The Notice by the General Office of the State Council on Printing and Distributing National Nutrition Plan

(Year 2017—2030)

The people’s governments of all provinces, autonomous regions and municipalities directly under the Central Government, all ministries and commissions of the State Council, all institutions directly under the State Council:

*The National Nutrition Plan (Year 2017 – 2030)* has been approved by the State Council and now printed and distributed to all of you. Please implement this Plan conscientiously.

General Office of the State Council
June 30, 2017

(This document disclosed publicly)

The National Nutrition Plan (Year 2017 – 2030)

Nutrition is an important material foundation for human beings’ life, growth, development and good health. National nutrition condition is relevant to the improvement of quality of nationals and social economic development. In recent years, the living standard of people in our country has improved continuously, nutrition supply capacity has increased significantly, and people’s nutritional and health condition has been improved obviously. However, problems such as coexistence of malnutrition and over nourishment, high incidence of nutrition-related diseases and lack of awareness of a nutritional and healthy lifestyle, become important factors affecting national health condition. This plan is drafted for the implementation of the *Healthy China 2030 Plan* and the improvement of national level of nutrition and health.

I General Requirements

(1) Guiding Ideology

The spirits of 18th National Congress of the CPC and the third, the fourth, the fifth, and the sixth Plenary Session of the 18th Central Committee of the Party shall be implemented comprehensively; the spirits of President Xi Jinping’s series important speeches as well as his new concepts, new thinking and new strategy of country governing shall be implemented fully; planning and promoting the “Five-in-One” overall layout as well as coordinating and promoting the “Four Comprehensives” strategic blueprint shall be focused; the policy decision
and deployment of the Party’s Central Committee and the State Council shall be implemented conscientiously; the new concept of development shall be firmly established and implemented; attention to putting people’s health first shall be paid; spreading nutrition and health knowledge, optimising nutrition and health services, improving nutrition and health system, establishing nutrition and health environment, and developing nutrition and health sectors shall be prioritized while bearing current condition with long term perspective in mind, paying attention to the nutrition and health condition during the whole lifecycle of people’s life and in the whole process of health; nutrition shall be integrated into all health policies to continuously meet the nutritional and health needs of people; the health level of entire population shall be improved to lay a solid foundation for building healthy China.

(2) Basic Principles

Insistence on the guidance of government. Attention to the overall planning, resources integration, and improvement of institution and systems shall be paid; the decisive role of the market in the allocation of nutrition resources and provision of services shall be maximized; a policy environment for the whole-society participation in the work of national nutrition and health shall be established.

Insistence on scientific development. Laws for the development of nutrition and health shall be explored and identified; the leading role of science and technology shall be maximized; research and development as well as application of appropriate technologies shall be strengthened; people’s nutrition and health literacy shall be improved, and the scientific level of nutrition work shall be raised.

Insistence on innovation and integration. The upgrade of agriculture with a focus on nutrition, food processing industry and catering industry shall be driven by reform and innovation; the supply of nutrition and health products shall be increased; the integration of nutrition, health and industry development shall be promoted.

Insistence on building together and sharing together. The important role of nutrition-related professional academic groups, industry associations and other social organisations, as well as enterprises and individuals in the implementation of the National Nutrition Plan shall be maximised; the positive interaction and participation among all parties in society in an orderly manner shall be promoted to ensure health and well-being for all.

(3) General Objectives

By the Year 2020, a standard regulatory system for nutrition will be basically finalised. Nutrition-related working mechanism will be basically sound and the framework of nutrition-related work at provincial, municipal and county level will be gradually improved. And the nutrition-related work at grassroots level will be strengthened. The food, nutrition and health industry will develop rapidly, and services for preserving health with diet will be increasingly enriched. The informatization level for nutrition and health will improve gradually. The malnutrition situation of key population groups will be improved significantly. A healthy lifestyle balancing diet and exercise will be further popularized. And the nutrition and health literacy of citizens will be greatly improved. The following objectives shall be achieved:
- The prevalence of anaemia in the population shall be reduced. The prevalence of anaemia in children under 5 years old shall be controlled below 12%; the prevalence of anaemia in pregnant women shall drop to less than 15%; the prevalence of anaemia in the elderly shall drop to less than 10%; the prevalence of anaemia in the poverty-stricken areas shall be controlled below 10%

- The prevalence of folic acid deficiency among pregnant women shall be kept under 5%. The rate of exclusive breast feeding for 0 - 5 months infants shall reach at least 50%; the prevalence of stunting in children under 5 years old shall be controlled below 7%.

- The prevalence of stunting among students at rural primary and middle schools shall be kept under 5%. Height difference of students in urban and rural areas shall be reduced; the rise in obesity rate among students shall be slowed down.

- The rate of nutrition screening of hospitalised patients and the proportion of nutrition therapy for hospitalised patients who suffer from malnutrition shall be increased.

- The awareness rate of nutrition and health knowledge of citizens shall be raised by 10% compared to the current level.

By the Year 2030, standard regulatory system for nutrition will be further improved; the nutrition-related working mechanism will be further improved; the food, nutrition and health industry will continue to develop sustainably; traditional services to preserve health with diet will be more abundant; "Internet plus Nutrition and Health" intelligent applications will be widely promoted; people’ nutrition and health literacy will be further improved; and the nutrition and health condition will be improved significantly. The following objectives shall be achieved:

- The prevalence of anaemia of key population groups shall be further reduced. The prevalence of anaemia in children under 5 years old and pregnant women shall be controlled below 10%.

- The prevalence of stunting in children under 5 years old shall be reduced to below 5%; the rate of exclusive breast feeding for 0 - 5 months infants shall increase by 10% compared to the rate in the Year 2020.

- Height difference between urban and rural students shall be further reduced; the rise in obesity rate among students shall be controlled effectively.

- The rate of nutrition screening of hospitalised patients and the proportion of nutrition therapy for hospitalised patients suffer from malnutrition shall be further increased.

- The awareness rate of nutrition and health knowledge of citizens shall be raised by 10% compared to the level in Year 2020.

- The national average daily salt intake shall reduce by 20%. The growth speed of overweight and obesity shall slow down significantly.

II Improve Implementation Strategies

(1) Improve Nutrition Standard and Regulatory Framework
Legislation and policy research on nutrition shall be promoted. Research work on nutrition-related legislation shall be conducted and nutrition-related regulatory framework shall be further improved. Relevant regulations and system for clinical nutrition management as well as nutrition monitoring and management shall be studied and established. Nutrition and health-related policies shall be formulated and improved. Nutrition and health steering committees at all levels shall be established. Technical consulting and guidance on nutrition and health regulations, policies, standards and others shall be strengthened.

The standard systems shall be improved. Basic research and measures to ensure the standards setting shall be strengthened and the capability of standard revision shall be improved. Nutrition and health standards shall be set based on food safety scientifically and in a timely manner. Industry standards such as the dietary reference intake of Chinese residents, dietary survey methods, malnutrition risk screening in population, dietary guidelines for diabetics, and work rules for nutrition survey in population shall be established and revised. General guideline for nutrition food for the elderly and standards on nutrition labelling for catering food shall be studies and established. The revision of important national food safety standards such as the *General Rules for the Labelling of Pre-packaged Foods*, the *Standard for the Use of Nutritional Fortification Substances in Foods*, and the national food safety standards for infants formula shall be speeded up.

**(2) Strengthen Capacity Building in Nutrition**

The capacity building in nutrition research and development shall be strengthened. Research on establishing reference intake of dietary nutrients based on the data of Chinese population shall be speeded up, the current status which relies on research results based on data on non-Chinese population shall be changed, and research on important nutrient requirements such as iron and iodine shall be prioritised. Techniques and methodologies for the monitoring and evaluation of food and nutritional status in the population shall be studied and improved. Techniques and strategies on the prevention and control of nutrition related diseases shall be studied and established. Economics study on nutrition and health as well as nutrition and social development shall be conducted. Development of national nutrition and health research institutes shall be improved. 3-5 regional nutrition innovation platforms and 20-30 specific key laboratories at ministerial and provincial level shall be established with the support of national and provincial professional nutrition institutes.

Personnel training in nutrition science shall be strengthened. The professional education and high-level personnel training for talents in nutrition science shall be strengthened. Nutrition training for clinical doctors in hospitals, maternity and children care institutes, and primary health care institutes as well as staffs in centralised catering service providers shall be promoted. Trainings for professionals such as dietitians and catering staff shall be provided. Schools, kindergartens, nursing houses and other facilities with required conditions shall be encouraged to be equipped with dietitians or to recruit dietitians. Social resources shall be fully utilised and nutrition education and training shall be conducted.

**(3) Strengthen Nutrition and Food Safety Monitoring and Assessment**
Monitoring of nutritional status in the population shall be conducted regularly. Monitoring the nutritional and health status as well as food consumption in population with national representativeness shall be conducted regularly. Information about food consumption of population groups, nutrients intakes, body measurements, laboratory tests and others shall be collected. The monitoring areas and population groups shall be expanded gradually when necessary in view of regional characteristics.

The monitoring on food composition shall be strengthened. The monitoring content in food composition shall be expanded; data of nutrition composition, functional composition, composition that is special disease related and harmful composition shall be monitored and collected regularly. The national food composition database shall be updated and improved continuously. A laboratory validation system shall be established and quality control shall be strengthened. Comprehensive assessments and evaluations shall be conducted. Historical investigation data shall be saved and all types of monitoring data shall be collected as well as consolidated systematically in a timely manner; database shall be established. Assessment on nutrition and health status in population and food nutrition value evaluation shall be conducted. Risk–benefit assessment on dietary nutrients intake, exposure of contaminants and other harmful substances shall be conducted to provide basis for the development of scientific dietary guidelines.

The monitoring of iodine nutrition and the prevention of iodine deficiency shall be strengthened. Monitoring urinary iodine in the population, water iodine, salt iodine and iodine survey in key food shall be conducted continuously and the covered areas and population groups shall be expanded gradually to establish a database on iodine nutrition status among Chinese residents. Scientific evaluation techniques and indicators of iodine nutrition status in the population shall be studied and established. Differentiated iodine intervention measures shall be established and targeted supplementation of iodine shall be implemented.

(4) Develop Food Nutrition and Health Industry

Production of high-quality nutritious edible agricultural products shall be promoted with great efforts. Guiding opinions on improving nutrition quality of edible agricultural products shall be drafted. The nutritional level of high-quality agricultural products shall be upgraded; the overall proportion of “Three-Products-One-Mark” (pollution-free agricultural products, green food products, organic agricultural products, and agricultural products with geographic identification mark) shall be increased to more than 80% in the same category agricultural products. Promotion systems for nutritious agricultural products shall be established; the upgrade of nutrition in high-quality edible agricultural products shall be promoted; safe and nutritious agricultural products produced in poor areas shall be promoted to be sold to other areas of China. A continuously dynamic national database on nutrition quality of agricultural products and a dynamic supporting system on the balance of food nutrition supply-demand for decision making shall be studied and developed.
The different needs in the development of food nutrition and health industries shall be regulated, guided and accommodated. The various and special agricultural product resources in our country shall be explored and utilised; in view of the demands for health among different population groups, efforts on development of new nutritious healthy foods such as health food, nutrients fortified food and food with both plant and animal origin protein shall be promoted. Guidance on the industry shall be enhanced; market order shall be regulated; consumption shall be guided according to science and coordinated development among production, consumption, nutrition and health shall be promoted.

Demonstration and promotion of healthy cooking mode and nutrition-balanced diet shall be conducted. The traditional cooking style shall be modified to meet the new nutrition requirements and healthy cooking style shall be developed. Research on nutrition-balanced food paring shall be conducted taking the nutrition requirements in population and characteristics of regional food resources into consideration. National food and nutrition education demonstration bases shall be established, demonstration healthy canteens and healthy restaurants shall be conducted, and healthy cooking style and nutrition-balanced diet shall be promoted.

The implementation of key projects such as nutritious staple food and food with both plant and animal origin protein shall be intensified. R&D on potato as staple food and guidance for its consumption shall be promoted; demonstration and guidance of nutritious staple food with focuses on traditional popular type of, regional special type of, leisure and functional type of products shall be conducted. Innovation on basic research and the processing techniques shall be intensified by using good-quality animal and plant origin protein as major nutrient ingredients and the promotion and transformation of key products of the project of plant and animal origin protein shall be carried out.

Nutrification of food processing shall be accelerated. The study on the dosage of oil, salt, sugar in processed food and their relevance to health shall be prioritised. Measures on limiting oil, salt and sugar in processed foods shall be introduced timely. Approaches on nutrification in food processing technology shall be introduced; technical systems to reduce loss of nutrients and to avoid generation of toxic and harmful substances shall be integrated. The impacts of different storage and transportation conditions on food nutrients shall be studied to limit the nutrition loss during food storage and transportation.

(5) Intensify the Development of Traditional Services for health preserving with food

Guidance on the traditional approach of health preserving with food shall be strengthened. The special advantages of Traditional Chinese Medicine shall be maximised; guidance on health preserving with food in line with current situation in our country shall be established; and habits for health preserving with food in line with dietary characteristics in different regions in our country shall be guided. The spread of traditional knowledge on health preserving with food shall be promoted through various channels; and effective integration with modern nutrition science and sports shall be promoted. Guidance on preserving health with food for elderly people, children, pregnant women and people with chronic diseases shall be provided to improve the quality of health preserving with food among residents. The health program by using Chinese Medicine for preventive treatment of disease shall be implemented;
a system for health preserving with food meeting the health needs of Chinese residents shall be further improved.

The monitoring and assessment on traditional healthcare food ingredients shall be conducted. The monitoring and assessment systems for traditional healthcare food ingredients shall be established; the monitoring and safety evaluation for functional composition and contaminants in food ingredients shall be conducted; and the list of substance that are both food and medicine in our country shall be further improved. Further research shall be conducted to select a batch of traditional food ingredients and medicine compatibility which have certain historical and empirical basis and further empirical studies on their healthcare effect shall be conducted. An information-sharing database for healthcare food ingredients and information shall be established.

Researches and development and industry upgrade for health preserving with food shall be promoted. Modern food processing industry shall be integrated with traditional health preserving food products and formulation to promote the standardization of products and formula, and to scale up the industry to develop a batch of health preserving food products with great social and economic values. A national resource monitoring network covering the main growing areas of health preserving food ingredients shall be established. Dynamic changes of resources shall be in control to provide timely information services for research and development, production, and consumption.

(6) **Strengthen Shared Utilization of Basic Data on Nutrition and Health**

The exchange and sharing of data on nutrition and health shall be promoted vigorously. Relying on the existing information platform, the construction of nutrition and health informatisation shall be strengthened and the information monitoring system of food composition and health condition in population shall be improved. The mechanism of information sharing and exchange shall be established to promote the interoperability and data sharing. A platform on basic data shall be established for cross-industry integration, cross-regional sharing, and cross-business applications through collaborative sharing of environment, agriculture, food and drug, medical, education, sports and other information data. A standard system of nutrition and health data and a service system of electronic certification shall be set up and the information security capabilities shall be improved effectively. "Internet plus Nutrition and Health" services shall be promoted and the pilot demonstration of the big data applications shall be promoted actively to drive the development of information technology industry that is oriented towards nutrition and health.

Data analysis and intelligent application shall be deepened comprehensively. A resources directory system of nutrition and health data shall be established; management specification of hierarchical authorisation, classification application and security review shall be established; opening and sharing of data resources shall be promoted and innovative application of data in multiple fields shall be strengthened. The comprehensive analysis and mining of multi-domain data shall be promoted; researches on the data analysis application scenario shall be conducted; models for correlation analysis, trend forecasting, scientific early warning, and supports to decision-making shall be established; integration of big data-driven service system shall be promoted; and business integration, cross-sectoral collaboration, social services and
scientific decision-making shall be supported to achieve government's precise management and efficient service.

Information services that are beneficial to residents shall be implemented vigorously. Wearable equipment and mobile terminal (APP) that brings nutrition, sports and health information together shall be developed; the integration and development of "Internet plus", big data cutting edge technology and nutrition as well as health shall be promoted; personalized, differentiated electronic products of nutrition and health, such as nutrition calculator, the mobile applications of dietary nutrition and exercise health guidance and others shall be developed; and accessible healthy information technology products and services shall be provided.

(7) **Popularise Nutrition and Health Knowledge**

The supply and dissemination capacity of information on nutrition and health science shall be improved. Combined with local food resources, eating habits and traditional dietary concept and focusing on the requirements from national nutrition and education of food safety knowledge, science publicity materials on nutrition and food safety, such as residents’ dietary guidelines that are suitable for different regions and different groups, shall be drafted to facilitate the implementation of popularisation of science. New communication forms for popular science shall be created, communication channels expanded, and free national knowledge sharing platforms on nutrition and food safety shall be established. Scientific information shall be communicated to the targeted population groups directionally and accurately by using a variety of forms and channels of communication. The establishment of teams for popularisation of knowledge of nutrition and food safety shall be improved. The positive role of media shall be maximised; pseudo-science shall be curbed resolutely; the various forms of rumours shall be combatted and disposed of according to laws and regulations; and false information on nutrition shall be identified and corrected timely to avoid any misleading of nutritional information.

The normalisation of education activities for popularisation of nutrition and health knowledge shall be promoted. The National Nutrition Week, the National Food Safety Publicity Week, the "May 20" National Student Nutrition Day, the "May 15 " National Iodine Deficiency Disorder Prevention and Control Day shall be leveraged to carry out education activities to vigorously spread scientific knowledge vigorously and such education activities shall be carried out on a regular basis. The inclusion of awareness rate for national nutrition and food safety knowledge as indicators in the evaluation of Healthy Cities and Healthy Villages as well as Healthy Towns shall be promoted. Demonstration workplaces for popularisation of nutrition and food safety knowledge, such as cottages for popularization of nutrition and food safety knowledge, shall be established. The effectiveness of science popularisation efforts shall be evaluated regularly to guide as well as to adjust the advocacy content and methodologies timely and to enhance the relevance and effectiveness of the publicity. Public opinion monitoring shall be conducted to respond to social concerns, to guide the public opinion reasonably, and to answer public doubts.

**III Carry out Major Actions**
（1）Action on Nutrition and Health in the First 1000 Days of Life

Nutrition assessment and dietary guidance for pre-pregnant and pregnant women shall be conducted. Nutrition guidance for pregnant women in maternal and child health institutions above the county level shall be promoted; and nutrition assessment and dietary guidance shall be included in the pre-pregnancy and pregnancy check-ups in our country. Maternal nutrition screening and intervention shall be conducted; and the rate of low-birth-weight and macrosomia shall be reduced. Consultation platforms for nutrition in the first 1000 days of life shall be established.

Intervention plans for maternal and child nutrition shall be implemented. The project on folic acid supplementation among women in rural areas to prevent neural tube defects shall be implemented continuously; and strengthen supplementation of folic acid, iron, and other micronutrients in progestational and pregnant women to reduce the prevalence of anaemia among pregnant women and to prevent nutritional deficiencies among children. The intervention project on intervening nutrition of pregnant women by using nutritional supplementation packages (Ying Yang Bao in Chinese) while taking balanced diet into consideration shall be promoted.

Breastfeeding rate shall be improved; and scientific feeding habits shall be fostered. The protection systems for breastfeeding shall be further improved, breastfeeding environment shall be improved, and nursing rooms in public places, government bodies, enterprises and public institutions shall be established. Scientific infant and young child feeding strategies shall be studied and developed, and appropriate complementary feeding shall be promoted and guided. Monitor and early warning of infant and young child diarrheal and malnutrition shall be strengthened; and prevention and control strategies and plans on foodborne diseases among infant and young child (diarrheal and others) shall be studied, developed and implemented.

The quality and safety level of infant and young child food shall be improved, and healthy development of the industry shall be promoted. Monitoring of nutrition composition and major contaminants in infant and young child formula food as well as complementary food shall be strengthened, and standards of infant and young child formula food and complementary food shall be revised and improved timely. Research and development capacities shall be improved; and the quality of infant and young child formula food and complementary food shall be improved continuously.

（2）Action to Improve Student Nutrition

Students shall be guided to have nutritious meals. Guidelines for recipes meeting the different nutrition requirements of school students at different ages in different regions based on local conditions shall be encouraged to guide students to have nutritious meals. Guidelines on operation practice on nutrition in organisations providing collective catering services shall be developed and implemented.

Overweight and obesity among students shall be intervened. "Physical Activities + Nutrition" weight management and intervention strategies for students shall be carried out, and education on balanced diet and nutrition shall be carried out among students, and students’
physical activities shall be promoted. The management of foods sold inside and around campus shall be strengthened. Monitoring and assessment of overweight and obesity among students shall be strengthened, and the influencing factors such as family, school and society shall be analysed to put forward targeted comprehensive intervention measures.

Education on nutrition and health among students shall be conducted. Education on nutrition and health in primary and middle schools shall be promoted. Various forms of activities for nutrition and health education shall be carried out during or after classes, taking the characteristics of students of different ages into consideration.

(3) Action to Improve Nutrition for the Elderly

Monitoring and assessment of the nutritional status of the elderly shall be conducted. Relying on the national geriatric research institutes and primary health care institutes, the nutritional screening and assessment system for the elderly in China shall be established and improved; guidelines on assessment of nutrition and health status shall be developed; and appropriate nutritional screening tools shall be prepared. Pilot works on monitoring, screening and evaluation of the nutritional status of the elderly in designated place shall be set up and regional demonstration shall be established to gradually cover more than 80% of the elderly all over the country, and basic nutrition and health status of the elderly in China shall be understood.

Nutritional improvement measures shall be developed to meet different needs of the elderly, and "healthy aging" shall be encouraged. Dietary guidance and consultation for the elderly relying on primary health care institutes shall be provided. Guidelines on offering nutritional diet for the elderly shall be promulgated to instruct hospitals, community canteens, health care institutes and nursing houses to provide healthy meals. Food products meeting the nutritional needs of the elderly shall be developed. Special nutritional intervention in the oldest old with low weight shall be conducted, and the overall health level of the elderly shall be improved gradually.

A management and care system for nutrition and health of the elderly shall be established. The nutritional status of the elderly shall be included in the residents’ health records gradually to achieve seamlessly integration and effective management. Nutrition-related work shall be included in the family health care services based on the existing work. Multi-sectoral collaboration mechanism shall be promoted to achieve the effective convergence between nutrition-related work and healthcare services.

(4) Action on Clinical Nutrition

A clinical nutrition working system shall be established and improved. Clinical nutrition-related work shall be further carried out generally through pilot demonstration; the construction of clinical nutrition departments shall be strengthened to improve the ratio of clinical dietitian per beds to 1: 150 through pilot demonstration; and the approach of multidisciplinary diagnosis and treatment shall be introduced, nutrition supporting teams shall be established to carry out the nutrition treatment and to expand the scope of the pilot step by step.
Nutritional screening, evaluation, diagnosis and treatment of inpatients shall be carried out. Nutritional screening of inpatients shall be rolled out gradually to understand the nutritional status of patients. A standardised clinical nutrition treatment pathway based on nutritional screening - evaluation - diagnosis – treatment shall be established, and nutritional treatment for malnourished hospitalised patients shall be taken following the principles of step-by-step nutritional treatment, and their effects shall be evaluated on a regular basis.

Nutritional control and prevention of nutrition-related chronic diseases shall be promoted. Guidelines on clinical nutritional intervention for chronic diseases, such as hypertension, diabetes, stroke, and cancer, shall be developed. Nutritional evaluation among hospitalised patients suffering from nutrition-related chronic diseases shall be conducted and classified guidance and treatment shall be offered. A long-term nutrition management model for nutrition-related chronic diseases from hospitals, communities to families shall be established, and nutritional classified treatment shall be carried out.

Standardised applications of food for special medical purpose and therapeutic diets shall be promoted. The standards of food for special medical purpose shall be further studied and improved and the product categorisation shall be further refined; and the research and development as well as the production of food for special medical purpose shall be promoted. Unified dietary nutrition standards for clinical treatment shall be established, and the formula of therapeutic diets shall be improved gradually. Training on relevant knowledge for medical personnel shall be strengthened.

(5) Nutrition Intervention in Poor Areas

Nutrition intervention shall be part of the effort to provide better healthcare, and nutrition and dietary instructions shall be offered in accordance with local conditions. Pilot projects to monitor the nutritional and health status in population, food consumption patterns, and the main nutrients and contaminants in food shall be conducted. Dietary and nutrition guidance program according to local conditions shall be developed, regional targeted and classified guidance and public education shall be carried out. According to the nutritional status of residents and the need to reduce the risk of intakes of specific contaminants, the feasibility on the adjustment of agricultural cultivation and breeding as well as the structure of diets among residents shall be studies to provide solutions and specific measures, and pilots shall be carried out in areas with suitable conditions.

Nutritional intervention in key population groups in poor areas shall be implemented. The nutrition improvement programs for students in compulsory education in rural areas and the nutrition improvement projects for the children in poor areas shall be carried out continuously to gradually cover prioritised areas in the national poverty alleviation and development plan and the contiguous destitute areas and counties. Schools in poor areas shall be encouraged to carry out proper catering according to local resources and local conditions to improve students’ diet conditions in school. Monitoring and assessment of students’ nutritional and health status as well as food safety risks in poor areas shall be conducted continuously. Nutrition and health policies and standards targeting the nutritional needs of the population groups in poor areas shall be developed and improved. The effects of nutritional intervention products shall be monitored and evaluated on a regular basis.
Monitoring and prevention of foodborne diseases in poor areas shall be strengthened, and nutritional deficiencies caused by foodborne diseases shall be reduced. The construction of monitoring network and reporting system on foodborne diseases in poor areas shall be strengthened, and the main types, trend and impacts of foodborne diseases on the health and nutritional conditions among local residents in poor areas shall be explored, with priority in the monitoring and traceability surveys of diarrheal, mastering the source of food contamination and the pathway of spreading. Prevention and control strategies shall be developed according to critical points in the outbreak of foodborne diseases. Public education on integration of nutrition and health shall be carried out.

(6) Action on Balancing Diets and Physical Activity

A healthy lifestyle shall be promoted. Actions on promoting healthy lifestyles among residents shall be promoted actively, and special programs prioritising "Three Reduction and Three Health" (reducing intake of salt, reducing intake of oil, reducing intake of sugar, oral health, healthy weight, and healthy bones) shall be conducted widely. The Dietary Guidelines for Chinese Residents shall be promoted and used as the guidance for daily diet to control salt intake, and to gradually quantify the use of salt and oil while reducing the intake of stealth salt. Basic principles of a balanced diet shall be promoted; a diet model that is of diversified food and grain-based shall be insisted, national healthy diet habits shall be established and strengthened. The concept of scientific physical activity shall be promoted, habits of sports and fitness shall be fostered, personal weight management shall be enhanced, and intervention in the diet and physical activity of those overweight and obese adult shall be taken. The dietary guidelines for residents and guidelines on physical activity for adults shall be revised and published regularly.

The nutritional supporting capacity and effectiveness in sports population shall be improved. Information and service platforms on nutrition for physically active individuals shall be established, and database on prescription of sports nutrition shall be constructed, and specific nutritional guidance for physically active individuals shall be promoted, and the risk of sports injury shall be reduced. National standards and industry standards on sport food and nutrition shall be revised timely, the research and development capabilities and technologies for sports nutrition food shall be improved, so that industry development will be promoted.

Integration and development of physical activity and medical system shall be promoted. The nutritional status and exercise behaviour of population groups suffering from nutrition-related chronic diseases such as diabetes, obesity and bone diseases shall be investigated to construct a health management model for nutrition and exercises that focuses on prevention and integrates prevention and treatment. The establishment of pathways through physical activity intervention in nutrition-related chronic diseases shall be studied. A model of integration of physical activity and medical system shall be constructed to maximise the positive role of physical activity intervention in the prevention, rehabilitation and other aspects of nutrition-related chronic diseases.

VI Strengthen Organization and Implementation
(1) Organization and leadership shall be strengthened. Local governments at all levels shall include implementation of the national nutrition plan into government performance evaluation to ensure effective results while taking local realities into consideration, strengthening organisation and supports, planning and coordinating, and specifying concrete working measures. The health and family planning departments at all levels shall work with relevant departments to clarify roles and responsibilities, to strengthen the supervision and evaluation, and to implement various work tasks.

(2) Funds shall be guaranteed. Investment into national nutrition plan shall be enhanced, support from different funding channels shall be maximised, civil society and diversified investment shall be encouraged for wide participation, and supervision of funds shall be strengthened.

(3) Advocacy shall be launched to mobilize the general public. Professional organisations, industry and academic societies, industry associations as well as media shall be organised to hold themed campaigns in different forms and channels to raise general awareness of national nutrition plan in the whole society; supports from all parties shall be gathered to promote public participation.

(4) International cooperation shall be strengthened. Exchange with international organisations and nutrition institutions from relevant countries shall be enhanced, and international influence of China in the field of nutrition and health shall be improved through project cooperation, education and training, academic workshops etc.