Meeting Report

Pacific Workshop on Nutrition, Noncommunicable Diseases and the Role of Codex

20–22 April 2015
Nadi, Fiji
Participants of the Pacific Workshop on Nutrition, Noncommunicable Diseases and the Role of Codex
20–22 April 2015
Nadi, Fiji
MEETING REPORT

PACIFIC WORKSHOP ON NUTRITION, NONCOMMUNICABLE DISEASES
AND THE ROLE OF CODEX

Convened by:

WORLD HEALTH ORGANIZATION
REGIONAL OFFICE FOR THE WESTERN PACIFIC
AND THE
FOOD AND AGRICULTURE ORGANIZATION OF THE UNITED NATIONS

Nadi, Fiji
20–22 April 2015

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NOTE

The views expressed in this report are those of the participants of the Pacific Workshop on Nutrition, Noncommunicable Diseases and the Role of Codex and do not necessarily reflect the policies of the conveners.

This report has been prepared by the World Health Organization Regional Office for the Western Pacific for Member States in the Region and for those who participated in the Pacific Workshop on Nutrition, Noncommunicable Diseases and the Role of Codex in Nadi, Fiji from 20 to 22 April 2015.
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Keywords:
Chronic diseases – prevention and control / Food – standards / Nutritional requirements /
Pacific islands / Sodium chloride, dietary
### ABBREVIATIONS

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CAC</td>
<td>Codex Alimentarius Commission</td>
</tr>
<tr>
<td>CCEXEC</td>
<td>Executive Committee of the Codex Alimentarius Commission</td>
</tr>
<tr>
<td>CCFL</td>
<td>Codex Committee on Food Labelling</td>
</tr>
<tr>
<td>CCNASWP</td>
<td>Coordinating Committee for North America and the South West Pacific</td>
</tr>
<tr>
<td>CCNFSDU</td>
<td>Codex Committee on Nutrition and Foods for Special Dietary Uses</td>
</tr>
<tr>
<td>CTF</td>
<td>Codex Trust Fund</td>
</tr>
<tr>
<td>DPAS</td>
<td>Global Strategy on Diet, Physical Activity and Health</td>
</tr>
<tr>
<td>FAO</td>
<td>Food and Agricultural Organization of the United Nations</td>
</tr>
<tr>
<td>JICA</td>
<td>Japan International Cooperation Agency</td>
</tr>
<tr>
<td>NCC</td>
<td>National Codex Committee</td>
</tr>
<tr>
<td>NCD</td>
<td>noncommunicable disease</td>
</tr>
<tr>
<td>SPC</td>
<td>Secretariat of the Pacific Community</td>
</tr>
<tr>
<td>UN ESCAP</td>
<td>United Nations Economic and Social Commission for Asia and the Pacific</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
</tbody>
</table>
SUMMARY

Noncommunicable diseases (NCDs) are the leading cause of death in Pacific island countries and areas where the epidemic is considered a health and economic crisis. The Pacific Workshop on Nutrition, Noncommunicable Diseases and the Role of Codex brought together 23 country participants from ministries of health and agriculture. The workshop objectives were:

1) to share experiences and identify options to overcome challenges associated with strengthening legal frameworks to reduce population intake of salt, sugars and fat in the Pacific;

2) to consider and identify Codex standards and guidelines to support country efforts to control and regulate nutrition-related NCD risk factors; and

3) to identify Pacific priorities on food standards setting to address nutrition challenges.

The workshop was chaired by Dr Vita Skilling from the Federated States of Micronesia and vice-chaired by Mr Elias Taia from Papua New Guinea. The workshop consisted of a series of presentations, group work sessions and discussions.

The participants concluded that Codex standards and guidelines are an important avenue for controlling and regulating nutrition-related NCD risk factors in the Pacific. The cost effectiveness of salt reduction is supported by a strong evidence base. As such, salt containing foods were identified as a strategic focus for the Pacific region such that Codex mechanisms are used to identify and standardize maximum levels of sodium in processed food. This was seen as a starting point introducing NCD-related standards through Codex. Further action include working on a proposal for amendments to the Codex standards for instant noodles and canned corned beef and, more immediately, for Papua New Guinea to make a statement at CCEXEC in June/July 2015 as CCNASWP Chair about the need for Codex to consider options to better address diet related NCD issues.

1. INTRODUCTION

1.1 Background

Noncommunicable diseases (NCD) have been declared a crisis for the 11 million people of the Pacific Islands. The four major NCDs – cardiovascular diseases, cancer, diabetes and chronic respiratory diseases – account for 76% of all deaths in the Pacific. Unhealthy diet – leading to overweight and obesity, high blood cholesterol, raised blood glucose and elevated blood pressure, as well as undernutrition and micronutrient deficiencies – is a primary modifiable risk factor contributing to the growing NCD burden.

The Pacific has undergone a major shift in food consumption patterns over the past 50 years. The diet of Pacific Islanders has changed from one principally consisting of locally grown root crops, fruits and vegetables, fresh fish and free range chicken and pigs to one dominated by imported white bread, rice, canned goods and highly processed foods which in most cases are cheap and convenient, but nutritionally poor. Imported products high in fat, sugar or salt dominate the food supply and there is limited consumer access to healthy local foods. Food legislation in most Pacific island countries is outdated, not enforced and/or primarily designed to address foodborne diseases and/or infectious diseases and only to a limited extent to ensure healthy diet.

Pacific health ministers have repeatedly sought solutions to counter the negative impacts of imported high-energy, nutrient-poor foods. Interventions such as taxation, supply restrictions and comprehensive approaches to improving food security have been tried with varying degree of success. Through the Apia Communiqué, the Pacific health ministers reiterated their commitment to address the NCD crisis by promoting multisectoral action, including developing targets for recommended
levels of fat, sugar and salt in food and beverages. This was further reaffirmed in the Yanuca Declaration 2015.

The Western Pacific Regional Action Plan for the Prevention and Control of Noncommunicable Diseases (2014–2020) supports Member States in strengthening their response to NCDs, while the Action Plan to Reduce the Double Burden of Malnutrition in the Western Pacific Region 2015–2020 addresses diet-related diseases and nutritional risk factors. The Western Pacific Regional Food Safety Strategy 2011–2015 supports Member States in strengthening national food safety systems including risk-based regulatory frameworks. The Global Strategy on Diet, Physical Activity and Health was endorsed by the World Health Assembly in 2004. In collaboration with WHO, the Codex Alimentarius Commission – in particular through the Codex Committee on Food Labelling (CCFL) and the Codex Committee on Nutrition and Foods for Special Dietary Uses (CCNFSDU) – has been taking action to implement the strategy.

1.2 Workshop organization

The meeting was jointly convened by the Food and Agricultural Organization of the United Nations (FAO) and WHO with support from the Codex Trust Fund. Pacific island country members of Codex’s Coordinating Committee for North America and the South West Pacific (CCNASWP) attended the workshop together with observers from Deakin University, Japan International Cooperation Agency (JICA), Secretariat of the Pacific Community (SPC) and United Nations Economic and Social Commission for Asia and the Pacific (UN ESCAP). The workshop timetable is available at Annex 1. The workshop brought together participants from 10 Pacific island countries representing health and agriculture sectors. The list of participants is available at Annex 2. Feedback from participant evaluations of the workshop is available at Annex 3.

1.3 Workshop objectives

The workshop objectives were:

1) to share experiences and identify options to overcome challenges associated with strengthening legal frameworks to reduce population intake of salt, sugars and fat in the Pacific;
2) to consider and identify Codex standards and guidelines to support country efforts to control and regulate nutrition-related NCD risk factors; and
3) to identify Pacific priorities on food standards setting to address nutrition challenges.

2. PROCEEDINGS

2.1 Opening session

The participants were warmly welcomed by Mr Peter Hoejskov of WHO and Mr Dirk Schulz of FAO. Both speakers noted that due to changes in dietary patterns from traditional to processed foods over the last 20 to 30 years, unhealthy diet is now the major risk factor for the growing burden of NCDs in the Pacific. Reference was made to Pacific health ministers calls for solutions to the negative impact of imported high-energy and nutrient-poor foods and strengthening countries involvement in Codex was identified as one such solution. Both opening speakers acknowledged financial support of the

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1 Participants were Codex focal points and representatives from ministries of health or agriculture from Cook Islands, Fiji, Kiribati, the Federated States of Micronesia, Nauru, Papua New Guinea, Samoa, Solomon Islands, Tonga and Vanuatu.
Codex Trust Fund for the meeting and expressed optimism that Codex processes and standards could be strengthened to help reduce population intakes of salt, sugar and fat in the Pacific.

Dr Vita Skilling, Secretary for Health, Federated States of Micronesia was elected as chair of the workshop and Mr Elias Taia, Program Manager and Codex Contact Point, Science and Technology Branch, Department of Agriculture and Livestock from Papua New Guinea as vice-chair.

2.2 More needs to be done to promote healthy eating in the Pacific

Mr Peter Hoejskov reminded participants of the NCD crisis in the Pacific and the commitment Pacific leaders are making to address it. NCDs are the major cause of death, accounting for 76% of all deaths in the Pacific. NCDs are also the major cause of morbidity. Pacific countries have some of the highest rates of obesity, type 2 diabetes and hypertension in the world and cancers are on the rise. Poor diet is a major determinant of most of these diseases. Participants were reminded how much dietary patterns have changed in Pacific countries over the last several decades from healthy to unhealthy. Previously based on fresh fish, free range chickens, coconut and locally grown root crops and fruits, diets are now dominated by imported, processed foods such as rice and canned foods. Many of these imported foods are high in fat, sugar and/or salt making it hard to stay under the maximum recommended intake levels and many are low in essential micronutrients such as iron and vitamin A, making it hard for people to achieve minimum daily requirements. For example, if a person eats three slices of a popular brand of canned pre-cooked meat, they will have already hit their maximum intake of saturated fat and sodium for the day.

Dr Wendy Snowdon reported on the Pacific Health Ministers Meeting (convened one week prior). The ministers were anxious that not enough was being done to ensure that Pacific children were nurtured in body and mind and felt there was insufficient focus on nutrition at a regional level and that more needed to be done to recognize and scale up successful programmes. Better support for breastfeeding was emphasized along with the need for more community-based action and legal, fiscal, taxation and organizational changes to improve diet and health. Nutrition labeling was identified as an important strategy.

2.3 The role and function of Codex

Mr Dirk Schultz presented the history, role and function of Codex. Founded in 1963, Codex was built on the principles of fair trade and health protection, particularly through food safety. To enhance effective participation by developing countries in Codex Alimentarius, the Codex Trust Fund (CTF) was established in 2003 by FAO and WHO. Since then, the fund has supported more than 200 participants from Pacific island countries and areas (2003–2014) to attend meetings. The fund's objectives moving forward will be:

- to build strong and sustainable national capacity to engage in Codex;
- to have a more tailored approach to reflect national priorities; and
- to encourage partnering and mentoring between countries, twinning between developing and transition economy and technical support.

Codex supports trade, with a focus on risk management rather than prevention. However, Codex has always recognized that trade can negatively impact public health. Codex’s work on essential food elements and nutrition labelling could help overcome these negative impacts. The Codex Committee on Food Labelling (CCFL) and the Codex Committee on Nutrition and Foods for Special Dietary Uses (CCNFSDU) are the most relevant to this pursuit. The Pacific island countries are represented at Codex through Codex’s Committee for North America and South West Pacific (CCNASWP). This Committee has been chaired by Samoa, Tonga and Papua New Guinea. Vanuatu will chair the committee from July 2015.
2.4 Implementing the Global Strategy on Diet, Physical Activity and Health through Codex

Dr Chizuru Nishida outlined the longstanding dialogue between WHO and Codex in relation to population nutrient goals in the early 2000s. This includes the formal request from WHO Member States to the Codex Alimentarius Commission (CAC) to continue to consider what evidence-based action CAC might take to improve the health standards of foods, consistent with the aims and objectives of the Global Strategy on Diet, Physical Activity and Health (DPAS). In 2005 CAC requested that WHO prepare a document identifying actions Codex could take to prevent NCDs. This document contained a series of proposals on: nutrition labeling; nutrition claims; quantitative declaration of ingredients; and modification of standardized foods and production and processing standards regarding nutritional quality and safety of foods. Participants were invited to think about how they may be able to strengthen national and regional Codex committees to support such actions.

2.5 Country reports on policy/legal strategies to reduce NCDs and related challenges

Country representatives shared information on the status of policy and legal strategies to reduce NCDs, how Codex may have been integrated into these activities and challenges they faced.

Cook Islands

- Interest and engagement in agricultural production is declining among young people due in part to declining wages relative to the tourism industry.
- A number of programmes are in place to encourage people to eat healthier food and adopt healthier lifestyles such as the Vae Vae challenge.
- A range of food acts, regulations and policies are in place.
- The tax on tobacco and sugary drinks was increased.
- Non-English nutrition labels are a problem.
- An important part of the solution is making partnerships, including with the food industry and importers.

Fiji

- A four-year plan for sugar, salt and fat reduction is in place.
- Fiji recognizes that few consumers read or understand nutrition labels.
- Taxation measures are in place to encourage healthy food consumption.
- Fiji plans to adopt the healthy star rating (a front-of-pack nutritional labeling scheme used in Australia and New Zealand).

Kiribati

- Kiribati is heavily dependent on imported food. Until 2012, only one shipment arrived per month. After a cargo shortage in 2012, there are now three vessels scheduled each month.
- Import and sale of food products that have passed the date mark is a major challenge.
- Kiribati is working on salt reduction including adoption of the Pacific salt reduction targets into national legislation.
- Staff movement makes it difficult to implement and maintain nutrition strategies.

Federated States of Micronesia

- Public laws set higher duties on some foods of poor nutritional quality (e.g. turkey tails).
- The Federated States of Micronesia has four regulations (for hygiene, low acid canned foods, labeling on pre-packaged food and frozen fish blocks) based on Codex.
- Challenges include the absence of maximum standards for fat, no analytical capacity to monitor compliance with food standards and the time it takes for standards to be approved.
**Papua New Guinea**

- Codex activity has focused on producing safe food products for export.
- Stunting and wasting are still a problem for children in Papua New Guinea and NCDs are a growing problem for adults.
- As chair of CCNASWP, Papua New Guinea has led development of new Codex standards for Noni and Kava.
- All new food laws will reflect Codex text.
- Papua New Guinea supports a strategy of using dietary guidelines and applying taxes if products exceed guideline targets.

**Samoa**

- Samoa has had a National Codex Committee since 2002 with broad membership.
- Samoa is preparing for final approval of a long awaited update to the food bill.
- Dietary guidelines are available for schools and workplaces.
- Monitoring work is ongoing to determine compliance with the International Code of Marketing of Breast-milk Substitutes and flour fortification.

**Solomon Islands**

- Solomon Islands has a national food security, food safety and nutrition policy (2010–2015) and Pure Food Act 1996 and Food (Food Control) Regulations 2010 based on Codex.
- Planners tend to react to issues at the expense of strategic planning.
- Legal and logistical support is inadequate to draft legislation and enforcement capacity is limited.
- Fishing vessels are off-loading by-catch to local populations. This appears to be good for the population because the fish are healthy but they may be high salt because the fish are soaked in brine.

**Tonga**

- Tonga has a national NCD strategy (2010–2015). Excise taxes (amended in 2013) have been adjusted for certain products to improve nutrition quality (e.g. a tax on imported fresh fish was reduced from 20% to 5%).
- Tonga does not have the ability to test compliance with food standards.
- More than 90% of food is imported.
- The National Codex Committee is based in the Ministry of Agriculture, Forestry, Food & Fisheries.
- The Food Act (2014) is based on Codex.

**Vanuatu**

- The National Codex Committee was established in 2000. The current chair is from the Ministry of Health. Efforts to strengthen the Committee after a 2009 National Food Summit are yet to be realized.
- The Committee is working on a national policy on food security and food regulations (based on Codex standards).
- Challenges include political instability leading to delayed endorsement of the Codex structure, limited commitment from major ministries (agriculture, trade and health) and a lack of human resources.
- A sugary drink tax is in place.
2.6 Discussion points arising from day one

1. The Federated States of Micronesia noted that the regional Codex Committee, CCNASWP did not acknowledge northern Pacific countries.
2. Papua New Guinea appreciated the CTF's support to participate in Codex activities and chair the CCNASWP. The CTF has helped to improve awareness at national level about the importance of food legislation development.
3. Tonga was unaware of CTF until this workshop.
4. Temporary advisor A/Prof Colin Bell asked who are the donors for CTF? The timeframe for standards development – how can it be sped up?
   - Member states fund the trust.
   - Standards development can be fast tracked in emergency cases such as melamine in milk powder/infant formula.

2.7 The inner workings of Codex

The Codex committees whose work most closely aligns with NCD prevention are the Codex Committee on Food Labelling (CCFL) and the Codex Committee on Nutrition and Foods for Special Dietary Uses (CCFSDU). Dr Chizuru Nishida provided an update on the recent work of these two committees, summarized in Table 1.

Table 1: Summary action plan for implementing DPAS through Codex

<table>
<thead>
<tr>
<th>Codex Committee on Food Labelling (CCFL)</th>
<th>Codex Committee on Nutrition and Foods for Special Dietary Uses (CCFSDU)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Nutrition labelling</td>
<td>1. Nutrition labelling</td>
</tr>
<tr>
<td>3. Quantitative declaration of ingredients</td>
<td>3. Production and processing standards regarding the nutritional quality and safety of foods</td>
</tr>
<tr>
<td>4. Modification of standardized foods</td>
<td></td>
</tr>
</tbody>
</table>

Significant action has been taken by CCFL and CCFSDU on nutrition labelling, including making nutrient declarations mandatory on all pre-packaged foods and expanding the list of nutrients that are always declared to include fat (saturated, trans), sugar and sodium. Work on amending the purpose of the guidelines to permit dietary management of NCDs is under review. Conditions related to nutrient content claims for trans-fatty acids have not progressed because there was insufficient scientific justification to classify all trans fat as having negative effects on health. WHO is updating total fat, saturated fat and trans fat guidelines and the WHO Regional Office for Europe has established a nutrient profiling system to help Member States make decisions regarding marketing restrictions and taxation. Other WHO regional offices including the Regional Office for the Eastern Mediterranean and the Regional Office for the Western Pacific are adapting the nutrient profiling model.

Mr Elias Taia reported on the work of the CCNASWP over the past four years and the contribution Papua New Guinea has made to the committee as chair. The six objectives of the CCNASWP strategic plan (2014–2019) for the next five years are:

1. to strengthen communication among CCNASWP members and the coordination of the region’s activities in Codex;
2. to provide maximum participation of all CCNASWP members of the region in the activities of CAC and its subsidiary bodies in particular in the CCNASWP region;
3. to promote the development and enhancement of national Codex contact points, national Codex committees, delegates and stakeholders, especially for Pacific members to carry out their core functions;
4. to strengthen the exchange of scientific and technical expertise and information among member countries of the region;
5. to promote the use of Codex standards, codes and guidelines in national standard development; and
6. to promote the development of Codex standards for specific food products produced in Pacific island countries and areas and other food related issues.

Moving forward Pacific countries can request work through Vanuatu, as the next chair of CCNASWP. The CCNASWP representative can then bring the issues to the CCEXEC who will assign the work to the relevant committee.

2.8 Initial group discussion on participation in Codex

Participants noted one challenge in integrating NCD prevention into Codex is that WHO advice regarding salt and sugar targets individuals (e.g. 5g of salt per day) while Codex standards are food product based and focus on minimum nutrient thresholds. From an NCD prevention perspective, maximum thresholds for sugar, fat and salt and associated nutrition labels for processed food would be helpful. Following the initial group discussions, two pathways were identified:

1. Identifying specific food items of dietary concern in the Pacific (e.g. instant noodles and canned corned beef) and working with Codex to improve their nutrition quality.
2. Highlighting nutrition priorities in the Pacific through the Executive Committee of the Codex Alimentarius Commission (CCEXEC) and CAC.

2.9 Nutrition-related food policy – evidence and experiences

Following the first round of group discussions participants were updated on policy options for interventions to control food-related NCD risk factors and on recent global and local experiences implementing programmes to reduce salt, sugar and fat.

Dr Jillian Wate offered definitions of food policy, including that of Timmer et al who describe food policy as “…the collective efforts of governments to influence the decision-making environment of food producers, food consumers and food marketing agents in order to further social objectives.”

Instruments for policy implementation and enforcement include:

- laws: legislation, regulations and fiscal measures (e.g. taxation)
- enforceable directives/actions (e.g. settings)
- dictating funding for programmes and service delivery
- advocacy, education and policy statements
- self-regulation (industries)

Examples of food-related taxes and policies in the Pacific were also provided (Tables 2 and 3).

Food policy should be informed by evidence and developed using a knowledge translation and exchange process so that the policy is effective, timely, relevant, well understood and sustainable. Health impact assessments of food-related policy are needed so that intended and unintended outcomes can be evaluated.

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Table 2: Select examples of food-related taxation in the Pacific

<table>
<thead>
<tr>
<th>Country</th>
<th>Type of taxation</th>
<th>Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cook Islands</td>
<td>Import duty on sugar-sweetened drinks</td>
<td>15% with a subsequent 2% rise per year</td>
</tr>
<tr>
<td>Fiji</td>
<td>Import duty and local excise duty</td>
<td>5% import duty; 5 cents/litre local excise duty</td>
</tr>
<tr>
<td>Fiji</td>
<td>Excise on raw materials</td>
<td>3%</td>
</tr>
<tr>
<td>Fiji</td>
<td>Import duty on palm oil and monosodium glutamate</td>
<td>32%</td>
</tr>
<tr>
<td>Fiji</td>
<td>Import duty on fruits and vegetables not grown locally</td>
<td>Removal of existing taxes, which were 5–32%</td>
</tr>
<tr>
<td>French</td>
<td>Excise and import tax on sugar-sweetened drinks, confectionaries and ice cream</td>
<td>40 CFP/litre local tax; 60 CFP/litre imported tax</td>
</tr>
<tr>
<td>Nauru</td>
<td>Sugar levy on all high-sugar foods and drinks and removal of a levy on bottled water</td>
<td>30%</td>
</tr>
</tbody>
</table>

Table 3: Select examples of food-related policy in the Pacific

<table>
<thead>
<tr>
<th>Country</th>
<th>Type of policy action</th>
<th>Year</th>
<th>Data sources available for monitoring</th>
<th>Evidence on potential effectiveness of implementation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fiji</td>
<td>Required labelling of trans-fatty acids and sodium on all processed foods</td>
<td>2013</td>
<td>Store surveys will assess changes in the level of labelling.</td>
<td>Not yet implemented</td>
</tr>
<tr>
<td>Fiji and Solomon Islands</td>
<td>Requirement for shelf labelling to denote high-fat meats</td>
<td>2009 and 2012</td>
<td>None planned</td>
<td>Not yet implemented</td>
</tr>
<tr>
<td>Fiji</td>
<td>Ban on sales of mutton flaps</td>
<td>2000</td>
<td>None</td>
<td>Reduction in availability of mutton flaps; unknown impact on overall diet</td>
</tr>
<tr>
<td>Samoa</td>
<td>Ban on importation of turkey tails</td>
<td>2007–2012</td>
<td>Importation data</td>
<td>Reduction in availability of tails; consumer survey suggests changing consumer behaviours</td>
</tr>
</tbody>
</table>

Dr Jacqui Webster reminded participants why salt (sodium in particular) reduction was such a cost effective intervention for NCD prevention and control and gave details of a successful United Kingdom salt reduction campaign and of similar efforts underway in Fiji and Samoa. While there are no Codex standards for maximum salt/sodium levels in foods, there are no regulations that prohibit evidence-based national maximums. Standards need to be applied equally to local and imported foods so they are not seen as a barrier to trade. Participants were updated on the process of developing Pacific salt targets for commonly consumed foods (such as breads, Asian sauces, canned fish and meats, sausages and snack foods) and reminded of the actual sodium targets per 100 grams of food (Table 4). They were also advised that while legislation is helpful, salt reduction can also happen without it.
Table 4: Pacific salt reduction targets by food category

<table>
<thead>
<tr>
<th>Food category</th>
<th>Sub-category</th>
<th>Target sodium mg/100g</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bread and roti</td>
<td>Bread without filling</td>
<td>400</td>
</tr>
<tr>
<td>Asian sauces</td>
<td>Soy sauce, Fish sauce, etc.</td>
<td>4,840</td>
</tr>
<tr>
<td>Canned fish</td>
<td>Tuna, salmon, sardines, mackerel and other canned fish</td>
<td>430</td>
</tr>
<tr>
<td>Canned meat</td>
<td>Corned beef, luncheon meat and other canned meat products</td>
<td>540</td>
</tr>
<tr>
<td>Sausages</td>
<td>Lamb, pork, beef and chicken sausages – frozen, chilled, canned and other sausages</td>
<td>600</td>
</tr>
<tr>
<td>Snack food</td>
<td>Crisps</td>
<td>600</td>
</tr>
<tr>
<td></td>
<td>Extruded snacks</td>
<td>750</td>
</tr>
<tr>
<td></td>
<td>Corn chips</td>
<td>560</td>
</tr>
<tr>
<td>Biscuits</td>
<td>Plain biscuits and crackers</td>
<td>610</td>
</tr>
<tr>
<td></td>
<td>Savoury biscuits</td>
<td>800</td>
</tr>
<tr>
<td></td>
<td>Sweet biscuits – filled and unfilled</td>
<td>450</td>
</tr>
<tr>
<td>Instant noodles</td>
<td>Ramen and other instant noodle products</td>
<td>1,600</td>
</tr>
</tbody>
</table>

Source: Pacific salt reduction targets, WHO 2014

Tebikau Tibwe and Eretii Timeon from Kiribati and Alipate Momoka and Jiutajia Tikoitoga from Fiji presented on their experiences reducing salt (Kiribati) and salt, sugar and fat (Fiji). Both countries have implemented awareness raising activities (event-based), worked with food industry to encourage product reformulation and begun work to implement food regulations. One constraint in Kiribati was frequent rotation of teachers in the outer Islands. This made it hard to deliver messages consistently. Fiji will be adopting a "healthy star rating" to assist consumers to identify more nutritious food items. This follows analysis of data from focus groups which found consumers generally did not use, or did not know how to use, the nutrition information panel on the back of packaged food items.

2.10 Group discussions on national and regional actions

Groups were formed to discuss what tangible next steps could be taken at national and regional levels to strengthen NCD prevention and control through Codex. At the national level there was support from participants for bringing proposals from countries to CCNASWP to "give voice" to nutrition issues. Practical actions such as reinvigorating committees, building the knowledge and skills of committee members and sourcing information on population dietary intakes were offered. Given the limited resources to attend Codex meetings, participants agreed to work together as a region to address common interests in Codex in a more coordinated manner.

From a regional perspective, participants emphasized the need to raise awareness of the food-related health crisis in the Pacific amongst Codex members outside of the region, and to advocate that Codex has an important role to play within the framework of its mandate to protect the health of consumers. While acknowledging the work by of Codex committees such as the CCFL and CCNFSDU, the participants stressed the need to consider paying attention to food compositional commodity standards. Participants agreed that the evidence base on salt/sodium was strongest, given that WHO has identified salt reduction as a cost-effective “best buy” intervention and this was reiterated in the Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013–2020. The participants reviewed a list of commonly consumed foods that contribute significantly to sodium intake among Pacific consumers and identified instant noodles as a food group that contributes significantly (high to very high levels of sodium content, frequently consumed by children and adults across the region). Participants therefore recommended that instant noodles would serve as an entry
point to consider developing maximum levels of sodium content in processed foods as a complementary means to control NCD risk factors from a standards perspective.

2.11 Stimulating improvements in the nutrition quality of food in the Pacific

To open the last day of the workshop, experts from regional organizations shared options for policy and legal interventions to improve diet, trends and patterns for imported food in the Pacific, options to eliminate trans fat in the food supply and WHO guidelines on sugar intake for adults and children.

Mr Nicky Anaturin outlined the trade agreements in operation across the Pacific – the Pacific Island Countries Trade Agreement (PICTA). Negotiations are ongoing on the Pacific Agreement on Closer Economic Relations. When finalized, this agreement will influence the types and quantities of food flowing into the Pacific. The general sentiment of participants was that while the agreement may help exports of products like Noni to international markets, the agreement will also open the borders of Pacific countries to a wider range of food products of low nutritional quality. This may constrain efforts to strengthen national food control systems. Actions contemplated by countries to address unhealthy products through policy and/or legal interventions may be constrained by industry challenges or threatened under various trade regimes, as well as investment agreements.

Mr Siope Vakataki’Ofa presented information from the International Trade Statistics Database to highlight trends and patterns of imported foods to the Pacific. Over the last 14 years there have been declines in imports of "high-profile" mutton flaps and turkey tails to most Pacific island countries. However, over the same period carbonated soft drinks and salt imports have increased along with products such as canned fish, corned beef and instant noodles. Several of the countries that provide development support to the Pacific region, such as the United States of America, Australia and New Zealand, are also among the main exporting countries to the Pacific. Most foods linked to NCDs in the Pacific are imported from overseas. Effective food standards are needed to regulate these food imports before they arrive.

Mr Usaia Dolodolotawake alerted participants to common sources of trans fat in the Fijian diet. Hydrogenated vegetable oils, such as those present in margarines, were identified as a major source of trans fat in the Fijian diet. Other sources include some peanut butters, bakery products such as biscuits, noodles and roti, and cooking oils. In terms of consumption, vegetable oils, fried potato chips, fish and chips, butter and roti contributed the most trans fat to the population's diet. Recommended options to address this situation include food legislation to ban foods with high trans-fat content and changes in cooking behaviors to avoid frying and use of cooking oils that have been repeatedly heated.

Dr Chizuru Nishida identified the possible role that Codex can play in helping to implement the 2015 WHO recommendations on sugar. WHO’s recommendations are:

- reduced intake of free sugars throughout the life-course (strong recommendation);
- in both adults and children, reducing the intake of free sugars to less than 10% of total energy intake (strong recommendation); and
- a further reduction of the intake of free sugars to below 5% of total energy intake (conditional recommendation).

2.12 Making better use of Codex for nutrition and NCD prevention and control in the Pacific

Plenary discussion to identify options for more active participation of Pacific island countries in Codex and to identify priorities for achieving harmonized food standards that address nutrition challenges in the Pacific. Participants prepared and presented country action plans – in line with national food, nutrition and NCD strategic plans – to develop and implement policy and regulatory measures to reduce population intake of fats, sugars and salt. The country specific actions are summarized in Table 5.
Table 5: Summarizing country actions from the Pacific Workshop on Nutrition, Noncommunicable Diseases and the Role of Codex

<table>
<thead>
<tr>
<th>Country</th>
<th>Actions</th>
<th>How?</th>
<th>Who?</th>
<th>When?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cook Islands</td>
<td>1. Present report to National Codex Committees NCC/ Cook Islands National Strategy and Action Plan (CINSAP) of NCD CINSAP</td>
<td>Codex committee meeting, invite CINSAP to attend</td>
<td>Ministry of Agriculture and Ministry of Health</td>
<td>May 2015</td>
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<tr>
<td></td>
<td>2. Look at Codex nutrition guideline and see what is applicable to our situation</td>
<td>Codex and CINSAP committee meeting</td>
<td></td>
<td>November 2015</td>
</tr>
<tr>
<td>Fiji</td>
<td>1. Include nutrition as an agenda item in all NCC meetings</td>
<td>• Write to NCC secretariat</td>
<td>Ministry of Health and Medical Services Contact point</td>
<td>Quarter (Q) 2 2015</td>
</tr>
<tr>
<td></td>
<td>2. Collate evidence for noodles, canned meat • Consumption • Availability • Total contribution to salt intake</td>
<td>Data sources</td>
<td>Foods taskforce Technical Advisory Group TAG</td>
<td>Q2–Q4 2015</td>
</tr>
<tr>
<td>Kiribati</td>
<td>1. Update nutrition policy highlighting the NCD component in the policy</td>
<td>All NCC members are also members of the Kiribati food and nutrition committee</td>
<td>Nutrition Unit</td>
<td>Q3 2015</td>
</tr>
<tr>
<td></td>
<td>2. Develop food policy for hawkers in workplaces: something like the school food policy</td>
<td>Various meetings with concerned partners: NCC, Office of the Attorney General (OAG), Legal Adviser (LA)</td>
<td>Environmental Health</td>
<td>Develop Q3,4 Implement 2016</td>
</tr>
<tr>
<td>Micronesia,</td>
<td>1. Establish a national Codex Committee</td>
<td>Identify key representatives Draft terms of reference Identify budget</td>
<td>Codex focal point</td>
<td>May 2015</td>
</tr>
<tr>
<td>Federated States of</td>
<td>2. Complete food and nutrition labelling regulations</td>
<td>Currently underway</td>
<td>Food safety committee</td>
<td>November 2015</td>
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<tr>
<td></td>
<td>3. Attach a salt survey to The Behavioral Risk Factor Surveillance System (BRFSS)</td>
<td></td>
<td>Q3 2015</td>
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<tr>
<td>Country</td>
<td>Actions</td>
<td>How?</td>
<td>Who?</td>
<td>When?</td>
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<tr>
<td>Nauru</td>
<td>1. Salt reduction</td>
<td>Lobby government for action Bring to notice of country Codex committee</td>
<td>Department of Health and Medical Services (Environmental Health, Public Health, Nutrition)</td>
<td>End of 2015</td>
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<td></td>
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<tr>
<td></td>
<td>2. Review food regulations</td>
<td>Codex</td>
<td>Boarder control (Agriculture)</td>
<td>End of 2015</td>
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<tr>
<td>Papua New Guinea</td>
<td>Draft proposal on the reduction of salt, sugar and fat</td>
<td>Take NCD issues to CCNASWAP Papua New Guinea Chair</td>
<td>FAO, WHO, Papua New Guinea</td>
<td>July 2015</td>
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<td></td>
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<tr>
<td></td>
<td>2. Incorporate NCD issues in national food security and food safety policies</td>
<td>Present to key Ministries doing the work</td>
<td>Nutrition and Food security committees</td>
<td>?</td>
</tr>
<tr>
<td>Samoa</td>
<td>1. Participation</td>
<td>Health representatives to the NCC to raise and present NCD issues at the national level Include NCD issues in agenda</td>
<td>Health reps CCP/NCP</td>
<td>During NCD quarterly meetings</td>
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<tr>
<td></td>
<td>2. Building capacity</td>
<td>Attend all Codex trainings Update standard guidelines</td>
<td>Ministry of Health representatives</td>
<td>Annually</td>
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<tr>
<td>Solomon Islands</td>
<td>Reactivate NCC and reaffirm commitment</td>
<td></td>
<td>Committee members</td>
<td>29 May 2015</td>
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<td></td>
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<tr>
<td></td>
<td>2. Look at data for intakes of salt, sugar and fat</td>
<td>Household Income and Expenditure Survey (HIES)</td>
<td>Nutrition and Food security Unit</td>
<td>May-June 2015</td>
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<td></td>
<td>3. Request FAO to help NCC with capacity-building to update regulations</td>
<td>Requests to FAO/WHO</td>
<td>NCC</td>
<td>November 2015</td>
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<td></td>
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<tr>
<td></td>
<td>2. Develop food standards and regulations, labelling</td>
<td>Proposal from Ministry of Health to NCC Assistance from FAO</td>
<td>Ministry of Health for proposal Proposal before end of 2015</td>
<td></td>
</tr>
</tbody>
</table>
3. CONCLUSIONS AND RECOMMENDATIONS

After three days of sharing experiences about how to overcome challenges associated with strengthening legal frameworks to reduce population intake of salt, sugars and fat in the Pacific, participants agreed that Codex standards and guidelines are an important avenue to control and regulate nutrition-related NCD risk factors in the Pacific. At the same time, other avenues should also be pursued. At a national level, voice should be given to the nutrition-related NCD crisis in the Pacific through Codex. Part of this voice may be renaming the CCNASWP so that it is inclusive of countries and areas of the northern Pacific. Many of the country actions in the table above reflect efforts to reinvigorate committees, build the knowledge and skills of committee members and, as far as possible, to apply Codex standards to NCD issues.

Salt containing foods were identified as a strategic focus for the region because of the strong evidence base for the cost effectiveness of salt reduction. Codex mechanisms can be used to identify and standardize maximum levels of sodium in processed food. This starting point can introduce NCD-related standards through Codex. Further actions include working on a proposal to amend the Codex standards for instant noodles and canned corned beef and, more immediately, for Papua New Guinea to make a statement at CCEXEC, as CCNASWP Chair, about the need for Codex to consider options to better address diet-related NCD issues.
### Annex 1. Workshop programme

#### PROGRAMME FOR PACIFIC WORKSHOP ON NUTRITION, NCDS AND THE ROLE OF CODEX

**20–22 APRIL 2015**

<table>
<thead>
<tr>
<th>Time</th>
<th><strong>Monday 20 April</strong></th>
<th>Time</th>
<th><strong>Tuesday 21 April</strong></th>
<th>Time</th>
<th><strong>Wednesday 22 April</strong></th>
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<tbody>
<tr>
<td>6.30-7.30</td>
<td>Physical activity</td>
<td>6.30-7.30</td>
<td>Physical activity</td>
<td>6.30-7.30</td>
<td>Physical activity</td>
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<tr>
<td>8.15-8.30</td>
<td>- Opening remarks FAO and WHO (Peter Hoejskov)</td>
<td>8.30-9.15</td>
<td>- Update on the work of CCFL and CCNFSDU in addressing nutrition and diet-related NCDs (Chizuru Nishida)</td>
<td>8.30-8.45</td>
<td>- Trade policy frameworks in the Pacific and options for policy and regulatory interventions to improve diets (Nicky Anaturin)</td>
</tr>
<tr>
<td>8.30-8.45</td>
<td>- Introduction and welcome (Peter Hoejskov)</td>
<td>9.15-10.00</td>
<td>- CCNASWP strategic Plan 2014–2019 and recommendations from the 13th Session (CCNASWP Chair – Papua New Guinea)</td>
<td>8.45-9.00</td>
<td>- Trends and patterns of imported food in the Pacific (Siope Vakataki‘Ofa)</td>
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<tr>
<td>8.45-9.15</td>
<td>- Background and objectives of the workshop (Dirk Schulz)</td>
<td>10.00-10.15</td>
<td>- Trans fat (TFA) in the Fijian food supply – Options for elimination of TFA from the food supply (Usaia Dolodolotawake)</td>
<td>9.00-9.30</td>
<td>- WHO guideline on sugars intake of adults and children – The role of Codex (Chizuru Nishida)</td>
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<tr>
<td>9.15-9.45</td>
<td>- Setting the scene – NCD and nutrition situation in the Pacific and the impact of unhealthy diets. Global and Regional Action Plans and targets (Peter Hoejskov and Wendy Snowdon)</td>
<td>9.30-10.00</td>
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<td>9.30-10.00</td>
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<tr>
<td>9.45-10.00</td>
<td>- Implementing the Global Strategy on Diet, Physical Activity and Health (DPAS) through the work of the Codex (Chizuru Nishida)</td>
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<td>10.00-10.15</td>
<td>Break</td>
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<tr>
<td>10.15-10.45</td>
<td>- Introduction to Codex Alimentarius and the Codex Trust Fund (CTF) (Dirk Schulz)</td>
<td>10.15-11.15</td>
<td>- Group discussion - Codex participation</td>
<td>10.15-12.00</td>
<td>- Plenary discussion to identify options for more active participation of Pacific island countries and areas in Codex and their priorities for harmonized food standards setting to address nutrition challenges in the Pacific</td>
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<tr>
<td>10.45-11.30</td>
<td>- Plenary discussion</td>
<td>11.15-12.00</td>
<td>- Group presentation</td>
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<td>11.30-</td>
<td>- Country updates on the use of Codex</td>
<td>12.00-12.30</td>
<td>- Policy options for interventions to control food and diet related NCD</td>
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<tr>
<td>Time</td>
<td>Activities</td>
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<tr>
<td>12.30-13.30</td>
<td>Lunch and Group photo</td>
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<tr>
<td>13.30-14.30</td>
<td>Country updates on the use of Codex in developing policies and legislation to improve diets. 10 min per country (contd.)</td>
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<tr>
<td>14.30-15.00</td>
<td>- Plenary discussion</td>
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<td></td>
<td>13.30-13.50 Pacific salt reduction targets – An opportunity for regulating sodium in food? (Jacqui Webster)</td>
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<td></td>
<td>13.50-14.05 Experiences on implementation of salt reduction targets in Kiribati (Tebikau Tibwe and Eretii Timeon)</td>
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<td></td>
<td>14.00-14.20 Experiences on implementation of salt, sugar and fat reduction targets in Fiji (Ali late Momoka and Jiutajia Tikoitoga)</td>
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<td></td>
<td>14.20-14.40 Experiences on implementation of salt reduction targets from other countries/regions and its link to Codex (Jacqui Webster)</td>
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<td></td>
<td>14.40-15.00 Discussion</td>
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<td>15.00-15.15</td>
<td>Break</td>
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<tr>
<td>15.15-16.30</td>
<td>- Group discussion (To discuss common challenges associated with implementation of policy and regulatory measures to reduce population intake of fat, sugar and salt and potential ways to overcome</td>
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<tr>
<td></td>
<td>- Group presentation and plenary discussion</td>
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<td></td>
<td>15.15-16.30 Group discussion (groups discussing two different questions)</td>
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<td></td>
<td>15.15-15.45 Conclusion</td>
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<td>15.45-16.00 Closing remarks FAO and WHO</td>
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</tbody>
</table>
Annex 2. List of participants

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Annex 3. Workshop evaluation

1 = I strongly disagree
2 = I disagree
3 = I neither agree nor disagree
4 = I agree
5 = I agree completely

<table>
<thead>
<tr>
<th>1. Workshop administration and organization</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
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<tbody>
<tr>
<td>Travel arrangements were satisfactory</td>
<td></td>
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<td>8</td>
<td>11</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>The workshop facilities were conducive to learning</td>
<td>3</td>
<td>16</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The workshop was well organized</td>
<td>2</td>
<td>4</td>
<td>13</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The accommodation was comfortable</td>
<td></td>
<td></td>
<td>1</td>
<td>17</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Meals and coffee breaks were satisfactory</td>
<td>4</td>
<td>14</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clear instructions were given for pre-course preparation</td>
<td>8</td>
<td>11</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Add any specific comment for overall improvement?

Comments:
- Check with participants travel itinerary first before paying/purchasing or issuing ticket please, e.g. my return trip from Nadi to AKL, because can not open access to it prior to departure, I ended up paying because I have to change departure time
- DSA issuance was not done on time and it's important for participants to know how they are compensated daily including boarding (?/transit

Interesting. I was well informed of some global and regional commitments
Meals could have been better
Excellent organization and logistical arrangement
Participants need to bring their voices in higher volume, volumes
No clear explanation on DSA. Participants should be given the option to decide the issue of accommodation and meals by giving full allowance and they pay themselves
Allowances were given at the end of the workshop. It would have been ideal for participants to take their full allocated and choose own accommodation. We were left to borrow money for dinner.
Ensure per diems are received before the workshop starts or on the first day of the workshop to enable us to buy our dinner
Change this workshop to other country instead of Fiji (venue)
We have not received our DSA as processed into our accounts and may be received upon our return. Therefore this must be altered for other meetings in future. Propose to either have them in cheque or cash upon arrival to workshop locations
2. Objectives of the workshop

<table>
<thead>
<tr>
<th>The objectives of the course were clearly explained</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>The objective on sharing experiences and identify options to overcome challenges associated with strengthening legal frameworks to reduce population intake of salt, sugars and fat in the Pacific</td>
<td>1</td>
<td>4</td>
<td>14</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The objective on considering and identifying Codex standards and guidelines to support country efforts to control and regulate nutrition-related NCD risk factors</td>
<td>1</td>
<td>5</td>
<td>13</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The objective on identifying Pacific priorities on food standards setting to address nutrition challenges</td>
<td>1</td>
<td>5</td>
<td>13</td>
<td>1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. Learning from the workshop

<table>
<thead>
<tr>
<th>It is clear to me how I can use the knowledge and skills from this workshop to strengthen Codex activities in my country</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>The workshop was relevant to my specific workplace needs with regard to engaging in Codex activities.</td>
<td>1</td>
<td>6</td>
<td>12</td>
<td>1</td>
<td></td>
<td></td>
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<tr>
<td>The trainers were of high quality</td>
<td>1</td>
<td>4</td>
<td>14</td>
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<td></td>
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<tr>
<td>The workshop materials aided my comprehension of the course</td>
<td>3</td>
<td>2</td>
<td>14</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>There was sufficient time for group discussion and questions</td>
<td>6</td>
<td>13</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Which of the following workshop sessions were most useful to you?

<table>
<thead>
<tr>
<th>Session 2 – Setting the scene – Nutrition and NCD situation in the Pacific</th>
<th>Not useful at all</th>
<th>Not very useful</th>
<th>Neutral</th>
<th>Useful</th>
<th>Very useful</th>
</tr>
</thead>
<tbody>
<tr>
<td>Session 3 – Introduction to Codex and the Codex Trust Fund including Codex and DPAS</td>
<td>6</td>
<td>14</td>
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</tr>
<tr>
<td>Session 4 – Country updates on the use of Codex</td>
<td>2</td>
<td>5</td>
<td>13</td>
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<tr>
<td>Session 5 – Update on CCFL, CCFSFDU and CCNASWP Strategic Plan 2015–2019</td>
<td>2</td>
<td>6</td>
<td>12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Session 6 – Policy options to control food and diet related NCD risk factors</td>
<td>2</td>
<td>7</td>
<td>11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Session 7 – Salt reduction in the Pacific including experiences from Fiji and Kiribati</td>
<td>3</td>
<td>5</td>
<td>12</td>
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<tr>
<td>Session 8 – Plenary discussion on identification of specific issues to bring to Codex for consideration</td>
<td>8</td>
<td>12</td>
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<tr>
<td>Session 9 – Trade policy frameworks</td>
<td>4</td>
<td>9</td>
<td>8</td>
<td></td>
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<tr>
<td>Session 10 - Trends and patterns in food import in the Pacific</td>
<td>1</td>
<td>7</td>
<td>11</td>
<td></td>
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</tr>
<tr>
<td>Session 11 – Transfat in the Fijian food supply</td>
<td>3</td>
<td>8</td>
<td>9</td>
<td></td>
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</tr>
<tr>
<td>Session 12 – WHO sugar guidelines</td>
<td>2</td>
<td>7</td>
<td>11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Session 13 – Country action plan development</td>
<td>4</td>
<td>16</td>
<td></td>
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</tr>
</tbody>
</table>
5. Please note your three most important take-home messages from this workshop?

Comments:

1. Implement action plan for FSM
2. Assist gather information/evidence to help support proposal at CCNASWP
3. Strengthening of NCC and participation in Codex
   1. Importance/usefulness of Codex and its implementations
   2. Identifying key sources for technical assistance
   3. The important link between Codex, Nutrition and NCD
   4. Addressing Codex alongside Nutrition issues
   5. NCD and nutrition and the importance of always involving Codex in our fight against NCDs
   6. Active participation in NCC to progress nutrition issues
   7. Need for scientific evidence to include in papers
   8. Building alliance with other Pacific island countries and areas
   9. The critical role of Codex within country dietary choices
   10. Way forwards for implementation of actions related to NCDs
   11. Multisectoral integration

1. To strengthen Codex
2. To include NCD in EH activity
3. To do the proposed actions we prioritized
   1. Engage more in Codex work
   2. Be better acquainted with Codex processes
   3. Codex part in food safety (importation)
   4. Necessities of reports and monitoring (funding purpose for programmes)
   5. NCD in the Pacific
      1. Understanding NCD issues due to salt, sugar and fat intake
      2. How to address these issues at country and regional level
      3. How best we incorporate into our ??? Food policies
   6. The role of Codex
   7. In country action plan
   8. Collaboration with all Pacific island countries and areas
      1. Work plan for each country
      2. Including NCD into legislation
      3. Identifying of food to target for salt, sugar, fats
         1. Strengthen the role of Codex Committee in country
         2. To create strong links with other sectors and industries
         3. Advocacy at high level to support food related policies and regulations
      4. NCD and Nutrition can be incorporated into Codex
      5. Codex and NCD complementary
         1. The NCC needs to be strengthened
         2. We need to collect data to support our proposal for Codex to help us
         3. Be responsible for any update regarding action plans
         4. NCD is a crisis
         5. Codex activities can help address this crisis
         6. There needs to be a good collaboration of relevant ministries to achieve this.
         7. Effective NCC
         8. Guidelines for salt (WHO)
         9. Salt (?) contents in different commodities
            1. Country updates on Codex in developing policy and legislation
            2. Pacific salt reduction targets
            3. Trade policy framework in the Pacific to trends and patterns of imported food in the Pacific
      1. Activate National Codex Committee
2. Ensure our legislation are in line with Codex Guidelines
3. Involve nutritionists in the Committee
1. Strengthening policies to enhance prevention of NCDs
2. Implementing food standards
3. Provide good supporting documents to improve NCD and Codex awareness

6. What specific priority actions you will take upon return to your country? (describe 2-3)
   
   Comments:
   
   - 1. Formal establishment of NCC
   2. Finalize draft food bill and regulations
   3. Implement salt intake survey
   Discrimination of (outcomes?)
   Establishment of NCC
   As per above (item 5)
   Pushing for Nutrition in Codex meetings
   pushing and introducing Codex for its awareness and nutrition addressing NCDs
   1 and 2 in item 5
   Reviving the NCC
   Implementation of prioritized actions in country
   Upgrade of nutrition policy
   Develop policy for healthy food in workplace
   1. Report to Codex Committee
   2. Emphasize salt reduction as a priority risk factor
   3. Emphasize "food labelling" legislation/implementation
   Reporting, sharing what I have learned here to my colleagues back home
   Papua New Guinea with assistance from WHO/FAO would reflect our concerns at CCCEXEC and
   CAC38 in Geneva and include our discussion in our country food policies
   Incorporate into all relevant policies the role of Codex/NCD issues
   Workplan reactivating CCP
   Working together with Nutrition Department to come up/identify the guidelines on food labelling to
   be included in legislation
   To ensure the NCC is revived and strengthened
   1. Find out about membership of NCC and advocate to be part of it if not yet
   2. Identify role of Codex in NCD
   1. Report to CEO (MOH) with recommendations
   2. Ensure that NCD and Nutrition are members of NCC in Tonga
      - help to review memberships of Codex Committee and get this NCC functioning again
      - include nutrition in agenda for meetings and have more nutrition input into the Codex functions
      and activities
      - continue further with food regulations
   Strengthened NCC work on NCDs
   Pacific salt reduction targets
   1. Activate National Codex Committee
   2. Ensure our legislation are in line with Codex Guidelines
   3. Involve nutritionists in the Committee
   1. Push through with the Food Bill to be endorsed by the Cabinet
   2. Always participate in Codex and NCD meetings
7. What type of support could help you make the learning from this activity more useful once you return to work?

Comment:

Codex workshop to support strengthening at Codex participation at national level.

- Need more finance to support trainings to maintain level of understanding with Codex
- Enhance knowledge and understanding to co-workers
- Had been given in terms of information
- More capacity building and technical advice
- Technical support to gather evidence for paper submission
- Support from Codex or from FAO/WHO with technical assistance or monitoring
- A close contact with resources personnel from FAO/WHO to keep update on our progress on our action plan to guide us through
- More support from Codex on updates
- Financial support from WHO
- Follow up from WHO/FAO with financial and technical support in terms of awareness/training/meetings, etc.
- Technical assistance via (email?)
- Legislation and pushing the government to champion (?) what he agreed upon
- Morale was very low at first when allowances were not given
- Continue technical support and updates on international and regional Codex issues relating to food and nutrition
- I would be able to present information through our National Codex Committee regarding the importance and resolutions of this meeting especially on salt, sugar and fat reduction and actions to be taken
- Technical support for Codex
- Collecting evidence-based in country information to support implementation of prioritized actions
- Technical assistance to assist with shifting mindset of EH officers to include NCD activities
- Updates/exchange of information between agencies, org, country

8. Please provide suggestions for future FAO/WHO activities (training courses, workshops, manuals etc.) that could further help you and your country participate more effectively in Codex

Comments:

- In-country Codex workshop for strengthening of CCP and NCC
- Some funding support from the CTF to support CCP and NCC in-country meetings and activities, multisectorial workshops and meetings
- Inclusion of more reps from different ministries
- To be included in the other coming workshop
- Continuous updates and circulation of latest publications by WHO please (e-copy and hard copy)
- Physical participation in CCFC and CCFSDU and CCNASWP
- Circulation of information to NCC-CCP and a second person next in line (secretariat)
- Training to NCC about Codex
- Vigorous EWG participation and PWG
- If possible include responsible persons and of course assist in funding
- FAO/WHO would assist us to take a (subsistence?) at a time and look at possible foods that are high in salt, fats and sugars, eg instant noodles
- Send clear agenda to participants prior to workshop
- Give participants to make a choice of their own accommodation
- Send workshop documents early/timetable
- Build nutritionist capacity on Codex roles
- Follow up of issues discussed in this workshop
I think that FAO/WHO needs to conduct training in Tonga so that it improves capacity building
Have a participant from each relevant ministry attend
Provide examples of legislations that have standards of salt, sugar and fat
Provide manual on Codex activities relevant to each region in advance prior to attending similar meetings

- WHO/FAO to join Samoa for another Codex meeting

9. Any other comments?

Comments:

- Overall, objectives of this workshop were met and helpful to addressing NCDs through Codex.
- Logistics could have "run more smoother"
- Find this workshop informative. Good to bring other stakeholders.
- Introduction of a variety of dishes as main meals for lunches please.
- Thank you for coordinating this timely workshop. It brings to the ??? Why nutrition should always be included in the Codex agenda
- Thanks for a well-organized workshop

- We have to have awareness to consumers regarding foods that contain high salt, sugar and fats and develop strategies to improve more taxes on those goods
- In a nutshell, the workshop was excellent. I learned a lot.
- Allowances to be given to participants prior to workshop dates or before leaving their countries
- When it comes to food and nutrition issues always involve nutritionist in Codex meetings at all levels
- This is a very strong foundation for me as I just started with this post because it gives an overview of the role of Codex in health, how to address impact of salt, sugar and transfat in food and importance of data as strong evidence to support proposal
- Very informative workshop and look forward to working further within the Codex Committee
- Financial (proplan?): This is the second time that I have not received my DSA before I departed Vanuatu and now it has not reached my bank yet. I think the system of sending DSA through bank is not working for many. Apart from me others are also facing this problem.
- Needs all soft copies on presentation presented during this meeting
- Thank you