



Best practices

of the Member States in food reformulation

Survey on Member States
„trio questionnaire 2016“

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Introduction

Overweight and obesity reaches in Europe the level of epidemic. Obesity is one of the 10 most important public health problems. While in 1995 there were 200 million people suffering globally from overweight or obesity, this number has grown to 300 million in 2000. Common incidence of overweight and obesity in European countries ranges between 30%-80%. It is stated in the EU countries that overweight and obesity together impacts 200 million of adults and obesity in children grows rapidly.¹ According to WHO data, the European region is mostly heavily affected by noncommunicable chronic diseases which are the main cause of invalidity and mortality. The cause of death on cardiovascular diseases is high systolic blood pressure which is responsible for 51% of heart failures and 45% of deaths on ischemic heart disease.² Cardiovascular diseases, type 2 diabetes, cancer and respiratory diseases (four main chronic noncommunicable diseases) together represent 77% burden from a disease and almost 86% of premature mortality. Excess of body weight (body mass index $>25\text{kg/m}^2$), excessive intake of energy, saturated fats, trans fatty acids, sugar and salt from food and from meal and also low consumption of vegetables, fruits and wholemeal products lead to increase of risk factors in nutrition and to increase of fears regarding development of health status of population.³ European Commission and the MSs identified several areas connected with nutrition and life style, which can reverse this unfavourable status. There are many activities, ranging from the focus on promotion of healthy life start, nursing, limitation of advertisement on children, food labelling, school boarding promotion, etc. on food reformulation.

Food rich in wholemeal cereals, vegetables and fruits and with low content of saturated fats, trans fatty acids and sodium protects against many noncommunicable diseases of so called "life style", such as mentioned cardiovascular diseases, diabetes type 2, obesity and some kinds of cancer. In 2003, WHO proposed target nutrition values for improvement of nutrients intake in population and for reduction of chronic diseases, through reaching of upper value of 2000 mg of sodium presence (5 g of salt/day), 10% from energy intake from saturated fats and 1% from energy intake from trans fatty acids through nutrition.⁴

Reformulation in processing of food provides an opportunity for improvement of health status of population through improvement of nutrition properties of food intended for common daily consumption. Reformulation of food has a potential to reduce inequalities in the area of health, with strengthening of disadvantaged population groups.

The present situation

- In 2007, strategy for Europe concerning nutrition, overweight and obesity was adopted. Strategy sets up an integrated approach of the EU for reduction of chronic diseases related to food. Its aim is to contribute to reduction of risks connected with unhealthy nutrition and limited physical activity in the European Union.
- Council conclusions from 8 June 2010 on measures for reduction of salt intake in population, in the interest of health improvement, challenge MSs to strengthen and carry out – elaborate coordinated and sustainable national policies in the area of nutrition, programs focused on reduction of salt content; they emphasize importance of food labelling for increasing of consumer awareness about possibility of appropriate food choice.

¹ EU Action Plan on Childhood Obesity 2014-2020

² Council Conclusions on nutrition and physical activity

³ Council conclusions of 8 June 2010 on Action to reduce population salt intake for better health'

⁴ Global Action Plan for the Prevention and Control of NCDs 2013-2020

- WHO global action plan for the prevention and control of noncommunicable diseases for the years 2013 - 2020 challenges in its goals to reduce risk factors of noncommunicable chronic diseases all concerned subjects and for reaching 25% of risk reduction on premature mortality from cardiovascular diseases, cancer, diabetes and chronic respiratory diseases, 30% reduction in average of salt intake in population, etc.
- Council conclusions from June 2014 unite MSs in common activities in fight against noncommunicable chronic diseases in connection with Health 2020.
- For increase of informedness of consumer, in December 2014 Regulation (EC) No. 1169/2011 came into effect. Since July 2016, duty on nutrition labelling of food is effective, which helps consumer in food selection with regard to its nutrition composition.
- Strategy of reformulation aiming to create healthier nutrition was included into several documents, e.g.: EU Framework for National initiatives on salt from 2008, EU Framework for national initiatives on selected nutrients from 2011 as a basis for formulation of criteria on energy, fats, saturated fats, added sugar, portions size, food consumption frequency. EU Framework created a basis for common approach and promotion of national plans in this field. It outlined key elements for promotion and development of actions in questions of food reformulation together with food producers, it lead to creation of EU Framework for national initiatives for selected nutrients – Enclosure I: Saturated fats and Enclosure II added sugars.
- Roadmap: The goal was to promote a joined EU approach to increase the availability of healthier food products and to commit the MSs and important stakeholders to the “roadmap for action” to achieve this. The roadmap was focused on lowering the levels of salt, saturated fat and sugar in produced foods since the role of these food compounds is essential to many diet-related health problems in Europe. It is urgency to move towards healthier food products and agree that the problem crosses national borders and thus demands transnational concerted action. The plan of action was to involve all important stakeholders, seek cooperation and exchange best practices with the food industry and that solid scientific evidence should be the basis of future action..

Council conclusions on improvement of quality of foodstuffs from 23 June 2016 confirm that nutrition plays significant role among life style factors and many processed foodstuffs contain big amount of salt, saturated fats, sugars and total energy. Expression of common steps of the EU in the area of food reformulation enabled the Slovak Republic during its Presidency to obtain information about and evaluate best practices of MSs, Switzerland and Norway in food reformulation and to provide overview of good practice for encouraging and shift of MSs, Switzerland and Norway in common EU and national initiatives directed toward healthier nutrition and thus reduction of occurrence of noncommunicable chronic diseases.

Background

Initiatives of MSs, Switzerland and Norway are extensive and are focused on main risk factors (salt, total fat, saturated fat, sugars, energy, portions size, food labelling, etc.) transfered to national strategies in accordance with recommended levels and particularities on national levels.

In 2016, European Commission sent to 28 MSs, Switzerland and Norway questionnaire prepared in framework of cooperation of „Presidency trio“ (Netherlands, Slovakia, Malta), focused on obtaining of information and best practices in the area of food reformulation. 24 countries (22 MSs, Switzerland and Norway) responded completely or partially to questions stated in the questionnaire. Based on this questionnaire, support of MSs in the framework of High Level Group for Nutrition and Physical activity, the Slovakia focused on processing of provided data on best practices obtained from 24 countries in the area of food reformulation on national level.

Output from processed data on best practices in the area of food reformulation on national level and progress in food reformulation obtained based on the questionnaire from 24 countries will be presented as a part of activities during the Slovak Presidency on the conference “Prevention of chronic non-communicable diseases and healthy lifestyle”, which is held on 20 – 21 September 2016 in Bratislava. Consequently, at the Informal Council of Ministers of Health of the *European Union* on 3 – 4 October 2016 in Bratislava they will serve as an introduction to discussion on the topic of best practices of the European countries in the area of food reformulation. The Slovakia will present processed recommendations and best practices of the European countries, which will enable to share mutual experiences of countries and they can help to strengthen their further common activities in the area of food reformulation and by that to contribute both to reduction of risk factors in nutrition and improvement of human health.

Carent steps in food reformulation in MSs

National initiatives of individual countries, according to data provide in questionnaire in the area of nutritional elements, energy value, portions size and nutritional labelling are represented as follows:

Focus on	Number of countries with food reformulation
Focus on salt	23
Focus on trans fat	20
Focus on total fat	20
Focus on saturated fat	18
Focus on added sugar	20
Focus on total sugar	15
Focus on energy intake	13
Focus on portion sizes	8
Focus on wholegrain	9

As one of the main initiators of national initiatives in the area of food reformulation was stated in case of 19 countries the Ministry of Health, 12 countries stated also other ministries and institutions (4x the Ministry of Agriculture) and 11 other ministries, institutions and organizations have primary responsibility for reformulation initiatives in the area of foodstuffs.

1. Salt

Evidence suggests that current levels of sodium consumption in Europe contribute to increased blood pressure in the population, and a consequent higher risk of cardiovascular and renal disease. There is a clear link between high sodium intake and high blood pressure; likewise there is conclusive scientific evidence showing that reduction of sodium consumption reduces blood pressure.

The WHO recommends no more than 2 grams of sodium (5 grams of salt) per day. Approximately ninety five per cent of sodium is consumed in the form of salt. According to Member States data collected for the survey, the current daily salt consumption in most European countries is estimated or measured to range between 8 to 12 grams per day, with few Member States above and few below this intake level.

The European Commission brought together a High Level Group of Member States' representatives, aimed at addressing a range of health topics related to nutrition and physical activity through the exchange of good practice. On 7 December 2007, the Council of Ministers of the European Union welcomed the initiative of the European Commission to propose salt reduction as a first priority for discussion within the High Level Group⁵.

24 countries (Austria, Belgium, Bulgaria, Croatia, Czech Republic, Denmark, Estonia, Finland, Germany, Greece, Hungary, Italy, Latvia, Lithuania, Poland, Romania, Slovakia, Slovenia, Spain, Sweden, The Netherlands, United Kingdom, Norway and Switzerland) provided information on best practices in the area of food reformulation on national level and on progress in the area of reformulation of salt in food.

1.1 Food commodity proportion in salt reformulation

23 countries (Austria, Belgium, Bulgaria, Croatia, Czech Republic, Denmark, Estonia, Finland, Greece, Hungary, Italy, Latvia, Lithuania, The Netherlands, Poland, Romania, Slovakia, Slovenia, Spain, Sweden, United Kingdom, Norway and Switzerland) stated that they focus on food reformulation with the aim to reduce salt content altogether in 19 food commodities, ready meals and meals served at catering premises. From this number, 15 countries (Czech Republic, Estonia, Greece, Spain, Finland, Hungary, Italy, Latvia, Lithuania, Poland, Sweden, Slovenia, Slovakia, United Kingdom and Switzerland) provided information on concrete food commodities (Charts 1 to 3).

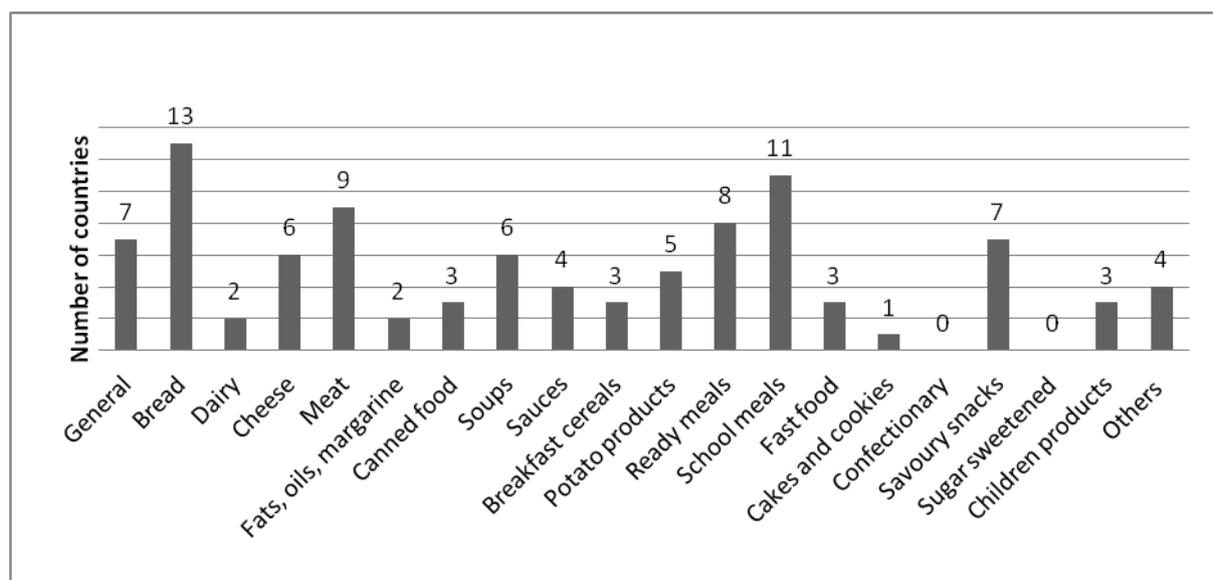


Chart 1: Food commodities involved in salt reformulation initiative

The biggest representation in food commodities involved in salt reformulation initiative with the aim to reduce salt content has a bread – in 13 countries (Czech Republic, Finland, Greece, Hungary, Italy, Lithuania, Poland, Slovakia, Slovenia, Spain, Sweden, United Kingdom and Switzerland), second highest representation has school meal – in 11 countries (Czech Republic, Estonia, Finland, Hungary, Italy, Latvia, Lithuania, Poland, Slovenia, Sweden, United Kingdom), followed by meat – in 9 countries (Czech Republic, Finland, Hungary, Lithuania, Slovakia, Slovenia, Spain, Sweden, United Kingdom), ready meals – in 8 countries (Finland, Italy, Lithuania, Poland, Slovenia, Sweden, United Kingdom and Switzerland), savoury snacks – in 7 countries (Finland, Hungary, Italy, Lithuania, Poland, United

⁵) EU FRAMEWORK FOR NATIONAL INITIATIVES ON SELECTED NUTRIENTS:
http://ec.europa.eu/health/nutrition_physical_activity/docs/euframework_national_nutrients_en.pdf

Kingdom, Spain), cheese – in 6 countries (Finland, Lithuania, Slovakia, Slovenia, Sweden, United Kingdom) and soups – in 6 countries (Czech Republic, Italy, Lithuania, Poland, Sweden, United Kingdom).

When compared with results of questionnaire from 2015, we can see that besides above-mentioned countries, the issue of salt reformulation in food is addressed also in Cyprus (product focus: bread, meat, ready meals, school meals), Germany, Ireland, Luxemburg and Malta (labelling: low in salt).

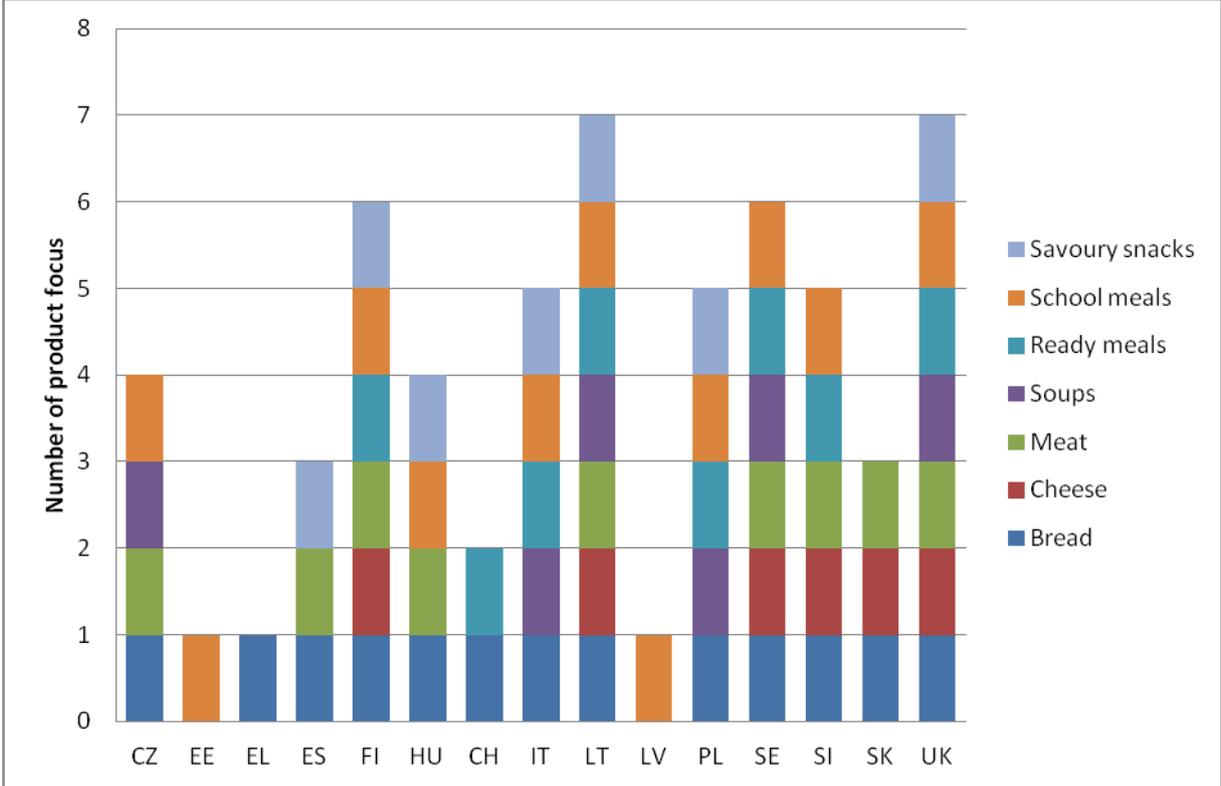


Chart 2: Comparison of food commodities representation, on which reformulation initiative with the aim of salt content reduction is focused, according to countries

Note: chart includes countries which stated concrete food commodity

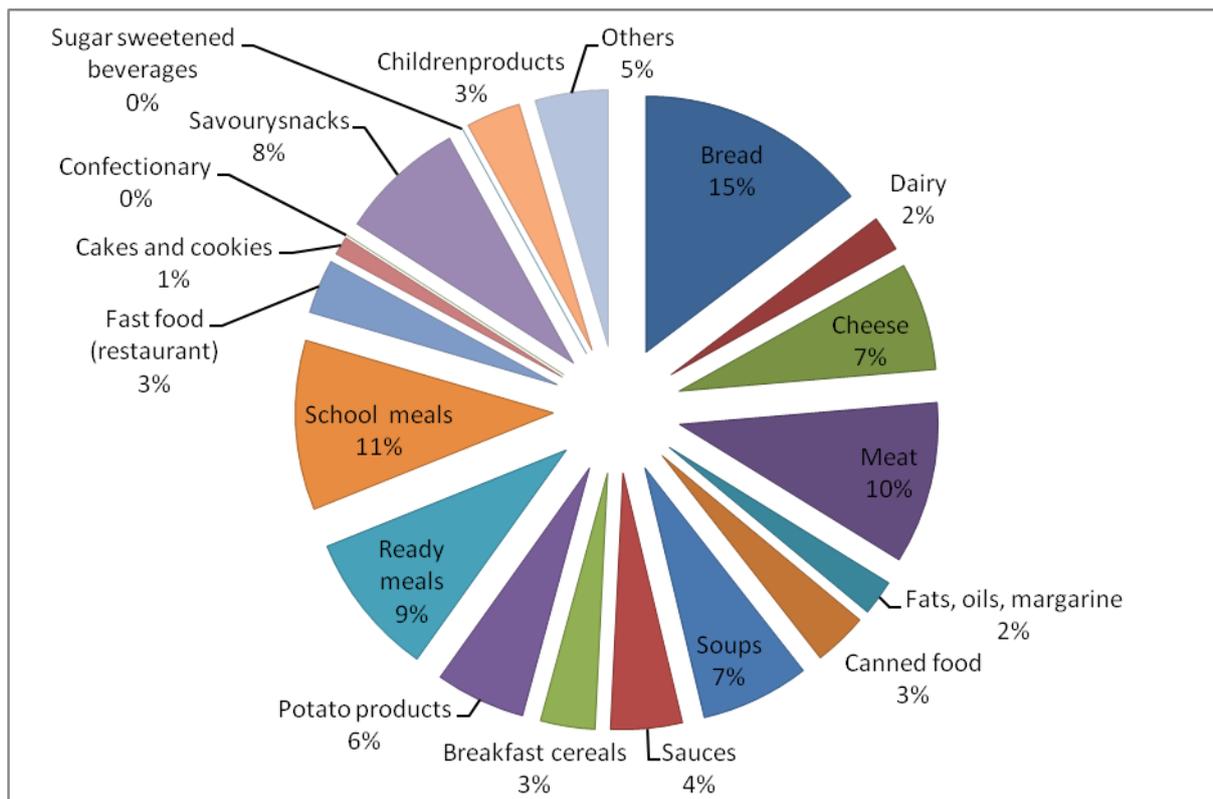


Chart 3: Percentual representation of individual food commodities, on which reformulation initiative with the aim of salt content reduction is focused, including school meals in the area of salt reformulation

Some countries stated also other food categories currently involved in the food reformulation in the area of salt, e.g. Latvia – meals in kindergartens, hospitals and long-term social care institutions; Slovakia – meals in canteens and other, catering premises, snack and condiments; Switzerland – meals in catering; United Kingdom - 76 categories of food and 11 targets for meals served out of home, including one for children’s meals.

Average number of food commodities,, on which reformulation initiative with the aim of salt content reduction is focused, according to provided data from 19 countries, is 3,75 reformulation kinds of food in one country.

1.2 Implementation objective

As one of the implementation tools of food reformulation with aim to achieve the goal of salt content reduction 10 countries (Croatia, Finland, Greece, Hungary, Latvia, Lithuania, Poland, Slovakia, United Kingdom and Switzerland) stated adoption of **maximum values for salt content** in selected food commodities. The least used tool was labelling (Czech Republic, Finland, United Kingdom). (Chart 4).

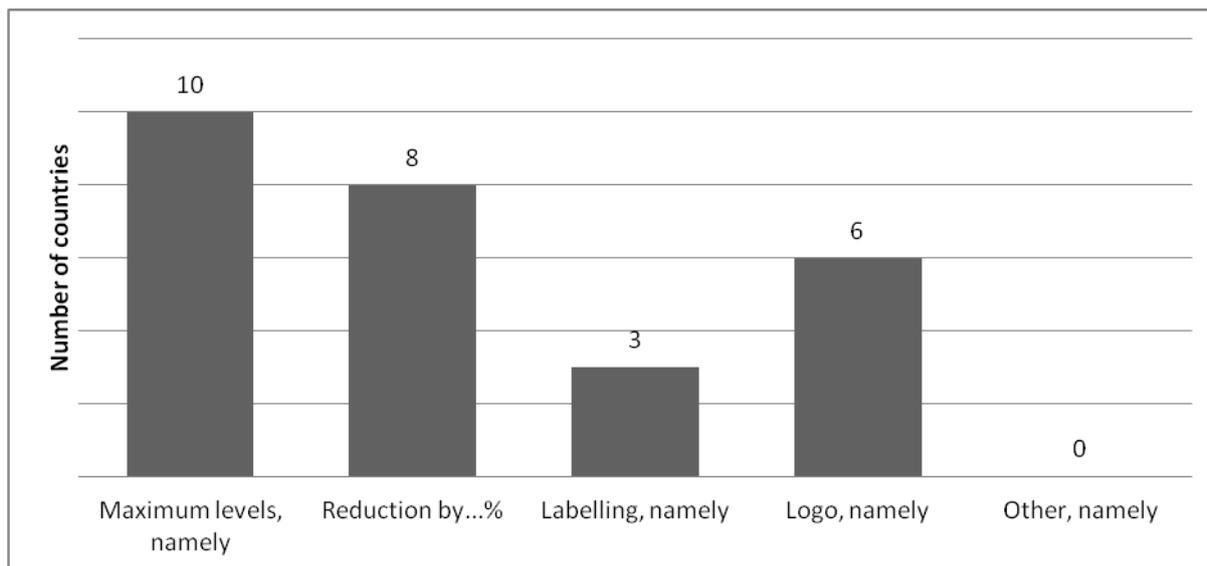


Chart 4: Representation of implementation tools of food reformulation in the area of salt reduction

1.2.1 Maximum levels

Maximum values, as an implementation tool of food reformulation in the area of salt reduction, were mentioned as the most used in case of food commodity bread and they range from 1,13 g salt per 100 g (United Kingdom), 1,25 g salt per 100 g (Latvia), 1,3 g salt per 100 g (Slovak Republic) to 1,3-1,5 g salt per 100 g (Switzerland).

1.2.2 Reduction of salt

8 countries mentioned as a way of implementation the salt content reduction in selected foodstuffs (Czech Republic, Estonia, Finland, Germany, Hungary, Slovenia, Spain and Switzerland). Provided data were expressed mostly on daily intake of salt. Hungary stated an objective for reduction of amount of added salt by 6 % in case of bread till 2017 and Switzerland stated reduction by 0,28 g NaCl/100 g in bread.

1.2.3 Labelling

Finland, Sweden and United Kingdom stated as a way of implementation of salt intake reduction in connection with food reformulation in the area of salt use of salt labelling.

1.2.4 Logo

Logo as a way of implementation in connection with food reformulation in the area of salt in foodstuffs uses only 6 countries (Finland, Greece, Latvia, Lithuania, Slovenia and Sweden).

1.3 Policy

In the area of policy, 12 countries (Croatia, Czech Republic, Estonia, Finland, Greece, Italy, Latvia, Poland, Romania, Slovenia, Spain, United Kingdom) stated that they use voluntary agreement. The second most frequent method which is used by individual countries for implementation is government initiative – in 9 countries (Greece, Italy, Latvia, Lithuania, Poland, Romania, Slovenia, United Kingdom and Switzerland). 5 countries (Finland, Greece, Hungary, Latvia, Slovakia) in the framework of reaching the improvement use legislation. (Chart 5).

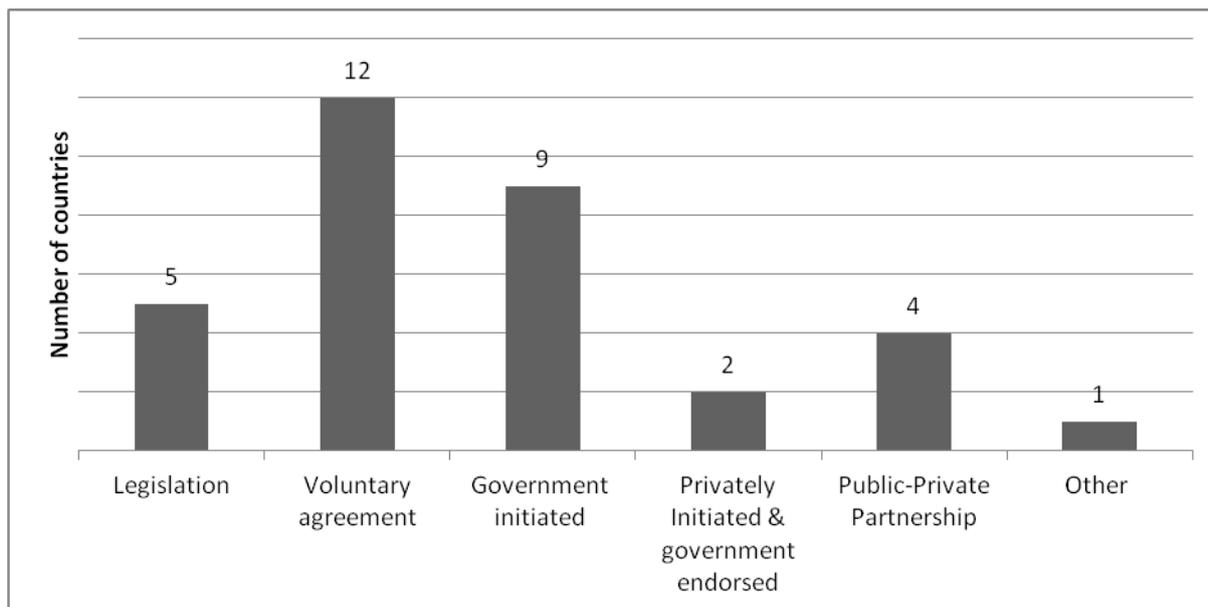


Chart 5: The way of implementation of food reformulation with the aim to reduce salt content on the level of policy

1.4 Date or period

15 countries stated following information about the period of food reformulation implementation with the aim to reduce salt content: United Kingdom: first salt targets set in 2006 to be met by 2010, most recent targets set in 2014 to be met by 2017; Spain since 2008; Romania since 2008; Slovak Republic since 2008; Latvia: school nutrition norms since 2012 and National food quality scheme products since 2008; Estonia: since 2009; Italy: since 2009; Greece: since 2010; Slovenia: since 2010; Lithuania: since 2010; Switzerland: since 2011; Croatia: since 2015; Hungary: The Ministerial decree No. 37/2014 affecting nutrient content of meals in public catering is applicable from September 2015. Finland, Italy, Poland (without further specification).

At the same time, 6 countries mentioned that they are active in food reformulation in the area of salt in food in specific periods:

- Sweden from 1989,
- Poland from 2008 until 2012,
- Czech Republic from 2009 until 2014 and from 2015 to 2020,
- Hungary from 2012 until 31 December 2017 for bread,
- Greece: Salt reduction strategy endorsed by the Hellenic Food Authority is active from 2016 until 2020,
- Croatia until 2019.

Two countries (Czech Republic and Slovakia) stated that they are preparing for the new data collection in the area of reformulation of salt in food.

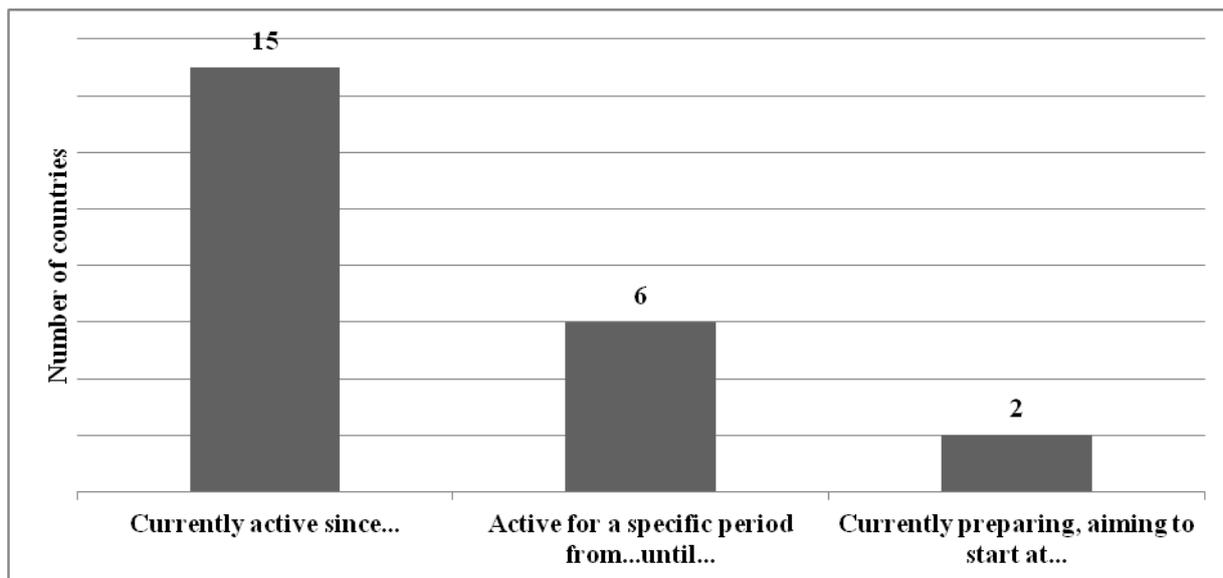


Chart 6: Activities of countries in food reformulation in the area of salt

1.5 Monitoring

In framework of monitoring, 11 countries (Croatia, Czech Republic, Estonia, Finland, Hungary, Italy, Poland, Romania, Spain, United Kingdom and Switzerland) stated that they perform **analysis of food content**.

Self reporting by industry was stated by 10 countries (Croatia, Czech Republic, Estonia, Finland, Hungary, Italy, Poland, Romania, United Kingdom and Switzerland) and 8 countries (Croatia, Estonia, Finland, Greece, Italy, Latvia, Slovakia, Slovenia) stated performance of **consumer awareness survey**. Biomonitoring, concretely **dietary intake control via 24h urine analysis** stated 8 countries (Croatia, Finland, Greece, Italy, Slovenia, Spain, United Kingdom and Switzerland). The least used method in the area of monitoring is **spot urine analysis**, which was stated only by United Kingdom.

In framework of **other methods**, some countries stated their own methods for monitoring of salt reformulation in food: Italy (stated other methods without concrete specification), Hungary - monitoring is based on food allotment sheets and/or food chemistry laboratory measurements, Latvia – control carried out by Food and Veterinary Service, Poland - Household budget survey, United Kingdom - Nutrition and Diet National Survey (NDNS).

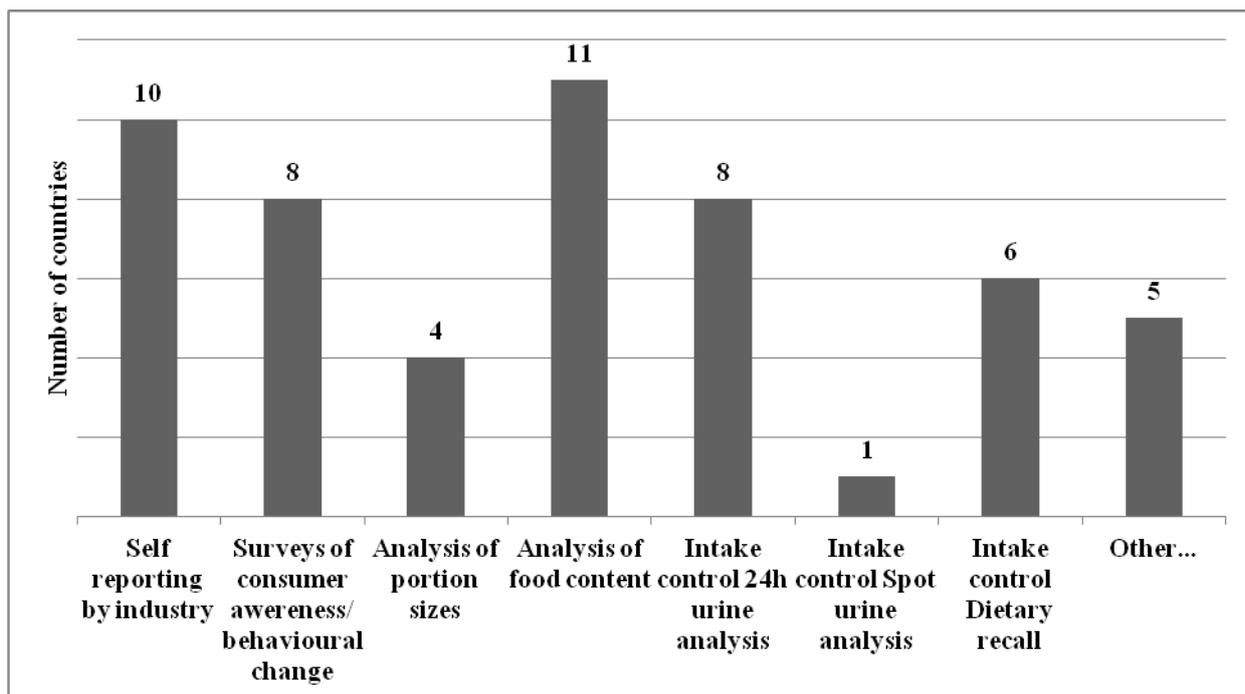


Chart 7: Ways of monitoring of food reformulation in the area of salt

1.6 Already obtained achievement in food reformulation

Achievements in the food reformulation in the area of salt were stated by 5 countries:

- Lithuania: using of logo
- Slovakia: reduction by 10 % in bread, by 35% in meals (baseline year: 2004)
- Slovenia: reduction in population intake by 5 % (baseline year: 2007)
- United Kingdom: salt intake in adults in England has been reduced by 11 % between 2005/06-2014; estimated salt intake for adults was 8 g/day in 2014. The goal is 6 g/day.
- Switzerland: maximum levels, namely 1,46 g NaCl/ 100 g of bread; reduction by 1,74 g NaCl/ 100 g of bread (2011).

2. Fats

Diets high in saturated fat are associated with an increased risk of cardiovascular diseases. Data from Member States bring to light that the current average intake levels for saturated fat are clearly exceeding WHO recommendations of less than 10 % of the energy intake, in nearly all Member States. The overall goal of initiatives focused on decrease of saturated fats intake is to contribute towards achieving population intake levels and dietary patterns in line with the national, the European Food Safety Authority (EFSA) and the World Health Organization (WHO) recommendations. According to EFSA, intake of saturated fat is recommended to be as low as possible within the context of a nutritionally adequate diet.⁶

⁶ Survey on Members States' Implementation of the EU Salt Reduction Framework:

http://ec.europa.eu/health/nutrition_physical_activity/high_level_group/inde

2.1. Product focus

20 countries (Belgium, Bulgaria, Croatia, Czech Republic, Denmark, Estonia, Finland, Hungary, Italy, Latvia, Lithuania, The Netherlands, Poland, Romania, Slovakia, Slovenia, Spain, Sweden, United Kingdom and Norway) provided information on reformulation initiative with the aim to reduce the amount of **total fat** in food. Italy, Latvia, Lithuania and Spain also mentioned food commodities involved in this reformulation initiative.

According to provided data, dairy products are the most represented food commodity – in 3 countries (Italy, Latvia, Lithuania). Other food commodities were mentioned only in 2 countries: cheese (Latvia, Lithuania), meat (Lithuania, Spain) and savoury snacks (Italy, Lithuania) (Chart 8).

Information on reformulation initiative with the aim to reduce amount of **saturated fat** was provided by **18 countries** (Belgium, Bulgaria, Croatia, Czech Republic, Denmark, Estonia, Finland, Hungary, Italy, Latvia, Lithuania, The Netherlands, Romania, Slovakia, Slovenia, Sweden, United Kingdom and Norway). Czech Republic, Lithuania and United Kingdom also mentioned the following food commodities involved in this reformulation initiative: children products, savoury snacks, confectionary, cakes and cookies, school meals, ready meals, soups, fats, oil, margarine, meat, cheese (Litva), fats, oil and margarine (Czech Republic and United Kingdom) (Chart 9).

20 countries have reformulation initiative with the aim to reduce amount of **trans fat** (Austria, Belgium, Bulgaria, Denmark, Croatia, Czech Republic, Estonia, Finland, Germany, Greece, Hungary, Italy, Latvia, Lithuania, Poland, Slovakia, Slovenia, Sweden, United Kingdom and Switzerland). According to provided data, reformulation is most frequently focused on following food commodities: cakes, cookies and confectionary (Czech Republic, Germany, Lithuania, Poland). Other food commodities included in this initiative are fats, oils, margarine and savoury snacks (Germany, Lithuania, Poland) (Chart 10).

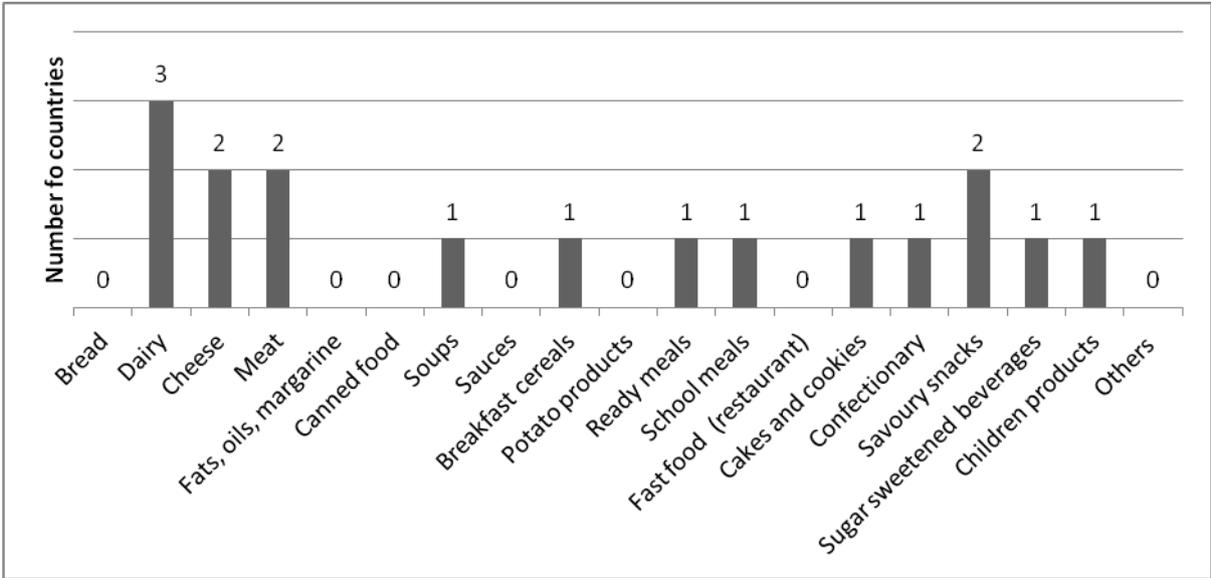


Chart 8: Food commodities, on which reformulation initiative is focused, with the aim to reduce the amount of total fat

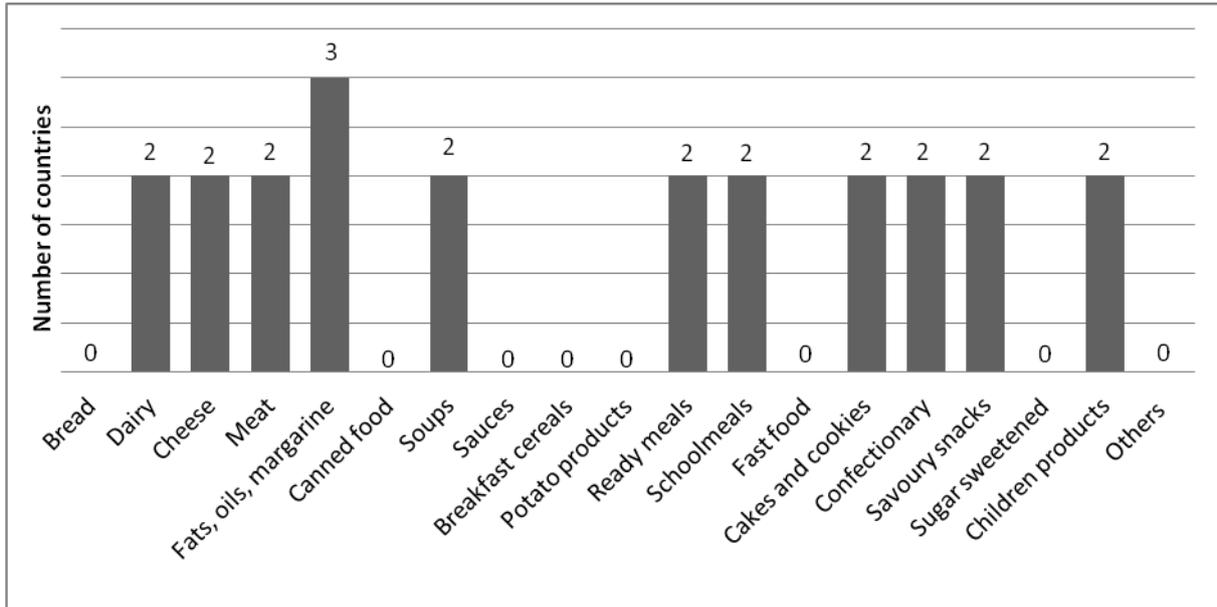
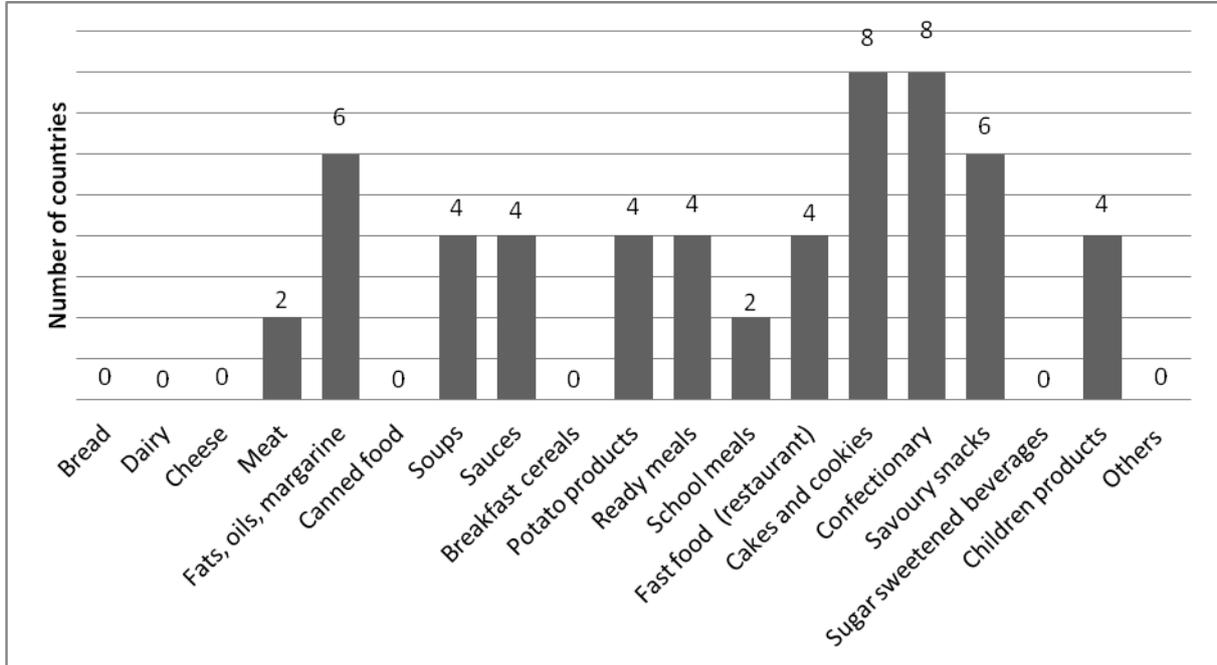


Chart 9: Food commodities, on which reformulation initiative is focused, with the aim to reduce the amount of saturated fat



Graf 10: Food commodities, on which reformulation initiative is focused, with the aim to reduce the amount of trans fat

2.2 Implementation objective

2.2.1 Maximum levels

Maximum values as a implementation tool of food reformulation in the area of **total fat** were mentioned by 3 countries (Latvia, Lithuania, Slovakia).

Maximum values as a implementation tool of food reformulation in the area of **saturated fat** were mentioned by Lithuania (without concrete specification) and United Kingdom (achieving public health recommendations to reduce saturated fat consumption to less than 11% of food energy for everyone over 5 years of age, compared to current levels of 12,7%).

Maximum values/limits as a implementation tool of food reformulation in the area of **trans fat** were stated by 6 countries from the overall number of 20 countries (Czech Republic, Hungary, Latvia, Lithuania, Poland, Slovakia. Values were stated as a daily intake from total energy value (e.g. Slovakia less than 2 % energy value) or as a maximum limit (e.g. 2 g per 100 g of total fat (Latvia)).

2.2.2 Reduction of fat

Two countries stated as a way of implementation defining the reduction of the amount of **trans fat** in selected foodstuffs: Germany (without specification of values) and Latvia (reduction by 1 June 2018 – adopted in 17 May 2016, without specification of values).

2.2.3 Logo

Logo, as a way of implementation in connection with food reformulation in the area of **total fat**, **saturated fat** was stated by Lithuania.

2.2.4 Other

Czech Republic stated own activities in food reformulation in the area of fats (namely promoting use of rapeseed oil in food as the lowest option with saturated fat content).

2.3 Policy

From 20 countries which answered individual questions from the questionnaire, 2 countries stated that in application of reformulation of **total fat** in food they use legislation (Lithuania, Spain) and 2 countries use voluntary agreement (Slovakia , Spain). Lithuania stated government initiatives and Spain stated public private partnership.

In strategy of implementation in the area of **saturated fat**, use of following policy was stated: legislation and government initiative (Lithuania). Czech Republic stated special project, cofinanced by the EU.

From 20 countries which answered individual questions from the questionnaire, 3 countries stated that in application of reformulation of **trans fat** in food they use legislation (Hungary, Latvia, Lithuania), 3 countries stated they use government initiative (Lithuania, Poland and Slovakia), 2 countries stated voluntary actions (Germany and Poland stated voluntary agreements and Latvia other voluntary action until 1 June 2018).

2.4 Date or period

3 countries stated following information on the length of duration of implementation of food reformulation with the aim to reduce amount of **total fat**: Lithuania (since 2010), Spain (since 2012) and Slovakia (since 2015).

3 countries provided following information on the length of duration of implementation of food reformulation with the aim to reduce amount of **saturated fat**: Czech Republic (since 2009 until 2014, since 2015 until 2020), Lithuania (since 2010) and United Kingdom (since 2011 until 2015).

8 countries (from the overall number of 20 countries), performing reformulation in the area of **trans fat**, provided the following information on the length of duration of implementation of food reformulation

with the aim to reduce amount of **trans fat**: Poland (2004), Lithuania (2010), United Kingdom (since 2011 until 2015), Hungary (2013), Germany (June 2015), Latvia, Czech Republic (2015), Slovakia (since 2008).

2.5 Monitoring

3 countries (Lithuania, Spain and Slovakia) stated that in the area of **total fat** reformulation they perform monitoring. **Analysis of food content** is performed in Lithuania and Spain. Dietary **intake control in the form of dietary recall** is performed in Lithuania and Slovakia and **self reporting by industry** is carried out in Spain.

Monitoring in the area of **saturated fat** reformulation was stated by 3 countries: Czech Republic (surveys of consumer awareness/ behavioural change), Lithuania (performs analysis of food content and intake control dietary recall), United Kingdom (self reporting by industry, via Nutrition and Diet and Nutrition Survey (NDNS)).

According to provided data, **trans fat** reformulation monitoring was stated in the form of:

- **self reporting by industry** in 3 countries: Czech Republic, Germany and United Kingdom
- **surveys of consumer awareness/behavioral change** - 1 country: Greece
- **analysis of food content** in 6 countries: Czech Republic, Greece, Latvia, Lithuania, Poland and Slovakia
- **dietary intake control in the form of dietary recall** in 2 countries: Lithuania and Slovakia
- Latvia stated performance of control through Food and Veterinary Service (laboratory analysis's)
- United Kingdom through Nutrition and Diet National Survey (NDNS). Chart 11.

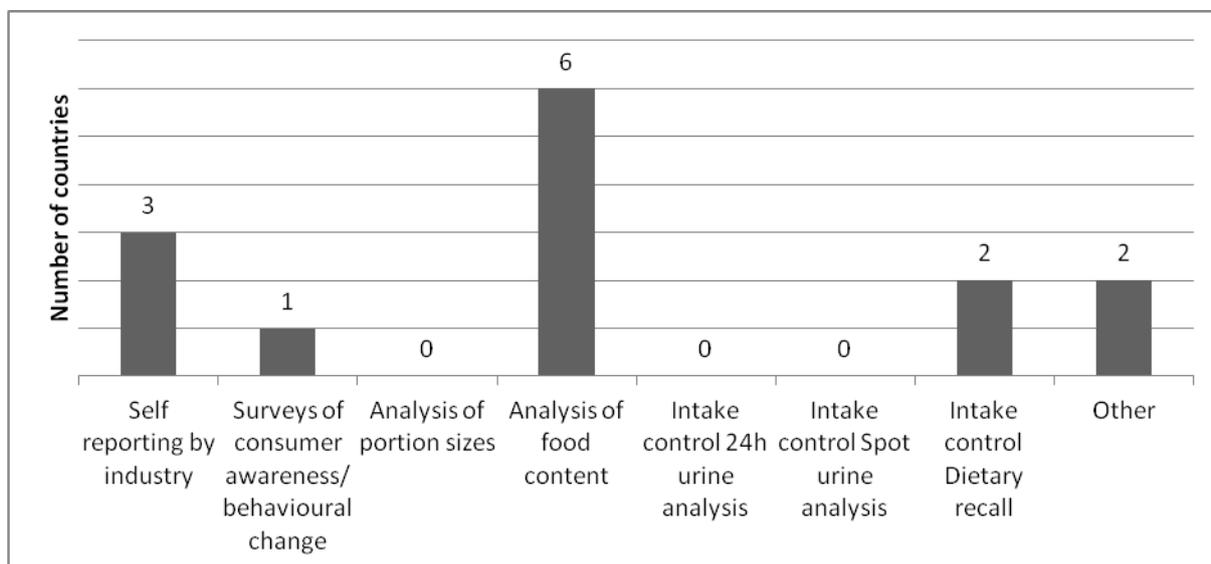


Chart 11: Ways of monitoring of trans fat reduction in food

2.6 Already obtained achievement in food reformulation

- in **total fat** Lithuania stated using of logo KeyHole
- in **saturated fat**, 3 countries stated: Czech Republic (other, image of rapeseed oil increased, use in warm cuisine becomes more popular than olive oil), Lithuania (use of logo - KeyHole), United Kingdom (current saturated fat intake in adults is higher than the recommendation at 12,6 % of daily energy intake)

- in **trans fat**, 3 countries stated: Czech Republic (labelling, namely less product containing SFA), Lithuania (use of logo KeyHole) and United Kingdom (current intake in adults is above the recommendation, at 0,6 - 0,7 % of daily energy intake).

3. Sugars

Reducing added sugars could be the most effective way of reducing energy density for some products, particularly for products with high water and low fat content.

A number of EU Member States have established recommendations for added sugars as less or not more than 10% of the total energy intake, while individual Member States recommend higher or lower maximum intakes, 15 and 5%, respectively.

WHO recommends a reduced intake of free sugars throughout the life course in order to reduce the risk of noncommunicable diseases in adults and children. It recommends an intake of free sugars in both adults and children of less than 10% of total energy intake based on moderate quality evidence from observational studies of dental caries.⁷

3.1 Product focus

15 countries (Austria, Belgium, Croatia, Czech Republic, Denmark, Estonia, Italy, Latvia, Lithuania, Poland, Slovakia, Slovenia, Sweden, United Kingdom and Switzerland) stated that they focus on food reformulation with the aim to reduce the amount of **total sugars**.

Detailed specification of food commodities in the area of **total sugars** was mentioned by 2 countries: Latvia (meals in kindergartens, hospitals and long-term social care institutions and school meals) and Lithuania (school meals, dairy, breakfast cereals, ready meals, confectionary, savoury snacks, sugar sweetened beverages, children products).

20 countries stated that they focus on food reformulation with the aim to reduce the amount of **added sugars** (Austria, Belgium, Bulgaria, Croatia, Czech Republic, Denmark, Estonia, Finland, Hungary, Italy, Latvia, Lithuania, The Netherlands, Poland, Romania, Slovenia, Sweden, United Kingdom and Norway, Switzerland), of which 4 countries concrete specified food commodities involved in food reformulation initiative: dairy (Latvia, Lithuania, and Switzerland), breakfast cereals (Lithuania and Switzerland), sugar sweetened beverages (Czech Republic and Lithuania), bread (Latvia), ready meals (Lithuania), school meals (Lithuania). United Kingdom (reformulation to reduce sugar was included under the calorie reduction pledge of the Responsibility Deal).

⁷ANNEX II: ADDED SUGARS: EU FRAMEWORK FOR NATIONAL INITIATIVES ON SELECTED NUTRIENTS:
http://ec.europa.eu/health/nutrition_physical_activity/docs/added_sugars_en.pdf

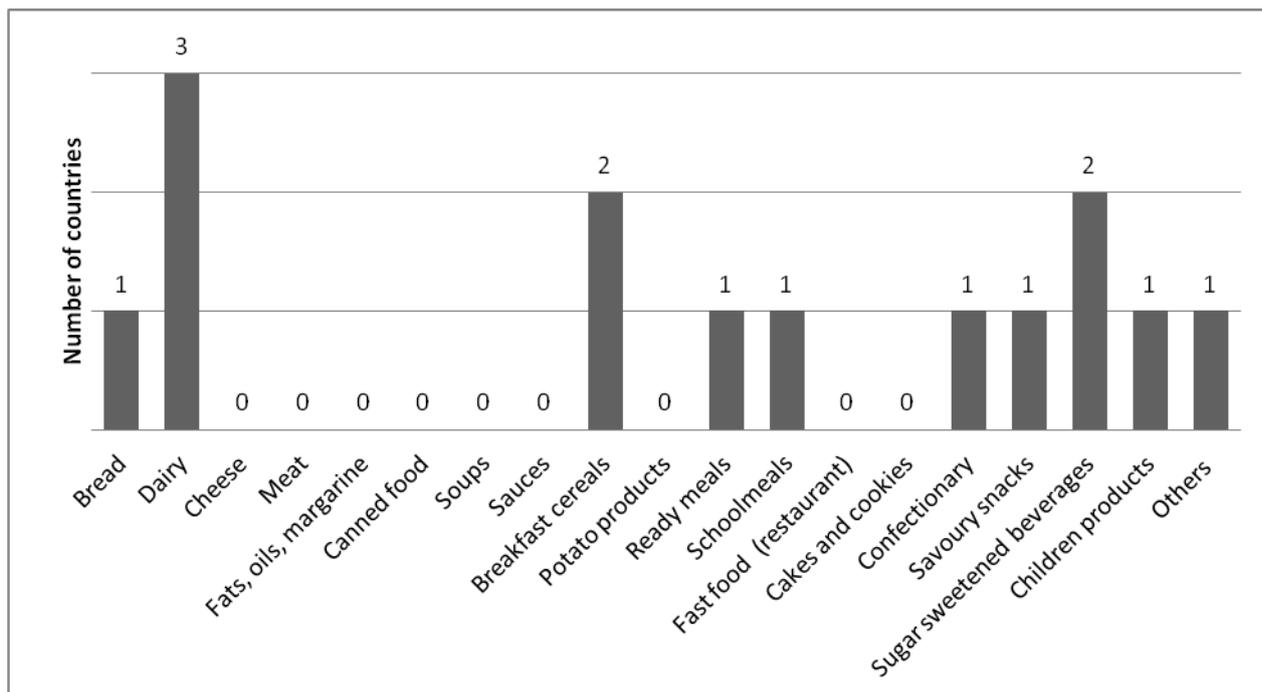


Chart 12: Food commodities, on which reformulation initiative is focused with the aim to reduce the amount of added sugars

3.2 Implementation objective

Maximum values as a implementation tool of food reformulation in the area of **total sugars** were stated by 3 countries (of the overall number 15 countries, which responded in the area of reformulation of **total sugars**) in selected food commodities (Latvia, Lithuania and Slovakia). For example, Latvia stated: school meals - sugar up to 20 g (one meal), meals at kindergartens - up to 20 g of sugar per day (3 meals), meals at long-term social care institutions - up to 20 g (for children up to 6 years) and 40 g (for children aged 6 through 18 years).

Maximum values as a implementation tool of food reformulation in the area of **added sugars** were stated by 3 countries (Czech Republic, Latvia and Lithuania). Latvia stated use of maximum limits (foods that could be distributed in school, including school cafes, vending machines: milk and dairy products up to 5 g per 100 g of added sugars, cottage cheese up to 5 g per 100 g of added sugars, crisp bread and bread up to 5 g per 100 g of added sugars). Czech Republic stated reduction by 10 % in last 4 years. Lithuania stated using of maximum limits and logo (KeyHole).

3.3 Policy

In case of **total sugars** reformulation the following policies were stated: legislation (Latvia and Lithuania) and government initiated agreement (Lithuania and Slovakia).

In case of **added sugars** reformulation, the following policies were stated: legislation (Latvia, Lithuania), government initiated agreement (Lithuania) and voluntary agreement (Czech Republic).

3.4 Date or period

2 countries provided the following information on the length of duration of implementation of food reformulation with the aim to reduce the amount of **total sugars** in food: Latvia (without concrete specification) and Lithuania (since 2010).

3 countries provided the following information on the length of duration of implementation of food reformulation with the aim to reduce the amount of **addes sugars** in food: Czech Republic (last 4 years), Lithuania (since 2010) and United Kingdom (since 2012 until 2015).

3.5 Monitoring

3 countries stated monitoring in the area of **total sugars** reformulation: Latvia, Lithuania and Slovakia. 2 countries stated as a method of monitoring analysis of food content (Latvia, Lithuania), dietary intake control (Lithuania, Slovakia). Latvia stated that it performs also other monitoring through Food and Veterinary Service.

4 countries stated monitoring in the area of **added sugars** reformulation (Czech Republic, Latvia, Lithuania, United Kingdom), self reporting by industry (United Kingdom), dietary intake control - dietary recall (Lithuania). United Kingdom stated also other monitoring (Nutrition and Diet National Survey, Kantar Worldpanel purchase data). Latvia stated monitoring of added sugars through Food and Veterinary Service.

3.6 Already obtained achievement in food reformulation

- in reformulation of **total sugars** in food, Lithuania stated use of logo (KeyHole)
- in reformulation of **added sugars** in food, Lithuania stated use of logo (KeyHole) and United Kingdom (current intake in adults is above the recommendation, at 12,1 % of daily energy intake).

4. Energy

High intake of saturated fat and in particular trans fat is among the factors increasing the risk to develop certain chronic diseases. With regard to total energy intake, excessive intake in comparison to the energy expenditure leads to high rates of overweight and obesity in Member States, which are then associated with increased risk to develop certain chronic diseases. There is evidence to support the focus of future actions on decreasing energy density because of the association of high energy density diets with increased risk of weight gain⁸.

4.1 Product focus

13 countries stated that they focus on food reformulation with the aim to reduce **energy value** of food (Belgium, Czech Republic, Denmark, Estonia, Finland, Italy, Lithuania, The Netherlands, Slovakia, Slovenia, Sweden, United Kingdom and Norway).

4 countries concrete specified food commodities involved in this reformulation initiative: sugar sweetened beverages (Slovenia), savoury snacks (Czech Republic), ready meals, school meals, children products (Lithuania). United Kingdom concrete specified that calorie reduction pledge of the Responsibility Deal included a number of different options that the food industry could adopt to reduce calories in their products. The options included reformulation to reduce sugar (e.g. in soft drinks) and reducing portion sizes (e.g. in confectionery) as well as marketing and education. (Chart 13).

⁸ EU FRAMEWORK FOR NATIONAL INITIATIVES ON SELECTED NUTRIENTS:
http://ec.europa.eu/health/nutrition_physical_activity/docs/euframework_national_nutrients_en.pdf

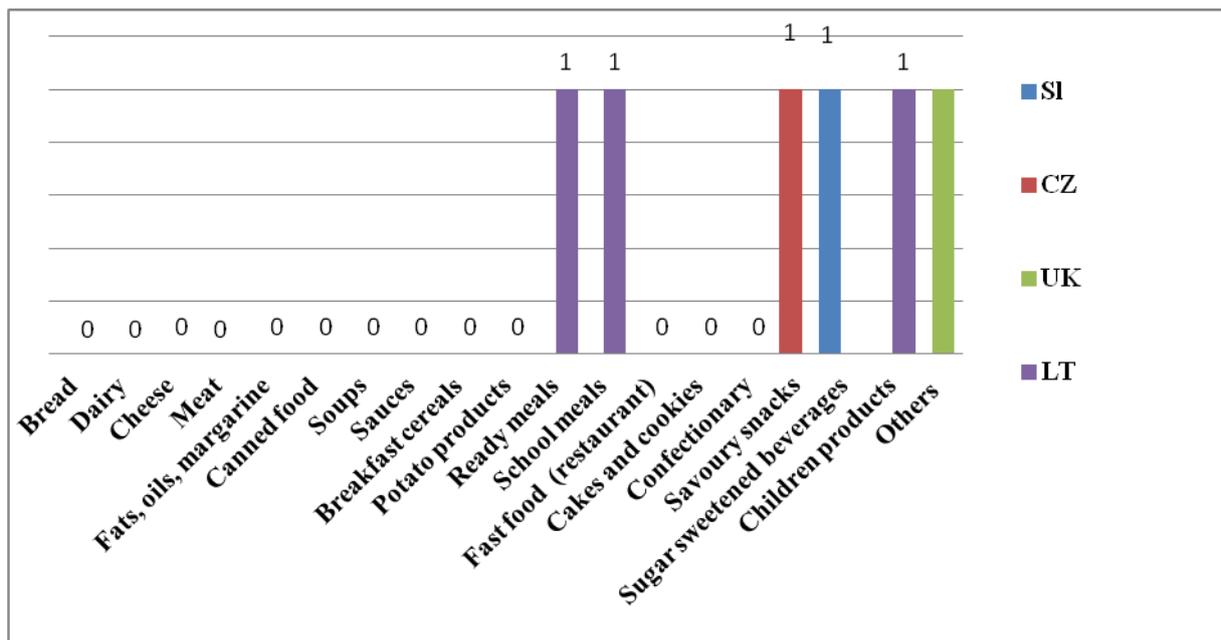


Chart 13: Food commodities, on which reformulation initiative is focused with the aim to reduce energy value of food, according to countries

4.2 Implementation objective

Maximum values as an implementation tool of food reformulation in the area of energy intake were stated by Lithuania and Slovakia (reduction by 10%). Reduction in the area of energy was stated by Slovenia (by 9 % in 4 years) and Czech Republic - reduction via reduction of added sugars in last 4 years. Lithuania stated use of logo (KeyHole).

4.3 Policy

In case of energy reformulation, the following policies were stated: voluntary agreements and government initiatives. For example: Czech Republic (voluntary agreement), Lithuania (legislation and government initiated), Slovakia (government initiated) and Slovenia (voluntary agreement, privately initiated & government endorsed).

4.4 Date or period

4 countries provided the following information on the length of duration of implementation of food with the aim to reduce **energy value** of food: Czech Republic (last 4 years), Lithuania (since 2010), Slovenia (since 2015) and United Kingdom (2012-2015).

4.5 Monitoring

5 countries stated monitoring in the area of energy reformulation:

- self reporting by industry: Slovenia, United Kingdom
- analysis of food content: Czech Republic,
- analysis of food content and intake control dietary recall: Lithuania,
- intake control dietary recall: Slovakia.

4.6 Already obtained achievement in nutrition elements

- stated by Lithuania – use of logo (KeyHole).

5. Portion size

5.1 Product focus

Reformulation in the area of **portion size** was stated by 8 countries (Austria, Belgium, Estonia, Hungary, Italy, Slovakia, Slovenia and United Kingdom). United Kingdom concretely stated: portion size reduction was included under the calorie reduction pledge of the Responsibility Deal.

(Note: In questionnaire from 2015, 15 countries stated that they deal with the topic of reformulation of portion size).

5.2 Implementation objective

United Kingdom stated voluntary portion size in single served products (e.g. confectionery, soft drink).

5.3 Date or period

United Kingdom stated that it is active in the area of reformulation of portion size (since 2012 until 2015).

5.4 Monitoring

United Kingdom stated self reporting by industry.

6. Wholegraine

Reformulation in the area of **whole grain** was stated by 9 countries (Belgium, Croatia, Denmark, Estonia, Hungary, Latvia, The Netherlands, Sweden and Norway) but without any more specific information.

(Note: In questionnaire from 2015, 13 countries stated that they deal with the topic of reformulation of whole grain).

Best practice of MSs in food reformulation

Based on data from the questionnaire completed by MSs on current status and progress in the area of food reformulation on national level of countries the most often used practices in food reformulation in the area of main factors (salt, total fat, saturated fat, trans fat, total sugar and added sugar, energy and portion sizes) were: limits (30 %), government initiatives – policy (20 %), voluntary agreement - policy (20 %), legislation – policy (17 %) and logo (13 %). (Chart 16).

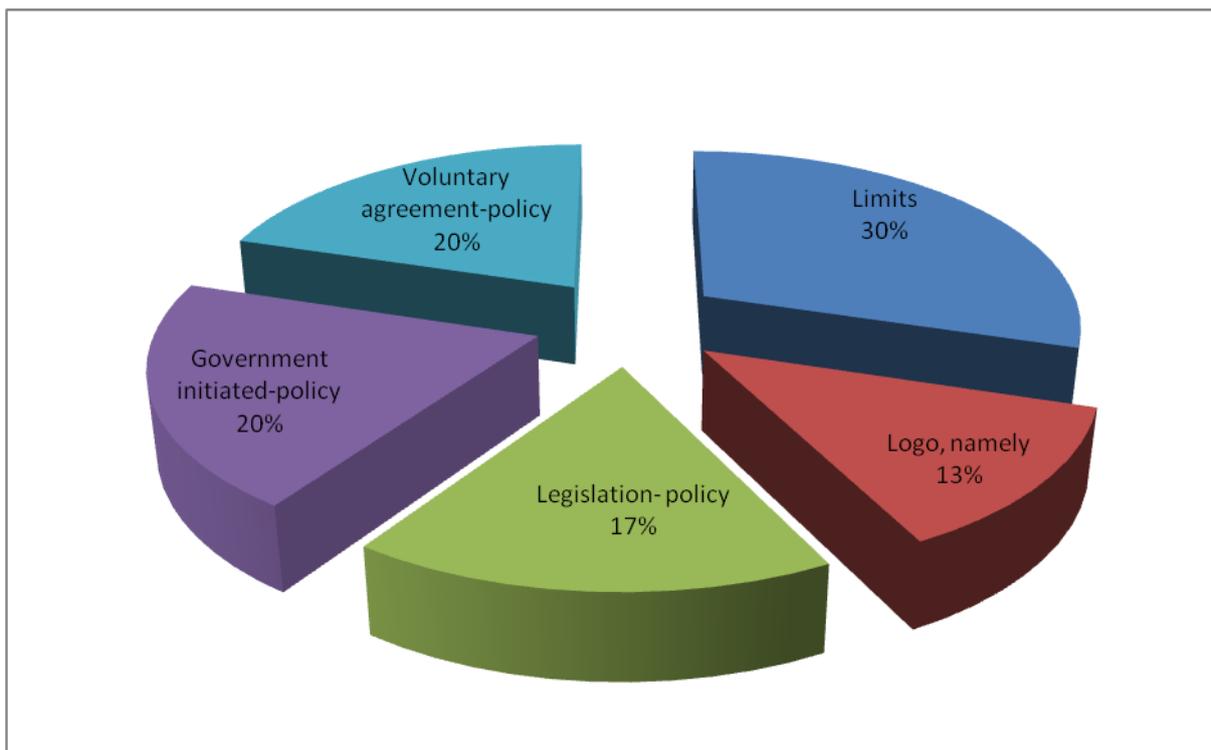


Chart 16: The way of implementation of food reformulation at the level of policy

Use of maximum limits (amounts) was stated mostly in food reformulation with the aim to reduce **salt** (based on the voluntary agreement policy, government initiated policy, legislation policy and logo) and **trans fat** (based on the legislation policy, government initiated policy and voluntary agreement policy). Significant are ongoing activities of food reformulation in the area of **added sugar** and **saturated fats**, including **trans fat** (based on the legislation, government initiated policy and voluntary agreement policy).

According to provided data on food reformulation, the most frequent changes stated by individual countries connected with food reformulation with regard to mentioned nutrients according to food commodities were the following ones: **school meals** (18 countries: salt, total sugar, added sugar, total fat, saturated fats, trans fat, energy), **savoury snacks** (16 countries: salt, total sugar, added sugar, total fats, saturated fats, trans fat, energy), **ready meals** (15 countries: salt, total sugar, added sugar, total fats, saturated fats, trans fat, energy), **bread** (14 countries: salt, added sugar) and **meat** (13 countries: salt, total fats, saturated fats and trans fat). (Chart 17).

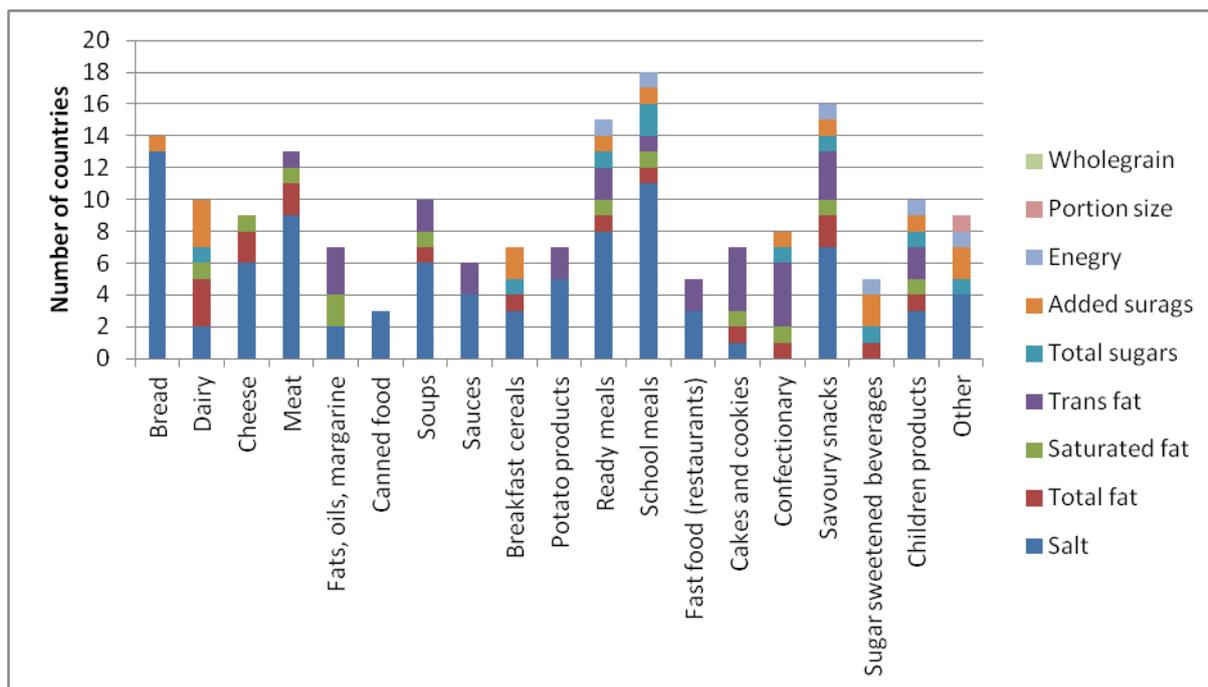


Chart 17: Comparison of reformulation activities of the countries focused on nutrients, energy value and portion size in food commodities

Based on provided data from the questionnaire, **the biggest progress** was so far obtained in the area of **reformulation initiatives of countries** in

- **reduction of salt** in food, in commodities: **bread** (13 countries), **schoolmeals** (11 countries), **meat** (9 countries), **ready meals** (8 countries)
- gradual changes in the area of **saturated fats**, in commodities: dairy, cheese, meat and of **trans fat** (in commodities: fats, oils, margarine, cakes, cookies)
- there is a focus on food reformulation in the area of **added sugar** in several food commodities (dairy, breakfast cereals, sugar sweetened beverages) (Chart 18).

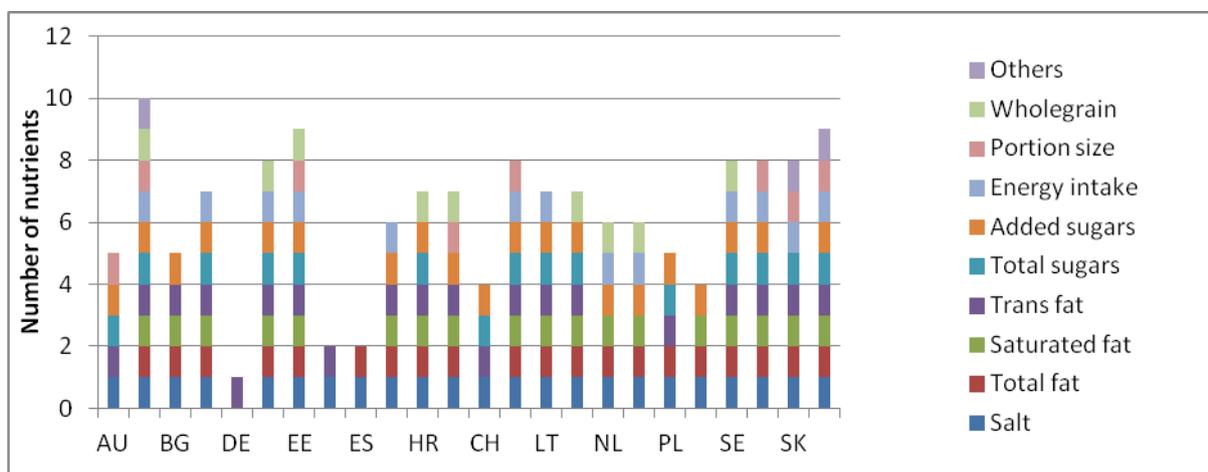


Chart 18: Comparison of reformulation activities focused on nutrients, energy value and portion size in individual countries

As a **good example of food reformulation**, we can mention **gradual reduction of salt content in food commodity bread**. 13 countries stated in the questionnaire that they focus on reduction of salt content in bread using as implementation tools the **maximum limits** (11 countries) and **logo** (5 countries) based mainly on policy of **voluntary agreement** (12 countries) and **government initiative** (9 countries).

This example confirms importance of application of different implementation tools and policies for gradual obtaining of common goals, which are currently reflected in several documents of the European Commission and MSs on national level.

Mentioned example of reformulation can be supported by the results of salt content monitoring from the source EuroFIR. (Chart 19). Average value of salt content in selected kinds of rye bread was 1049 mg/100g (min. 200 mg/100g, max. 1515 mg/kg).

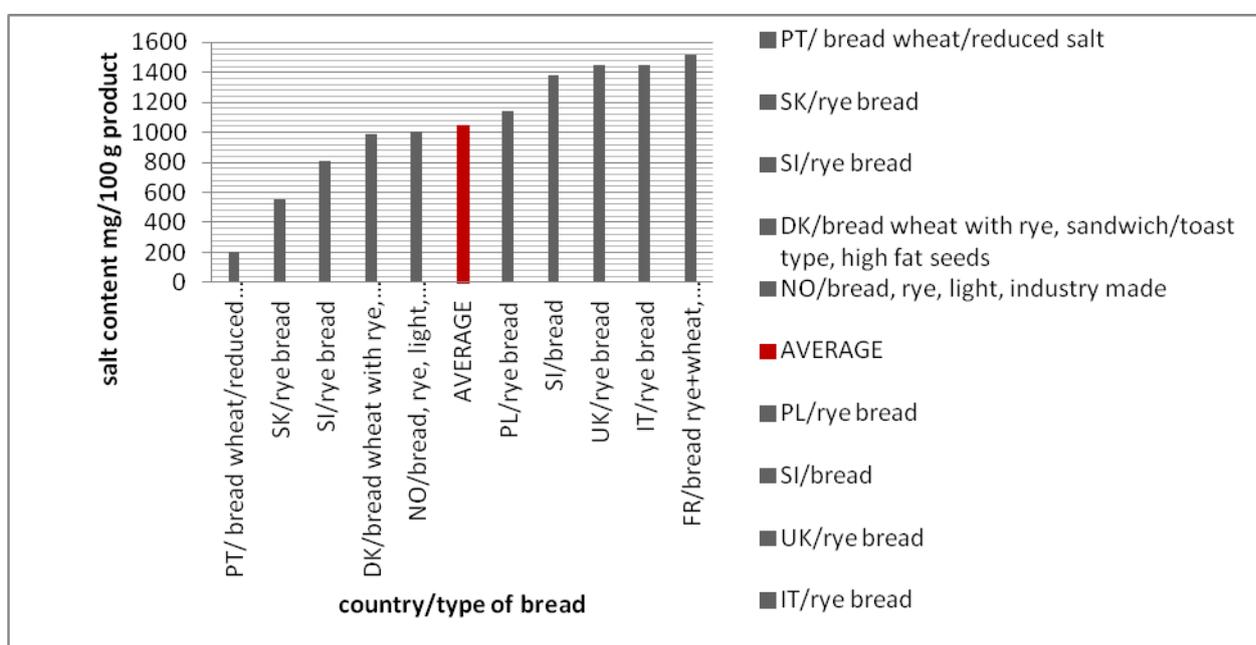


Chart 19: Salt content in bread (bread wheat with rye) in different countries

Source: EuroFIR

7.1 Best practices during implementation of reformulation

Based on data provided from the questionnaire, it is possible to summarize the best practices in food reformulation on national level in following areas:

- **national action plan**
- **agreement and cooperation with industry sector**
- **public awareness campaign, education of inhabitants, education campaign**
- **legislation policy**
- **using symbols, labels.**

7.1.1 National action plan

20 countries (Austria, Belgium, Bulgaria, Croatia, Czech Republic, Denmark, Estonia, Finland, Hungary, Italy, Latvia, The Netherlands, Lithuania, Poland, Slovakia, Slovenia, Spain, United Kingdom and Norway, Switzerland) provided information, that they have adopted plans at national level or programs on improvement of nutrition and food and they take into account both common EU goals and also specific national goals. They confirm that national plans are base for goals setting, their implementation and obtaining, they promote education and campaigns for public, media, using political, legislative and public tools, they support cooperation with industry, trade and broad public.

7.1.2 Agreement and cooperation with industry sector

Practices of MSs were expressed as follows:

- *achievement of goals in selected products after agreements with industry sectors (bread, meat products, salty snacks) on reductions of salt and fat content (Spain)*
- *producers and retailers together around the table made agreements on maximum levels. A well organised sector organisation is very helpful in coordinating activities towards all their members, small and big enterprises. (The Netherlands)*
- *in September 2015 Official commitment document of healthier foods and food offer was signed by soft drink sector in Slovenia*
- *progress has been made by the food and drink industry on overall calorie reduction, including on sugar, through a range of actions including reformulation and portion control. Significant progress in salt reduction has been made, with some manufacturers achieving reductions of up to 50% in some products. In the field of saturated fats companies have achieved up to 70% saturated fat reductions through voluntary reformulation. Trans fats have been removed from most processed products through voluntary reformulation (United Kingdom).*

7.1.3 Public awareness campaign, education of inhabitants, education campaign

Practices of MSs were expressed as follows:

- *in the framework of the campaign the public was urged to take care of their heart health and special emphasis was placed on increased cholesterol as a risk factor of cardiovascular disease. JSC "Hanzas Maiznīca" created a new product – "Sirdsmiera auzu rikas" ("Peace of Heart Oat Portion Bread"), which is the first oat bread containing enough oat beta-glucan to decrease blood cholesterol and reduced added salt content (Latvia)*
- *importance of campaigns, education of inhabitants and general and also specifically focused campaigns on education was expressed by Croatia, Denmark, Latvia, Slovakia and Slovenia.*

7.1.4 Legislation, limit

Practices of MSs were expressed as follows:

- *through updated national legislation (maximum levels of added salt) the reduction of content of added salt into the selected foodstuffs and meals (e.g. bakery products: bread and pastries; prepared meals, cooled and frozen prepared meals prepared industrially etc.) achieved. Reduction of content of salt in dehydrated soups and bouillons through the Decree of Ministry*

of Agriculture. Update and reformulation of meals in pre-school and school boarding through meal norms and recipes took place in 2015, in the area of main nutritional factors of meal portions: energy value, content of total fats, saccharides, added sugar, fibre, selected vitamins (e.g. vitamin C) and mineral substances; expert basis for nutritional reformulation of meals were Recommended nutritional doses for inhabitants of the Slovak Republic from the year 2015 (Slovakia)

- in 2016 the government approved the regulation on the maximum permissible content of trans fatty acids in foodstuffs with the main aim to improve the dietary habits and public health indicators of the Latvian population. Foodstuffs with trans fatty acids exceeding the maximum permissible limits will be permitted on the Latvian market until 1 June 2018. There are certain food producers starting to reduce trans fatty acids content in food products in Latvia (Latvia).

7.1.5 Using symbols, labels

Practices of MSs were expressed as follows:

- symbol of healthier food Keyhole. The Keyhole has had a positive influence on product development although far from all products are Keyhole labelled. The Keyhole's 25 years may be said to have contributed to developments towards nutritious, healthy foods by functioning alongside the Nordic nutrition recommendations as both benchmark and guide in the product development process. In step with the increase of flow of information, and coupled with increased individuality as to whom one listens to and is influenced by, the Keyhole has been subject to increased competition, leading to erosion of its significance and relevance (Sweden)
- warning labels for highly salted products (Finland).

7.2 The gaps during implementation of reformulation

As gaps during food reformulation, in questionnaire there were stated:

7.2.1 Cooperation with food industry

- weak industry response and a public awareness (Slovenia)
- rather low interest of the catering companies in salt reduction in the meals was observed (Poland)
- problems for SMEs in implementing reformulation activities, especially because of the costs (Romania)
- cooperation with food producers is more difficult – when it is based only on voluntary basis (Slovakia)
- it is needed to continue work in close cooperation with the Ministry of Agriculture and food producers to develop even more new and improved food products with the reduced fats, added sugar and salt content (Latvia).

7.2.2 Technological difficulties - causes

- some branches of food industry (e.g. meat industry, bakery industry) have some technological difficulties with reducing salt content (Poland)
- some businesses may have already been working on reformulation prior to the establishment of the RD and therefore they have achieved different levels of progress. This may lead to

difficulties in evaluating the direct impact of the RD as an overall policy to improve public health (United Kingdom)

- *regarding salt reduction, producers are limited in communication in case of reformulation. Claiming “Less salt” is only possible, when the content is reduced by 25 %, what is hardly achievable due to technological/taste reasons (Czech Republic)*
- *some food sectors have limitations to diminish the level of added sugars and fats reformulation because their products are fats or sugars in majority. Some food operators have limitations to define numeric goals of diminution for fats and sugars, for example the restaurants sector (Belgium).*

7.2.3 Resistance - causes

- *resistance of members of Chamber of economy (Croatia)*
- *some resistance of food producers and some ministries (Agriculture, Economy, Finances)(Lithuania).*

7.2.4 Conflict of interest between the economical and public health aspects (Switzerland)

7.2.5 Increase an availability of healthier options - causes

- *lack of national system for easier selection of healthier foods (Slovenia).*

7.2.6 Lack of resources (financial, personnel) - causes

- *the main challenges for the implementation of national reformulation initiatives in Greece include the lack of resources, both financial and in terms of personnel. A shrinking public sector due to the economic crisis imposed huge challenges to those who develop policies and monitor actions. In addition, food business operators are worried about consumer acceptance and hence sales, as well as any technological obstacles may face when reformulating food products. There are often concerns regarding the availability of cheap alternatives/technologies, in order to avoid cost increases for the production of reformulated foods (Greece).*

7.2.7 Monitoring - causes

- *the monitoring process has been one of the criticisms of the RD, due to the fact there is no harmonised reporting method across the various food related pledges, and monitoring is based on industry self-reporting on an annual basis (United Kingdom).*

7.2.8 Consumer’s unwillingness - causes

- *in basic foodstuffs, more attractive for consumer is still foodstuff with higher content of salt, added sugar and fats (mainly of hidden forms e.g.: in durable and soft meat products). In spite of education of inhabitants about correct nutritional habits, content of foodstuffs etc., there are only slow changes in foodstuffs preferences; economical situation of families plays a role (Slovakia)*
- *consumer does not understand details, how the certain fatty acids are influencing the health (Czech Republic).*

7.3 Challenges to the future

Proposals for change in the future for obtaining of the progress:

- **step by step approach in the dialog with food industry**

- **improve the collaboration of food industry** (Italy)
- **close cooperation of all sectors** (governmental and also private)
- **focus on monitoring program** (harmonising reporting method)
- **monitor the action at national and local level** (Italy)
- *It is challenging to bridge the gap between frontrunners and the companies that are on the other end of the range. Companies favour a fair situation, so every product group has to do its part, on the other hand, especially for supermarkets it is a huge challenge to deal with all product groups at the same time* (The Netherlands)
- **challenging salt reduction targets**
Challenging salt reduction targets were published in 2014 and major businesses are working to meet these targets by December 2017 (United Kingdom)
- **campaign**
Plan to make public health awareness campaigns about importance of healthy diet and as well to implement activities in order to make the healthy choice the easiest choice (Latvia)
- **limits**
As one of the possibilities of promotion of reaching of progress in food reformulation we consider creation of recommended limits for basic categories of foodstuffs having the biggest burden of fats, added sugars and salt on common EU basis with the possibility of maintaining of quality characteristics. In further development, we think, it is important to support setting out the limit for trans-fatty acids in the area of hydrogenated fats and oils on common EU basis. (Slovakia)
The need of clear European legal requirements to stimulate foods reformulation from industry (Bulgaria).

Summary

So far, MSs applied different policies in the area of reformulation of risks in different food categories, which were reflected in national documents supported by governments with regard to their risk, sources and regulation. In cooperation between governments and food producers, policies include initiatives on reduction of energy, salt, saturated fats, trans fats, total and added sugars and portion size.

Based on provided data from the questionnaire

- 23 countries stated participation in reformulation of **salt** in food
- 20 countries stated participation in reformulation of **trans fat** in food
- 20 countries stated participation in reformulation of **total fat** in food
- 18 countries stated participation in reformulation of **saturated fat** in food
- 20 countries stated participation in reformulation of **added sugar** in food

- 13 countries stated participation in reformulation of **energy** in food
- 9 countries stated participation in reformulation of **portion size** and **wholegrain** in food (Note: all answers were included - also those without stated limit).

Mutually functioning initiatives of MSs creates spectrum of activities for obtaining of goals in food reformulation. In many MSs the dominant emphasis is put on risk factors, such as salt, trans-fatty acids, etc. Activities of food producers in the area of product improvement are increasing.

Open issue is strengthening of activities for approximation of consistent and measurable levels of risk factors (salt, saturated fat, added sugar) and their representation in main foodstuffs or food commodities and in portion size. In this respect activities in the framework of mutual projects are important, such as e.g. JANPA, which can contribute to setting of further steps in reformulation. It is important to promote and develop proved practices and examples on how to best advance in obtaining of reduction of intake of risk factors in nutrition. It is necessary to support activities on obtaining further information on how reformulated product will influence intake of risk factor, whether it is sufficiently supported by other policies, e.g. by labelling, nutrition standards, nutrition and health claims about foodstuffs, composition, etc.

Above mentioned requires to continue in begun activities Strategy of reformulation - with the aim of creating of healthier nutrition it was included into several documents, e.g.: EU Framework for National initiatives on salt from 2008, EU Framework for national initiatives on selected nutrients from 2011, which puts a basis for another formulation of criteria on energy, fats, saturated fats, added sugar, portions size, consumption frequency. EU Framework created a basis of common approach and promotion of national plans. It outlined key elements for promotion and development of actions in questions of reformulation together with producers, it created EU Framework for national initiatives for selected nutrients – Enclosure I: Saturated fats and Enclosure II: added sugars.

Best practices from MSs summarized by the Slovakia during the Presidency through the „trio questionnaire“ will contribute to building of possibilities for strengthening of goals of food reformulation in EU countries towards gradual impact on nutrition factors - energy, fats, saturated fats, including trans fat, added sugar and salt and towards obtaining the healthier and balanced nutrition. This requires strong mutual support and cooperation between the MSs and also with all concerned subjects such as industry and consumer.

Best experiences, obstacles and changes for the future stated by the MSs in the questionnaire are summarized in Table 1.

Table 1

The Best practices	The gaps	Challenges for the future
national action plan	cooperation with industry	step-bystep approach in the dialog with food industry
agreement and cooperation with industry sector	technological difficulties	improve the collaboration of food industry
public awareness campaign, education of inhabitants, education campaign	lack of resources	close cooperation of all sectors
legislation policy	conflict of interest between the economical and public health aspects	focus on monitoring program
using symbols, labels	increase an availability of healthier options	monitor the action at national and local level
	lack of resources (financial, personnel)	
	monitoring	
	consumer's unwillingness	

Data provided by MSs, Norway and Switzerland in framework of „trio questionnaire“ were summarized by the Slovakia as part of activities during the Presidency into the following points:

- For the creation of a political base on national level of MS it is needed to further promote and develop national action plans, which provide a technical framework for developing of a national action and endorse major policy guidelines which should underlie national and international policies, strategies and activities to improve nutrition.
- Cooperation with the industry on common EU level (between High Level Group on Nutrition and Physical Activity – MSs - EU Platform) and national level of MSs is perceived as primary, it brings broader possibilities and more flexible way for gradual step- by-step achieving the goals in food reformulation.

- Continuation in strengthening and participation in cooperation of all main players, sectors both on national and also on common EU level will enable better unification of goals and achieving the results.
- Education of a broad public and children in schools, campaigns for strengthening and increase of knowledges on nutrition composition of foodstuffs, and by that the progress in framework of “healthy choice is easy choice” for the consumer.
- Promotion of nutritional labelling of foodstuffs through the common logo, symbols for visualization, approximation and simplification of understanding of the significance of nutritional composition of foodstuffs. At the same time, it brings further stimulation for improvement of composition of foodstuffs.
- Strengthening of activities on approximation of consistent and measurable levels of risk factors (salt, saturated fat, added sugar) and their representation in main foodstuffs or in food commodities and in portion size with the support of common guidebooks, recommendations etc.
- Continuation in strengthening of technological development in food production and effort to improve their nutritional composition.
- Unification of monitoring, harmonisation of methods both on national levels and common EU level for monitoring of development of nutritional composition of foodstuffs, their impact on nutrition and impact on the public health.
- Continuation in activities for strengthening of science and research in the area of impact of nutrition, and foodstuffs, on development of health status of inhabitants, further development of chronic noncommunicable diseases, based on good practice of EFSA, WHO and JRC and the EU.
- Continue in initiatives of High Level Group on creation of discussions and a base for monitoring of development and exchange of best practices in the area of food reformulation with regard to energy, fats, saturated fats, including trans fat, added sugar, salt and portion size.

List of used abbreviations

Austria	AT
Belgium	BE
Bulgaria	BG
Czech Republic	CZ
Germany	DE
Denmark	DK
Estonia	EE
Greece	EL
Spain	ES
Finland	FI
France	FR
Croatia	HR
Hungary	HU
Switzerland	CH
Italy	IT
Lithuania	LT
Latvia	LV
The Netherlands	NL
Norway	NO
Poland	PL
Portugal	PT
Romania	RO
Sweden	SE
Slovenia	SI
Slovakia	SK
United Kingdom	UK