

## GREEN PAPER

### "Promoting healthy diets and physical activity: a European dimension for the prevention of overweight, obesity and chronic diseases"

#### IV.3. Health across EU policies

Questions on which the Commission invites contributions include:

- 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?
  - Take leadership
  - Avoid the term diet in favour to nutrition
  - Facilitating the framing, strengthening and updating of national policies on diet and physical activity focusing on prevention of chronic diseases in all policies especially within health, education and town planning.
  - Food labelling, making it more readily comparable and understandable and banning false health claims
  - Enforce health driven rules for advertising, especially in respect of advertising aimed at “vulnerable” groups such as children and pregnant women.
  - Guidelines for city planning to facilitate opportunities for greater physical activity for everybody - related to e.g. transport, sports grounds, security of open space
  - Agricultural policy should be directed to support healthy diets
  - Food companies should be encouraged to be “Health promoting companies”. A certificate at EU level might be established
  - Activities must be linked to prevention programmes of chronic diseases, such as diabetes and cardiovascular disease.
  - Evaluation, monitoring, and surveillance are essential components of actions and should be collected at EU and wider international level.
  - All member states have accepted the Global strategy on diet, physical activity and health (WHO 22.4.2004). Community activities should be coordinated with the WHO European region and the Council of Europe.
  
- Which kind of Community or national measures could contribute towards improving the attractiveness, availability, accessibility and affordability of fruits and vegetables?
  - Give absolute priority to this issue
  - Tax reductions especially in remote areas of EU, where fruits and vegetable are not available from own country during wintertime.
  - Tax reductions to encourage local fruit and vegetable production
  - Encourage the provision of fresh fruit and vegetables in schools, at working places and in hospitals

- 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?
  - Ongoing research in identifying or creating “healthy” food as well as its production and preparation techniques
  - More research is needed especially on tools to make lasting changes to consumer behaviour. It is essential to identify the most effective systems for helping individuals acquire knowledge about healthy living and identifying ways in which such knowledge can be implemented by the individual especially by those at most risk.

#### IV.4. The Public Health Action Programme

Questions on which the Commission invites contributions include:

- 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?
  - By monitoring e.g. data from clothing industry and its changing product grandeurs, collecting data from/at school enrolment, military physical exams
  - Data exists in many EU States but both definition and collection methods vary. There is a need for clarification so that systems conform since comparable data from EU States is a pre-requisite for monitoring the effects of public health interventions.
- 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?
  - Presenting case histories, presenting longitudinal historic data.
  - In the implementation of the programme resources should be directed
    - to ensure wide dissemination of the results of the research on the possibilities to reduce risk and costs
    - to encourage the development and implementation of national diabetes plans
    - to finance transeuropean projects to promote health promotion and chronic disease prevention.
- Which are the most appropriate dissemination channels for the existing evidence?
  - Lay Press, TV, Clubs
  - Schools and secondary education, all health care facilities especially primary care, the workplaces, occupational health care, employers unions and trade unions.
  - Media, especially TV.

## V. AREAS FOR ACTION

### V.1. Consumer information, advertising and marketing

Questions on which the Commission invites contributions include:

- When providing nutrition information to the consumer, what are the major nutrients, and categories of products, to be considered and why?
  - Concentrate above all on caloric content + content of fibres material
  - Messages should be structured as simple as possible
  - Avoid any confusing details
  - Translate every description to the dimension of g/100 ml (or g/100 g) – especially with alcohol and carbohydrate content
  - Normally the categories of “high – medium – low” should be sufficient
  - Major nutrients: quality and amount of fat, carbohydrates, salt.
  - Categories of products: prepared dairy products, prepared dishes, snacks, beverages, especially soft drinks and alcoholic drinks, confectionary and bakery products
- 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?
  - Don't make easy things complicated
  - Most diet/nutrition terms are more confusing than helpful in speaking with the general public
  - Education should start in kindergarten and continue through primary and secondary education. It is especially important to provide opportunities for expectant parents to learn how to interpret the information provided on food labels. The material used in education should contain demonstrations of and pictures of healthy meals and products.
  - NGOs can provide material, if financially supported
  - Primary Health Care, maternity clinics, and health educators
- Are voluntary codes (“self-regulation”) an adequate tool for limiting the advertising and marketing of energy-dense and micronutrient-poor foods?
  - No, but it can be used as a first step
- What would be the alternatives to be considered if self-regulation fails?
  - Legislation
- How can effectiveness in self-regulation be defined, implemented and monitored?
  - Reduce to the simplest – minimal essentials be defined

- 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?
  - Clearer food labelling and banning false health claims

### V.2. Consumer education

Questions on which the Commission, in view of identifying best practices, invites contributions include:

- How can consumers best be enabled to make informed choices and take effective action?
  - Look for or develop pictograms (like in traffic or airport orientation)
  - Same with traffic light colours (red, yellow, green) – they work without translation, explanation across any language barrier
  - With clear, easy understandable food labelling and with symbols which are determined by European experts.
- What contributions can public-private partnerships make toward consumer education?
  - In any common campaigning
  - Public institutions, NGOs and private companies can create partnerships and panels, which can produce leaflets, arrange meetings around healthy choices and encourage physical activity. Clearer rules and regulations are needed to prevent the dissemination of misleading and/or false information.
  - To increase credibility and resonance
- 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?
  - “Future health – it’s You to decide upon!”
  - “Eating and action can in fact prevent or delay disease”
  - The most important message should be: “This is a way for you to feel better, to improve the quality of your own life and the life of your family”. Although the message must be positive, avoiding blame, it does need to highlight the risk for severe diseases like diabetes, cardiovascular disease, cancer, osteoporosis, depression etc. It is important to give a name to diseases which can be prevented or whose onset may be delayed.
  - Public, NGO and private partnerships should be created. The NGOs can play a key role, but their financial security and their independence should be guaranteed.

### V.3. A focus on children and young people

Questions on which the Commission, in view of identifying best practices, invites contributions include:

- 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?
  - A reduction in portion size is a crucial factor in encouraging a healthy diet. Healthy dietary patterns need to be encouraged at an early age. National guidelines for healthy diet at schools and in workplace canteens. Kindergartens and schools can arrange “parent schools” to inform them on healthy dietary patterns. There are examples of good practice in many EU States, one of the best known is that developed by the celebrity chef Jamie Oliver in the UK.
- What is good practice for the provision of physical activity in schools on a regular basis?
  - Action with sense (against non-sense messages), with a core of competition, with some kind of awarding behind – even with bonus- or credit points as winning day off, holiday tours in case of reaching or approaching realistic goals
  - Offer club – sport facilities and link them with school and leisure sports (in respect to location and personnel)
  - In view of very different kinds and possibilities invest in searching and (or testing) for 1) *affection* and 2) *natural abilities* and realize everything accordingly
  - Creation of suitable foot and cycle paths, designed tracks and road schemes that allow safe walking, cycling and the use of play areas around the home and school. Encouraging initiatives such as “the walking school bus” helps to build an expectation that physical activity is a good thing.
  - Change in school curriculum to encourage children to participate in sports and physical activity. Hours for physical activity should be increased and included in the national education curriculum.
- 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?
  - Avoid the term “dietary”
  - Hamper accessibility
  - Make the “preferential” attractive
  - Train the feeling of satiety
  - Allow eco-friendly chewing gum
  - Avoid strictly any “may fly” actions
  - Avoid an inflation of “miracle” diets
  - Favour and encourage serious advisers
  - Banning vending machines which market such products, if voluntary removal is not successful.

- 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?
  - Positive competition over the best ideas – preferably through awarding procedures
  - They can be partners in planning, implementing and financing local events, preferably on a continuing basis. Independence of schools must be guaranteed
  - Children should be protected from advertising, which promotes inappropriate and unnecessary consumption of energy dense (high calorie) food and drink

#### **V.4. Food availability, physical activity and health education at the work place**

Questions on which the Commission, in view of identifying best practices, invites contributions include:

- How can employers succeed in offering healthy choices at workplace canteens, and in improving the nutritional value of canteen meals?
  - By initiating of group-counselling as “never miss a meal” ads
  - By choosing and educating catering managers with adequate knowledge of healthy foods and the preparation of attractive and healthy dishes.
- What measures would encourage and facilitate the practice of physical activity during breaks, and on the way to and from work?
  - Sliding working hours to enable self-determination
  - Secure places and routes
  - Provide suitable places for bikes or any other sports equipment at working places, in busses, in the train
  - Safe walking and cycling routes, guided physical activity, organizing working teams in occasional special competitions, such as local half marathons or even charity walks.

## V.5. Building overweight and obesity prevention and treatment into health services

Questions on which the Commission invites contributions include:

- Which measures, and at what level, are needed to ensure a stronger integration aiming at promoting healthy diets and physical activity into health services?
  - e.g. Start any medical consultation by weighing and documentation of results.
  - Measures should be built at local level in primary health care normal routines. National prevention programmes should include models for local prevention programmes. Local prevention programs need to identify with local need and activities should be coordinated with those responsible for other related programmes.
  - Group-counselling must become a regular feature in health centres. Personal counselling must be available when needed.
  - Families must be involved in the counselling. Maternity clinics are important centres where the importance of a healthy lifestyle may be advocated as mothers and fathers tend to be particularly interested in the future health of their unborn children.

## V.6. Addressing the obesogenic environment

Questions on which the Commission invites contributions include:

- In which ways can public policies contribute to ensure that physical activity be “built into” daily routines?
  - Popularize this most intelligent term: “obesogenic” (word of the Year !!)
  - Give favourable VIP-examples
  - Urban and suburban planning must be responsive to the need to create an environment which facilitates good health and encourages physical activity. For example, the design of offices and workplaces where staff and visitors are encouraged to walk rather than take a lift or an escalator.
- Which measures are needed to foster the development of environments that are conducive to physical activity?
  - (Re-)integrate work – and leisure.
  - Recommendations and even legislation for healthy villages, towns and cities environments, guarantee routes for walking and cycling in all surroundings. Encouraging such activity requires planned provision of space on public transport (trains) for carriage of cycles, safe cycle parks, provision of publicly provided cycles for public use/hire.

## V.7. Socio-economic inequalities

Questions on which the Commission invites contributions include:

- Which measures, and at what level, would promote healthy diets and physical activity towards population groups and households belonging to certain socioeconomic categories, and enable these groups to adopt healthier lifestyles?
  - Search and encourage people to stick to their own (traditional) sporty preferences – so e.g. soccer over tennis; bicycling over sailing
  - Guarantee healthy choices to be affordable for people with low income.
  - The activities must be run at local level near people affected
- How can the “clustering of unhealthy habits” that has frequently been demonstrated for certain socio-economic groups be addressed?
  - Win their children for induction of changes
  - Consider bonus-malus rules for success or failure
  - Provision of public recreational facilities (free wherever possible) and arrange mass events where everybody can participate
  - Arrange group counselling in neighbourhoods in “own language”
  - Create co-operation with unemployed people’s clubs, local clubs and pubs to start encouraging life style changes

## V.8. Fostering an integrated and comprehensive approach towards the promotion of healthy diets and physical activity

Questions on which the Commission invites contributions include:

- Which are the most important elements of an integrated and comprehensive approach towards the promotion of healthy diets and physical activity?
  - Change thinking
  - Appeal to responsibility
  - Call it fun
- Which role at national and at Community level?
  - See IV 3
  - The national level is the basis for the practical work.
  - It is important that EU, WHO and Council of Europe work together.
  - Strengthening partnerships and collaboration of Community institutions with national NGOs and European NGOs and professional networks



## V.9. Recommendations for nutrient intakes and for the development of food-based dietary guidelines

Questions on which the Commission invites contributions include:

- 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?
  - European guidelines may be best used as a model upon which national guidelines might be developed.
  - Regional and national habits may be used a kind of benchmarking – mark the best!
- How can the gaps between proposed nutrient targets and actual consumption patterns be overcome?
  - As an extremely long lasting process – by endurance, intelligent ideas, new goals, with high frustration tolerance
  - With wide cooperation with all concerned parties, there needs to be both a “top down” and a “bottom up approach”. States and individuals need to accept that the current trend towards a population of obese citizens is a very serious issue, which needs to be urgently addressed by all.
- How can dietary guidelines be communicated to consumers?
  - Avoid Guidelines as external control
  - Build on argumentation and beliefs instead of rules
  - At national level in cooperation with public health and education authorities. A close cooperation with NGOs should be established. Partnerships with the private sector, especially with national food companies should be created.
- In which way could nutrient profile scoring systems such as developed recently in UK contribute to such developments?
  - There is a need for such systems to be discussed amongst experts from EU States, NGOs and the EU Commission. The possibility of wider EU use needs to be assessed.

## V.10. Cooperation beyond the European Union,

Questions on which the Commission invites contributions include:

- 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?
  - The WHO is actively working towards a strategy on obesity at European region. EU should combine its activities with the WHO activities to avoid double or triple work on same issues. The Council of Europe should be included in these activities.
  - Mimic the Olympics: – come together, compete and award the best

## V.11. Other issues

Questions on which the Commission invites contributions include:

- 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?
  - A yearly “Health at Your Disposal Day”
- Which of the issues addressed in the present Green paper should receive first priority, and which may be considered less pressing?
  - Food labelling
  - Health claims
  - Mobilize the best practices (ideas, procedures)
  - “Health promoting companies”. A certificate or award at EU level might be established.

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