CORE CONCEPT

Public Health Nutrition Programmes Course: Obesity Prevention, Reformulation and Fortification

30 November – 4 December 2026
Barcelona - Eixample district four-star

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Ref: 2095_30464 **Date:** 30 November – 4 December 2026 **Location:** Barcelona - Eixample district four-star **Fees:** 23500 SAR

Introduction:

Public health nutrition programmes, covering obesity prevention, reformulation and fortification, is a 1-week course for ministry of health nutrition departments, food authorities and NCD prevention units, ending with a Nutrition Programme Action Plan for a case health authority. Obesity, hypertension and micronutrient deficiencies persist when salt and sugar targets go unmonitored, trans fat stays in the food supply, fortified flour misses its standard and policies go unevaluated. Nominees already manage or advise on population nutrition work, and learn through case studies on survey data, product composition records and fortification reports. CoreConcept Training Center delivers this public health nutrition programmes course.

Course Objectives:

- Assess the double burden of malnutrition and the diet-related NCD burden of a population and set programme priorities from that evidence
- Design nutrition surveillance that combines dietary intake surveys, urinary sodium surveys and anthropometric data with indicators for programme tracking
- Set sodium and sugar reformulation targets by food category and select trans-fat elimination policy options with industry monitoring
- Compare sugar-sweetened beverage taxes and front-of-pack labelling formats as policy levers and manage industry interference risk
- Plan wheat flour fortification and salt iodisation programmes with quality assurance and coverage monitoring
- Build an evaluation logic model and a Nutrition Programme Action Plan with process and impact indicators

Target Audience:

- Ministry of health nutrition departments responsible for population dietary policy, surveillance and programme planning
- Food authority standards units responsible for composition targets, fortification standards and market monitoring
- Non-communicable disease prevention units responsible for obesity, hypertension and diabetes prevention strategies
- Public health surveillance and observatory teams responsible for dietary surveys and nutrition indicators
- Health economics and fiscal policy units responsible for appraising health taxes and programme costs
- Public health institutes and development partners responsible for advising governments on nutrition programmes

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Course Outline:

Day 1: Public Health Nutrition Landscape and Population Diet Burden

- Double Burden of Malnutrition Profile for a Case Population
- Diet-Related NCD Burden Estimates From Mortality and Risk Data
- Healthy Food Environment Versus Obesogenic Environment Mapping
- Nutrition Stakeholder Map Across Health, Agriculture, Finance and Industry
- Current Nutrition Policy Inventory and Gap Baseline

Day 2: Nutrition Surveillance Systems and Intervention Frameworks

- Dietary Intake Survey Methods From 24-Hour Recall to Food Frequency
- Urinary Sodium Survey Design for Population Salt Intake Estimates
- Anthropometric Surveillance of Overweight, Obesity and Stunting Prevalence
- WHO Best Buys Matrix for Unhealthy Diet Interventions
- Sodium Country Score Card and Programme Indicator Selection

Day 3: Salt, Sugar and Trans-Fat Reduction Through Product Reformulation

- Food Category Sodium Target Levels and Reformulation Timelines
- Sugar Reduction Targets for Beverages, Dairy and Bakery Categories
- REPLACE Action Package Steps for Industrial Trans-Fat Elimination
- Partially Hydrogenated Oil Ban Versus Trans-Fat Limit Policy Options
- Industry Reformulation Monitoring Using Product Composition Databases

Day 4: Fiscal Levers, Front-of-Pack Labelling and Fortification Programme Risks

- Sugar-Sweetened Beverage Tax Design and Revenue Earmarking Options
- Front-of-Pack Scheme Selection Among Warning, Graded and Endorsement Formats
- Wheat Flour Fortification Standards for Iron, Folic Acid and Zinc
- Salt Iodisation Quality Assurance From Producer to Household Testing
- Industry Interference, Conflict of Interest and Policy Erosion Risks

Day 5: Case Study on a Nutrition Programme Action Plan for a Case Health Authority

- Case Health Authority Diet Burden and Surveillance Data Review
- Case Intervention Prioritisation Using Best Buys and Feasibility Scores
- Case Reformulation, Fiscal and Fortification Package Design
- Programme Evaluation Logic Model With Process and Impact Indicators
- Nutrition Programme Action Plan Completion and Panel Defence

Skills You Will Gain:

- Nutrition Burden Profiling
- Dietary Survey Design
- Reformulation Target Setting
- Trans-Fat Policy Analysis
- Health Tax Appraisal
- Front-of-Pack Scheme Selection
- Fortification Quality Monitoring
- Nutrition Programme Evaluation

Why Attend This Course:

- Present a Nutrition Programme Action Plan for a case health authority to the nutrition department head and the NCD prevention director for endorsement
- Decide which mix of reformulation targets, fiscal measures, labelling schemes and fortification to fund first, based on burden and feasibility evidence
- Avoid voluntary targets that industry ignores, fortified flour that falls below standard and policies that cannot be evaluated
- Share survey protocols, target-setting worksheets, fortification monitoring checklists and the evaluation logic model with programme colleagues

Conclusion:

Back at work, the participant gives the nutrition department head and the NCD prevention director a Nutrition Programme Action Plan that ranks reformulation, fiscal, labelling and fortification measures against the population burden. Policy units use it to brief decision makers on targets and health tax options, the food authority uses its monitoring section to schedule product sampling and fortification audits, and surveillance teams align survey rounds with its indicators. After the first monitoring cycle, the unit should compare product composition, intake and fortification compliance results with the baseline and revise targets and timelines.

Frequently Asked Questions FAQ:

What should participants know before a public health nutrition programmes course?

Participants should already plan, manage or advise on population nutrition, food standards or NCD prevention work. No dietetics qualification is needed. Bringing anonymised survey results, product composition data or a fortification monitoring report helps them apply the case study to their own setting.

How does a public health nutrition programmes course differ from a clinical nutrition or food labelling compliance course?

It works at population and policy level: surveillance, reformulation targets, health taxes, front-of-pack schemes and fortification. Clinical nutrition courses plan diets for individual patients, and labelling compliance courses check one company's packs against rules, so neither is covered here.

Why do public health nutrition programmes favour reformulation and fortification over individual dietary advice?

Reformulation and fortification change the food supply itself, so the whole population benefits without each person changing habits. Individual advice still matters, but structural measures reach low-income groups and children more reliably and can be tracked through product and survey data.

What do participants take back from public health nutrition programmes training?

Participants take back a Nutrition Programme Action Plan for a case health authority, with a burden profile, surveillance indicator set, reformulation target worksheet, fortification monitoring checklist and evaluation logic model they can adapt to their own organisation.