The transfer of research evidence into practice has been historically slow, and requires an integration of many elements, including quality evidence, supportive physical and intellectual environments, and facilitation, as discussed at the NNEdPro Sixth International Summit on Nutrition and Health. Examples of applying clinical research into practice focused on the use of group consultations (also known as group clinics or shared medical appointments) to support behaviour change, the role of dietary micronutrients during the COVID-19 pandemic and the potential of Precision Nutrition. An emerging area from early implementation evidence includes group consultations, also known as shared medical appointments, as discussed by Dr Fallows. Group consultations have been shown to improve clinical outcomes for some patient groups (e.g., HbA1c, lipids, BMI), as well as improve self-care and health education, and patient and clinician satisfaction. These groups have been piloted throughout the UK both face-to-face and virtually, with initial findings suggesting they are feasible and acceptable to patients and clinicians. Further work is needed to assess the potential of Precision Nutrition. Use of implementation science is in important ways due to identifiable molecular traits and can be underpinned by knowledge creation, effective education, and culture change. Dr Bell then highlighted how theoretical frameworks have provided guidance for the implementation of real world, complex nutrition interventions, including the Systematised Interdisciplinary Program for Implementation and Evaluation (SIMPLE) in Australia, and the More-2-Eat program in Canada.

Knowledge networks, such as the NNEdPro Nutrition and COVID-19 Taskforce, are central to the rapid creation and dissemination of evidence, as highlighted at the NNEdPro Sixth International Summit on Nutrition and Health. During the COVID-19 pandemic, the Taskforce rapidly collated evidence and widely shared clear and accessible resources globally, via NNEdPro Regional Networks. The impact of the Taskforce on disseminating evidence and encouraging collaboration was made evident, and thus demonstrates the importance of this approach for addressing regional and global nutrition challenges. Scientific journals, such as BMJ Nutrition, Prevention & Health, are critical to the generation and dissemination of evidence, which is key to its uptake and implementation in policy and practice.
NNEdPro group to the local network to share evidence and encourage collaboration within and between Networks. Each Network is encouraged to understand the needs of their region, locally tailor relevant interventions, and share learnings with other networks. The focus of these networks is on knowledge exchange, capacity building among members, and wider public health impact. An example of these networks in action is the use of the Mobile Teaching Kitchen (MTK) model, which empowers marginalised community members to become culinary health educators. The intervention was originally developed by the Regional Network in India, and adaptations of the MTK intervention are planned across the Swiss, Mexico, Italy & The Mediterranean, and the Brazil Regional Networks. Networks will learn from each other while making adaptation relevant to their local need, resources, and capacity. Knowledge networks underpinned by strong leadership and clear communication strategies are essential to take collaborative action on nutrition and end malnutrition in all its forms.

Data that is accurate and accessible helps to drive innovation and progress, which was a key theme of discussion at the NNEdPro Sixth International Summit on Nutrition and Health. Data-driven policies and programmes have the potential to reorient food systems and end malnutrition by 2030, according to Andre Laperriere of Global Open Data for Agriculture and Nutrition (GODAN). The COVID-19 pandemic has exacerbated the existing food crisis, affecting production, processing, and distribution within the food system, and highlights the critical need for timely and reliable data to drive decision-making. The pandemic has affected food on the levels of production, transformation, and distribution, which presents an unprecedented opportunity for change.

Using data, we can identify and learn from countries who have had the most success in reducing hunger (E.g., Armenia, Brazil, Ghana) and those which have achieved zero hunger while keeping adult overweight and obesity to a minimum (E.g., Republic of Korea, Japan). However, making practice and policy decisions involves a complicated process influenced by logic, current evidence, existing models and authorities, previous experiences, emotions, and cognitive biases, as discussed by Dr Jeffrey Bohn. Causal inference approaches could be one way to address some of these complications by merging nutrition data and scientific evidence to promote better decision-making in the context of nutrition-related communicable diseases targeted by the Nutrition Decade and the Sustainable Development Goals. Although challenges exist in all data science, there are particular challenges in applying mathematical precision in nutrition. Nutrition research considers dynamic processes that evolve and are often influenced by the process of studying them. Additionally, nutrition research occurs against the backdrop of traditional biomedical research where the randomised control trial (RCT) is considered the gold standard in proving causation. While pre-registration of data, protocol and analyses can address some of these primary challenges with research behaviour, to truly understand causation we must consider counterfactuals, which consider the context of the research (models, interventions, characteristics, and cognitive bias) for a more complete understanding. Causal inference tools can be applied to relevant, curated data to identify confounders and subsequent causal linkages. There is a necessity for the quality use of data to identify and strengthen high-impact policies and programmes for action on nutrition.

Research is a cumulative process, and the open flow of information is key to the uptake of evidence into policy and practice. There is growing interest in online knowledge hubs that provide open access to information for public good, and in particular, platforms that have the capability to foster