HDHL

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World Health Organization

From Evidence to Action: Confronting Power in Food Systems

Why strong evidence still fails – and what we do about it

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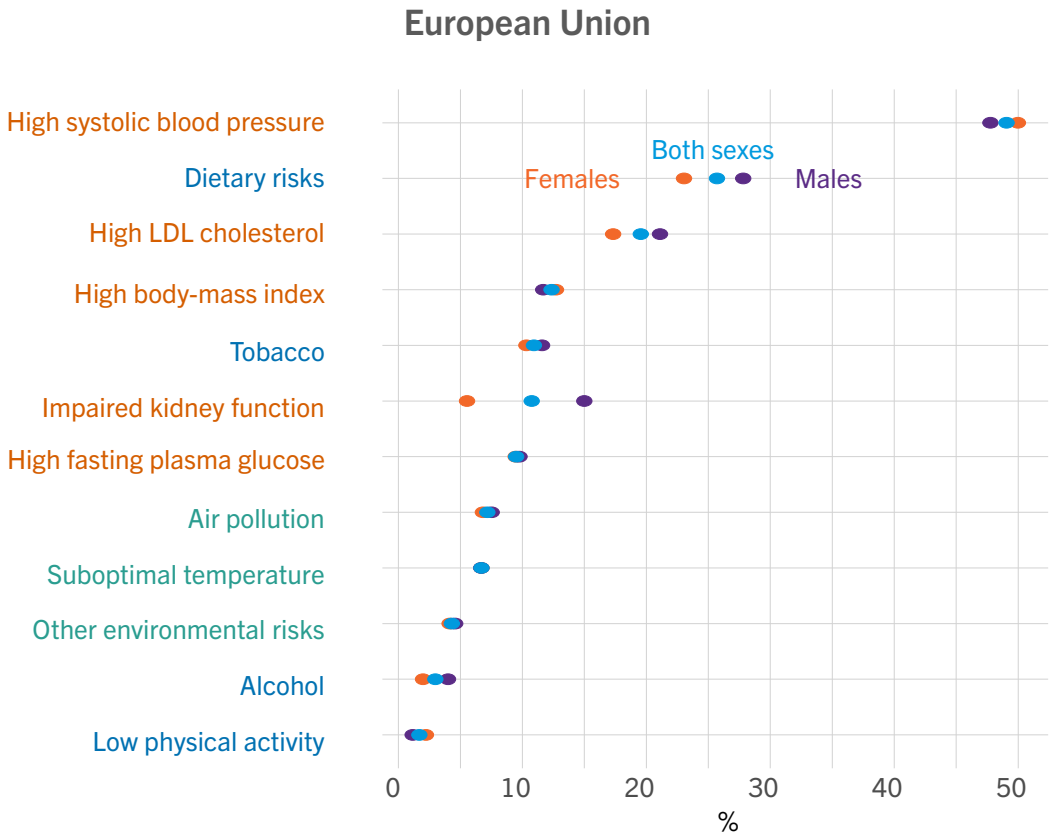
European Region

HDHL Conference 2026 (21 April, Brussels)

3/4 of CVD deaths in the EU can be attributed to risk factors



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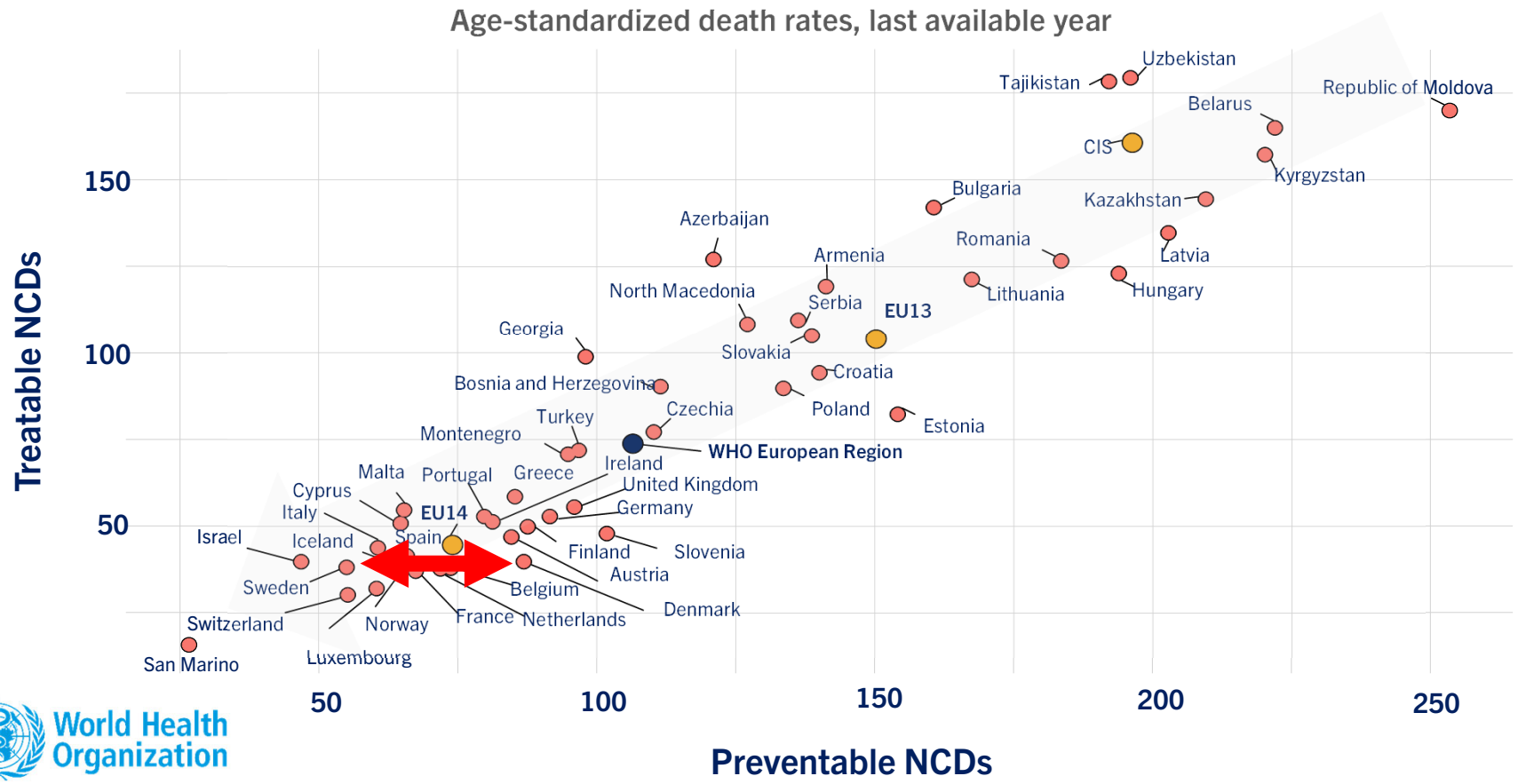
Source: GBD 2021

Large variation in prevention remain



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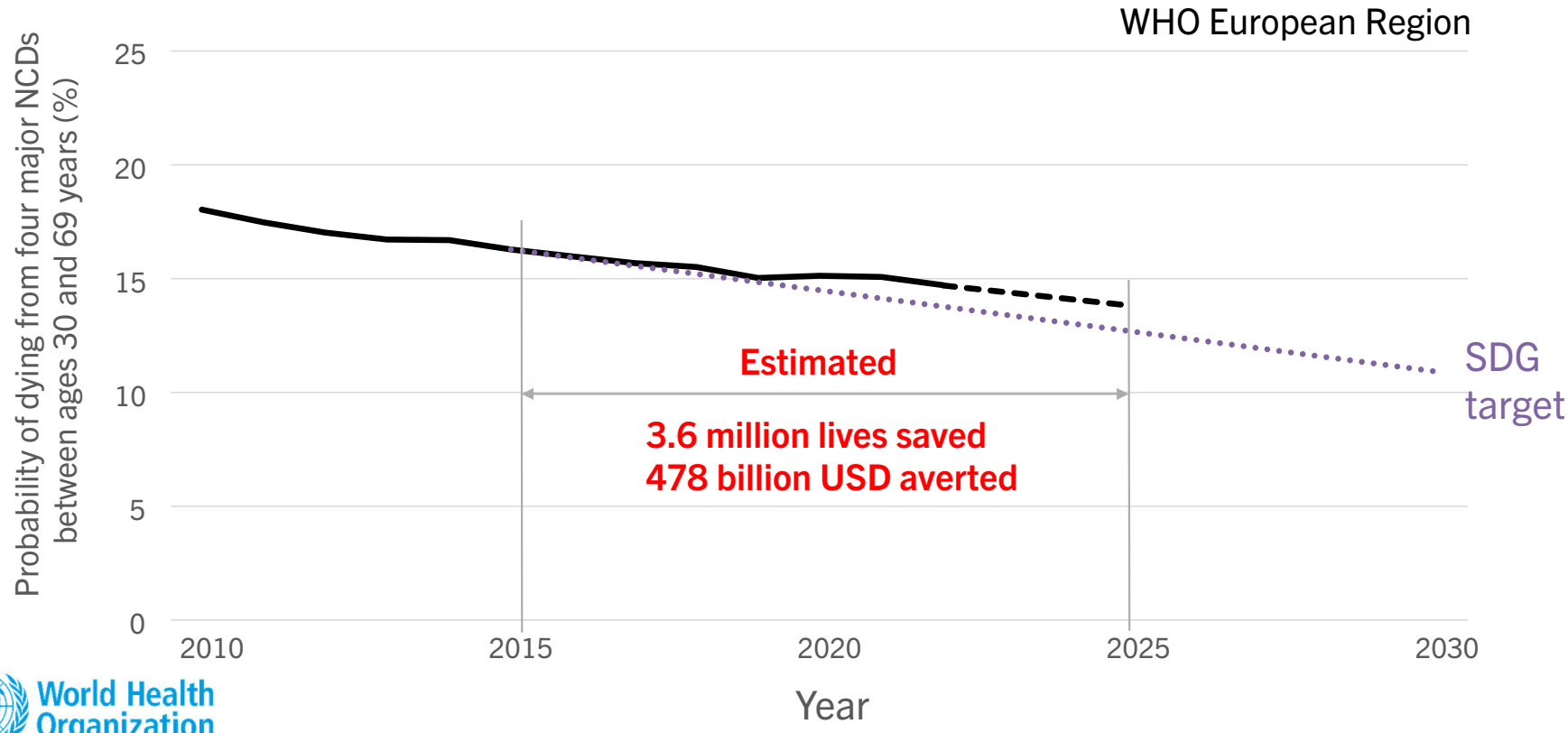
How far we have come: Premature mortality from NCDs decreasing, but not fast enough



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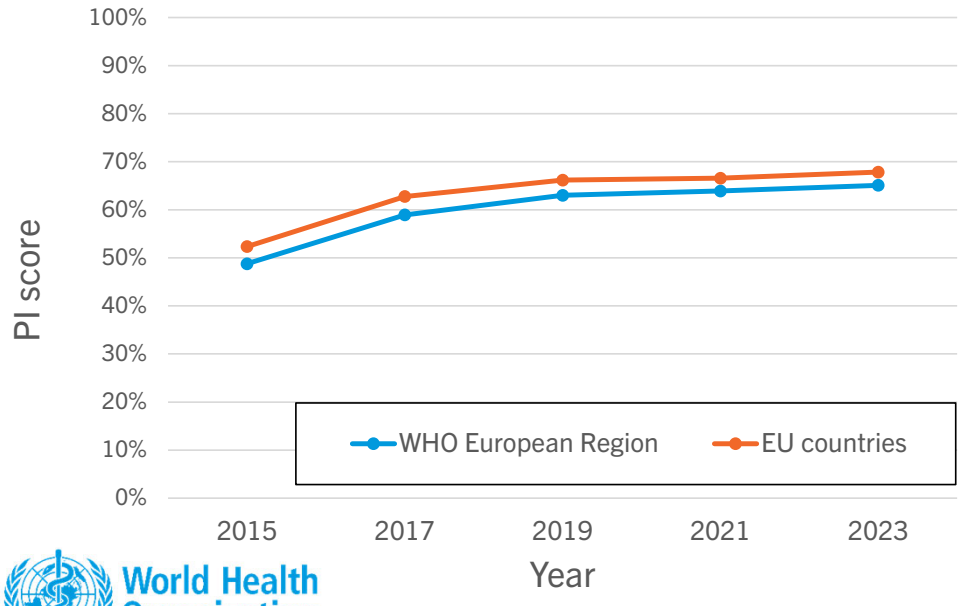
Policy implementation in the EU: Progress Monitor Indicators

- Based on WHO Best Buys
- Return of investment: 10 USD for 1 USD invested in HIC



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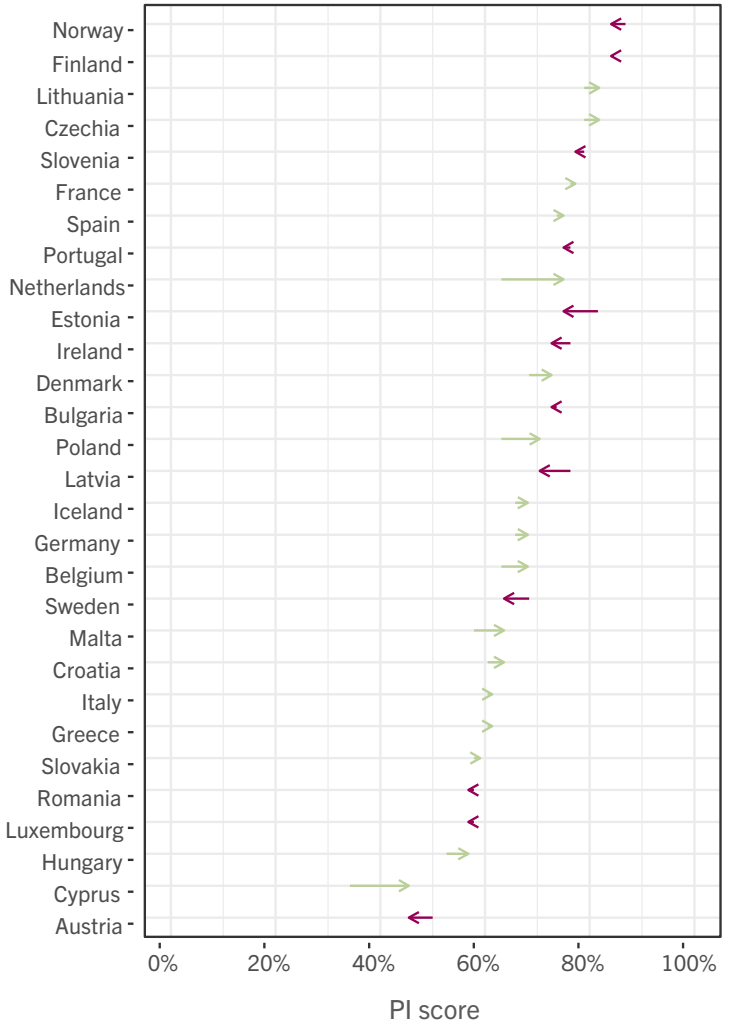
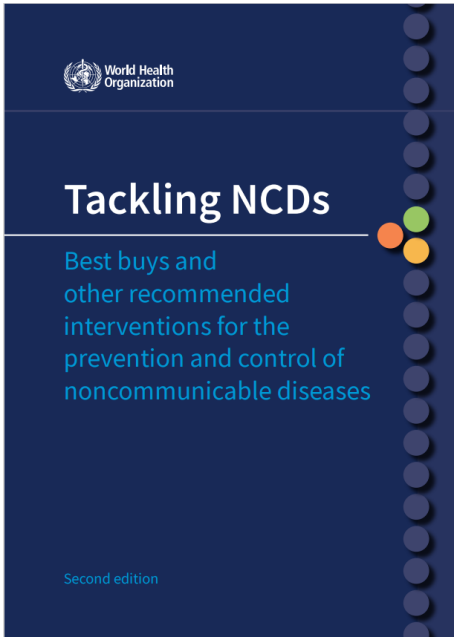
Implementation by country 2021-2023



Quick buys



25 proven, cost-effective interventions that show results in 5 years or less

Examples: measurable impact in ***less than 1 year***

- Increase excise taxes on tobacco and alcohol
- Advertising bans and restrictions on harmful products
- Front-of-pack food labelling
- Treatment of hypertension in adults
- Brief counseling on physical activity in PHC

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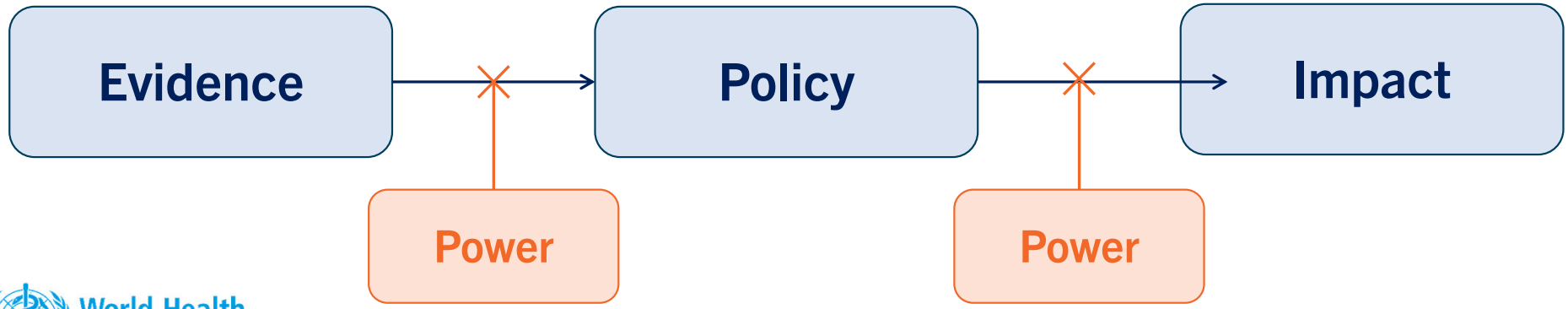
The real barrier is not knowledge

- Evidence on healthy diets is strong and consistent
- Yet policy progress remains slow, partial, or diluted
- The gap is not technical



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How power shapes food policy in Europe

Agenda control

What enters decision-making – and what does not

Narrative control

How evidence is framed, challenged, or diluted

Dependency

Reliance on few stakeholders for implementation

Timing & fragmentation

Evidence arrives too late – voices remain divided

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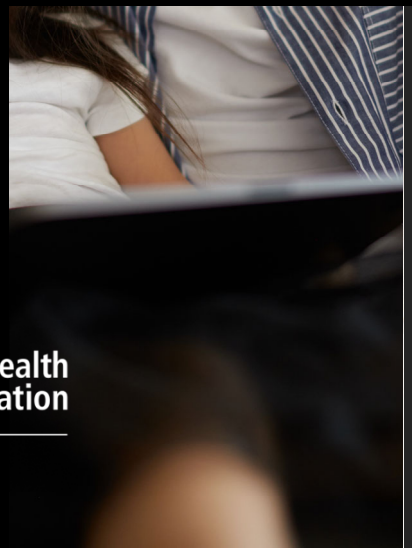
When evidence meets power

Marketing to children

- Reframed as "Parental responsibility"
- "Right to information"



Reformulation

- Dependent on industry
- Voluntary → limited impact

Front-of-pack labelling

- Delayed / blocked early
- Demands for unrealistic outcome evidence (e.g. diabetes reduction)
- Evidence thresholds that cannot be met by a single policy

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From more & more evidence to smarter action

Old approach

- Produce more evidence
- Communicate better
- Expect change

New approach

- Anticipate power dynamics
- Design policies for real-world constraints
- Strengthen public sector leadership
- Align actors → reduce fragmentation

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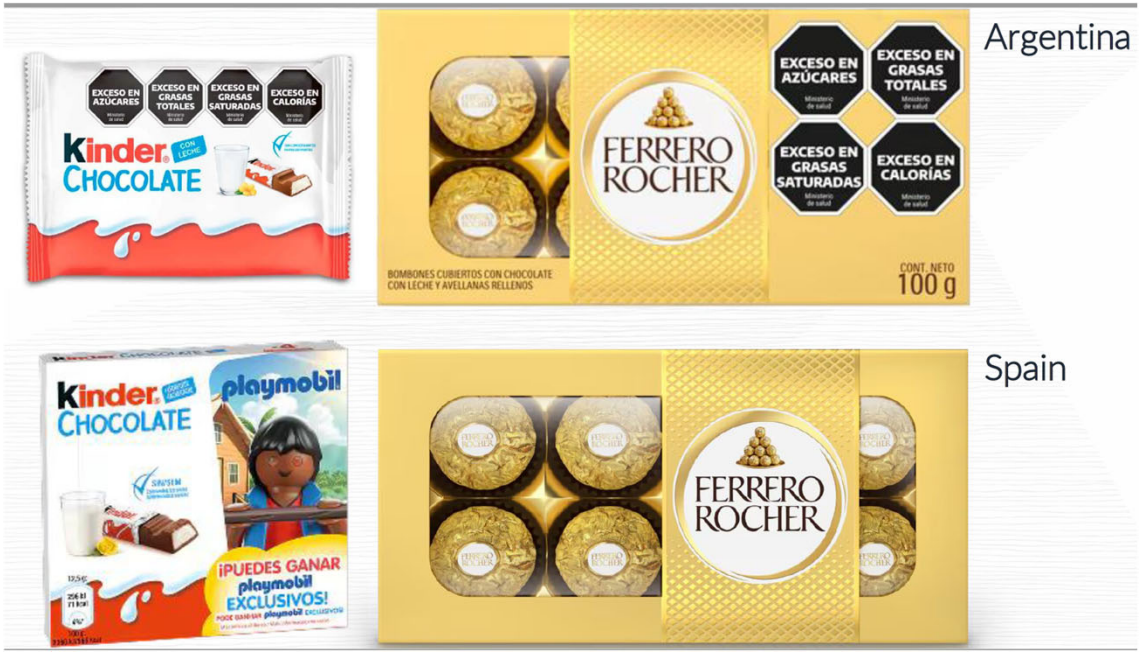

Cookies from **Denmark** in **Peru**

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-26%

-53%

-119%

USA
607mg sodium

Peru
450mg sodium

Chile
397mg sodium

Mexico
277mg sodium

Three shifts to unlock action

1 Redefine engagement

Differentiate actors by commitment and accountability

2 Strengthen governance

Manage conflicts of interest transparently

3 Act collectively

Align public health voices to increase influence

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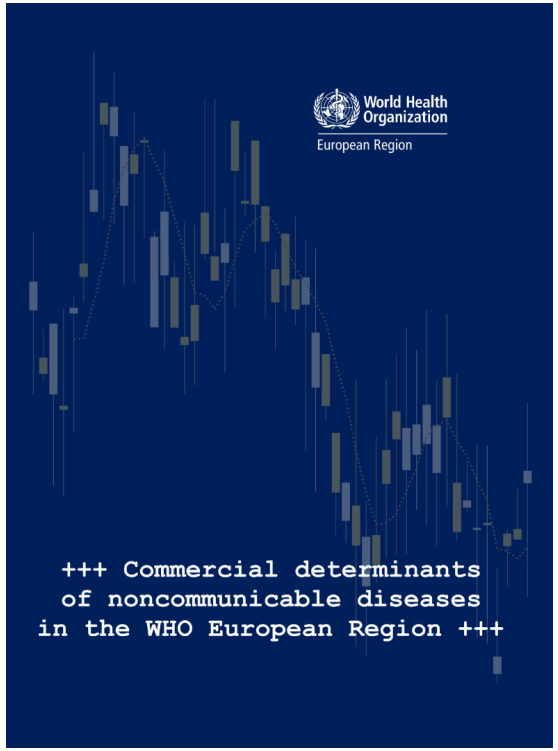
Building capacity on identifying and managing conflict of interest

- Facilitating training of policy makers in operationalizing assessing and managing COI at country level.
- Building case studies and advocacy through investigative journalism.
- First training in Poland with possibility to scale up to other countries in the Region.



https://iris.who.int/handle/10665/376957

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The opportunity is not technical – it is political

- ✓ The evidence is already **strong**
- ✓ The solutions are already **known**

The question is:
Are we ready to act on power?

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Thank you!

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Health promotion and NCD prevention:
solutions to today's challenges?

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VIRTUAL WHO/EUROPE CONSULTATION

29–30 APRIL
10–12:30 CET

Rebooting HEALTH PROMOTION

Marking 40 years of the Ottawa Charter in the WHO European Region