**ALLIANCE FOR FOOD & HEALTH (AFH): A PROPOSAL**

*“Finding a Better Way – Together”*

*Disclaimer: This paper is intended only introduce AFH and is not an official document.*

**Background**  
Food and health are inexorably linked. This connection presents both challenges and opportunities to the global community.

On the “challenge” side, according to the McKinsey Global Institute, the negative global economic impact from obesity is roughly $2.0 trillion, or 2.8% of world GDP.[[1]](#footnote-1) This effect is close to that arising either from smoking or armed violence and terrorism. In addition, obesity is ranked by the McKinsey Global Institute as one of the top four social burdens in a diverse list of countries including Mexico, the United States, United Kingdom, France, Japan, South Africa, Morocco and Brazil.[[2]](#footnote-2)

In response to this ongoing public health problem, the World Health Organization (WHO) and member governments along with the public health community are taking action on obesity in addition to malnutrition and non-communicable diseases (NCD). On the multilateral side, the WHO has focused resources and issued increasingly influential guidelines to encourage action related to diet and lifestyle. At the same time, national and sub-national governments worldwide are seeking ways to reduce the magnitude of the under- and over-nutrition problem through both collaboration and regulation.

On the positive side of the ledger, food and nutrition also present major opportunities to improve public health and fight disease globally. In this way, agriculture and the food system can be powerful drivers for economic growth and sustainable development. The proper interventions can improve long-term health outcomes, resulting in both higher economic growth and lower medical costs. In the rich countries, this has the potential to sharply reduce costs of aging populations while in emerging economies, better nutrition could enable more individuals to reach their potential.

Despite the critical importance of the food and health issues, the record of interventions in this space has been mixed. While some of the collaborative and regulatory efforts show may promise made progress in reducing the disease burden, the measures taken so far collectively may not be achieving their stated policy objectives. [[3]](#footnote-3),[[4]](#footnote-4)

One central question in designing effective interventions has been the difficulty of finding actionable and practical ways to address the issues. This lack of clarity may be partially a result of silos that exist between different disciplines involved with these issues. The current disconnect between fields and actors combined with mistrust and even hostility between stakeholders may also be undermining the overarching goal of promoting good health globally. In addressing public health as it relates to food and drink, the central question is how to achieve critical goals with the fewest negative economic and other unanticipated outcomes. This will likely require an interdisciplinary approach.

The need to examine these problems across fields highlights a pressing need for deeper ongoing strategic collaboration between the public health, medical, nutrition, NGO, and food and agriculture communities on scientific, economic and policy issues. There may be a way to promote improved public health outcomes though wide-ranging collaboration between stakeholders.

**The Concept**  
This paper outlines a proposal to establish a new Alliance for Food & Health (AFH) to suggest actionable, innovative and effective polices and initiatives by facilitating collaboration between diverse stakeholders, including NGOs, governments, academia, the public health and medical communities and the food and agriculture industry. The focus of the organization will be global, rather than just U.S. domestic issues. **The creation thought leadership drawn from highly diverse participants is a unique value-add of AFH since its breadth may allow it to influence policy and other commitments in unique ways. If implemented, this joined-up thinking could significantly improve global health outcomes.**

Since health promotion is a broad goal, the focus of this initiative will be on the nutrition-related challenges and opportunities as related to food. These can include challenges such as overweight/obesity, diabetes and cancer but also will look at opportunities to use food as a means to further boost health. AFH will look at how food production and consumption affects nutrition and health from a highly interdisciplinary approach including public health, economics, nutrition, public administration, marketing and many other fields. To keep this initiative manageable, AFH will not address tobacco and will only consider alcohol as it overlaps with nutrition and health.

The purpose of this Alliance is to unite disparate groups for joint action focused on the common cause of finding more effective and less costly solutions to promote good health in the food and nutrition space. **The goal is to generate new and actionable guidelines and policies and other ideas that can inform the debate on food and agricultural issues by drawing upon a wide group of expert stakeholders.** These recommendations could take the form of best policy practices or innovations that may deserve support and will result in cross-sector collaborations to address challenges and opportunities.By creating new content though AFH’s convening function and aligning the views of various stakeholders, the purpose is to find new ways forward that recognize both the complexity of the problems and the need for cooperation. In these ways, AFH could add value by providing a forum where major stakeholders convene to address these issues in a collaborative and non-confrontational manner.

**Our goal is to find a better way – together.**

Importantly, AFH will look to collaborate with and amplify other existing initiatives. We do not seek to compete with other organizations. In addition, while stakeholders may choose to promote AFH’s work, it will not directly lobby governments or other decision-makers itself. For example, the Alliance will seek to cooperate with the EU Platform for Action on Diet, Physical Activity and Health (DPAH), which brings together different stakeholders. We will approach other major partners that may include the Global Health Council’s nutrition roundtable, the NCD Roundtable, InterAction, the NCD Alliance, Robert Wood Johnson Foundation, and the World Obesity Federation.

To prevent duplication of academic and other research-oriented work, the emphasis will not be on primary research – but on finding ways to best use current knowledge from diverse sources in a synergistic way. However, AFH recommendations may indicate and highlight knowledge gaps needing further examination to further inform our work. This may be an important consideration since the strength of the evidence base will play a critical role in supporting suggested interventions and expected outcomes

In terms of time-frame, this initiative is meant to have the greatest impact over the medium-term, since it will likely take time to build the trust necessary between participants and/or in the process to allow the creation of a durable consensus among them. However, on the way to this goal, it would be desirable to determine a few short-term “quick wins” where stakeholders may be able to come to agreement fairly quickly on specific issues – where broad agreement is possible.

*Proposed Participants*

The Alliance would include the food and agriculture industry, NGOs, governments, international organizations, academic and scientific bodies, with the goal of finding and suggesting effective and actionable collaborative solutions to issues arising from food and drink.

The participant focus would be those working at the nexus of policy, science and economics with the goal of finding innovative ways forward to address these issues. While this neutrality may be a challenge to maintain, the overriding concern will be defining cost-effective programs to encourage healthy choices. Outside of this consideration, the organization itself will remain policy agnostic and will encourage participant organizations to find consensus.

In the current debate, organizations look at the complex issue of health through their own particular lens of expertise. What appears to be lacking in the debate is a multidisciplinary approach involving all stakeholders interested in taking action on a scientific basis less closely tied to a specific political agenda. In fact, the current frictions among stakeholders may be contributing to non-science based, confusing and often ineffective policy-making.

In contrast, AFH offers significant possible benefits for all stakeholders by incorporating the pooled knowledge of all stakeholders. Specifically, this initiative offers **governments** an opportunity to pursue more effective and less costly policies. For **NGOs**, it could provide a chance to find more effective ways to address compelling health issues and secure industry buy-in. Thought leaders in **academia** and **associations** could have a platform to contribute their expertise to emerging issues and identify emerging research needs. Finally, the food and agriculture **industry** would have the opportunity to offer its perspectives as the supplier of food and beverage products and to engage with other stakeholders in a productive way.

It is this possibility of “Doing Nutrition Smarter” that offers participants an incentive to participate – and for potential members and donors to fund the organization. Ideally, financial support would come from a mix of the public sector, donors and private sector to support the continued neutrality of the Alliance. The key is to maintain balance in funding along with transparency on how AFH is supported.

In creating this proposal, we have consulted with the following organizations:

• U.N. Food & Agriculture Organization (FAO)

• World Health Organization (WHO)

• International Food Policy Research Institute (IFPRI)

• Grocery Manufacturer’s Association (GMA)

• International Food Information Council (IFIC)

• Institute of Food Technologists (IFT)

• International Life Sciences Institute (ILSI)

• Inter-American Institute for Cooperation on Agriculture (IICA)

• The Global Partnerships Forum

• NCD Roundtable & Members

• U.S. Department of Health & Human Services (HHS), Office of Global Affairs

• U.S. Department of Agriculture (USDA)

• U.S. National Institute of Health (NIH)

• U.S. Agency for International Development (USAID)

• The Delegation of the European Union to the United States

• Institute for Mechanical Engineering (IMechE/UK)

• Tufts University

• McGill University

• George Washington University

This is not an exhaustive or definitive list of potential stakeholders – it is a selection of those consulted thus far. Importantly, at this point, inclusion above also does not imply that any of these entities have committed to this initiative.

While this notional list is U.S.-heavy, the intention is to add global partners quickly during the initial stages of this initiative. AFH will engage internationally with governments, industry and associations to further strengthen its global perspective. This will build upon the relationships with specific entities focused on food, nutrition and health issues along with individual and companies. A diverse membership base will need to be to be in place before formally launching the Alliance.

*Possible Issue Themes*

Nutrition is a complex issue – which can make it challenging to find an initial focus. Taken at a general level, these could include a focus on specific disease risk factors, regional issues, the double burden of malnutrition, and sector-specific initiatives. There are many possible directions possible – which will be up to the group to decide. It may likely focus outside the United States initially to keep a global perspective and reduce the effects of U.S. domestic politics on its deliberations.

One possible lens is economic. A November 2014 study by the McKinsey Global Institute reveals the complexity of the problem from an economic perspective.[[5]](#footnote-5) It notes that any, “single intervention is likely to have only a small overall impact on its own. A systemic, sustained portfolio of initiatives, delivered at scale, is needed to address the health burden.” It notes that education and personal responsibility are necessary but not sufficient to deal with the issue. Critically, it states that getting the “full potential impact requires engagement from as many sectors as possible.”[[6]](#footnote-6)

In terms of possible actions, McKinsey noted that the highest-impact interventions are portion control, reformulation, parental education, and introducing healthier meals in schools and workplaces.[[7]](#footnote-7) Other possible approaches include heightened consumer awareness and knowledge and increasing the availability and affordability of fruit and vegetables. However, it was stressed that no single intervention alone can address health issues in a satisfactory way, especially since the effectiveness of interventions can vary by population.

At the macro level, one intriguing approach is the “convergent innovation” thinking that calls for forward thinking around paths of convergence for agriculture, health, and wealth.[[8]](#footnote-8) This cross-cutting approach focuses on the entire value chain and links good nutrition to its many causes through a “Whole of Society” (WoS) paradigm that seeks effective solutions to improve nutrition and health globally.[[9]](#footnote-9)

**Next Steps**

Initially, the Alliance would focus on building trust to influence both the tone and substance of the relationship among the actors. It would also seek to identify those issues that might be the most amenable to developing collaborative solutions. This would occur by focusing on concrete problems and creating opportunities through increased coordination, facilitating the development of a more positive relationship between those involved. This could also the form of defining terms and setting a scope of work that can build trust between stakeholders and in the process.

Another initial task would be to define the shared vision and determine principles of engagement by mutual agreement – and most likely to be formalized in a Framework of Principles. These “rules of the road” could include creating overarching guiding principles, determining success measures and determining channels of communication. For example, success measures could include determining process achievements, assessing possible collective impact, and evaluating progress toward to the goal of outcome of improved interventions. Concurrently, outputs could be defined as activities designed to generate outcomes that bring the overall goal closer.

Several principles have been suggested in the literature for public-private partnerships including in the nutrition space. These may apply well to AFH:

1. Leveraging of partners’ capabilities for the health of the public.
2. Creating a good/complementary fit between partners.
3. Maintaining accountability and transparency.
4. Fair, unbiased project selection and disclosure of interests.
5. Clearly understood and agreed-upon objectives.
6. Public benefit from intellectual property generated by partnership.
7. Mutual trust and cooperation.
8. Broad-based partner participation including consumer perspectives.
9. Strategic and financial long-term commitment of partners.
10. Identifying and managing potential legal/ethical issues.[[10]](#footnote-10)

Moving forward using these principles, the Alliance would also build stronger links between ag/food, nutrition, and public health communities to engage, communicate and share information. This would improve stakeholder sharing of scientific and technical information and hopefully create a safe space for industry, NGOs, academics and the government to collaborate on addressing nutrition and food issues. This approach would acknowledge issue complexity, seek synergy – and avoid blame.

One final issue would be to find and define an initial focus and to create a “meta-agenda” of issues to be addressed. This could also define basic themes and foci of the Alliance’s work. The immediate emphasis could be on relatively “easy wins”, where consensus may be most possible. As the process advances, stakeholders can decide future issues to be addressed that can deliver maximum impact in the years to come.

**Appendix A: AFH Draft Guiding Principles**

1. **Setting a Common Vision**
   1. Vision: To transform global public health by the creation of new synergistic approaches to food and nutrition issues.
   2. Strategic Goal: Develop novel, actionable, impactful and concrete ways to improve public health related to food and nutrition by generating ideas though multiple stakeholder collaboration.
   3. Measuring Effectiveness – Outcomes: Outcomes are measured over time by the concrete effects on policy, industry and the media debate that come from AFH ideas to deliver improved health and economic outcomes.
   4. Measuring Effectiveness – Outputs: Outputs are defined as documents that suggest actionable and synergistic ways to address food-related public health concerns. In the early period, activities will support process outputs to set the rules of engagement and determine the agenda. The next step will be to obtain some quick wins that can develop trust in the process and between stakeholders. This will allow the process to gain momentum. This will move to other priorities depending on group preferences.
   5. Adherence to Evidence: AFH will base its recommendations on evidence and will attempt to minimize other influences. Since the evidentiary base will drive the debate, participants in the debate will bring up data to support their positions. However, the group will also need to decide collectively if the evidence is sufficient to make decisions.
   6. Minimizing Organizational Overlap: There are many other bodies active in the public health and NCD space but the distinctiveness of AFH lies in its highly diverse members, global vision, and a commitment to collaborate together on the issues.
   7. Advocacy: AFH will not serve as an issue advocate. AFH members will take this role once the Alliance has generated ideas. Instead, AFH is meant to be an advocate of the process (multi-stakeholder cooperation)
   8. Target Audience: AFH will not focus on public communications – but will seek to inform expert opinion who will connect with the public and others.
2. **Principles of Engagement.**
   1. Membership: Members will be drawn from a wide number of stakeholders involved in the public health, food, agriculture, regulatory and other spaces. They will include NGOs, industry, academia, governments, foundations, scientific bodies and other parties interested in the intersection between food and public health. Members should also be committed to the idea of collaboration and membership should be carefully balanced between different types of stakeholders. In particular, it is vital to keep a balance between NGOs and industry points of view. Members are encouraged to engage in outreach with potential members, especially if there are major stakeholders not at the table.
   2. Leadership: AFH leadership should reflect stakeholder balance of members, especially between industry and the public health community.
   3. Agenda Setting: The agenda will be set by the group based on balanced feedback from diverse stakeholders.
   4. Confidentiality: In order to foster open communication and trust, all participants agree to follow the Chatham House Rule, “where participants are free to use the information received, but neither the identity nor the affiliation of the speaker(s), nor that of any other participant, may be revealed.”
   5. Funding Transparency: Funding for AFH should be balanced between different kinds of stakeholder sources to maintain its integrity.
   6. Collaboration with other Organizations: AFH seeks to collaborate with other organizations in the food/nutrition/health space to deepen potential synergies.
   7. Framework of Principles: AFH will develop a Framework to support collaboration and transparency. It will also include acknowledgement of differences of opinion among AFH members and emphasis on our shared goal(s).
3. **Internal Communication.**
   1. Meetings: AFH will meet to address administrative issues, set the agenda and finalize its substantive recommendations.
   2. Digital Tools: Much of the day-to-day substance of AFH discussions will occur through a digital platform to be established in fall 2015.
4. **Setting the Next Agenda – Suggested/Possible Initial Projects**
   1. Agreement on Vision and Rules of Engagement: Including goals, effectiveness measurement, membership, agenda setting, confidentiality, collaboration with other organizations.
   2. Dimensions of each problem to consider: Public health, economics, behavior change, nutrition, regulatory, industry commitments
   3. Substantive Agenda: Specific issues to be determined by the group. May also include regional or subject cluster focus groups.

**Appendix B: Meeting - Sample Agenda**

1. **Introductions**
   1. Welcome
   2. Anti-Trust Statement
   3. Participants Introductions
   4. Introduction by TBD
2. **Setting a Common Vision**
   1. Policy and guidance.
   2. Minimizing overlap with other organizations.
   3. Advocacy through stakeholders.
   4. Measuring effectiveness (output/outcomes). Quick wins v. other long-term priorities
3. **Principles of Engagement.**
   1. Membership.
   2. Leadership
   3. Setting the agenda.
   4. Confidentiality.
   5. Funding Transparency
   6. Collaboration with other organizations.
4. **Internal Communication.**
   1. Meetings.
   2. Digital tools.
5. **Setting the Next Agenda - Suggested/Possible Initial Projects.** 
   1. Encouraging fruit and vegetable consumption.
      1. Includes issues such health promotion and availability e.g. school fruit schemes, supply chain issues, fresh food market promotion in urban design, food deserts, incentives to producers, and infrastructure support.
      2. Proposed Initial Drafter: Eric Trachtenberg/McLarty Associates
   2. “Low-hanging” Sugar.
      1. Targeting opportunities to reduce sugar consumption strategically at low cost.
      2. Proposed Initial Drafter: John Forrer/George Washington University
   3. How to encourage Biofortification.
      1. How to encourage the growth, marketing and consumption of products with enhanced nutrition.
      2. Proposed Initial Drafter: Peg Willingham/HarvestPlus.
   4. School feeding type programs in LDCs or in rich countries.
      1. Can be linked to the WHO initiative on “Nutrition Friendly Schools” and the development of standards for the provision of food in public institutions.
   5. Dietary composition and health outcomes.
      1. This may be the Mediterranean diet or other benchmark alternatives that best fit specific regions/populations.
   6. Global “My Plate.”
      1. Finding ways to guide personal choices and diet.
   7. Opportunities and limits of reformulation.
      1. The Netherlands is focusing their 2016 European Presidency in 2016 on this. Discuss ingredients and nutrients that could be replacements.
   8. Connecting food, nutrition and development.
   9. Other possible issues: Portion control, , parental education
   10. Risk groups approach (maternal, baby foods, child health, aging populations)
   11. Regional challenges/opportunities (LatAm, India, Caribbean, China).
   12. The role and responsibility of the media/press in nutrition and public health
   13. Potential to use social media as a tool for public empowerment – enabling individual and community agency – on taking health and dietary ownership
   14. Influence/effect/impact of the global food processing industries ingredients selection on public health and nutrition
   15. Other ideas?

1. Overcoming obesity: An initial economic analysis, McKinsey Global Institute, November 2014 [↑](#footnote-ref-1)
2. Ibid [↑](#footnote-ref-2)
3. “Prevention of Overweight and Obesity: How Effective is the Current Public Health Approach?”, Ruth S.M. Chan and Jean Woo, Int. J. Environ. Res. Public Health, 2010, #7. [↑](#footnote-ref-3)
4. “Cost-Effectiveness of Fiscal Policies to Prevent Obesity”, Marj Moodie et al, Curr Obes Rep, 2013, #2. [↑](#footnote-ref-4)
5. Overcoming obesity: An initial economic analysis, McKinsey Global Institute, November 2014 [↑](#footnote-ref-5)
6. Ibid [↑](#footnote-ref-6)
7. Ibid [↑](#footnote-ref-7)
8. Paths of convergence for agriculture, health, and wealth, by Laurette Dubé, Prabhu Pingali, and Patrick Webb, PNAS, July 31, 2012 [↑](#footnote-ref-8)
9. Ibid [↑](#footnote-ref-9)
10. “Principles for building public-private partnerships to benefit food safety, nutrition, and health research”, Nutrition Reviews® Vol. 71(10):682–691, by Sylvia Rowe et al. [↑](#footnote-ref-10)