

MINISTRY OF HEALTH OF THE REPUBLIC OF LATVIA

Brīvības iela 72, Riga, LV-1011 • Tel. 7876000 • Fax 7876002 • E-mail: vm@vm.gov.lv

Riga

10.03.2006. No S-01-19-14/1276

SANCO-C4-NUTRITIONGREENPAPER@cec.eu.int

In reply to the questions in the Green

Paper entitled 'Promoting healthy

diets and physical activity: a European

dimension for the prevention of

overweight, obesity and chronic diseases'

The Ministry of Health has summarised and sent replies to the questions in the European Commission's Green Paper published on 8 December 2005, entitled 'Promoting healthy diets and physical activity: a European dimension for the prevention of overweight, obesity and chronic diseases', on which the Commission invited all interested institutions to make contributions.

Enclosure: replies to the questions in the Green Paper (6 pages)

Deputy secretary of state

R. Muciņš

I. Straume 7876076

Questions in the Green Paper entitled 'Promoting healthy diets and physical activity: a European dimension for the prevention of overweight, obesity and chronic diseases', to which the Commission invites interested institutions to make contributions:

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?

<u>In agriculture and business:</u> support for producers and processors producing healthy products, and higher taxes on those that produce unhealthy food. <u>In education:</u> programmes for wider basic knowledge about diet and physical activity, gearing them to pupils' ages in each school year. Promotion of the inclusion of sports activity within school programmes. Providing schools with the necessary equipment for sports lessons. The following situations should be eliminated: sports lessons are uninteresting (creating the opposite of the desired effect, and putting pupils off sports activities), there are few sports associations/clubs with outside

school activities (the number of sports clubs for adults is relatively high), children's opportunities to practise sport outside school is in practice dependent only upon their parents' ability to pay. <u>Consumers</u>: need to be educated (for example, about labelling – how to choose the best from five products on offer). <u>Environmental and audiovisual policy</u>: restrictions on the advertising of unhealthy products.

Which kind of Community or national measures could contribute towards improving the attractiveness, availability, accessibility and affordability of fruits and vegetables?

Subsidies and financial assistance for catering businesses, employers and schools which provide their customers/workers/schoolchildren with free fruits and vegetables. National initiative: promotion of local produce markets, market advantages for local producers.

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?

Surveys are conducted (for instance, the FINBALT study into health habits once every two years), but an objective study is needed, for example the establishing of a body mass index (BMI) for vulnerable groups (children, adolescents, people in the 35 to 45 age-group).

How can the availability and comparability of data on obesity be improved, in particular with a view to determining the precise geographical and socioeconomic distribution of this condition?

A single database should be set up. Objective and comparable data, such as the BMI, are a trend in this direction.

How can the programme 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?

In order for the programme to be effective, it is necessary to channel it towards those parties who are involved and concerned by it.

Which are the most appropriate dissemination channels for the existing evidence?

An Internet website and meetings of experts who will subsequently further disseminate the information acquired.

When providing nutritional value information to the consumer, what are the major nutrients, and categories of products, to be considered and why?

For: cereal products: fibre content, fat content; milk and milk products: fat content, salt content (for cheese), sugar content (for yoghurt and similar products); meat and fish products: fat and salt content; soft drinks: sugar content; snacks: protein, fat, carbohydrate, salt and sugar content.

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?

Work needs to be done with consumer organisations, primary healthcare specialists and children (particularly of primary school age). Educational materials are necessary on information given on food labels (for example, a booklet on food additives received a wide response).

Is voluntary code ("self-regulation") an adequate tool for limiting the advertising and marketing of carbohydrate-dense and mineral-poor foods? What would be the alternatives to be considered if self-regulation fails?

In Latvia as things stand currently this will not work – only specific prohibitions will work.

How can consumers best be enabled to make deliberate choices act according to them?

Consumers need to be motivated, i.e. the relevant level of consumer awareness.

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?

It should be emphasised that an unhealthy diet, obesity and a lack of physical activity determine not only consumers' appearance and well-being at the moment, but also their long-term health.

What are good examples for improving the nutritional value of school meals, and how can parents be encouraged to improve the nutritional value of home meals?

Currently in Latvia, the regulation issued by the Cabinet of Ministers laying down hygiene requirements for educational institutions stipulates that the basic principles of a healthy diet must be complied with in canteens. This regulation is due to be amended with the addition of an annex with recommendations for a healthy diet and a list of recommended and undesirable products.

What is good practice for the provision of physical activity in schools on a regular basis?

The activities are scheduled at the right time, are interesting and there are relevant facilities (sports equipment, changing rooms with lockers and showers).

What is good practice for fostering healthy dietary choices at schools, especially as regards the excessive consumption of energy-dense snacks and sweetened soft drinks?

In Latvia there are schools where unhealthy products are not for sale, but this is on the initiative of individual schools, and there is no single compulsory measure. We believe that the example of France (and also the UK) is a positive one. There, the law on public health prohibits the installation in schools of vending machines selling snacks or drinks. Guidelines are needed as to which products should be sold in such machines (water, mineral water, milk, juice, and so on).

How can the media, health services, society and relevant sectors of industry support health education efforts made by schools? What role can public-private partnerships play in this regard?

The advertising of unhealthy products should be restricted, vending machines selling unhealthy snacks and drinks and kiosks should not be installed in schools or very close to them, I the introduction of free vegetable and/or fruit bars at schools should be supported, and a school milk programme should be promoted.

How can employers succeed in offering healthy choices at workplace canteens, and in improving the nutritional value of canteen meals?

Assistance and benefits for employers that supply workers with free salad and vegetable bars, fruit and water. Relevant guidelines need to be prepared.

What measures would encourage and facilitate the practice of physical activity during breaks, and on the way to and from work?

The creation of an environment facilitating physical activity. Setting up cycle paths and bicycle racks at public buildings. Including free sports activities in health insurance (bonuses for workers making use of this opportunity).

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

Primary healthcare specialists need to be involved, and feedback information is needed from them (annual anthropometrical indicators of patients examined, lifestyle habits, recommendations made). Information material about a healthy diet, physical activity and obesity should be distributed in health services.

In which ways can public policies contribute to ensuring that physical activity is "built into" daily routines?

Setting up cycle paths and bicycle racks at public buildings. Increasing opportunities for active tourism (such as various sporting and educational tracks/circuits, illuminated ski tracks, swimming locations etc.). Setting up of sports fields and skateparks. Construction of swimming pools and sports halls. Promoting the opportunities for physical activity that already exist.

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

A determining factor in the development of such environments is funding, and in order to motivate and help individuals to choose to adopt a healthy lifestyle knowledge and high-quality information sources are necessary.

Which measures, and at what level, would promote healthy diets and physical activity in population groups and households belonging to certain socioeconomic categories, and enable these groups to adopt healthier lifestyles? How can the "clustering of unhealthy habits" that has frequently been demonstrated for certain socio-economic groups be addressed?

Educating young people, since they can spread the information they acquire within their families. Involving primary healthcare specialists (practically all healthcare specialists), since often population groups belonging to certain socio-economic categories do not read the press and do not keep up with information provided by

the mass media, and thus healthcare specialists are sometimes the only people who can influence the lifestyle of these population groups.

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

In order to motivate and help individuals to choose to adopt a healthy lifestyle, knowledge and high-quality information sources are needed.

Choosing a healthy lifestyle needs to be made an accessible, attractive and modern course of action.

Which role do these have at national and at Community level?

The more attractive the choice of a healthy lifestyle becomes, the more it will attract public interest. Those speaking about such a lifestyle ought to show everyone a positive example.

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?

At a European level guidelines ought to be general, outlining the main problems and directions, thus allowing the states to apply them and to take into account cultural and traditional variations.

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

By educating consumers so that they understand what and how much they are consuming.

How can dietary guidelines be communicated to consumers?

By promoting the idea of a healthy diet to the public (for example, seminars, special days/holidays for bread and other healthy products, various attractions, lotteries and articles in local papers, etc.).

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

We believe that this nutrient profile scoring system is very useful in allocating food products, on a scientific basis, to healthy, less healthy and unhealthy categories. With the help of this system it would be possible to demonstrate healthy choice options clearly to consumer, and it could also be used in the preparation of information materials, recommendations and guidelines.

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?

Within the framework of the Consultation Platform, exchange of experience seminars and visits, and the promotion of best practice.

Are there issues not addressed in the present Green paper which need consideration when looking at the European dimension of the promotion of diet, physical activity and health?

Much is said about obesity, but there are also other problems created by an unhealthy diet and lack of physical activity, and therefore a section of the target audience may believe that the Green paper does not apply to them.

Non-governmental consumer protection organisations believe that too little attention has been paid to the possible risks of food additives and the use of GMOs.

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

Education about physical activities (especially for children), the creation of an environment that promotes health and audiovisual policy should be established as priorities.