numbers of youth and other vulnerable populations● Restrictions on alcohol promotion in educational buildings, workplaces and health facilities	<ul style="list-style-type: none">● Regulations on the marketing of products, environments and behaviours that encourage sedentary behaviour● Restrictions on sport partnerships and sponsorships with unhealthy products	<ul style="list-style-type: none">● Legislation to end inappropriate marketing of baby feeding products in line with the International Code of Marketing of Breast-milk Substitutes and subsequent resolutions● Legislation to end inappropriate marketing of complementary foods
Improve the food and drink supply	<ul style="list-style-type: none">● Limits on salt and requirements for removal of trans fats in food products● Limits on availability of high-fat meat products● Initiatives to increase the fibre and wholegrain content of food products in the overall food supply● Initiatives to increase the sustainability of food production	<ul style="list-style-type: none">● Limits on the amount of alcohol in products (e.g. ready drinks, beer, wine)● Limits on additives to alcoholic drinks, such as stimulants like caffeine and taurine	<ul style="list-style-type: none">● N/A	<ul style="list-style-type: none">● Policies to increase the availability of appropriate, diversified, nutrient-dense foods for complementary feeding and for breastfeeding women● Limits on salt and sugar and requirements for removal of trans fats in infant and toddler food and drink
Incentives in communities	<ul style="list-style-type: none">● Initiatives to increase the availability of healthier foods in stores and food service outlets● Incentives and regulations to reduce ‘less healthy’ food and ingredients in food service outlets	<ul style="list-style-type: none">● Licensing system on retail sales or public health oriented government monopolies on the production and/or sale of alcohol● Restrictions on drinking in public spaces● Restrictions on days and hours of sale of alcohol● Restrictions on purchase of alcohol at petrol stations	<ul style="list-style-type: none">● Community walking and cycling programmes● Sport and recreation policies that create active opportunities for everyone● Incentives and rules to make safe spaces for physical activity (e.g. improved lighting), including recreation and public and active transport	<ul style="list-style-type: none">● Community-based interventions, including group counselling or education● Home visits by public health nurse or midwife soon after birth to promote, protect and support breastfeeding
Healthy urban design	<ul style="list-style-type: none">● Planning restrictions on food outlets● Incentives and rules for stores to locate in underserved neighbourhoods (e.g. healthier retail outlets)	<ul style="list-style-type: none">● Restrictions on density of on-premise and off-premise alcohol outlets and integration of public health considerations into relevant planning laws	<ul style="list-style-type: none">● Transport planning policies, systems and infrastructure that prioritise walking, cycling and use of public transport● Urban design regulations and infrastructure that provide convenient, safe and affordable access to quality public open space● Policies that increase access to fresh quality fruit and vegetables in local areas that can be easily accessed by foot, bicycle or public transport● Land use and urban policies that require city and regional designs to incorporate residential density, connected street networks that include sidewalks, easy access to a diversity of destinations and access to public transport	<ul style="list-style-type: none">● Policies that encourage and support women to breastfeed in public● Nursing stations in public facilities such as airports, train stations, parks, etc.
Systems change				
Integrate actions across sectors	<ul style="list-style-type: none">● Nutrition standards for public procurement● Public procurement through ‘short’ chains (e.g. local farmers)● Supply chain incentives for food production (e.g. stimulating markets for healthier foods)● Governance structures for multisectoral/ stakeholder engagement	<ul style="list-style-type: none">● Drink-driving laws and blood alcohol concentration limits through sobriety checkpoints● An appropriate minimum age for purchase or consumption of alcoholic drinks● Governance structures for multisectoral/ stakeholder engagement to harmonise alcohol policies across government sectors	<ul style="list-style-type: none">● Cross-level government working groups including representatives from national, regional and local levels of government to implement action plans at each level synergistically● Policies that ensure adequate access to, and use of, natural environments for physical activity, recreation and play	<ul style="list-style-type: none">● Governance structures for multisectoral/ stakeholder engagement
Behaviour change communication				
Inform people	<ul style="list-style-type: none">● Development and communication of food-based dietary guidelines● Public awareness campaigns on healthy eating● Public awareness campaigns concerning specific unhealthy food and drink	<ul style="list-style-type: none">● Public awareness campaigns about risks of alcohol consumption and cancer● Development and communication of ‘lower-risk’ drinking guidelines	<ul style="list-style-type: none">● Development and communication of physical activity guidelines● Sustained, community-wide education and public awareness campaigns using traditional and social media and social marketing techniques to promote and increase understanding of the diverse ways everyone can be active, as well as increase understanding of the risks of physical inactivity and sedentary behaviour● Public awareness communications about places to be physically active	<ul style="list-style-type: none">● Community-based communication campaigns to promote, protect and support exclusive breastfeeding for the first 6 months of life, tailored to the local context● Mass media and social media campaign on breastfeeding