

# SALT REDUCTION STRATEGY

To Prevent And Control NCD For Malaysia 2021-2025 Disease Control Division Ministry of Health Malaysia 2021

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#### **Abbreviations**

The bottom 40% of income earners

BP Blood pressure

CVD Cardiovascular diseases

DALY Disability-adjusted life-years

FMM Federation of Malaysian Manufacturers

HCL Healthier Choice Logo

HiTS Program Hidangan Berkhasiat di Sekolah KOSPEN Plus Komuniti Sihat Pembina Negara at workplace

KOSPEN Komuniti Sihat Pembina Negara MAP Monitoring-Awareness-Product

MOH Ministry of Health

MyCoSS Malaysian Community Salt Study
MyFCD Malaysian Food Composition Database
NHMS National Health & Morbidity Survey

NCD Non-Communicable Diseases
NGO Non-governmental organisation

PROSIS Program Siswa Sihat

SME Small and medium-sized enterprises/businesses

TOR Terms of Reference
TWG Technical Working Group
WHO World Health Organization

## **Appendices**

Appendix A Achievement Salt Reduction Strategy to Prevent and Control NCD for Malaysia,

2015-2020

Appendix B Terms of Reference for Technical Working Group (TWG) for the Salt Reduction

Strategy

#### **About this Document**

This is an addendum document to the Salt Reduction Strategy 2015-2020 with an objective to extend the scope of the document to a new term of 2021-2025 while retaining the overall target of the initial strategy, based on the interim evaluation.

# **Acknowledgements**

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# Message from Director General of Health Malaysia



Noncommunicable diseases (NCDs) are the leading cause of death worldwide, responsible for 71% of the 57 million deaths. 77% of these NCD deaths occur in low- and middle-income countries. In 2016, it was estimated that 74% of all deaths in Malaysia were NCD-related. Of the NCDs, cardiovascular diseases (CVDs) account for most deaths, and raised blood pressure (BP) is the leading risk factor for CVDs. The National Health and Morbidity Survey (NHMS) in 2019 revealed that the prevalence of NCD risk factors continued to rise in Malaysia with 6.4 million (30.0%) adults having raised BP.

Available evidence suggests a direct relationship between sodium intake and BP level. Excessive sodium consumption (defined by the World Health Organization as >5 g sodium per day), has been shown to produce a significant increase in BP subsequently leading to the onset of hypertension and its cardiovascular complications. Conversely, a reduction in sodium intake decreases blood pressure levels and hypertension incidence, and is thus associated with a reduction in cardiovascular morbidity and mortality.

The National Strategic Plan for NCD 2016-2025 (NSP-NCD) supports the nine global voluntary targets with the overarching aim to reduce premature death from the four major NCDs by 25% by 2025. Among them is the 30% decrease of salt/sodium intake in the population and a 25% reduction in the prevalence of hypertension by 2025.

The Salt Reduction Strategy to Prevent and Control NCD for Malaysia 2021-2025 is an extension of its predecessor and outlines multi-pronged strategies to reduce salt intake among Malaysians through its M-A-P (Monitoring, Awareness, Product) sub-strategies. Outlined within this document are strategies and activities that will create a supportive environment for behaviour change for Malaysians to lead a healthier lifestyle.

At the Ministry of Health, we believe that all stakeholders including, but not limited, to government agencies, private sectors, NGOs, professional bodies, and academicians would find this document beneficial when implementing the strategies outlined in their respective fields. Let's all do our part to make Malaysians healthier.

TAN SRI DATO' SERI DR NOOR HISHAM BIN ABDULLAH Director General of Health Malaysia

# Message from The Deputy Director General of Health (Public Health)



It is an honour and privilege for me to share my thoughts on The Salt Reduction Strategy to Prevent and Control NCD for Malaysia 2021-2025. This strategic plan is testament to the government's commitment to reduce the burden of NCDs in Malaysia through healthier eating habits, particularly in limiting salt intake in our diets.

This document is a continuation of the previous Salt Reduction Strategy to Prevent and Control NCD for Malaysia 2015-2020, and is to be used as a guide for the next five years.

Based on the recommendations synthesised from midterm evaluation of the previous strategy conducted in 2018, the Salt Reduction Strategy to Prevent and Control NCD 2021-2025 continues to maintain the same M-A-P Strategy (Monitoring, Awareness and Product). The strategies outlined here will hopefully be adopted not only by the Ministry of Health (MOH) and other government agencies, but also by other relevant stakeholders such as professional bodies, NGOs, academic institutions and the industries.

This document provides clear directions to implement and monitor these progress of the interventions. We hope that the implementation of these strategies through a strengthened coordination with all stakeholders will significantly contribute to successful reduction of salt intake in the population, and reduce the burden of NCDs and risk of premature deaths in Malaysia.

I urge all parties concerned to give full commitment and solid support to make this goal a reality.

DATUK DR. CHONG CHEE KHEONG

**Deputy Director General of Health (Public Health)** 

Ministry of Health, Malaysia

#### **Executive Summary**

Salt or sodium intake has been directly associated with blood pressure increase. Therefore, the overall reduction of 30% in global average population salt consumption by 2025 was targeted. This is the only nutrition-specific target and a core component of the Global Action Plan for the Prevention and Control of Non-communicable Diseases (NCD) 2013–2020, which aimed to achieve a 25% reduction in premature mortality from avoidable NCDs by 2025. Almost three quarters of all premature NCD deaths, defined by dying before reaching 70 years of age, occur in low- and middle-income countries.

This Salt Reduction Strategy to Prevent and Control NCD for Malaysia 2021-2025 is a continuation of the previous document published for 2015-2020. Reducing salt intake among Malaysians is the simplest and most cost-effective measure for reducing cardiovascular disease because of its high impact on health, high feasibility and low implementation costs. It highlights the importance of creating a living environment that promotes healthy eating for all Malaysians. The overall objectives are to increase awareness; to strengthen policies; and to promote research, partnership and engagement with all relevant agencies.

In order to achieve the target of reducing salt consumption among Malaysians, the efforts should be inter-sectoral, and it should take a multi-disciplinary approach. The implementation of the activities including education, legislation enforcement on labelling, and product reformulation require participation of all relevant stakeholders to ensure their effectiveness. In addition, integrated programs need to be established at the primary care level, to improve the efficiency and effectiveness of detection and management of hypertension and other cardiovascular risk factors through a full risk approach, as recommended by WHO.

Through the extended M-A-P strategies, we hope to build upon existing work in a more systematic and integrated approach. The Plan of Action for 2021-2025 clearly outlines the process and output indicators and targets, with the long-term target of reducing the mean salt intake of the adult population to 6.0 g per day by the year 2025. Hence, it is hoped that we are a step closer to help Malaysians change their behavior to reduce their daily salt intake.

#### Introduction

The prevalence of hypertension in Malaysia remains high at 30.0% for all adults aged 18 years and above<sup>1</sup>. Salt reduction is deemed a cost-effective strategy as outlined in the Global Action Plan for the Prevention and Control of NCDs adopted at the 63<sup>rd</sup> World Health Assembly 2013.

According to the Malaysian Community Salt Survey (MyCoSS) study on salt intake, Malaysians are consuming an average of 7.9 g (1.6 teaspoons) salt or 3,167 mg sodium per day <sup>2</sup>, above the recommended intake by World Health Organization (WHO) of 5.0 g (1 teaspoon) per day <sup>3</sup>. Based on this study 79% of Malaysians are consuming too much salt. In terms of knowledge, 9 out of 10 Malaysian adults were aware of the negative health impacts of a high salt diet. In terms of attitude, 9 out of 10 Malaysian adults thought that reducing salt in their diet is important and 3 out of 5 Malaysian adults thought that they consumed the right amount of salt in the diet. 7 out of 10 Malaysian adults add salt when cooking, and about half of the surveyed Malaysian adults add additional salt, sauces, and condiments to food when dining at their tables. Half of the surveyed Malaysian adults control their salt intake regularly. Product surveys indicate that high sodium products consumed by Malaysians, such as sauces and instant noodles did not include sodium content information on the nutrient information panel <sup>4,5</sup>.



<sup>&</sup>lt;sup>1</sup>National Health and Morbidity Survey 2019

<sup>&</sup>lt;sup>2</sup> Malaysian Community Salt Survey (MyCoSS 2019)

<sup>&</sup>lt;sup>3</sup> WHO (2012), Guideline: Sodium Intake for adults and children. World Health Organization (WHO), Geneva.

<sup>&</sup>lt;sup>4</sup> Shahar S, You,YY, Zainuddin NZS, Michael V, Ambak, Haron H, He FJ, MacGregor GA. 2019. Sodium content in sauces—a major contributor of sodium intake in Malaysia: a cross-sectional survey BMJ Open 9:e025068.

<sup>&</sup>lt;sup>5</sup> Tan CH, Chow ZY, Ching SM, Devaraj NK, He FJ, MacGregor GA, Chia YC. 2019. Salt content of instant noodles in Malaysia: a cross-sectional study. BMJ Open 9:e024702

## Salt Reduction Strategy to Prevent and Control NCD for Malaysia 2015-2020

This policy document outlined 3 main strategies, namely Monitoring (M), Awareness (A) and Products (P) Strategy. The general objective was to promote, educate, collaborate with all related stakeholders to reduce salt intake among the population, working towards achieving the 30% global reduction target by the year 2025 with the ultimate aim of reducing the burden of NCDs in Malaysia. The main target was to reduce salt intake from 8.7 g (1.75 teaspoon) salt (baseline data among healthcare staff in 2012) to 6.0 g (1.2 teaspoon) salt in 2025 or with a reduction of 0.5 g per year. The medium- and long-term outcome of this policy is a reduction of the average salt intake to 7.4 g per day (1.5 teaspoon) among the adult population and 15% reduction in disability-adjusted life-years (DALY) for high blood pressure in the year 2020.

Although the outcome of the strategies did not achieve the target to reduce the average salt intake of the adult population to 7.4 g per day in 2020, as evidenced by MyCoSS, there was indeed a reduction of mean salt intake to 7.9 g per day (1.6 teaspoons) which is slightly above the target.

#### Goal

To promote, educate and collaborate with all related stakeholders to reduce salt intake among the Malaysian population, working towards achieving the 30% reduction of global target by the year 2025 with the aim of reducing the burden of NCDs in Malaysia.

<sup>&</sup>lt;sup>6</sup> Malaysian Community Salt Survey (MyCoSS 2019)

#### **Objectives**

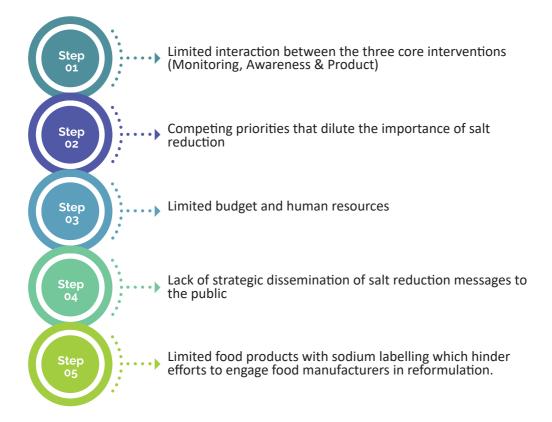
- To raise the level of awareness pertaining the issue of salt in the prevention of NCD and its cost-effectiveness
- To establish and strengthen national policies and plans for the prevention and control of NCDs through salt reduction initiatives
- To implement an intervention to reduce the modifiable risk factors for NCDs especially unhealthy diet
- To promote research for the prevention and control of NCDs especially salt intake research, salt content in the food and product reformulation
- To promote partnership among different organizations for the prevention and control of NCD especially reduction of salt
- To engage food manufacturers or industries to reduce salt in processed food and beverage products
- To monitor and evaluate the progress of salt reduction initiatives and their effectiveness

The MAP Strategy focused on the seven (7) objectives above and its achievements are documented in Appendix A.



# Midterm Evaluation of the Salt Reduction Strategy 2015-2020 by WHO

A midterm evaluation was commenced in 2018 to evaluate the implementation of Salt Reduction Strategy. Based on the report "Reducing Salt Intake In Malaysia: An Interim Evaluation of what works", it was found that the strategy focused heavily on producing culturally specific salt reduction education resources and accurately monitoring population salt intake and salt levels in food. Progress was moderate in establishing mechanisms to deliver such outputs to the Malaysian population (by training state health professionals and community members to spread the message) and engaging food manufacturers to reformulate or label the sodium content of processed food. However, progress in ensuring that salt reduction messages, education materials, and lower salt processed food reached and were adopted by the Malaysian population was slow. The major challenges of implementation include:



Key drivers of the strategy include the engagement of researchers to conduct monitoring, the formation of the technical working groups to monitor progress and design of context-specific salt reduction resources, and the Healthier Choice Logo (HCL) as an incentive for food reformulation.

The following steps were recommended for strengthening the salt reduction intervention:



### The Extended MAP Strategy for Malaysia

#### **Monitoring Strategy (M)**

Malaysia will continue to strive to measure salt intake among its population using 24 hours urinary sodium analysis or validated spot urine analysis together with food consumption survey. This should be done at the end of the term after all the strategies have been implemented to evaluate the outcome. Product survey and food analysis on salt content should be done in food products that have not been previously surveyed to include food from street food vendors, restaurants, school / workplace canteens, food courts, food trucks and other commercial food suppliers.

#### **Awareness Strategy (A)**

In order to increase the reach and adoption of salt reduction practices, a multi-stakeholder strategic communication plan targeting specific groups through targeted communication channels needs to be developed with a specified time frame and target. Examples of target populations are school children, chronic disease patients, the B40 population, and working adults.

#### **Product Strategy (P)**

While voluntary reformulation is ongoing, efforts to propose mandatory salt targets for specific processed food contributing to high salt intake among Malaysians needs to be intensified. Mandatory labelling has been gazetted on 21st July 2020 and will be enforced on 22nd July 2022 (Food Act 1983). Continuous education and collaboration with the food industries to ensure full commitment for action needs to be done.



# **Operationalising this Strategy**

The Plan of Action for Salt Reduction Strategy and roles of divisions withinMinistry of Health is shown in Table 1.

Table 1: Plan of Action for Salt Reduction Strategy 2021-2025

A	to Produce		B 11.111
Activity	Indicators	Targets	Resposibility
	Strategy: Monitoring	ng	
To conduct a population-based survey for salt intake (24-hour urine analysis or validated spot urine)- to incorporate into NHMS- Nutrition Survey	A survey conducted every four years	Next report in 2024	Institute for Public Health
To strengthen the database of food with salt/sodium content in the Malaysian Food Composition Database (MyFCD)	Number of food items with salt/ sodium content in the database	Annual increment of the food items with salt/sodium content in the database	Nutrition Division
To increase the number of food items analysed and included in the Current Database via primary/lab analysis.	Number of food items analysed (primary analysis)	Annual increment of the number of food items in the current MyFCD	Nutrition Division
To increase the number of food items entered in the Industry Database by the food industries.	Number of food items reported by the food industry	database	Nutrition Division
To conduct a survey to determine barriers and enablers towards salt reduction among targeted groups (E.g., out of the home sector, B40)	Number of surveys done, and reports published and/ or Number of interventions	Survey completed and report published and/ or intervention completed	Disease Control Division
To conduct a survey to determine health literacy related to salt intake among Malaysians.	Number of surveys done, and reports published	Baseline survey 2021, Follow up survey 2025	Institute for Health Behavioral Research

Activity	Indicators	Targets	Resposibility
	Strategy: Awarenes	SS S	
To increase health literacy through health promotion activities	Percentage of sufficient health literacy on reading labels among target group	10% increase by the year 2025 (baseline 2021)	Disease Control Division
To develop a Strategic Communication Plan to improve health promotional activities relating to reducing salt intake	Strategic Communication Plan document	Published in 2021	Disease Control Division
To improve the level of health literacy of reading labels (to maximise benefits of mandatory salt content labelling) through health promotional activities for the specified target groups.	Specific salt-related modules developed and incorporated into the existing platforms and programs	Completed by end of 2021	Disease Control Division
To use existing platforms and programs in specific target groups  Preschool & School Children  • Tunas Dr Muda  • Doktor Muda  • Promosi Pemakanan Sihat Murid Tabika/Prasekolah Dan Sekolah  • Hidangan Sihat Di Asrama Sekolah  • Pemantauan Penjualan Makanan Dan Minuman Di Kantin Sekolah  • HiTS  Adolescents or Young Adults  • PROSIS  • Kafe@teen (Lembaga Penduduk dan Pembangunan Keluarga Negara)			

Activity	Indicators	Targets	Resposibility
Adults and Working Population  • Kafeteria Sihat  • Penyajian Hidangan Sihat  Semasa Mesyuarat  • KOSPEN and KOSPEN Plus  Chronic Disease and Elderly  • Perkhidmatan Pemakanan  Warga Emas  • KOSPEN			
	Strategy: Products		
To drive product reformulation of pre-packaged food towards a healthier sodium level	Number of food products with reduced salt/sodium content	Minimum 5 products per year	Nutrition Division
To process the inclusion of mandatory maximum salt/ sodium level in high-risk food through/in Amendment of Food Act 1983	Number of stakeholder engagement with relevant agencies and food industries	Minimum 5 engagements per year	Disease Control Division
To enforce the labelling of sodium content in processed food by 2022	Number of products labelled for salt/ sodium content	100% sampled food labelled by the year 2022	Food Safety and Quality Division

Possible roles of other government and non-governmental agencies are shown in Table 2 and 3 respectively.

Table 2: Government agencies that have major possible roles in operationalising the Salt Reduction Strategies

	Agency	Possible Roles in the Salt Reduction Strategy
1	Ministry of Education/ Higher Education	<ul> <li>Incorporating salt education components as part of school healthy eating curriculum</li> <li>Facilitating implementation of salt reduction initiatives in school or higher learning institution (Kelab Dr Muda, Program Siswa Sihat (PROSIS), etc.)</li> <li>Facilitating a health-promoting environment (e.g., healthy cafeteria or canteen, school meal programme (Program Hidangan Berkhasiat di Sekolah, HiTS))</li> </ul>
2	Ministry of Communication and Multimedia	Facilitating promotion of salt reduction programme and products
3	Ministry of International Trade and Industry	<ul> <li>Facilitating product reformulation development among small and medium food industries</li> <li>Promotion and facilitation of exports of local products with low or reduced sodium</li> <li>Promote and facilitate accelerated adoption of digital technologies and salt-related innovations, such as reformulation</li> </ul>
4	Ministry of Domestic Trade, Cooperatives & Consumerism	<ul> <li>Promotion of healthier foods/beverages (reduced sodium content) as an affordable alternative for Malaysians</li> <li>Facilitate implementation of fiscal measures and regulations related to unhealthy food/drinks</li> </ul>
5	Ministry of Agriculture & Agro-based industry	<ul> <li>Promotion of fruits and vegetables consumption to increase potassium intake and reduce salt intake</li> <li>Increase the availability of fresh vegetables and fruits to Malaysian at affordable prices to increase consumption</li> <li>Promote and facilitate accelerated adoption of digital technologies and salt-related innovations, such as reformulation</li> </ul>
6	Attorney General Office	Approval of proposed legislation or food amendment

Table 3: Roles of Other Agencies outside of Health

	Stakeholder	Possible roles in the Salt Reduction Strategy
1	Food and beverages industries and association (Federation of Malaysian Manufacturers (FMM) or Small and medium-sized enterprises/businesses, SME)	<ul> <li>Reformulation of food products with reduced and low sodium content in line with the Healthier Choice Logo requirements</li> <li>Reformulation of selected food products with target</li> <li>Contributing to the MyFCD database of reformulated food with reduced and low sodium content</li> <li>Labelling of food with sodium level as per the requirement of the mandatory sodium labelling by the Food Act.</li> <li>Labelling of low sodium claim such as reduced and low sodium content</li> </ul>
2	Media	<ul> <li>Consumer awareness of food with reduced and low sodium content</li> <li>Promotion of healthier food/drink (low salt)</li> <li>Promotion of safe salt alternative or substitutes</li> </ul>
3	NGOs and Professional Bodies	<ul> <li>Awareness and education to the general population and specific focus groups</li> <li>Act as technical advisors and provide input on salt awareness program or initiatives</li> </ul>
4	Academia	Research on salt content in processed food or cooked food, salt intake for the focus group, the relationship of salt intake and hypertension/other cardiovascular diseases, knowledge and awareness on salt intake and its relationship with diseases and intervention studies to reduce salt intake for focus group

The Technical Working Group (TWG) for the Salt Reduction Strategy under the Disease Control Division, MOH will continue to provide technical guidance and recommendations in operationalising this Salt Reduction Strategy. The membership and terms of reference (TOR) of this TWG are shown in Appendix B.

# **Monitoring and Evaluation**

The output, short-term, intermediate-term indicators and targets are shown under Appendix A. Medium-term, long-term indicators and targets are shown in Table 4.

**Table 4: Long-term Indicators and Targets** 

	Long-term outcome indicators	Target (2025)
1.	Average salt intake of the adult population	6.0 gram salt per day
2.	Risk of premature mortality due to hypertension, cardiovascular diseases, and stroke	25% relative reduction of the prevalence from 2010 (baseline)



#### **Conclusion**

In view of current progress, barriers and facilitators to implementation, and the contextual influences on salt intake in Malaysia, the following steps are recommended to strengthen salt reduction interventions:

- (1) Facilitate greater integration of strategies with stakeholders leading different elements of the strategy.
- (2) Conduct comprehensive monitoring of the sodium content of ready-to-eat processed food and out-of-home dining food in Malaysia.
- (3) Establish several communication channels to strategically reinforce salt reduction messages to the Malaysian population.
- (4) Conduct ongoing evaluation of process measures to inform adaptations of the interventions.

Through the extended M-A-P strategies, we hope to build upon existing work in a more systematic and integrated approach. The Plan of Action for 2021-2025 clearly outlines the process and output indicators and targets, with the long-term target of reducing the mean salt intake of the adult population to 6.0 g per day by the year 2025.

Effective implementation of the Salt Reduction Strategy requires a multi-sectoral approach, involving many stakeholders, including the private sector, NGOs, and civil societies. Through clear and realistic, stepwise Plan of Action, built on the 3 M-A-P strategies, Malaysia hopes that the interventions will contribute significantly to the reduction of NCD burden in the country.

# **Appendix A**

An excerpt of some of the achievements achieved under the Salt Reduction Strategy to Prevent and Control NCD for Malaysia, 2015-2020 are listed below. More details and other achievements can be accessed by scanning the QR code.



Outcome	<ul> <li>The result was used as a baseline data to inform the health staff' conducted in 2012         <ul> <li>'Salt Reduction Strategy to Prevent and Control NCD for Malaysia 2015-2020' successfully obtained additional budget to conduct a population-based study.</li> </ul> </li> </ul>	<ul> <li>The findings have been used as evidence for the development of educational tools on salt and health for healthcare professional and public.</li> <li>It was also used for development of Recommended Nutrient Intakes 2017 and Primary and Secondary Prevention of Cardiovascular Disease 2017 as well as to request additional programme budget from WHO for the development of tools.</li> </ul>
Achievement	Report published (2014) based on the pilot study on 'Sodium intake among normotensive health staff' conducted in 2012	Report published (2015) based on study on 'Determination of dietary sodium intake among the Ministry of Health staff' (MySalt)
Strategy		Monitoring

Stra	Strategy	Achievement	Outcome
		Report published (2019) based on the 'Population-based Salt Intake Survey to Support the National Salt Reduction Programme for Malaysia' - (Malaysian Community Salt Survey – MyCoSS)	The results and findings were used to apply for LINKS Fund and Newton Fund grants and were used as evidence to write up the Malaysian Dietary Guideline 2020 for key message 10: Salt and Sauces.
		Extensive health promotions and education tools developed and published	Educational tools have been developed and published comprising of the guideline, manual, infographic, video, poster, recipes book, booklet sodium counting, slide presentation which can be browsed at <a href="https://bit.ly/KKMGaram">https://bit.ly/KKMGaram</a>
15		Successful number of training, workshops, and courses conducted, increased of knowledge in relation to salt, and salt reduction intervention incorporated into KOSPEN	<ul> <li>Successful Training of Trainers on the use of educational materials on salt has been conducted among healthcare staff in five zones in Malaysia.</li> <li>In addition, various activities were carried out to increase public awareness to reduce salt intake,</li> </ul>
Awar	Awareness		<ul> <li>including talks, exhibitions, cooking demonstrations, seminars, workshops, continuous medical education especially during the World Salt Awareness Week.</li> <li>Based on training and intervention in four states, it was found that there was an increase in knowledge (average increase of 29.5%) among the participants.</li> </ul>
			<ul> <li>E-learning intervention in all states showed that there was an increase of knowledge by 52.9% among participants.</li> <li>Implementation of salt reduction intervention among the volunteers in some KOSPEN localities.</li> </ul>

Strategy	Achievement	Outcome
	Promotion through mass media and social media	<ul> <li>Ongoing mass media and social media promotion through newspaper, television, radio, article, magazine, YouTube, Facebook, and Twitter.</li> </ul>
1	Achieved target of reformulation of 5 products annually	62 products have been reformulated by food industry through voluntary initiatives.
Products	Mandatory labelling successfully gazetted on 21st July 2020	<ul> <li>The gazettement of mandatory labelling for the salt content in food packaging in July 2020 and to be enforced by the year 2022.</li> </ul>

### **Appendix B**

#### Technical Working Group (TWG) for the Salt Reduction Strategy

Chairperson

Deputy Director (NCD), Disease Control Division, MOH

#### Members

- 1. NCD Section, Disease Control Division, MOH
- 2. Nutrition Division, MOH
- 3. Food Safety and Quality Division, MOH
- 4. Health Education Division, MOH
- 5. Family Health and Development Division (Primary Care), MOH
- 6. Institute for Public Health, MOH
- 7. Institute for Health Behavioural Research (IHBR), MOH
- 8. State Health Department Representative
- 9. Academia
- 10. Malaysian Dietitians' Association
- 11. Nutrition Society of Malaysia
- 12. Malaysian Society of Hypertension

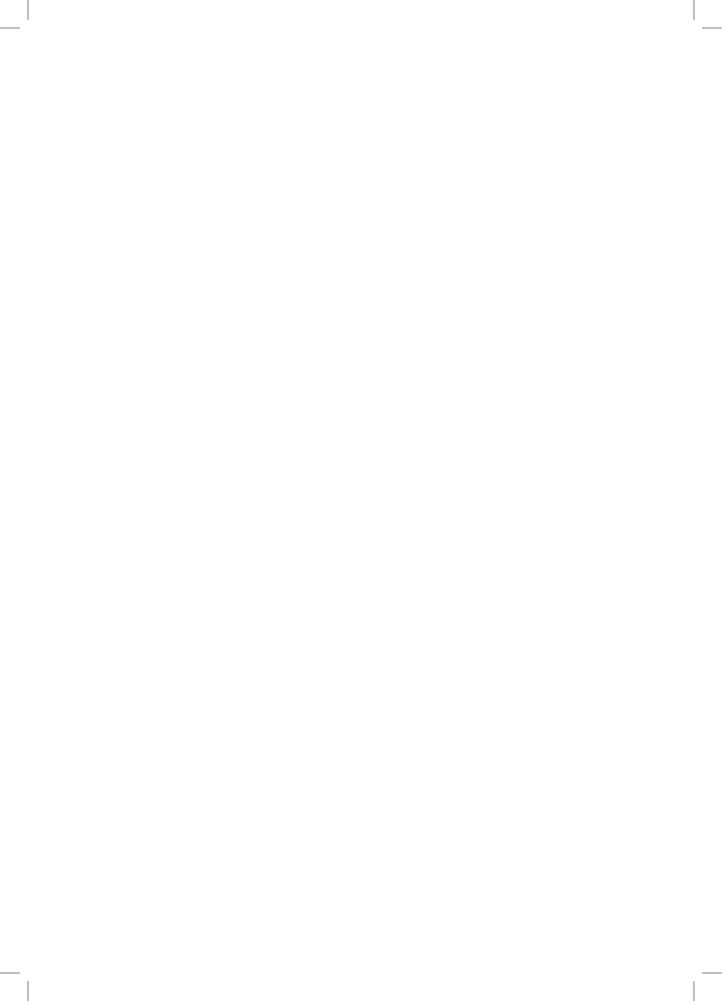
#### Terms of Reference (TOR)

- 1. To provide technical input for salt reduction initiatives in Malaysia to further strengthen the activities and program in the country.
- 2. To identify the appropriate method for salt reduction campaign and awareness, by target groups.
- 3. Establish and strengthen smart partnerships between different sector (agencies, industries, Professional Associations or NGOs, universities) and other stakeholders.
- 4. A platform for discussion, sharing and dissemination of information on salt reduction activities.
- 5. Coordinate and monitor the implementation and achievements of the salt reduction campaign and activities done at the national level and various sectors and stakeholders.

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## **NOTES:**





#### Cawangan Penyakit Tidak Berjangkit Bahagian Kawalan Penyakit

Kementerian Kesihatan Malaysia Aras 2, Blok E3, Kompleks E, Pusat Pentadbiran Kerajaan Persekutuan, Presint 1, 62590 Putrajaya

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