**QUESTIONNAIRE**

**Contact Details**

Please provide your contact details in case we need to contact you in connection with this questionnaire. Note that this is optional.

|  |  |
| --- | --- |
| Type of Stakeholder (please select one) | Member State  Observer State  Other (please specify) |
| Name of State  Name of Survey Respondent |  |
| Email |  |
| Can we attribute responses to this questionnaire to your State publicly\*?  \*On OHCHR website, under the section of SR health | Yes No  Comments (if any): |

# Background

Within the framework of Human Rights Council resolution 51/21, the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, has identified analyzing the progress and challenges to attaining the Sustainable Development Goals (SDGs) as one of the strategic priorities during her tenure, along with analysing the role of the underlying determinants of health, such as climate change and environment, water and sanitation, education and gender equality (See: [A/HRC/47/28 para. 108](https://www.ohchr.org/en/documents/thematic-reports/ahrc4728-strategic-priorities-work-report-special-rapporteur-right)). In compliance with her mandate and in line with these priorities, she has decided to devote her next thematic report to the General Assembly, to be held in October 2023, to the issue of “Food, nutrition and the right to health”.

# Objectives of the report

In the report, the Special Rapporteur will turn her attention to the underlying determinants of health, with a focus on how food and nutrition positively or negatively impact the right to health. In particular, she will rely on the frameworks of the social and commercial determinants of health to address how colonialism, racism, and other power asymmetries continue to build and maintain inequitable food systems and environments, influencing activities across the production, aggregation, processing, distribution, consumption, and disposal of food products,[[1]](#footnote-1) and ultimately shaping the context in which consumers acquire, prepare, and consume food.[[2]](#footnote-2) The Special Rapporteur’s analysis will consider the double impact of malnutrition,[[3]](#footnote-3) which refers to the co-existence of undernutrition with diet-related non-communicable diseases (NCDs) such as diabetes, cardiovascular diseases, and cancer. In this sense, she will emphasize that rights-based approaches to food and nutrition must reconcile and address both concerns, often misconstrued as competing. The Special Rapporteur will also report on new and emerging trends related to the impact of climate change, conflict, and COVID-19 on food and nutrition, as well as related responses.

Importantly, the Special Rapporteur will adopt an intersectional approach and consider the multiple forms of discrimination affecting persons in the context of food and nutrition. She will analyse the links between inequities in accessing adequate food and sex, gender, poverty, class, and the rural and urban divide, as well as related systems of oppression.

The Special Rapporteur intends to analyse the obligations and responsibilities of actors, such as States and corporations respectively, in relation to food and nutrition under the framework of the right to health. The Special Rapporteur would therefore like to identify specific challenges and opportunities related to food and nutrition in countries and within communities around the world. She would also like to identify good practices that affirm the right to health in this context, as well as seek examples of how to combat discrimination in accessing adequate food.

*Glossary of definitions for the purpose of this questionnaire:*

* **Double burden of malnutrition**:refers to “the coexistence of undernutrition along with overweight, obesity or diet-related NCDs, within individuals, households and populations, and across the life-course.”[[4]](#footnote-4)
* **Food environments**: refer to “the physical, economic, political and socio-cultural context in which consumers engage with the food system to make their decisions about acquiring, preparing and consuming food.”[[5]](#footnote-5)
* **Food systems**: refer to “the entire range of actors and their interlinked value-adding activities involved in the production, aggregation, processing, distribution, consumption and disposal of food products. Food systems comprise all food products that originate from crop and livestock production, forestry, fisheries and aquaculture, as well as the broader economic, societal and natural environments in which these diverse production systems are embedded.”[[6]](#footnote-6)

# Questionnaire

The questionnaire can be downloaded below in English (original language), French and Spanish (unofficial translations). Responses can address some of the questions or all of them, as feasible or preferred.

* Download the questionnaire (WORD): English | Français | Español

# How and where to submit inputs

Inputs may be sent by e-mail by 24 March 2023.

|  |  |
| --- | --- |
| **E-mail address** | ohchr-[srhealth@un.org](mailto:srhealth@un.org) |
| **E-mail subject line** | Contribution to GA report - SR right to health |
| **Word limit** | 750 words per question |
| **File formats** | Word, PDF (Please note that only word docs will be posted online) |
| **Accepted languages** | English, French, Spanish |

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# Treatment of inputs/comments received

# Please note that all responses will be published on the official webpage of the Special Rapporteur.

# Key Questions

*You can choose to answer all or some of the questions below. (750 words limit per question).*

1. What are the major factors that challenge quantitatively and qualitatively adequate access to food and nutrition in your country and/or community (including external to your country)? Taking into consideration the underlying determinants of health, in what ways do they contribute to health inequities?
2. What legislative or regulatory measures (such as those related to nutrition standards, labelling, marketing, procurement in institutional settings including – but not limited to – schools and prisons, and fiscal measures) have been considered or adopted in your country and/or community to improve food and nutrition, especially for persons in vulnerable situations? Where relevant, how are those measures being enforced?
3. In your context, have any legislative or regulatory measures attempted to simultaneously address undernutrition, on the one hand, and diet-related non-communicable diseases such as diabetes, cardiovascular diseases, and cancer, on the other hand? In doing so, have they been successful? Please provide concrete examples.
4. Beyond diet-related non-communicable diseases, food and nutrition are also relevant in relation to infectious diseases and other illnesses. For example, contaminated food can lead to foodborne illnesses, poor nutrition can make persons more susceptible to infectious diseases, and individuals living with infectious diseases and other chronic illnesses may have unique dietary requirements for health. Please describe any challenges and progress made in this regard in your country and/or within your community.

1. Multi-stakeholder approaches to food and nutrition are often affected by power asymmetries that exclude persons and communities in situations of vulnerability.
   1. Please provide concrete examples of the barriers and opportunities for these persons or communities, such as Indigenous peoples, women, children, and migrants, to participate in national and/or international policymaking processes pertaining to food and nutrition, including the process of participation.
   2. What proactive steps or good practices can you report on taken by the State to engage in activities to strengthen people's access to and utilization of resources for food security in this regard?
2. What is the impact of gentrification, development, technology, industry activity and deforestation on food security? Please share some concrete examples.
3. Please provide examples related to the impact of food production, on the right to health of the population living or the people working in or near the areas of production/cultivation?

1. FAO, IFAD, UNICEF, WFP and WHO. 2020. The State of Food Security and Nutrition in the World 2020. Transforming food systems for affordable healthy diets. Rome, FAO, available at: <https://doi.org/10.4060/ca9692en> [↑](#footnote-ref-1)
2. HLPE, Nutrition and food systems. A report by the High-Level Panel of Experts on Food Security and Nutrition of the Committee on World Food Security, 2017, Rome, available at: <https://www.fao.org/3/i7846e/i7846e.pdf> [↑](#footnote-ref-2)
3. World Health Organization, The double burden of malnutrition: Policy brief, 2017, available at: [WHO/NMH/NHD/17.3](https://www.who.int/publications/i/item/WHO-NMH-NHD-17.3) [↑](#footnote-ref-3)
4. *Ibid*. [↑](#footnote-ref-4)
5. HLPE, Nutrition and food systems. A report by the High-Level Panel of Experts on Food Security and Nutrition of the Committee on World Food Security, 2017 Rome, available at: <https://www.fao.org/3/i7846e/i7846e.pdf> [↑](#footnote-ref-5)
6. FAO, IFAD, UNICEF, WFP and WHO, The State of Food Security and Nutrition in the World 2020. Transforming food systems for affordable healthy diets Rome, 2020, available at: <https://doi.org/10.4060/ca9692en> [↑](#footnote-ref-6)