

SAVING LIVES THROUGH COMPREHENSIVE SODIUM REDUCTION

A 6-Step Guide for Policymakers and Advocates

Consuming too much salt is a leading risk factor for cardiovascular disease and causes at least 1.9 million deaths each year—more than any other nutritional cause. Reducing salt consumption to the World Health Organization (WHO) recommendation of 5 grams per day can save lives and money. Policymakers and advocates can use the following steps to guide salt reduction and improve the healthfulness of diets overall.

1 Conduct a landscape analysis

- a Stakeholders: Identify existing or potential individual and institutional champions, influencers and partners within government, academia and civil society.
- b Legal and policy environment: Review legislative and regulatory frameworks, legal authority for sodium reduction interventions, and related government policies, agendas, programs, and strategies. Identify potential threats or opposition to sodium reduction efforts.
- c Food environment: Identify common sources of sodium, (e.g., home cooked foods, packaged foods, food consumed outside the home); review whether packaged and processed food is locally produced, imported, or both; assess the types of salt and high salt foods on the market and whether potassium-enriched low-sodium salt is available.
- d Local and global evidence: Review existing evidence and gaps related to sodium intake, sources, or content in foods; knowledge, attitudes, and practices related to sodium reduction among key stakeholders and/or the public; and cost-effectiveness estimates of sodium reduction interventions. Summarize global evidence on intervention impact¹ and cost-effectiveness².

2 Build an evidence base

- a Collect baseline data on population sodium intake, major sources of dietary sodium, and the levels of sodium in foods targeted by the program.
- b Model the health and economic burden related to high sodium intake and potential benefits of sodium reduction interventions (i.e., lives saved and return on investment).
- c Share case studies and country examples of successful policies, with emphasis on neighboring countries where possible³.
- d Create fact sheets to highlight the importance and benefits of sodium reduction and potential program and policy solutions.

1 Hyseni L, Elliot-Green A, Lloyd-Williams F, et al. Systematic review of dietary salt reduction policies: Evidence for an effectiveness hierarchy?. PLoS One. 2017;12(5):e0177535.

2 World Health Organization. Tackling NCDs: 'best buys' and other recommended interventions for the prevention and control of noncommunicable diseases. WHO; 2017.

3 For examples of case studies, refer to:

[WHO global report on sodium intake reduction](#). Geneva: World Health Organization; 2023

[Global Health Advocacy Incubator. FOPWL regulations around the globe](#). Updated June 2023.

[Resolve to Save Lives. Healthy Public Food Procurement in Quezon City, Philippines](#). 2022.

[He FJ, Brinsden HC, MacGregor GA. Salt reduction in the United Kingdom: a successful experiment in public health](#). J Hum Hypertens. 2014;28(6):345-352.



For every 10 million individuals covered by best practice sodium reduction policies, between 1,000 and 2,000 deaths can be prevented.

3 Design and conduct an advocacy strategy

Design and conduct an advocacy strategy to win support for sodium reduction from the government and advocate for passage of policies to reduce sodium. This may include coalition-building and direct policymaker advocacy (based on the stakeholder mapping in Step 1) as well as media and communications campaigns. Also, develop strategies to [counter potential arguments](#) against sodium reduction, particularly from the food industry.

4 Develop a national sodium strategy

Obtain high-level political support and develop a [national sodium strategy](#) that outlines the steps that government and other stakeholders will take to achieve sodium reduction.

- a Agree on a goal for sodium reduction and identify which ministry/department will own the agenda and be accountable for the national strategy.
- b Develop a comprehensive national strategy for sodium reduction, including: (1) vision and objectives, (2) a comprehensive set of interventions and/or policies and their timelines, (3) communications plan, (4) monitoring and evaluation plan and (5) key stakeholders.
- c Get buy-in from the key ministries, departments and agencies.
- d Outline an [operational plan](#) including budgets and specified roles and responsibilities for individuals and partners, ministries, departments and agencies in the government, academia and civil society.
- e Establish a technical working group (TWG) responsible for strategy development and implementation, including relevant individuals and partners in the government, academia and civil society.
- f [Minimize conflicts of interest](#) by requiring all TWG members to sign a conflicts of interest statement and limiting the food and beverage industry's involvement. While industry may be consulted during open public consultations, they should not be engaged in policy development.

5 Develop, implement, and enforce laws and regulations

- a Conduct formative research to design optimal policies/interventions (e.g., randomized controlled trial to test front-of-package labeling designs; analysis of packaged food data to set sodium target levels). Develop a comprehensive set of policies to address the various sources of sodium within the population (See Box 1.)
- b Establish mechanisms to implement and enforce policies using timelines and milestones that are both rigorous and politically feasible.



- c For interventions that can be implemented at a sub-regional level (e.g., low-sodium salt and public food procurement and service), consider demonstration projects to pilot test strategies, refine interventions, and build local evidence and support in a district/state/province.

Box 1: Effective interventions to reduce population sodium consumption



Packaged food:

- **Sodium targets for packaged foods** establish mandatory maximum limits for sodium content for specific food categories and reduce these progressively over time to allow industry to reduce sodium gradually. Prohibit sale of products with sodium content that exceeds the limits.
- **Front-of-package warning labels** indicate packaged foods high in sodium and other unhealthy nutrients, making it easy for consumers to make healthier choices.
- **Restrictions on marketing, promotion, and sponsorship of unhealthy food** limit exposure to these foods, reduce unhealthy food preferences and behaviors, and provide industry incentive to reformulate and market healthier products.
- **Fiscal policies** including taxes on products high in sodium, sugar, or saturated fats can discourage consumers from purchasing unhealthy foods and encourage manufacturer reformulation. They are most effective when paired with subsidies for healthy foods.



Use a consistent Nutrient Profile Model (NPM)

- A single NPM should be used across packaged food policies (with the exception of sodium targets) to facilitate implementation and provide clearer incentives to consumers. Effective nutrient profile models have strict criteria and are based on [strong scientific evidence](#).



Food consumed outside the home:

- **Healthy public food procurement and service policies** set nutrition standards for food served or sold in public settings such as schools and hospitals, where millions of meals are consumed each day.



Food consumed at home:

- **Low-sodium salt substitutes** replace some of the sodium in salt (usually 25%) with potassium and can be used in home cooking (as well as in prepared and packaged foods) without changing taste. Using a low-sodium salt substitute can lower blood pressure and reduce heart disease and stroke.
- **Mass media campaigns** can increase consumer awareness of the dangers of sodium consumption and build public support for policies to address high sodium intake. Campaigns are only effective in tandem with other interventions.



6 Develop a plan to monitor and evaluate

Develop a plan to monitor and evaluate sodium reduction interventions and specify mechanisms for enforcement.

- a Collect data on process and outcome indicators to evaluate program impact including:
 - i Reductions in sodium intake through 24-hour urinary studies
 - ii Reductions in the levels of sodium in foods targeted by the program:
 - 1 assess any reductions in sodium content in packaged foods through a label analysis study
 - 2 assess changes in purchasing patterns of packaged foods high in sodium
 - iii Other process indicators may include documenting the increase in sales/use of low sodium salt or improvements to the availability of healthy, lower sodium food served in public institutions.
 - iv Consider overall impact of interventions on population health outcomes (hypertension prevalence, cardiovascular disease death and disability, etc.)
- b Based on findings, review and adjust plans, strategies, and policies to incorporate lessons learned.