

# 5 recommendations to reduce salt intake to live longer and healthier lives



PUBLISHED MAR 14, 2022  
BY [WORLD HEALTH ORGANIZATION](#)

During Salt Awareness Week, WHO is highlighting 5 simple recommendations that can help lower salt intake and blood pressure, significantly reducing the risk of stroke and heart disease. High salt intake is one of the leading causes of death in the WHO European Region.

Often, we can consume large amounts of salt without even knowing it – while eating processed food or choosing meals through delivery apps.

WHO emphasizes the importance of reducing salt intake and highlights practical actions that Member State authorities can take to implement policies to reduce population level salt intake and promote health and well-being.

For adults, WHO recommends consuming no more than 5 g of salt every day. For children the recommendation is even less: 2 g of salt a day. However, current daily salt consumption in the Region ranges between 8 g and 19 g – well above this recommendation.

It is estimated that reducing salt intake even by 15% would prevent 8.5 million premature deaths in 10 years in low- and middle-income economies and could deliver cost savings in high-income countries.

Member States have agreed to a 30% reduction in salt intake by 2025 as a priority intervention to reduce noncommunicable diseases (NCDs).

In some countries of the Region, up to 75–80% of salt consumed by people every day comes from processed foods. Many people are not aware of these amounts.

WHO recommends Member States to implement an important policy tool – clear and consistent front-of-pack nutrition labelling. This will help consumers to understand what is in the foods that they are buying as well as drive the reformulation of products by the food industry.

Given the high proportion of processed foods in current diets, many countries in the Region have chosen to focus efforts on improving the composition of processed foods.

Reformulation has been identified as a cost-effective policy, and – for the most part – a politically feasible one. Studies have demonstrated that diets containing more products meeting nutritional targets are associated with an overall reduction in the risk of disease.

Reformulation may be accompanied by efforts to change individual purchase habits and consumption behaviour, gradually and over time, and without announcement to consumers.

WHO has developed global sodium benchmarks for sodium levels in different food categories as an important step to facilitate the reformulation of food products which contribute to salt intake, and drive progress towards meeting global goals to reduce population salt intake.

Foods available through meal delivery apps (MDAs), which became increasingly popular in the wake of the COVID-19 pandemic, are also associated with high levels of salt, as well as calories, sugar and saturated fat.

As more and more of our decisions surrounding food and beverages are made in the digital arena, it is important for public health authorities to understand the potential impacts of MDAs on NCDs and other public health concerns.

Salt intake patterns – as well as nutrition habits in general – differ between social groups, and this may lead to health inequities.

Research shows that, among socioeconomically disadvantaged groups, knowledge of government guidance and health literacy is often lower while voluntary table salt use and total salt intake may be up to 5–10% higher.

Data from salt surveys indicate that salt intake among the general population ranges from 8.7 g in the Netherlands to 19.0 g in Kazakhstan.

The WHO European Programme of Work 2020–2025 (EPW) calls for action to reduce health inequities and advocates united action for better health. WHO guidelines and country support packages can assist Member States to find the right approach in this context.

“It is crucial for all countries to build a solid foundation for health literacy. People deserve to know how dietary intake and salt consumption affect their well-being and their future,” said Dr Kremlin Wickramasinghe, Acting Head of the WHO European Office for the Prevention and Control of Noncommunicable Diseases.

“An enabling environment for salt reduction can be created through local policy interventions and the promotion of healthy food settings in schools, workplaces, health facilities, communities and cities. A healthier choice should be an easier choice for consumers in the WHO European Region and beyond.”

*Press release distributed by Wire Association on behalf of World Health Organization, on Mar 14, 2022. For more information subscribe and [follow](#) us.*

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