World Nutrition, June 2026;17(2): 4-5
DOI: https://doi.org/10.26596/wn.20261724-5

WORLD NUTRITION
The Official Journal of the World Public Health Nutrition Association
Journal homepage: https://www.worldnutritionjournal.org
ISSN: 2041-9775

Editorial

SHAKE the salt habit, 2026

Ted Greiner[1,*], **Swati Jain**[2,*]

[1] Editor, World Nutrition, World Public Health Nutrition Association; [2] Department of Health Research, Delhi, India

OPEN ACCESS

***Corresponding Author**
Greiner T.
editorinchief@worldnutritionjournal.org
ORCID: 0000-0001-8711-768X

Article History
Received: May 21, 2026
Revised: June 06, 2026
Accepted: June 07, 2026
Published: June 30, 2026

Citation
Greiner T., & Jain S. (2026). SHAKE the salt habit, 2026. *World Nutrition*, 17(2), June, 4–5. https://doi.org/10.26596/wn.20261724-5

Academic Editor
Ted Greiner, PhD

Copyright © 2026 Greiner & Jain. Published by WPHNA. This is an open-access article distributed under the Creative Commons Attribution License (CC BY 4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Highlights/Key Messages

- High salt consumption remains a major global public health threat.
- Salt Awareness Week, 2026 was marked by the release of the second edition of its "SHAKE the salt habit" package.
- SHAKE the Salt Habit" technical package emphasizes government led mandatory policy frameworks such as food reformulation targets, front-of pack labelling, marketing restrictions for children, and taxes on unhealthy foods.
- This WHO package includes guidance on countering common industry arguments

Various dietary guidelines around the world recommend that adults limit their sodium intake to less than 2300 mg per day (about 1 teaspoon of table salt). India, the United States, and the European Union share a near-identical consensus on this. However, there is a need to develop comprehensive programs with policies and interventions to transform food environments, making it achievable to reduce salt intake (ICMR-NIN, USDA; European Commission).

By 2019, some 96 national salt reduction programs had been implemented (Santos et al., 2021). These and later programs have focused on educational campaigns, food reformulation, nutrition labelling and interventions in institutional settings. Santos et al. identified only five countries that had implemented taxation approaches. None of these 96 countries had achieved the WHO target of a 30% reduction in salt consumption.

In the UK's soft approach, voluntary reformation by the food industry was the main driver, leading to a 15% reduction in salt consumption (Tan et al., 2021). Finland, with its highly educated and health-aware population, reduced its sodium intake by 1200 mg/day following mass-media education campaigns, voluntary industry efforts, and warning labels on high-sodium packaged foods (Cobb et al., 2012).

Since then, mandatory approaches have gained more attention, including mandatory maximum limits for key food categories (South Africa, Iran, Jordan, Argentina; with Bangladesh, Singapore, Malaysia, Cameroon, and Nigeria making commitments in the 2024 World Health Assembly), mandatory front-of-pack labelling (Chile, Mexico, Brazil, Colombia, Argentina; with the US FDA proposing a new rule in January 2025), and procurement and sales restrictions for public institutions and schools (Egypt, Iran, Argentina, Colombia, Mexico, and Brazil) (CSPI 2025; Resolve to Save Lives 2024).

In 2021, WHO released the "*Global benchmarks for sodium levels for distinct food subcategories*", recommending that member states reduce salt intake by 30% by 2025, a target of 5g/person/day (WHO, 2021). Despite this and other concerted efforts, high salt consumption remains a major global public health threat. Salt Awareness Week, 2026 was marked by the release of the second edition of its ***"SHAKE the salt habit"*** *package (*WHO, 2026). This updated framework reorganized the original 10 broad food categories into 70 distinct food subcategories, taking into account regional diets and a wider range of processed and packaged foods.

Rather than mere voluntary campaign-led actions and the promotion of potassium-containing, lower-sodium salts to replace regular table salt, this edition of the "*SHAKE the Salt Habit*" technical package emphasizes government-led mandatory policy frameworks such as food reformulation targets, front-of-pack labelling, marketing restrictions for children, and taxes on unhealthy foods. The package focuses on changing the food environment rather than just relying on individual willpower. The acronym SHAKE stands for Surveillance, Harness industry, Adopt standards, Knowledge, and Environment, serving as a global framework for governments to use proven interventions.

Keywords: salt, SHAKE, 5 grams, food enviornment , salt reduction programs, maximum recommended salt intake

Particularly remarkable, this 2nd edition explicitly calls for safeguards against food industry interference, flatly stating that corporate entities should not be responsible for setting public health policies. It provides step-by-step guidance on data collection, enforcement strategies, and countering common industry arguments.

Author Contributions

TG and SJ were equally responsible for conceptualization and writing. Both authors approved the final version and consent to its publication.

Declaration of Generative AI and AI-Assisted Technologies in Scientific Writing

Gemini was used to search for relevant information and references. All drafting was done by the authors, who take responsibility for the entire content.

Acknowledgements

None

Data Availability Statement

All relevant data are available within the manuscript

Funding

None

Conflict of Interest

Ted Greiner is the editor of the journal, and Swati Jain is an Editorial Assistant. The authors declare no other potential conflicts of interest.

References

Cobb, L. K., Appel, L. J., & Anderson, C. A. M. (2012). Strategies to reduce dietary sodium intake. *Current Treatment Options in Cardiovascular Medicine*, 14(4), 425–434. https://doi.org/10.1007/s11936-012-0182-9

CSPI (Center for Science in the Public Interest) (2025). Front-of-package nutrition labeling. https://www.cspi.org/page/front-package-nutrition-labeling

Resolve to Save Lives. (2024). Five Countries Commit to Comprehensive Sodium Reduction. (Press Release). https://resolvetosavelives.org/about/press/five-countries-commit-to-implementing-comprehensive-sodium-reduction-policies

Santos, J. A., Tekle, D., Rosewarne, E., Flexner, N., Cobb, L., Al-Jawaldeh, A., Kim, W. J., Breda, J., Whiting, S., Campbell, N., Neal, B., Webster, J., & Trieu, K. (2021). A Systematic Review of Salt Reduction Initiatives Around the World: A Midterm Evaluation of Progress Towards the 2025 Global Non-Communicable Diseases Salt Reduction Target. *Advances in Nutrition*, 12(5), 1768–1780. https://doi.org/10.1093/advances/nmab008

Tan, K. W., Quaye, S. E. D., Koo, J. R., Lim, J. T., Cook, A. R., & Dickens, B. L. (2021). Assessing the Impact of Salt Reduction Initiatives on the Chronic Disease Burden of Singapore. *Nutrients*, 13(4), 1171. https://doi.org/10.3390/nu13041171

WHO (2026) SHAKE the salt habit, second edition. Geneva: World Health Organization. https://www.who.int/publications/i/item/SHAKE-the-salt-habit-2nd-ed

ICMR-NIN (2024). Dietary Guidelines for Indians.

USDA. Dietary Guidelines for Americans, 2025–2030. https://knowledge4policy.ec.europa.eu/health-promotion-knowledge-gateway/defining-dietary-salt-sodium-table-3a_en

WHO (2021). WHO global sodium benchmarks for different food categories. Geneva: World Health Organization.

Publisher's Note: *All claims expressed in this article are solely those of the authors and do not necessarily represent those of their affiliated organizations, or those of the publisher, the editors and the reviewers. Any product that may be evaluated in this article, or claim that may be made by its manufacturer, is not guaranteed or endorsed by the publisher. The publisher remains neutral with regard to jurisdictional claims.*