







THE SALT HABIT

The SHAKE Technical Package for Salt Reduction





5 H A K E THE SALT HABIT

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WHO Library Cataloguing-in-Publication Data:

The SHAKE Technical Package for Salt Reduction.

1.Sodium Chloride, Dietary – adverse effects. 2.Diet, Sodium-Restricted. 3.Hypertension. 4.Cardiovascular Diseases. 5.Recommended Dietary Allowances. 6.National Health Programs. 7.Health Promotion. I.World Health Organization.

ISBN 978 92 4 151134 6

(NLM classification: WB 424)

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Printed by the WHO Document Production Services, Geneva, Switzerland.

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EXECUTIVE SUMMARY

Raised blood pressure is the leading risk factor for the global disease burden and is estimated to cause 9.4 million deaths every year – more than half the estimated 17 million deaths caused by cardiovascular diseases annually. High consumption of sodium leads to increases in blood pressure among those with normal blood pressure as well as those whose blood pressure is already raised. Sodium consumption (over 2 grams per day, equivalent to 5 grams of salt per day) contributes to high blood pressure and increases the risk of heart disease and stroke.

Sodium is mainly consumed as salt which in the diet can come from processed foods, either because they contain large amounts of salt (such as ready meals, processed meats like bacon, ham and salami, cheese, salty snack foods and instant noodles, among others) or because they are consumed frequently in large amounts (such as bread and processed cereal products). Salt is also added to food during cooking (bouillon and stock cubes) or at the table (soy sauce, chilli sauce, fish sauce and table salt). Dietary patterns are being transformed by the increasing production of more and more processed food, rapid urbanization and changing lifestyles. Highly processed foods are becoming increasingly available and affordable.

In 2013, the World Health Assembly endorsed the Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013–2020. The Global Action Plan provides WHO Member States, international partners and WHO with a road map and menu of policy options which, when implemented collectively between 2013 and 2020, will contribute to progress on nine global noncommunicable disease (NCD) targets to be attained in 2025. One of the targets agreed by Member States is a 30% relative reduction in mean population intake of salt/sodium by 2025. It is essential that this target is met in order to meet the overall goal of a 25% reduction in premature mortality from NCDs.

The **SHAKE** package has been designed to assist Member States with the development, implementation and monitoring of salt reduction strategies to enable them to achieve a reduction in population salt intake. The package outlines the policies and interventions which have proved to be effective in reducing population salt intake, provides evidence of the efficacy of the recommended interventions, and includes a toolkit containing resources to assist Member States to implement the interventions. WHO looks forward to continuing to work with Member States to reduce population salt intake and combat the burden of NCDs.

ACKNOWLEDGEMENTS

This document was prepared in collaboration with the World Health Organization Collaborating Centre for Population Salt Reduction at the George Institute for Global Health in Sydney, Australia. The accompanying toolkit was field-tested in Croatia, Indonesia, Kiribati, Kuwait, Mauritius, Mongolia and Suriname. A final review was then conducted within WHO and with salt reduction experts before finalization. WHO acknowledges the generous input from international experts Nawal Al Hamad, Norm Campbell, Franco Cappuccio, Karen Charlton, Mary Cogswell, Wangchuk Dukpa, Cres Eastman, Clare Farrand, Melvyn Freeman, Susan Jebb, Mary L'Abbe, Mary-Anne Land, Jessica Leighton, Mu Li, Graham MacGregor, Bruce Neal, Jimaima Schultz, Victoria Targett, Jacqui Webster and Michael Zimmerman, as well as WHO officials Ayoub Al Jawaldeh, Tim Armstrong, Virginia Arnold, Douglas Bettcher, Peter Hoejskov, Jo Jewel, Joao Breda, Warrick Junsuk Kim, Branka Legetic, Leo Nederveen, Chizuru Nishida, Susannah Robinson, Juan Pablo Pena Rosas, Padmini Angela de Silva, Chandralall Sookram, Wendy Snowdon, Cherian Varghese, Temo Waqanivalu, Stephen Whiting and Godfrey Xuereb.

ABBREVIATIONS

- CVD Cardiovascular disease
- COMBI Communication for Behavioural Impact
- Demographic Health Survey
- FoP Front-of-Pack

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