

Proposal

Belgium reaction to the European Commissions' Green paper

“Promoting healthy diets and physical activity: a European dimension for the prevention of overweight, obesity and chronic disease.”

Introduction

Belgium welcomes the Green Paper of the European Commission on “Promoting healthy diets and physical activity: Towards a European strategy for the prevention of overweight, obesity and chronic diseases” as a timely exercise in the battle against unhealthy dietary habits and lack of physical activity as leading causes of avoidable illness and premature death in Europe.

Belgium acknowledges that the rising prevalence of obesity across Europe is a major public health concern. It welcomes the fact that this discussion is undertaken in a transparent way and through a multi-stakeholder approach. A similar approach was undertaken in 2003 with the elaboration of the Belgian National Food and Health Plan. This plan is now close to finalisation and will be fully implemented as of April 2006.

The Belgian National Food and Health Plan focuses primarily on diet and dietary determinants, together with an integrated approach towards physical activity. As obesity is an issue involving the whole of society, it can however not be seen separately from other fields, such as education, sports, infrastructure, mobility, agriculture etc, the competent authorities of which will also be asked to address the issue in their field of competence.

Background on the Belgian National Food and Health Plan

The underlying causes for overweight and obesity are multi-factorial and embedded in the cultural and structural context of society. This problem cannot be solved by isolated measures, focussing only on consumer behaviour but needs to involve all societal stakeholders. The Belgian National Food and Health Plan has been developed in a concerted action with all stakeholders involved, in the spirit of constructive collaboration and engagement, rather than confrontational. This multi-stakeholder approach brought together experts from government, food industry, food distribution, horeca, consumer groups, patient organisations, medical experts, scientists, etc to share their experiences, think together and identify in consensus necessary actions to tackle the identified issues.

To this end, 10 working groups were created to discuss specific issues and agree on actions to be undertaken in agreement with the stakeholders involved. The 10 fields that were addressed by the working groups were:

- Diet of children and adolescents (school, education, environment, ...)
- Malnutrition in hospitals, elderly homes and home care
- Physical activity
- Scientific aspects
- Consumer information (labelling, claims, publicity)

- Diet of adults
- Diet of infants and young children (0 to 3 years of age)
- Selected deficiencies, supplementation
- Horeca, Catering, Food production
- Information and education

These activities resulted in 59 suggested concrete actions, laid down in the plan and carried by general acceptance and the engagement of each individual stakeholder to take up their role in tackling the problem.

The aim of the integrated approach of the Belgian National Food and Health Plan is in the first place to create a climate where the choice for healthy diets is positively promoted by concerted actions of the stakeholders. This leads to social pressure on parties to act in line with the principles of the Plan. Stakeholders should see health promoting activities as an opportunity for strengthening their image rather than as a threat. More controversial issues, such as price interventions, taxes, product composition standards, signposting and publicity and advertising restrictions have been discussed in the course of the elaboration of the plan. The discussions led to agreement that the most efficient way forward would be to first engage in those actions where a high level of consensus exists, such as the increase in the consumption of fruit and vegetables, consumer information and education, etc.

I. General considerations on the green paper

1° A general approach towards diet-related issues should be adopted. A policy focused on obesity should not lead either to a policy advocating avoidance of certain foods and/or ingredients. A varied and balanced intake of foods will also ensure an adequate intake of all nutrients

2° Belgium believes in a strategy of positivism, information, education and informed consumer choice with discussion, mutual understanding and cross party agreement between the different players as key principles. Legislative measures, although always a possibility, should be seen as a final resort, if no commitment from stakeholders would be experienced.

For some areas as labelling and for advertising and marketing to special vulnerable target groups as children (minors) european legislation may be the appropriate way.

3° Prevention in young children and adolescents must be the priority

4° The EC should enhance the cooperation between the member states and therefore specify, more in detail, the role of the European Platform and the European Nutrition and Physical Activity Network and their interaction would be welcomed.

. The European Commission should focus primarily on consultation and collaboration with member states (through the NPA network) as an instrument for defining the European strategy. To guarantee transparency, it could be opportune to have a permanent member of DG SANCO in the NPA-network

It is important to define the role of the European Platform. Belgium agrees that it is important that stakeholders meet and try to agree on voluntary actions in line with the national and European strategy. However, there must be a very clear reporting and feedback of the proposals of the Platform to the member states, through the NPA network.

Belgium urges to discuss the evaluation of the outcomes of the Platform, regarding both efficiency and effectiveness, in a transparent way with the member states. This evaluation

could be used to clarify and re-define the role to the Platform and it's interaction with the NPA network.

Specific questions:

Health across EU policies

- *What are the concrete contributions which Community policies, if any, should make towards the promotion of healthy diets and physical activity, and towards creating environments which make healthy choices easy choices?*
 - Put this subject high the political agenda : initiatives at council level which further contribute to as sustain the raised (political)awareness :
 - Collect and distribute examples of best practices
 - Draw general evidence-based guidelines in consultation with a committee of experts from all over Europe. More detailed guidelines need to be made on a regional scale because socio-cultural factors largely influence risk factors as well as the feasibility of the strategies to tackle them.
 - Draft guidelines for a self-regulatory code of conduct for establishing responsible attitudes in relation to publicity, Explore the need for a common legislative framework for publicity destined to certain groups;
 - Promote consistency between the different Commission Services with regard to the consumer's perception of healthy food. (for example relation between promotion of healthy diets and the agricultural policy, consumer policy: clear and uniform labelling format on nutrition and health claims can contribute to a healthy choice)
- *Which kind of Community or national measures could contribute towards improving the attractiveness, availability, accessibility and affordability of fruits and vegetables*
 - Affordability: The objective should be to reach a correct pricing policy, to favour healthy choices.
 - Availability: work together with other policy domains such as education and the private sector to increase availability (as well as affordability) of fruits and vegetables at school, workplace, canteens (e.g. salad bars), supermarkets...
 - Attractiveness: caterers should be stimulated to present fruit in an attractive and convenient way, e.g. make fruit salads, present pineapples cut in pieces or slices, ... For vegetables salad bars are an attractive way to promote eating vegetables.
- *On which areas related to nutrition, physical activity, the development of tools for the analysis of related disorders, and consumer behaviour is more research needed?*
 - Way of implementation of strategies to influence eating behaviour an programmes to promote physical activity among youth and their efficiency and (cost)effectiveness
 - The thorough discussions on evidence-based measures to tackle the nutrition-related issues, such as obesity have led to the identification of area's where scientific data are still lacking or incomplete, especially in the field of behaviour, physical activity, dietary survey, impact of individual risk factors in the development of overweight and obesity and assessment of efficacy of measures. It is therefore essential that funding of research projects by European Union takes into account in the first place projects that relate to the fields were research is urgently needed. Such

research may help focus resources and means on those measures that have been shown to have the greatest impact.

- There is also a lack of evidence on the effectiveness of the different communication strategies.
- Research on healthy diets should be encouraged in other areas, especially in the research framework programme.

The Public Health Action Programme

- *How can the availability and comparability of data on obesity be improved, in particular with a view to determining the precise geographical and socio-economic distribution of this condition?*
 - Uniform registration system not based on self-reporting but on actual measurements of height and weight by using existing structures (e.g. for children this is already measured by the medical surveillance system in Belgium).
- *How can the program contribute to raising the awareness of the potential which healthy dietary habits and physical activity have for reducing the risk for chronic diseases amongst decision makers, health professionals, the media and the public at large? Which are the most appropriate dissemination channels for the existing evidence?*
 - Organization of a conference for policy makers (cfr. Ministerial Conference WHO-EURO in Istanbul 2006)
 - Active cooperation with the NPA network to ensure the coherence between the supported projects,
 - Direct communication of the results to the member states through the NPA network
 - The communication to the public is best dealt with at national or local level, so that the results can be translated and targeted to the specific audience.

Consumer information, advertising and marketing

- *When providing nutrition information to the consumer, what are the major nutrients, and categories of products, to be considered and why?*
 - The general message should be positive, so emphasize products of which the intake should be increased: whole grain foods, fish, fruits and vegetables
 - It still has to be determined what would be the essential information that is needed on the label for the consumer to make an informed choice. In the framework of the Belgian National Food and Health Plan an audit is planned to assess what information is essential and what would be considered auxiliary. This audit will be carried out in concertation with stakeholders and could serve as an input in the debate to be initiated by the European Commission on labelling and nutritional labelling in particular.
 - As to nutritional labelling it is foreseen to develop and test a system based on 'reference intake values' that would allow the consumer in a simple way to understand the relevance of the nutritional composition in relation to the food and his

- daily diet. Figures say not everything so a visually attractive information system is needed which gives the consumer a clear impression of the % of the RDA he/she consumes by eating a practical portion: for example one cup, one slice, one cookie,...
- Belgium would urge the European Commission to adopt and harmonise such an approach at EU level. This would need to include both pre-packed and non-prepacked foods.
 - Also the use of a signposting system or claims on labels e.g. indicating fibre-rich foods can be very useful for the consumer to recognise 'healthy foods', provided that these are linked to nutrient profiling.
- *Which kind of education is required in order to enable consumers to fully understand the information given on food labels, and who should provide it?*
- As indicated higher, labels should be simplified and standardised, and made as clear and comprehensible as possible (e.g. by using illustrations), so that they can be understood without or with only limited education.
 - It is a primary responsibility of governments to educate consumers on how to understand nutritional information. Such educational measures are a cornerstone of the Belgian National Food and Health Plan. This will be implemented in schools, workplaces, etc and via educational initiatives and folders.
 - A good nutritional education, with on one hand general information on healthy nutritional habits, and on the other hand more specific information on macronutrients and their role and impact in major diseases, discussed in a simple and comprehensible way, is absolutely necessary as a basic knowledge.
 - The education should be provided in schools, but in addition to that, adults should also get the chance to be informed, e.g. through courses organised by mutualities and socio-cultural organisations and given by qualified dietitians. In addition to this basic information, practical 'reading lessons' on how to interpret labels should be given to consumers. The example of 'supermarket tour' or grocery projects is a useful, but rather time-consuming and costly tool for achieving this. As indicated higher, labels should be simplified and standardised, and made as clear and comprehensible as possible (e.g. by using illustrations), so that they can be understood without or with only limited education.
- *Are voluntary codes ("self-regulation") an adequate tool for limiting the advertising and marketing of energy-dense and micronutrient-poor foods? What would be the alternatives to be considered if self-regulation fails?*
- Discussion, mutual understanding and cross party agreement must be the key principle. Therefore, self regulatory codes of the food industry and food distribution as well as of publicity providers are the first step in order to get the industry in line with the health objectives provided they are evaluated on their effectiveness on a regular basis.
 - Legislative measures, although always a possibility, should be seen as a final resort, if no commitment from stakeholders would be experienced or for advertising and marketing to special vulnerable target groups as children (minors).
 - Cross border publicity goes beyond the remit of national Member States and is subject to the most advanced technological techniques. In this respect the European Directive on Television without frontiers should be reviewed and novel ways of communication, such as internet, e-mail, mobile telecommunication, etc should be included.

- How can effectiveness in self-regulation be defined, implemented and monitored? Which measures should be taken towards ensuring that the credulity and lacking media literacy of vulnerable consumers are not exploited by advertising, marketing and promotion activities?

- The Belgian National Food and Health Plan has integrated a self-regulatory code of conduct by the sectors of publicity, food industry and food distribution as a possible means for establishing responsible attitudes in relation to publicity, under the condition of an objective evaluation of the efficacy of the code on a regular basis. This evaluation should be under public scrutiny. The methodology for the evaluation should be transparent and include both quantitative and qualitative assessments.
- Regulation should contain clear engagements and limitations, in order to be able to evaluate implementation.
- Prohibition of certain types of advertising, marketing and promotion activities, e.g. to children, may be necessary.

Consumer education

- *How can consumers best be enabled to make informed choices and take effective action?*
 - Programmes or activities should work at different levels: awareness, knowledge (information), skills, attitude and behaviour; at the same time, environmental changes should promote in a positive way the healthy choices.
 - Attention should not only be paid at the provision of information but also at the understanding of this information by the consumer. (simple, consistent, positive).
 - Consumers should be able to rely on some reliable sources of information, such as websites governed by the government or public health institutes.
- *What contributions can public-private partnerships make toward consumer education?*
 - Food industry can contribute by making clear labels (cfr. higher).
 - The distribution sector as well as catering companies are good partners for the distribution of information (leaflets, posters) at the place where consumers buy their food, and thus make the decisions.
 - Also the organisation of ‘supermarket tours’, where consumers are guided by a dietician throughout the supermarket have been proven to be useful.
- *In the field of nutrition and physical activity, which should be the key messages to give to consumers, how and by whom should they be delivered?*
 - Key message = balance between in (nutrition) and out (activity)
 - How: different tools should be used by national and local government to act most efficient towards the consumer,

- Who: the most important is that the information given is objective, coherent and unambiguous; messages should be based on an agreed national or regional policy plan from the public health institute.

A focus on children and young people

- *What are good examples for improving the nutritional value of school meals, and how can parents be informed on how to improve the nutritional value of home meals?*
 - nutritional education of people involved in preparing school meals to make them aware of the importance of healthy nutrition, and with practical guidelines on how to implement this in collectivities.
 - Information to the parents of basic elements of a balanced meal
- *What is good practice for the provision of physical activity in schools on a regular basis?*
 - More sports at school (during school hours)
 - Physical activity build in activities during breaks (e.g. noon)
 - Provide enough space to play (playgrounds, sports fields,...)
 - Improve safety around the school: safe roads for bicycles and pedestrians to get to school
- *What is good practice for fostering healthy dietary choices at schools, especially as regards the excessive intake of energy-dense snacks and sugar-sweetened soft drinks?*
 - To promote healthy dietary choices, a global health policy for the schools should be established, including health education (knowledge and skills) and creating an environment whereby individuals (in casu children) are being enabled to control and improve their health. Therefore, measures should be aimed at making the healthy choices the easy ones. Concrete examples are:
 - Increase the availability of healthy food choices: provide fruits and milk products as snacks or desserts, provide enough vegetables with meal (e.g. as a salad bar),
 - Limit or exclude the possibilities to buy energy-dense snacks and soft drinks in schools.
- *How can the media, health services, civil society and relevant sectors of industry support health education efforts made by schools? What role can public-private partnerships play in this regard?*
 - *The role of the media is also a key factor. Notwithstanding their independence and the right of freedom of speech, the media is asked to reflect on the impact they can have on consumer behaviour through their programs, series, etc by exemplifying positive role models, portraying healthy dietary and other behaviour (e.g. smoking, wearing of safety belt, safety helmet). They are urged to recognise this responsibility*

and are asked to address it in an ethical way via a deontological code (cfr. www.sirc.org; Guidelines on Science & Health Communication; Social Issues Centre)

- *The health authorities (health minister and ministry) should work together with their education counterparts, first to raise awareness and emphasize the need for action in schools, secondly by providing targets, tools, methodologies and materials.*
- Involvement of industry as far as the ‘ tools’ provided or sponsored by industry are in line with the objective goals.

Food availability, physical activity and health education at the work place

- *How can employers succeed in offering healthy choices at workplace canteens, and in improving the nutritional value of canteen meals?*
 - In general the supply of healthy foods should be increased, not only in canteens, but also throughout the workplace (e.g. provide fresh fruits instead of biscuits and other energy dense snacks; make water available instead of soft drinks,...)
 - Cooks should get a basic nutritional education, to make them aware of the importance of healthy nutrition, and with practical guidelines on how to implement this in collectivities.
 - Menus can be revised by dieticians, in order to ensure a balanced menu, with more lean meat, fish and vegetarian alternatives, as well as enough vegetables and limit the deep-fried choices.
 - Several catering companies are well aware of this issue, have dieticians employed to ensure balanced diets and provide a choice of healthy meals, fresh fruits, salads, and lean dairy products. This should be encouraged.
 - When working with a catering company, employers should take this aspect into account. When comparing offers they should not just compare prices, but also what they will get for it (value for money). They can also introduce specific requirements on the supply of healthy food choices when negotiating the contract.
 - Provide information on the energetic value of the proposed meals is a possible means to make people more aware of what they eat (e.g. kcaloric and fat content of a meal with French fries vs. boiled potatoes; with or without sauce,...)
 - When a sandwich bar is available, this should also provide wholemeal bread, lean alternatives for the usual fat sandwich fillings, soups and salads and fresh fruit.
 - The Flemish Institute for Health Promotion has for example developed a guide for companies with advices and measures they can take to implement a healthy food policy. Such a guide can help companies who have no experienced personnel.
- *What measures would encourage and facilitate the practice of physical activity during breaks, and on the way to and from work?*

- Make stairs more prominent in buildings instead of the central role which elevators get now.
- Stimulate the use of bicycles for home-work traffic, by giving a kilometer fee for cyclers, creating parking places for bicycles and make changing facilities with showers available. The company can also provide bicycles themselves for transfers during the day
- Access to a company owned fitness room or a reduction in the price for using sporting facilities in the neighbourhood..

Building overweight and obesity prevention and treatment into health services

- Which measures, and at what level, are needed to ensure a stronger integration aiming at promoting healthy diets and physical activity into health services?

- General Practitioners should be attentive to overweight and obesity in their patients in general (even if they seem healthy) and provide them or their parents with relevant information on healthy lifestyles. To realise this, it is important that all health professionals (doctors, nurses,...) should receive a course on nutrition during their education, and get a basic training in health promotion and prevention practices.
- Additional education and training should be provided for health professionals in specific settings (such as school or company doctors). They should also be provided with reliable and updated information (e.g. through a website, with fact sheets,...).
- Collaboration with institutional health settings (hospitals, psychiatric hospitals, nursing homes, etc) must be enhanced in order to help them providing healthy diets and to stimulate physical activity.

Addressing the obesogenic environment

- In which ways can public policies contribute to ensure that physical activity be “built into” daily routines?

- People were stimulated to take the bicycle to work by: the possibility to shower when arriving at work, the presence of (safe) cycling paths, and financial stimuli. This is not only a stimulus to encourage people to use bicycles, but also rewards this positive behaviour in people who already do this
- Urban planning and architecture could contribute to the promotion of physical activity, (by assuring safe, comfortable and well maintained cycle and footpaths, by ensuring they can take short cuts (e.g. through pedestrian areas, allow cyclers to use both directions in one way streets, ...), free parking lots for bicycles under surveillance, where possible adjustments of traffic lights in order to reduce waiting times,...

- *Which measures are needed to foster the development of environments that are conducive to physical activity?*

- As one example, in new buildings or during renovations, architects could make sure that stairs are more prominent and accessible than elevators or escalators, so that the majority of people use the stairs and elevators are reserved for less mobile people.

Socio-economic inequalities

- *Which measures, and at what level, would promote healthy diets and physical activity towards population groups and households belonging to certain socio-economic categories, and enable these groups to adopt healthier lifestyles?*

- Actions directed to the general public can be sustained by actions on local level preferably in cooperation with organisations who already work with the target population. If possible, the topics of healthy lifestyles, especially the promotion of healthy diets and physical activity, should be integrated in the existing activities of these organisations.
- We should work on the image of healthy and unhealthy foods and the idea that healthy food is more expensive should be changed:
- *How can the “clustering of unhealthy habits” that has frequently been demonstrated for certain socio-economic groups be addressed?*
 - This is a very difficult issue requiring an integrated approach at local level.
 - Education and working by peer groups could play an important role in this. One possible and promising way to realise this is working with ‘experts by experience’. These are people from the target groups themselves, who are being engaged and trained to directly work with the target group. In this way, they fulfil a bridging function and they are able to ‘translate’ the message to the every day language of the people of the target group and to address the specific problems of the target group in a very practical way .

Fostering an integrated and comprehensive approach towards the promotion of healthy diets and physical activity

- *Which are the most important elements of an integrated and comprehensive approach towards the promotion of healthy diets and physical activity?*

- A ‘health in all policies’ approach is essential: promoting healthy diets and physical activity is not possible by actions only from the public health sector, because of the important role of environmental factors. The involvement of education, agriculture, mobility, etc... is necessary to realise this.

- On local level for example a first step to such a close collaboration has been taken by the signing of an intention statement by the *respective authorities* for health, education, agriculture and youth.
- Preventive actions are primordial: healthy dietary habits and daily physical activity should be build in a healthy lifestyle from the youngest age groups.
- All involved actors should take their responsibility in promoting healthy dietary habits and physical activity; not only the health promotion sector, but also education, ...
- An analysis of the situation and the needs should be performed, Correct baseline data are necessary for this.
- Intermediates (health professionals and others) should be trained properly
- For raising awareness and general information social marketing strategies can be used
- *Actions on national and local level should be adapted to the target population !*
- A permanent (for instance each 2 years) and well supported evaluation should be performed

- *Which role at national and at Community level?*
 - Community level: develop evidence, especially concerning the efficiency and efficacy of interventions; exchange information on good practices. *Given that the origin and consequences of obesity are multi-factorial and complex, assessing the impact of individual measures is a difficult exercise. Europe could help Member States to support and offer means for a standardised assessment of the health impact of the national food and health plans in order to create common benchmarks and identify best practices.*
 - National/regional/local level (as appropriate): implementation, with an integrated approach well tailored to fit the socio-cultural differences in the regional communities throughout Europe.

Recommendations for nutrient intakes and for the development of food-based dietary guidelines

- *In which way could social and cultural variations and different regional and national dietary habits be taken into account in food-based dietary guidelines at a European level?*
 - Because of the regional differences in dietary habits, we are sure that it will be difficult to develop food-based dietary guidelines at a European level. It would be more appropriate to stick to general dietary guidelines at the European level, and to leave it to the competent authorities within member states to develop particular food-based guidelines.
 - If food-based dietary guidelines would be developed, it should be general enough to make it possible for the individual member states to adapt this to the local situation. E.g. development of a general model such as the food guide pyramid/triangle, which could then be adapted to the specific dietary habits within the countries.

- *How can the gaps between proposed nutrient targets and actual consumption patterns be overcome?*

This is of course the aim of all interventions related to diet, so can not be answered in one line... cfr all of this document.

- *How can dietary guidelines be communicated to consumers?*

By health promotion activities; these may include mass-media campaigns, but should also focus on more 'close to consumer' actions, such as through education, peers, activities of socio-cultural organisations and by use of social marketing strategies.

- *In which way could nutrient profile scoring systems such as developed recently in UK contribute to such developments?*

A clear nutrient profiling system is a very useful tool to help consumers make healthy choices. Implementation of such a system should be coupled on an information campaign to make it clear to people.

Cooperation beyond the European Union

- *Under which conditions should the Community engage in exchanging experience and identifying best practice between the EU and non-EU countries? If so, through which means?*

More collaboration is needed between the European union and WHO to maximise the efforts of both organisations in relation to data collection (e.g. geographical and social-economic data relating to obesity, ...)

Other issues

- *Which of the issues addressed in the present Green paper should receive first priority, and which may be considered less pressing?*

Prevention in young children must be prioritised, in view of the alarming increase in overweight and obesity in children.

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