



**DG SANCO**  
**Luxembourg, November 2010**

**Current Implementation status of the  
Strategy for Europe on Nutrition, Overweight and Obesity related  
health issues**



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Annex 1. EC areas/indicators linked with the actions/questions of the two country reporting templates

## Methodology

A three-year collaborative project between the Directorate-General for Health and Consumers (DG SANCO) of the European Commission (EC) and the World Health Organization (WHO) Regional Office for Europe was established to monitor progress in improving nutrition and physical activity and preventing obesity in the EU. The EC/WHO monitoring project's objectives are to evaluate the stage of policy development and the actions carried out by EU Member States (MS) to implement policies with regard to key commitments contained in the three main European policy documents in the indicated areas: the 2006 European Charter on Counteracting Obesity, the 2007 EC White Paper entitled "A strategy for Europe on nutrition, overweight and obesity related health issues" and the WHO European Action Plan for Food and Nutrition Policy 2007-2012.

A network of National Information Focal Points from the 27 EU countries was set up to map national information sources and collect information throughout the duration of the project. Various ways were used to collate this information.

Firstly, the Focal Points were asked to complete two country reporting templates. The first one covered the mapping of national policy documents on nutrition, physical activity and obesity and of sources on nutritional status, dietary habits and physical activity patterns. The second template covered the mapping of information on existing public health programmes, projects, and initiatives designed to improve nutrition and physical activity or prevent obesity of the general population. In addition, both templates were used to gather information on the level of implementation of activities, programmes and strategies by national governments to improve nutrition and physical activity and tackle overweight and obesity. The list of activities was derived from the six key action areas that are addressed in the WHO European Action Plan for Food and Nutrition Policy 2007-2012. The level of their implementation could be scored as "1. Not existing or not clearly stated in any policy document, and not planned within 2 years", "2. Clearly stated & partly implemented or enforced" or "3. Clearly stated & entirely implemented and enforced". The scoring done by the Focal Points was validated by bilateral teleconferences.

Secondly, documents on the outcomes of these mapping exercises were prepared and Focal Points were asked to provide comments and validate the included information. In particular three EU MS related documents were relevant for the current report and concerned a review of food and nutrition policy development and legislation, an overview of implementation of statutory and self-regulatory codes in the area of marketing foods and beverages to children and a review of policy developments and legislation regarding physical activity promotion. All Focal Points provided feedback and added information on sources of surveillance data, policy development and policy implementation that had become available after completion of the templates.

The current document reports on the implementation status of seven general areas of action that reflect the issues covered in the White Paper on a Strategy for Europe on Nutrition, Overweight and Obesity related health issues. For this purpose sixteen indicators were chosen to assess the current situation of each EU Member State for each of them. The indicators aim to address the following:

### **Better informed consumers**

1a – Existence of legislation or voluntary initiatives requiring nutritional labelling of foods, including signposting labelling initiatives, with nutritional information such as ingredients and the corresponding energy.

1b – Existence of legislation or voluntary initiatives on the marketing of unhealthy food and non-alcoholic beverages to children.

1c – Existence of information and education campaigns promoting healthy eating and raising awareness among the population.

### **Making the healthy option available**

2a - Existence of measures affecting food prices such as taxes on soft drinks, chocolate and confectionary and/or incentives on fruits and vegetables.

2b – Existence of initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar.

2c – Existence of initiatives to reduce salt content of processed food, in line with the EU target of 16% reduction by 2013.

## **Encouraging Physical activity**

3a – Existence of initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity, cycling and walking, for example through Healthy Urban Planning.

3b - Provision of guidelines for physical activity and existence of education campaigns raising awareness among the population.

## **Priority groups and settings**

4a - Mandatory inclusion of nutrition education in the curriculum of primary and secondary schools pupils.

4b - Mandatory inclusion of physical education in the curriculum of primary and secondary school pupils.

4c - Provision of free or subsidised school meals and availability of healthy food.

4d – Existence of initiatives to provide healthy food and facilities for physical activity at the work place.

4e - Role of health and education professionals: availability of nutrition and physical activity counselling in primary health care, and existence of training in the promotion of healthy nutrition and physical activity for teachers and health professionals.

## **Developing monitoring system**

5 – Existence of measures to strengthen monitoring and evaluation in the areas of nutrition and physical activity.

## **Engaging private sector**

6 – Existence of initiatives engaging commitment from commercial stakeholders

## **Policy coherence at local level**

7 – Promoting and supporting community based interventions

The information provided through the project's two country reporting templates on the level of implementation of activities, programmes and strategies by national governments and the feedback received on the three project's reports constituted the basis for the information included in this report. Annex 1 lists for each of the 16 indicators the corresponding actions as were mentioned on the project's templates.

Based on the information provided through the EC/WHO project (country reporting templates), the European Commission composed a table containing colour coding illustrating the level of implementation with regards to the White Paper on Nutrition, Overweight and obesity related health issues. Therefore, the emphasis relies on each area's progress rather than on individual states.

Within this coding system, the action areas of the White Paper will be differentiated according to their belonging categories of red, yellow and green in order to visualize the current situation within the EU and determine which areas are in highest need of progress.

The choice of colour is based on the following:

**Red**- No action has been taken in the area or no information was provided.

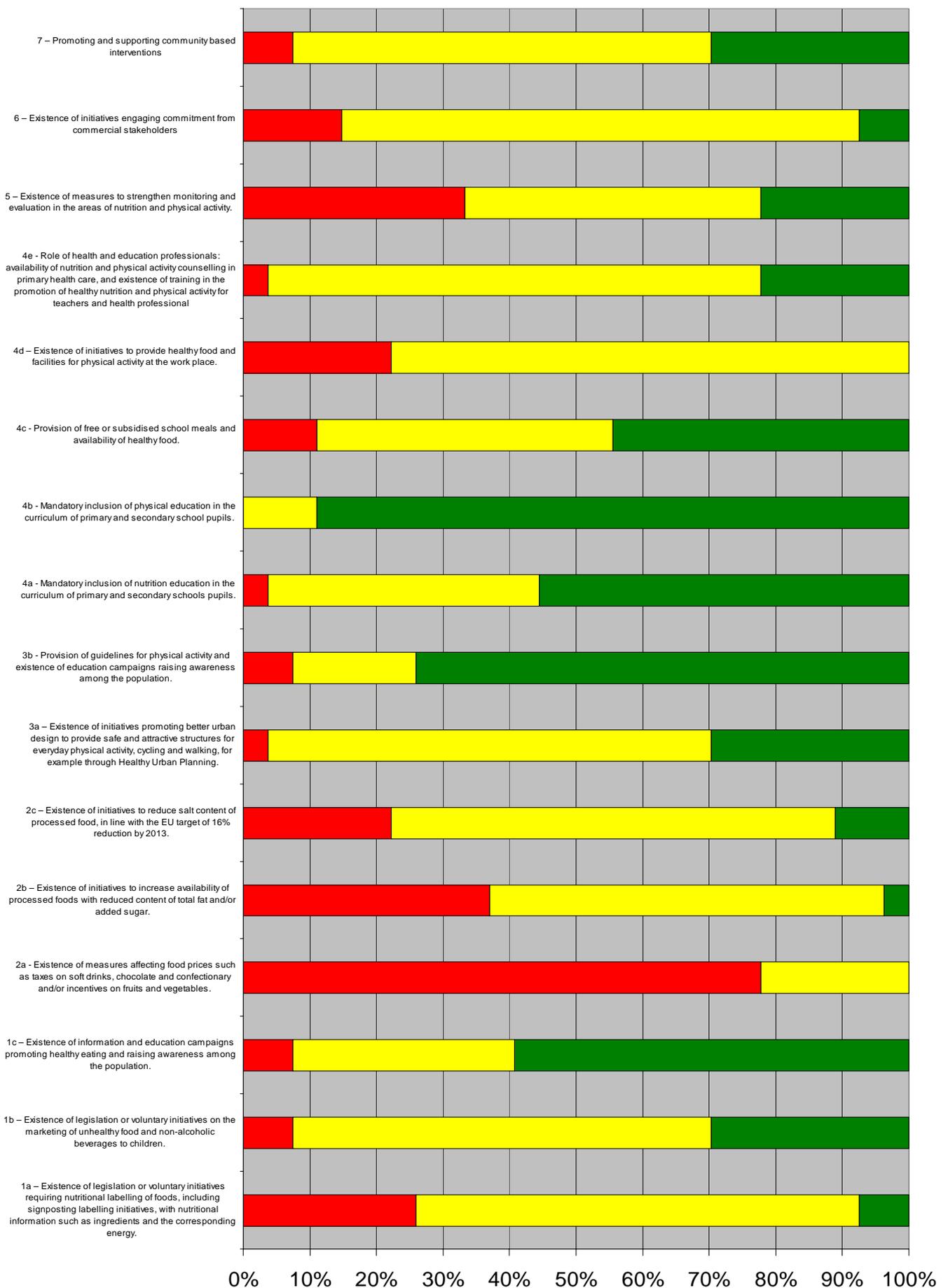
**Yellow**- There are developments in the area, but a national legislation is not adopted or implemented yet / There have been some debates or small scale initiatives during the past years, but not yet at appropriate national scale.

**Green** – A legislation or initiative is put into place and fully implemented at a national scale.

It must be bear in mind that this document represents a snapshot of the implementation levels in 2010 rather than a presentation of the progress up to 2010. However, by analysing the different indicators selected for this Report, a clear frame is provided to assess the implementation of the White Paper all over the European Union.

A possible limitation may be the lack of data provided by the different MS, eventually leading to an incomplete representation of policy implementation levels. Therefore, it has to be noted that this document only represents the currently available information.

## Strategy implementation status



## Austria (AT)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

Signposting on food products, which provides brief information on labels about nutritional content of foods such as traffic light schemes, is done via voluntary actions by food industry ("GDA-labelling").

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

In the first "Austrian Obesity Report, basis for action: Children, young people and adults", published in August 2006, measures are mentioned regarding marketing and advertising by working with the private sector.

Based on the national implementation of the EU-Media-directive 2007/65/EU at the end of 2009, the Austrian government and the national TV-enterprises reached an agreement on a "Code of Conduct" concerning child-targeted marketing of foods ([www.werberat.at/layout/HFSS%20Kodex%20%20Kindersendungen.pdf](http://www.werberat.at/layout/HFSS%20Kodex%20%20Kindersendungen.pdf)). This self-regulatory mechanism is in place since February 2010.

#### 1c - Information and education campaigns

A "Nutrition Hotline" was put in place, offering nationwide nutrition counselling via telephone and internet, free-of-charge. An internet platform for nutrition and physical activity has been implemented. Another promotion campaign aimed at increasing fruit and vegetable consumption ("Obst und Gemüse 5x am Tag"). Austria has also started "Fit fur Osterreich", a nation-wide programme to promote health-enhancing physical activity offered in sport-clubs.

### **Making the healthy option available**

#### 2a - Existence of measures affecting food prices

No measures are reported.

2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar

No initiatives are indicated.

2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)

Being a member of the EU Framework on salt reduction, Austria has initiated actions to reduce the salt content of processed foods. To this end, a monitoring mechanism has been set up to determine the types of foods that contain a lot of salt and a dialogue with the food sector on reducing salt in bread, meat product and ready-to-eat meals has been established. Austria indicates to work with mandatory iodization of salt.

**Encouraging Physical activity**

3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity

A programme to increase traffic safety for pedestrians and cyclists has been entirely enforced at national level. Austria undertakes action in the field of expanding pedestrian zones, cycle and walking lanes. No action is reported regarding the expansion of green spaces and play areas in urban areas have not been addressed. When it comes to the promotion of better urban design, the responsibility lies with local municipalities and no specific action is reported in this regard.

3b - Provision of guidelines for physical activity / education campaigns

Austria has developed and implemented guidelines for physical activity. They were issued by the Ministry of Sport and they are promoted at population level through the following website: <http://www.fitfueroesterreich.at>.

## **Priority groups and settings**

### **4a - Mandatory inclusion of nutrition education in schools**

Nutrition education in primary and secondary schools is mandatory in Austria.

### **4b - Mandatory inclusion of physical education in schools**

Physical education in primary and secondary schools is mandatory in Austria.

### **4c - Provision of free or subsidized school meals / promotion of healthy food**

Removing energy dense nutrient poor foods and beverages in school vending machines has been partly implemented at national level, excluding private-run schools for the moment.

### **4d - Promoting the provision of healthy food and facilities for physical activity at the workplace**

A programme ensuring provision of healthy food at the workplace has been developed and partly implemented. Actions to provide facilities for physical activity at the workplace are taken but not fully implemented. For both areas actions mainly take place at the local level.

### **4e - Role of health and education professionals**

Efforts have been made to provide school teachers with a training in promoting healthy nutrition, and it is also included in the curriculum of health professionals training.

## **Developing monitoring system**

### **5 - Strengthening monitoring and evaluation**

No specific information is given about monitoring and evaluation with regards to their national overarching programme. Nonetheless, monitoring of specific activities, such as the action on salt, is ongoing.

## **Engaging private sector**

### **6 – Engaging commitment from commercial stakeholders**

Austria reported to have three public-private partnerships in place Austria stated that they had six voluntary actions ongoing, such as the promotion of physical activity among children through football competition with Danone.

## **Policy coherence at local level**

### **7 – Promoting and supporting community based interventions**

An example of the numerous local activities is “Healthy City Network”, which is part of the WHO Healthy Cities project. It began in 2001 as a pilot project in one Viennese district, with the aim of creating a health-promoting environment. Local health networks actually use existing resources in the health and social sectors and provide people with information and education. In 2009, 32 cities were participating to this network.

## Belgium (BE)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

Signposting on food products has been put in place as a voluntary system that provides the possibility to refer to specific nutritional objectives of the National Food and Health Plan.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

Regulations on marketing of unhealthy food and drinks to children have been partly implemented with regards to the White Paper elaborated within the framework of the National Food and Health Plan ([www.mijnvoedingsplan.be](http://www.mijnvoedingsplan.be)).

The National Nutrition and Health Plan was launched in April 2006, covering the period 2006–2010. It was mentioned that advertising should be in line with the principles of the Plan, and the ethical code of conduct for marketing, developed by the food industry, would be thoroughly and objectively evaluated. As 2010 is the final year of implementation for the National Nutrition and Health Plan, the Belgian Government will review the activities that have been undertaken with regards to the principles outlined in the Plan and the implementation of the ethical code.

In 2008, the Flemish Government and Parliament approved a code of conduct for advertising on television and radio directed to children. It was decided that advertising should be clearly directed to certain age groups (minus 12 and minus 16 years old). The promotion of an excessive use of food products with a high content of fat, sugars or salt is not allowed. The Flemish regulator for Media will monitor the compliance to the code and handle eventual complaints.

Belgium is also a member of the European MS Action Network on reducing marketing pressure to children.

### 1c - Information and education campaigns

As part of the National Nutrition and Health Plan (2006-2010), an education campaign was developed promoting healthy eating habits and physical activity tailored to different age groups, through internet and television.

### **Making the healthy option available**

#### 2a - Existence of measures affecting food prices

No measures are reported.

#### 2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar

A working group on energy reduction was created within the framework of the National Food and Health Plan (2006-2010), but implementation results with regards to the recommendations of this working group have not been documented.

#### 2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)

A taskforce was established in 2007 within the framework of the National Food and Health Plan (2006-2010). All voluntary commitments have been evaluated in March 2009, but stronger commitments are needed to reach the 10% reduction of salt intake. The Belgian Government requested a study from the Scientific Institute of Public Health and the University of Ghent, which will look at data from the Food Consumption survey analysing specific salt intake from different food products. This will allow the Belgium Government to proceed with an impact analysis which will lead up to a more detailed engagement with regards to specific food products in 2012. Currently, the focus has been on raising awareness on salt intake at population level and an independent organisation has been controlling the efforts made by the food industry concerning the labelling of salt in food products.

Belgium is also a member of the European MS Action Network on reducing salt intake in the population (ESAN-European Salt Action Network).

## **Encouraging Physical activity**

### **3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity**

The Belgian Institute for Traffic Safety will enforce an action plan at all governmental levels to improve traffic safety ([www.bivv.be](http://www.bivv.be), [www.jesuispour.be](http://www.jesuispour.be)).

Action on the expansion of cycle and walking lanes is only reported to be undertaken in the Flemish community ([www.mobielvlaanderen.be](http://www.mobielvlaanderen.be)). No action is reported on the expansion of pedestrian zones, green spaces and play areas in the cities.

### **3b - Provision of guidelines for physical activity / education campaigns**

Guidelines for physical activity have been developed and are part of the Flemish Action Plan that promotes healthy exercise (as well as diet) by targeting the local community. The action plan "Sport for all" was implemented from 2007 to 2009 to promote physical activity among the whole population and improve sport facilities.

In the French community, a policy for the promotion of healthy nutritional habits and physical activity aimed at children and adolescents was adopted in 2005 ([www.mangerbouger.be](http://www.mangerbouger.be)).

Similarly, efforts have been carried out within the German-speaking community to promote healthy nutrition and physical activity.

A cycling action plan was adopted in 2005 on a national level, promoting cycling as a physical activity.

## **Priority groups and settings**

### **4a - Mandatory inclusion of nutrition education in schools**

In Belgium, each regional government is responsible for education. For this reason, the inclusion of nutrition education in school curriculum is dealt with by the regional authorities (Flanders, the French-speaking and German-speaking community). However the jurisdiction of nutrition education is also part of the mandate of the School Governing Bodies. Therefore, while nutrition education is not mandatory in schools at regional level, it still depends on the decision of the School Governing Bodies.

#### 4b - Mandatory inclusion of physical education in schools

Physical education is mandatory in schools from the different regions of Belgium.

#### 4c - Provision of free or subsidized school meals

The provision of free or subsidized fruit and vegetables, as well as a ban on unhealthy food in vending machines at school are only partially enforced, and dealt with at local level. A small scale project was also initiated at Flemish level regarding health school vending machines.

#### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

In Flanders, promotion of physical activity and healthy eating at the workplace is planned as part of the Flemish Action Plan for the period 2008 to 2015. The Flemish Institute for Health Promotion and Disease Prevention (VIGEZ) develops methods and materials to encourage this kind of actions in specific settings such as the work place.

#### 4e - Role of health and education professionals

The training of school teachers in promoting healthy nutrition and physical activity is not implemented at national level. The Flemish Institute for Health Promotion and Disease Prevention (VIGEZ) develops methods and materials to encourage this kind of actions in specific settings such as schools.

A working group was set up by the social security system to provide guidelines for nutrition counselling in the health sector. ([www.riziv.be](http://www.riziv.be))

However, neither nutrition nor physical activity is included in the curriculum of health professionals training.

### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

A monitoring system was developed in order to conduct an evaluation of the implementation of the National Food and Health Plan. As the National Plan has different objectives and goals, working groups were created to discuss the activities

for implementation. The different activities of the working groups have been monitored and a complete evaluation will be conducted by the end of 2010.

## **Engaging private sector**

### **6 – Engaging commitment from commercial stakeholders**

In Belgium, four Public Private Partnerships have been reported to be ongoing within the context of nutrition and physical activity.

## **Policy coherence at local level**

### **7 – Promoting and supporting community based interventions**

As Public Health is decentralized in Belgium, most of the community based interventions are initiated from the regional government level. Intergovernmental collaboration aims at ensuring policy coherence and that regular exchanges between the different levels of governments are taking place. A good example of a nutrition education campaign at school level implemented in Flanders is a project called “Tutti Frutti” which intends to encourage fruit and vegetables consumption by school children. Another small scale project concerns health school vending machines. The French Community Plan is based on various communication tools, including a web site, two posters and a journal for schools, and was established in accordance with the National Nutrition and Health Plan. More information on this Plan can be found at [www.mangerbouger.be](http://www.mangerbouger.be)

## Bulgaria (BG)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

No voluntary initiatives regarding nutritional labelling or signposting have been reported.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

Bulgaria participates in the European MS Action Network on reducing marketing pressure to children. Following the Network's recommendations, all relevant stakeholders (public institutions, producers, traders, NGO, media) should be involved in planning and implementing actions for reducing the exposure of children to marketing of "unhealthy" foods. To this end, a panel discussion is being prepared in order to elaborate national measures.

#### 1c - Information and education campaigns

Within the Food and Nutrition Action Plan (FNAP) covering 2005-2010, the "National Obesity Week" has been organized annually since 2006. It includes various events such as healthy products exhibitions, free access to sports facilities, distribution of fruits in schools and kindergartens or consultations with leading experts in nutrition and dietetics. For the last two years the Bulgarian National Television broadcast in prime time two promotional TV spots on healthy nutrition and physical activity. The "National Obesity Week" is also supported by food industry companies and associations, which sponsor part of the activities or organize parallel events.

### **Making the healthy option available**

#### 2a - Existence of measures affecting food prices

No measures are reported.

## 2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar

Round tables of representatives from the National Committee for the realization of the Food and Nutrition Action Plan (FNAP), experts in nutrition and food technology and producers of meat products, bread and bakery products and soft drinks were organized. The possibility for joint action was discussed. Reduction of fat and sugar content in some food and drink products was achieved in a number of companies through actions on the regional or local level.

## 2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)

Bulgaria is a member of the European MS Action Network on reducing salt intake in the population. The main sources of salt in diet have been determined. Round tables and discussion forums with food producers have been organised. The reduction of salt content in some food products was realized in a number of companies through actions on the regional or local level. A national monitoring system has also been set up to monitor salt intake at population level.

## **Encouraging Physical activity**

### 3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity

Actions to promote better urban design in order to provide safe and attractive structures for everyday physical activity have been undertaken. Efforts concerning increasing the traffic safety and the expansion of green spaces, play areas and cycling/walking routes have been initiated but not yet fully enforced.

Under the law for territorial management, the municipalities are responsible for creating and maintaining zones for recreation, health tracks and sport facilities for children, bicycle alleys, adequate infrastructure to mountain huts, camping places and shelters.

### 3b - Provision of guidelines for physical activity / education campaigns

Guidelines for physical activity exist but are not fully implemented yet. Bulgaria runs a National program for the development of physical education, sport and social tourism for the period 2009-2013.

## **Priority groups and settings**

### 4a - Mandatory inclusion of nutrition education in schools

Mandatory inclusion of nutrition education in the curriculum of primary and secondary school pupils is planned but has not been implemented so far.

### 4b - Mandatory inclusion of physical education in schools

The inclusion of physical education is mandatory in all primary and secondary schools.

### 4c - Provision of free or subsidised school meals /healthy option

A national programme offering a free cup of milk and breakfast to all schoolchildren from 1<sup>st</sup> to 4th grade has been established. Since 2008 the program was updated: fruits and milk/yogurt are now provided in some regions/schools.

Moreover, the School Fruit Scheme strategy was adopted in April 2009 in collaboration with the Ministry of Agriculture and Food. Schools now provide a free cup of milk and a breakfast for all schoolchildren (7 to 12 years old); some regions offer fruits in addition to that.

In July 2009, an ordinance of the Ministry of Health was adopted aiming to improve nutrition of children at school. The ordinance introduced current modern principles of healthy nutrition in school canteen meals such as mandatory provision of school cafeteria with vegetables, fruits and other healthy foods, and the restriction of sales of energy dense and nutrient poor foods and beverages in school canteens, cafeteria and vending machines. Food products with a high content of fat, sugar and salt are not allowed.

#### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

The promotion of physical activity at the workplace is planned but has not been implemented so far; the provision of facilities has only been realized to some extent at local level.

#### 4e - Role of health and education professionals

Teacher training in the field of healthy nutrition education is planned but has not been implemented so far. Physical activity and nutrition are included in the curriculum of health professionals training.

#### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

No cost-effectiveness calculation of nutrition and physical activity policies and programmes, or any other evaluation measures have been carried out.

#### **Engaging private sector**

#### 6 – Engaging commitment from commercial stakeholders

In Bulgaria, nine public-private partnerships were created, such as the Promotion of National Food Based Dietary Guidelines for Adults supported by Coca Cola.

#### **Policy coherence at local level**

#### 7 – Promoting and supporting community based interventions

The National Centre of Public Health Protection and the Regional Inspectorates for Control and Protection of Public Health carry out regular public information and education campaigns on the principles of healthy nutrition. Activities range from regular publications in the media, lectures at schools and to health care professionals, courses for nutrition experts or nurses in kindergartens, etc.

## Cyprus (CY)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

A legislation requiring labelling and/or signposting of foods with nutritional information is being put into place, but is not nationally reinforced yet.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

A second National Nutrition Plan was adopted in 2007, where specific actions regarding marketing pressure to children were planned. However, no specific details have been reported. Cyprus is also involved in the European MS Action Network on reducing marketing pressure to children.

#### 1c - Information and education campaigns

Within the context of the first National Nutrition Action Plan which was finalized in 2005, several initiatives have been carried out, including educational programmes on healthy nutrition aimed at women from rural areas and general healthy nutrition campaigns for the general population, by involving the media, street kiosks and schools among others, particularly during the annual "diet week".

### **Making the healthy option available**

#### 2a - Existence of measures affecting food prices

No measures are reported.

#### 2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar

No initiatives are reported.

#### 2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)

No initiatives with regards to salt reduction are being carried out.

## **Encouraging Physical activity**

### **3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity**

Efforts concerning increasing the traffic safety and the expansion of green spaces, play areas and cycling/walking routes have been initiated but not fully enforced yet. No action has been undertaken on the promotion of better urban design to provide safe and attractive structures for everyday physical activity.

### **3b - Provision of guidelines for physical activity / education campaigns**

Guidelines for physical activity have been developed and are fully implemented. As part of the National Nutrition Action Plan of 2005, a programme was initiated to encourage people to gather in their local parks for physical activities organised by the Ministry of Health.

## **Priority groups and settings**

### **4a - Mandatory inclusion of nutrition education in schools**

The programme "Mediterranean diet – back to our tradition" was recently launched in schools in order to teach children and parents about healthy Mediterranean diets. The initiative "Five minutes for five fruits" aims to promote fruit consumption by encouraging children to eat fruits and discuss their benefits.

### **4b - Mandatory inclusion of physical education in schools**

Inclusion of physical and nutrition education in primary and secondary school curriculum is mandatory at national level. Moreover, sport equipment and facilities are provided.

### **4c - Provision of free or subsidised school meals**

Free milk is offered to school children, and the EU-funded programme for fruit distribution in schools started in September 2009. Some efforts have been made to remove unhealthy food and beverages from school vending machines.

#### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

The workplace is not used as a setting for the promotion of healthy eating or physical activity yet.

#### 4e - Role of health and education professionals

Teacher training in the promotion of healthy nutrition and physical activity is partly implemented. Within the health care sector, nutrition is included in the curriculum of health professionals training, and nutrition counselling is available at low cost or free in primary care.

### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

No information is available with regards to monitoring and evaluation.

### **Engaging private sector**

#### 6 – Engaging commitment from commercial stakeholders

No information is reported.

### **Policy coherence at local level**

#### 7 – Promoting and supporting community based interventions

Many local community based interventions have been reported, the interventions are targeted at a specific setting such as in the schools and at community level.

## Czech Republic (CZ)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

Nutrition labelling is not compulsory in the Czech Republic; however when it is used it should follow the decree of 2004 of the Ministry of Health on nutritional declaration. More than 80 % of food producers implement the decree.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

Self-regulation is the most favoured approach. Therefore, the Czech Advertising Standards Council launched a self-regulatory Code of Advertising Practice to address all entities that are active in the field of advertising in the country and to provide rules for professional behaviour.

With regards to vending machines at schools, some voluntary activities of the drink industry (removing of logos, willingness of some companies to provide water instead of soft drinks, etc.) have been reported.

#### 1c - Information and education campaigns

Within the framework of the "Health 21" policy document, working groups were formed to discuss community and education programmes with regard to child obesity, physical activity and treatment of obesity. In 2006, a campaign entitled "Keep it balanced!" was initiated, focusing on motivating people to keep their energy in balance by promoting a healthy diet and physical activity. The campaign was organised by the Ministry of Health in cooperation with the National Public Health Institute and was supported by the Federation of the Food and Drink Industries of the Czech Republic, the Czech Confederation of Commerce and Tourism, several commercial bodies and some health insurance companies.

### **Making the healthy option available**

#### 2a - Existence of measures affecting food prices

No measures are reported.

## 2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar

The Ministry of Agriculture of the Czech Republic prepared a new statement in 2009 with regards to product reformulation focusing on food product innovation.

## 2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)

The reduction of salt content of processed foods has been carried out on a voluntary basis across the industry, particularly among dehydrated soups and dehydrated ready meals producers. A progress report should be delivered by the industry since a monitoring of salt reduction initiatives will take place in 2010.

## **Encouraging Physical activity**

### 3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity

In 2004, Czech Republic developed a National Cycling Strategy that mainly focused on the expansion of cycle lanes. Actions on the traffic safety for pedestrians and cyclists and the expansion of pedestrian zones, green spaces and play grounds in cities are carried out through organisations such as the National Network of Healthy Cities.

There is a policy on urban and regional development that includes the promotion of better urban design to provide safe and attractive structures for everyday physical activity.

### 3b - Provision of guidelines for physical activity / education campaigns

Guidelines for physical activity have been developed and are part of the nationally implemented Food Based dietary Guidelines.

The National Programme of Sport, Development for All: Promotion of physical activity, improving environments promoting physical activity is subsidized annually by the Ministry of Education, Youth and Sports. The Ministry sets out general rules and criteria for each of the projects that will be supported through this annual Programme. The rules are subjective to priorities that are defined within the Government. In this context, schools may ask for support to improve their sport

facilities and play areas or non-governmental organizations may ask for support to run sport clubs or maintenance of their facilities.

### **Priority groups and settings**

#### **4a - Mandatory inclusion of nutrition education in schools**

The inclusion of nutrition education in schools is mandatory at national level.

#### **4b - Mandatory inclusion of physical education in schools**

The inclusion of physical activity in schools is mandatory at national level.

#### **4c - Provision of free or subsidised school meals**

Free or subsidised school meals are provided: according to the National Decree, parents pay for the ingredients (within limits) and other costs (infrastructures, kitchen equipment, staff...) are borne by the Czech Republic. Children are also provided with morning snacks and lunch at schools, with lunch and afternoon snack in kindergartens.

#### **4d - Promoting the provision of healthy food and facilities for physical activity at the work place**

As a member of the European Network for Workplace Health Promotion (ENWHP), provision of healthy foods and active travel at the work place are being promoted.

#### **4e - Role of health and education professionals**

School teachers receive a training in the promotion of healthy nutrition and physical activity.

### **Developing monitoring system**

#### **5 - Strengthening monitoring and evaluation**

With regards to food consumption, systematic monitoring has been achieved, in line with the resolution of the Government (December 2001) concerning the strategy to

assure food safety in the Czech Republic. However, reliable data for the vulnerable population groups is still missing and up-to-date nutrition tables are non-existent.

## **Engaging private sector**

### **6 – Engaging commitment from commercial stakeholders**

The "Health 21" policy document constitutes the basis for cooperation between different stakeholders by emphasizing the importance of intersectoral collaboration. The Czech Technology Platform was established in 2006 by the Federation of the Food and Drink Industries of the Czech Republic. Four priorities with corresponding working groups were established: food safety, quality of food and production, food and consumers, and food and health. The Ministry of Health has closely cooperated with all the working groups and actively participated to the one addressing food and health (<http://www.foodnet.cz>).

## **Policy coherence at local level**

### **7 – Promoting and supporting community based interventions**

Departments within the regional Public Health Institutes and regional Public Health Authorities - which are governed by the Ministry of Health - specifically focus on nutrition and related issues, therefore ensuring the policies' correct implementation at local level.

## Denmark (DK)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

In 2009 the Nordic nutrition labelling (Keyhole) was introduced in Denmark. Another example of a labelling initiative focussing on specific food products is the Whole Grain Campaign implemented in Denmark.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

Denmark is involved in the European MS Action Network on reducing marketing pressure to children. Since 2006, Denmark has had statutory regulation in the Law on Marketing and in the guidelines from the Consumer-ombudsman. Furthermore, there are a number of general provisions in the Food law. As a supplement to the statutory regulation, several stakeholders from the food industry, advertising and media and retailers' organizations launched a self-regulatory code called " Forum Responsible for Food Marketing Communication" in the beginning of 2008, thereby limiting marketing and advertising of food and beverages to children. The core of the code is to address advertising and sponsoring of foods, especially with high content of sugar, fat or salt directed towards children in the media where the target audience are children under the age of 13. A guide sets out the nutrition profiles for the food products concerned by the code and the media is also defined in details (<http://kodeksforfoedevarereklamer.di.dk> ).

#### 1c - Information and education campaigns

Information and education campaigns with regards to obesity, nutrition and physical activity have been carried out by the Danish National Board of Health and the Danish Veterinary and Food Administration. The campaign "Enletterebarndom" ([www.enletterebarndom.dk](http://www.enletterebarndom.dk)) - in English: "A less heavy childhood"-, which has been ongoing since 2008, covers health risks and social issues among young overweight children (4-6 years of age). It is mainly targeted at families with young children but also at professionals working with this age group.

Since 2003, the “Altomkost” campaign ([www.altomkost.dk](http://www.altomkost.dk))- English: Diet in a Nutshell-, has been dealing with the implementation of actions regarding healthy diet matters.

Another annual campaign has been focusing on recommendations regarding physical activity ([www.getmoving.dk](http://www.getmoving.dk)) since 2003.

## **Making the healthy option available**

### **2a - Existence of measures affecting food prices**

In 2009, the Danish Government introduced the Spring Package which included an increase of fiscal taxes on confectionary and soft drinks among other things and investigated the possibilities of creating a fiscal tax on saturated fat.

### **2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar**

The nutrient label “Keyhole” was introduced in spring 2009. The Keyhole symbol helps consumers to identify the healthier options when buying food. It also encourages manufacturers to improve product reformulation and develop healthier products.

### **2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)**

A dialogue with the industry has been started as part of the work in the EU HLG on reducing the European Salt intake.

## **Encouraging Physical activity**

### **3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity**

Action has been undertaken in the area of promoting better urban design and the provision of safe and attractive structures for everyday physical activity. Efforts concerning increasing the traffic safety for pedestrians and cyclists and the expansion of green spaces, play areas and cycling/walking routes are clearly stated and fully

implemented through the Ministry of Culture and the Ministry of Transport and municipalities.

### **3b - Provision of guidelines for physical activity / education campaigns**

Guidelines for physical activity are provided and fully implemented. Since 2005, the Danish National Board of Health has organized an annual campaign promoting physical activity targeted at schoolchildren (target group until 2003-04: Adults) of 11-15 years old ([www.getmoving.dk](http://www.getmoving.dk)). The campaign has promoted and supported local initiatives at school and municipality level.

The campaign "Copenhagen on the move" is being carried out by the Municipality of Copenhagen with the aim of promoting sport activities at a local level.

## **Priority groups and settings**

### **4a - Mandatory inclusion of nutrition education in schools**

Nutrition education is compulsory in the form of "home economics" at secondary schools for 2 hours per week.

### **4b - Mandatory inclusion of physical education in schools**

Physical education is mandatory for parts of the primary school and throughout secondary school.

### **4c - Provision of free or subsidised school meals**

In 2009, recommendations for food and meals in the Danish day-care institutions were published by the Danish Veterinary and Food Administration and initiatives have also been taken in the area of healthy school meals.

According to the Public School law, the municipal councils are to decide if they want to subsidize school meals through partial municipal funds. With regards to fruits and vegetables, the Danish Government has undertaken action to promote school fruit ([www.frugtkvarter.dk](http://www.frugtkvarter.dk)).

#### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

No national strategy has been established but many workplaces in Denmark provide facilities for physical activity and canteens offering healthy food to the employees.

Some work places support activities for overweight employees. These activities are often run by external health professionals.

#### 4e - Role of health and education professionals

No specific training programme has been foreseen with regards to the teacher training in the promotion of nutrition and physical activity. However, the training of health professional in primary health care in healthy nutrition, physical activity and weight loss counselling has been developed.

### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

A catalogue of indicators has been developed by the Danish Government in connection with the Danish Public Health Strategy: "Healthy throughout Life 2002-2010". Its aims are to promote regular monitoring, establish health profiles at national and regional level to determine trends in the population's health status and behaviour (i.e. eating and physical activity habits) and encourage efforts to promote health and prevent disease.

In 2003, the Danish National Action Plan against Obesity stressed the importance of evaluating the prevalence, causes and consequences of obesity. Cost-effectiveness calculations of nutrition and physical activity policies and programmes were carried out by estimating the potential health economic consequences of increased physical activity in the adult population (year 2005).

## **Engaging private sector**

### **6 – Engaging commitment from commercial stakeholders**

Denmark reported to have ten public private partnerships and eight voluntary actions from commercial stakeholders in place.

The Danish “Six per day” campaign (<http://6omdagen.dk>) illustrates the kind of public-private cooperation brought by such partnerships. Another example is the Danish Whole Grain Campaign, which encourages the population to eat more wholegrain in order to improve public health. In 2010, this campaign had more than 20 industry partners.

## **Policy coherence at local level**

### **7 – Promoting and supporting community based interventions**

In collaboration with national and local government institutions, partnerships were formed with key stakeholders such as day-care institutions and schools, the leisure sector, voluntary bodies, workplaces, the food, drink and pharmaceutical industries, bodies influencing traffic and town planning, private obesity management organizations, and health and welfare institutions. Since the launch of the Action Plan in 2003, the National Board of Health has initiated a series of projects. For instance, a financial pool of €10 million was allocated for developing and evaluating prevention strategies in Danish municipalities. The above-mentioned stakeholders form a network which serves as a platform to exchange best practices and support. The focus is education of health professionals and target groups in major risk of developing obesity.

Furthermore, the "Getmoving" campaign focuses on supporting and promoting local initiatives within the municipalities.

## Estonia (EE)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

An increasing number of food/drink producers have committed to the voluntary GDA (Guideline Daily Amounts) labelling scheme.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

This issue is being considered, but no legislation was put into place so far. Currently, according to advertising law, it is prohibited to advertise in school premises. In line with the National Health Development Plan for Estonia (2009-2020), specific actions will be taken with regards to removing energy-dense nutrient poor foods and beverages in school vending machines.

#### 1c - Information and education campaigns promoting healthy eating

As part of the National Strategy for Prevention of Cardio-Vascular Diseases adopted for the period 2005-2020, a campaign aiming to raise awareness on balanced nutrition and food-based dietary guidelines, fruit and vegetable consumption, non-smoking and physical activity was launched. However, the first action plan was confirmed only for the period 2005-2008.

### **Making the healthy option available**

#### 2a - Existence of measures affecting food prices

Although taken into consideration, no measures have been reported.

#### 2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar

The issue is being discussed, but no measures have been taken so far.

### 2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)

Although taken into consideration, no salt reduction initiatives have been reported. The government is planning to organize an awareness campaign in 2010.

## **Encouraging Physical activity**

### 3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity

Efforts to increase traffic safety for pedestrians and cyclists and to expand cycle and walking lanes are realised. Estonia has developed a National Traffic Safety Strategy 2003–2015, which mainly focuses on the expansion of cycle and walking lanes and education about traffic safety.

No actions were reported in the area of promoting better urban design and expanding pedestrian zones, green spaces and play areas in the cities.

### 3b - Provision of guidelines for physical activity / education campaigns

Guidelines for physical activity are developed as part of the Estonian Nutrition and Food Recommendations. For elderly people, special guidelines have been elaborated in a document called "Nutrition and Physical Activity for Elderly People".

The Estonian Ministry of Culture also carried out a "Sports for All" programme (2006-2010), which main aims are to raise awareness and train experts. Actions promoting physical activity are implemented within the framework of the Strategy for Prevention of Cardio-Vascular Diseases.

## **Priority groups and settings**

### 4a - Mandatory inclusion of nutrition education in schools

Nutrition education is part of the national curriculum in primary and secondary schools since 2002 (subject syllabus "Health education"), and of the national pre-school education curriculum in kindergartens (since 1999). The new curriculum and subject syllabus is currently under development.

#### 4b - Mandatory inclusion of physical education in schools

The inclusion of physical education is mandatory in the curriculum of primary, secondary and upper secondary schools.

#### 4c - Provision of free or subsidised school meals

Actions in the school settings include providing school meals paid by the government for children from first to ninth grades. In kindergarten, parents have to pay only partly for the three meals a day and subsidised meals for children from poor families are being paid by the municipalities. Since September 2006, adolescents studying in vocational schools after graduating from primary school have also benefited from school meals paid by the government. In 2008, the Ministry of Social Affairs adopted an updated regulation on health protection requirements for catering facilities in pre-school institutions and schools. According to that regulation, a school lunch is supposed to cover 30 to 35% of the daily energy and nutrient needs and 85 to 90% of the daily energy and nutrient needs in kindergartens. Brown bread has also been included to the daily school meal. School fruit scheme has been introduced since 2009. Finally, a competition called "The Best School Canteen" is held every year since 2006 to encourage the school canteen staff in their work and improve the professionalism of the caterers.

#### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

The provision of both healthy food and physical activity facilities are being developed but so far only partly implemented.

#### 4e - Role of health and education professionals

Training of school teachers in nutrition and physical activity education is clearly stated but only partly implemented. Low cost/free nutrition or physical activity counselling is partly available in relation to cardiovascular diseases, and both nutrition and physical activity are partly included in the curriculum of health professional training.

## **Developing monitoring system**

### **5 - Strengthening monitoring and evaluation**

No specific information has been reported with regards to monitoring and evaluation.

## **Engaging private sector**

### **6 – Engaging commitment from commercial stakeholders**

Various initiatives exist in partnership with commercial stakeholders, for example the “5 portions of fruit and vegetables a day” campaign with Coca Cola.

Furthermore, an increasing number of food/drink producers have committed to the voluntary GDA (Guideline Daily Amounts) labelling scheme.

## **Policy coherence at local level**

### **7 – Promoting and supporting community based interventions**

Since February 2005, Estonia has had a national policy document dealing with nutrition and physical activity: the National Strategy for Prevention of Cardiovascular Diseases (CVH Strategy). To facilitate the implementation of the Strategy at local level, health councils have been established in all counties. The responsibility of these councils is to plan, allocate resources, coordinate implementation and evaluate activities at county level. They have a specific budget for local action.

## Finland (FI)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

National legislation requires declaring the salt content for specific food products and "warning labels" for highly salted foods. "Healthy Heart" – a symbol labelling a better choice for foods low in saturated fat, sugar and salt and high in fibre – has been developed by the National Heart Association and notified to the EU commission as a nutritional claim according to 1924/2006. Food industry is also voluntarily applying GDA (Guideline Daily Amounts).

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

Although there are some initiatives in this respect, no particular regulation was enforced. In October 2005, a consensus was reached about evidence-based guidelines on preventing and treating obesity and the National Consumer Agency published guidelines on the marketing of food to children. In June 2008, the Finnish government adopted a resolution on the development of guidelines aiming to improve health through physical activity and better nutrition. It stressed the need to promote health in the food marketing messages targeting children and young people, using state-regulatory measures in addition to corporate self-regulation systems if necessary. Finland is also a member of the European MS Action Network on reducing marketing pressure to children.

#### 1c - Information and education campaigns promoting healthy eating

Several programmes are implemented at local as well as national level. The Heart and Nutrition Programme, developed by the Heart Health Committee and gathering various stakeholders, includes health promotion campaigns targeting the whole population through the media ("Health Media Project").

## **Making the healthy option available**

### **2a - Existence of measures affecting food prices**

Since August 2009, EU School Milk Scheme subsidies have been given to healthier low-fat or low-salt products. The introduction of taxes on sugary food items - especially sweets and soft drinks - from January 2010 is being considered. This proposal is currently under hearing process.

### **2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar**

Initiatives covering this issue have been enforced. The local margarine industry now uses mainly rapeseed oil.

### **2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)**

Salt reduction initiatives have a long history in Finland, starting with the North Karelia project during the 1970's. Systematic information has been provided to the public and health authorities have worked in cooperation with the food industry to initiate voluntary labelling. Urinary sodium excretion studies show a decreasing salt intake of the population.

Finland is also a member of the European MS Action Network on reducing salt intake in the population.

## **Encouraging Physical activity**

### **3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity**

Actions in the area of traffic safety for pedestrians, expansions of pedestrian zones, cycling and walking lanes, green spaces and areas in the cities have been undertaken but are not fully implemented yet. A governmental resolution on policies promoting sport and physical activity was adopted in 2008 and has been implemented by the Ministry of Education and Culture. Another government resolution on health enhancing physical activity and nutrition was approved in 2008 and has been implemented by Ministry of Social affairs and Health.

### 3b - Provision of guidelines for physical activity/ education campaigns

Guidelines for physical activity for different age groups are in place.

## **Priority groups and settings**

### 4a - Mandatory inclusion of nutrition education in schools

Nutrition education is included in the curriculum of all primary and secondary school pupils.

### 4b - Mandatory inclusion of physical education in schools

Physical education is mandatory in all primary and secondary schools.

### 4c - Provision of free or subsidised school meals

A free school lunch is served to all Finnish children on school days. The meal includes hot meal, vegetables, bread and milk (or water). In addition, the meal of older students is subsidized. The quality of school meals is regulated by the Ministry of Education and Culture.

In 2007, the Ministry of Education and Culture and the National Institute for Health and Welfare (former KTL) published recommendations not to provide vending machines with sweets and beverages at schools.

### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

Actions to make the workplace a promotion setting for healthy nutrition and physical activity are being developed. Employers deliver vouchers for physical activity to workers..

Worksite meals also constitute an important way to improve the quality of the daily diet. Different tax agreements have been applied (e.g. decrease from 22% to 13% in July 2010 in the value-added tax of restaurant meals) in order to reduce the price of meals at the workplace. The employers contribute by paying the annual amount of taxable value of the meal and provide lunch vouchers to the employees.

#### 4e - Role of health and education professionals

As part of the Heart and Nutrition Programme, trainings in nutrition expertise have been offered to primary health care workers. Moreover, postgraduate training for care, nutrition and education personnel in nutrition/weight control/physical activity/prevention of non-communicable diseases has been developed.

#### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

The Heart and Nutrition Programme is evaluated at regular intervals. National dietary surveys have been carried out every five years on adults (since 1982) and a first pilot survey on children has been planned. Every four years, the government prepares a report on social and health issues for the Parliament. The latest 2010 report emphasized the need to achieve goals with regards to an increased physical activity and a better nutrition. The 2006 "Nutrition in Finland" report provided an overview of the current situation in Finland and reported progress with regards to nutrition.

#### **Engaging private sector**

#### 6 – Engaging commitment from commercial stakeholders

Representatives of commercial stakeholders (food industry and trade) are members of the National Nutrition Council and participate in various working groups in the field of food and nutrition. Food industry is using Guidelines Daily Amount and "Better choice" symbol on a voluntary basis. Trade industry has also developed systems to inform consumers of how they can get nutrition information about food products.

## **Policy coherence at local level**

### 7 – Promoting and supporting community based interventions

Several interventions exist at local level. One example is “A Weighty Matter – Early Prevention of Excessive Weight and Obesity in Children”, promoting obesity prevention through healthy eating and exercise at the Turku Municipal Health Care Department.

## France (FR)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

A legislation regarding food labelling is being developed.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

The 2004 Public Health Act stipulates that television and radio commercials for beverages with added sugar, salt or artificial sweeteners and manufactured food products must contain the following health information: "For your health, do not eat foods that contain too much fat, too much sugar or salt; Eat at least 5 servings of fruit and vegetables every day; Avoid eating snacks; Do physical exercise regularly". However, there is the possibility for advertisers to avoid this obligation by paying a 1.5% tax of the annual amount they pay for advertising these types of products.

In 2009, a Charter to promote healthy diet and physical activity in TV programmes was elaborated. This Charter should comply with the current legal framework related to advertising and communication and expresses the commitment of professionals (TV production, advertising and communication, food manufacturing, private and public TV channels). As a result of this Charter, the code of conduct applied by professionals of advertisement in accordance with the National Nutrition Health Programme (PNNS) rules will be reassessed. France is also involved in the European MS Action Network on reducing marketing pressure to children.

#### 1c - Information and education campaigns promoting healthy eating

In 2002, a national food guide ("La santé vient en mangeant") was published, tailored to different target groups, listing the different food categories. Separate guidelines on nutrition and physical activity for adolescents were published in 2004.

In 2005, three large media campaigns were launched, promoting fruit and vegetable consumption, physical activity and the reduction of food products rich in free sugars. Leaflets and educational materials were distributed.

As part of a charter elaborated by the Ministry of Health and the Ministry of Culture and Communication in 2009, healthy diet and physical activity were promoted through TV programmes and advertisements, receiving commitments from the media, advertising and communication companies, and food manufacturers. In November 2009, a TV campaign entitled "The salt, fat and sugar are not always where you think" was released. It refers to the [www.mangerbouger.fr](http://www.mangerbouger.fr) site (National Nutrition Health Programme website aimed at overall population) which presented a specific tool (MADAM) that enabled consumers to compare the quantity of sugar, fat and salt contained in each food category. In addition, a DVD presenting the PNNS was produced and distributed from July 2009.

### **Making the healthy option available**

#### **2a - Existence of measures affecting food prices**

No measures affecting food prices have been implemented. However, the issue was addressed in the report on the relevance and feasibility of a nutrition-based taxation, published in 2008 by the Ministry of Health and the Ministry of Economy.

#### **2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar**

The issue is addressed within the National Nutrition Health Programme, and proposals to economic actors are being made. This is, however, not finalized.

#### **2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)**

France is a member of the European MS Action Network on reducing salt intake in the population. In 2005, bakers were engaged in reducing the salt content of bread.

### **Encouraging Physical activity**

#### **3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity**

Actions to promote better urban design to provide safe and attractive structures for everyday physical activity have been undertaken, but have not been fully implemented yet.

Initiatives to promote cycling are encouraged, by providing facilities for secure parking, bicycle centres and distributing "bicycle kits" for instance. Efforts have also been made to expand pedestrian zones, walking and biking lanes, and green spaces and play areas, but they have not been fully implemented at national level yet.

### 3b - Provision of guidelines for physical activity/ education campaigns

Guidelines for physical activity have been issued, fully implemented and disseminated through the "Manger Bouger" programme. This is part of the National Nutrition Health Programme (PNNS) set up by the Ministry of Health.

## **Priority groups and settings**

### 4a - Mandatory inclusion of nutrition education in schools

The inclusion of nutrition education is mandatory in French schools.

### 4b - Mandatory inclusion of physical education in schools

The inclusion of physical education is mandatory in French schools.

### 4c - Provision of free or subsidised school meals

Subsidized (warm) food is provided up to the university level.

Provision of fruits and vegetables to schools is being carried out through the "Fruit à la récré" programme, but it is not nationally enforced yet. All vending machines have also been removed from school settings since 2005.

### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

The development of a strategy has been planned, but not finalized or implemented yet.

#### 4e - Role of health and education professionals

Training on the promotion of healthy nutrition and physical activity is provided to teachers through information material.

Nutrition and Physical activity are not yet included in every curriculum of health professional training, but discussions are taking place regarding this issue.

#### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

The Second Nutrition Action Plan in France is being evaluated in 2010: its implementation is being monitored in order to provide an overview of the progress that have been realised since the launch of the plan in 2006.

#### **Engaging private sector**

#### 6 – Engaging commitment from commercial stakeholders

Several public-private partnerships exist, such as the commitment of producers and distributors to promote fruit and vegetable consumption, or the 2009 Charter to promote a healthy diet and physical activity in TV programmes and advertisements which involved the media, food manufacturers, etc.

#### **Policy coherence at local level**

#### 7 – Promoting and supporting community based interventions

The Second National Programme for Nutrition and Health 2006-2010 (PNNS2) includes actions focussing on the underprivileged in particular, who are generally more concerned with obesity, but also actions that are better adapted to neighbourhoods, with superior health care and improved detection.

## Germany (DE)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

Optional voluntary labelling, on top of that required by EU law, is encouraged. For that purpose an optional national labelling system (1 plus 4 scheme) for prepacked foods was developed by the Ministry of Food, Agriculture and Consumer Protection, including guidelines for consumers and food companies. The 1 plus 4 scheme is increasingly adopted by food producers. It requires information about the energy content, fat, saturated fat, sugar and salt. In addition, the Guidelines Daily Amount (GDA) percentages are included. At present the guidelines are extended to segment sizes and recommendations for an even better visualization of the energy content. The final version will be published shortly.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

No legislative initiatives have been undertaken because Germany is in favour of self-regulatory approaches. Many companies have committed themselves to refrain from advertising their products to children under 12. The German Advertising Federation also developed a Code of Conduct which underwrites many principles, such as not abusing consumers' confidence, not undermining a healthy and active lifestyle or a balanced and healthy diet, etc. For children the code stipulates that they should not be conducted to abusive purchases and excessive consumption by exploiting their confidence.

#### 1c - Information and education campaigns promoting healthy eating

Various educational programmes were carried out, especially addressing to children, young people as well as socially disadvantaged and migrant families. An example is the campaign "Besser essen. Mehr Bewegung. Kinderleicht", aiming at counteracting overweight and obesity in children and adolescents with preventive measures, and influencing eating habits in kindergartens, schools and family settings. Part of it was a tour taking in 20 German cities per year, offering specific programmes in schools and kindergartens as well as weekend activities, and which is also a part of National

Action Plan In Form – a German national initiative to promote healthy diets and physical activity that runs until 2020. This Action Plan was developed by the Federal Ministry of Health and the Federal Ministry of Food, Agriculture and Consumer Protection.. The model project "Kinderleicht-Regionen", also part of In Form and set up on a local level with the help of selected regional networks, aims to demonstrate the methods, pathways and partners that can help to prevent the onset of overweight in children from birth up to the end of primary school ([www.besseressenmehrbebewegen.de](http://www.besseressenmehrbebewegen.de)).

The German Platform for Diet and Physical Activity was founded in September 2004 and led to several campaigns including 15 television spots targeting preschool children with information on nutrition and physical activity.

### **Making the healthy option available**

#### 2a - Existence of measures affecting food prices

No specific measures have been reported in this regard, but in order to keep food products affordable, the VAT on all foods was reduced from 19% to 7%.

#### 2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar

A great variety of sugar and/or fat reduced foods is already available in all relevant food groups and at different prices (including discounters). Therefore additional legislative or fiscal measures have not been implemented to that end.

#### 2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)

Salt reduction recommendations are part of all nutrition information promoted by the government and the German Nutrition Society. A diet in line with the 10 rules of the German Nutrition Society will subsequently lead to a recommended salt intake of about 5-6 g/per day. A continuous monitoring system to measure salt intake/salt excretion in different population groups is in place. In Germany, the main source for salt intake in the population is bread. Furthermore, the available data indicate that specific food selections (e.g. savoury snacks) contribute to the salt intake in different

population groups. The government policy response towards these data results is to provide nutrition education to the identified risk population groups.

Further recommendations to reduce salt intake are included in all national quality standards for meals in schools, kindergartens, homes for the elderly, canteens at the work place, food on wheels-services, etc. They will also be part of the national quality standards for hospitals and rehabilitation clinics that will be finalized in 2011.

The fact that iodine supply in Germany is based on salt iodization to a high degree has to be considered, but this is not the reason for the German policy towards salt reduction. In Germany, nutrition is considered as a comprehensive approach within the line of the national "In Form" Action Plan. A dialogue with industry will be taken up where considered necessary in addition to the abovementioned and already implemented programmes.

### **Encouraging Physical activity**

#### **3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity**

Action on the promotion of a better urban design to provide safe and attractive structures for everyday physical activity has been carried out. Actions in the area of traffic safety for pedestrians, expansions of pedestrian zones, cycling and walking lanes, green spaces and areas in cities are developed at a local level, but these actions have not been fully implemented yet.

Centres have been established in all 16 Länder to encourage physical activity and to facilitate an overview of the opportunities for physical activity. Pilot projects aiming to enhance various aspects of physical activity are supported by the federal ministries. There is a National Cycling Plan and numerous regional and local initiatives to establish permanent structures in order to encourage more physical activity for all population groups. These initiatives are part of the National Action Plan "In Form" and more information about them can be found at the website [www.nationaler-radverkehrsplan.de/](http://www.nationaler-radverkehrsplan.de/).

### 3b - Provision of guidelines for physical activity/ education campaigns

Guidelines on physical activity exist. The National action plan "In Form" also includes the promotion of physical activity and the plan's action area 3 addresses physical activity in daily life. For example, 50 federal governments and Länder organisations have formed a co-operation alliance, "Health Promotion for the Socially Disadvantaged", with a strong focus on diet and physical activity. Quality labels that have been developed by the German Olympic Sport Committee and other sport associations offer guidance for physical exercises.

The German Platform for Diet and Physical Activity was founded in September 2004 and led to several campaigns including 15 television spots targeting preschool children with information on nutrition and physical activity.

## **Priority groups and settings**

### 4a - Mandatory inclusion of nutrition education in schools

Education is regulated by the Länder only, and not at the federal level. The coordination body for the Länder is the Kultusministerkonferenz (KMK). Nutrition education is part of many curricula in the different school types; however, it is more often integrated into other school subjects like biology, chemistry, home economics or even social studies instead of being a separate school subject.

### 4b - Mandatory inclusion of physical education in schools

This issue is also regulated by the Länder. But physical education is a normal part of all school curricula. Moreover, in day schools, additional options for physical education are offered to pupils in the afternoon.

### 4c - Provision of free or subsidised school meals

This is also dealt with at the "Länder" or the local level. In Germany the majority of schools are still part time schools where no (warm) meal is offered to the students, because they go home for lunch. In the last decade the establishment of day schools began, so that their number is increasing continuously. However, the offer to eat at school is almost always an option, not a must (e.g. "offene Ganztagschule"). School

meals are not free for all students but there are schemes for subsidising the meals for students with low-income parents. Apart from that, all school meals are subsidised indirectly by the communities by providing parts or all of the infrastructure (e.g. kitchen, rooms, operating expenses, etc.). Germany takes also part in the EU school fruit programme.

#### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

The provision of facilities for physical activity, as well as that of healthy food, is being carried out in some work settings. National Quality Standards for healthy food at the workplace have been established.

#### 4e - Role of health and education professionals

The training of school teachers to promote healthy nutrition and/or physical activity is organized at different levels. Professional development mainly is especially the Länder's responsibility. Additional qualification of the teachers on nutrition is also offered by several federal programmes: the Federal Ministries of Health and of Food, Agriculture and Consumer Protection provide aid via their responsible organisations; the Federal Centre for Health Education (BZgA) proposes training materials on nutrition, foods and physical activity, including extensive training manuals.

Nutrition and Physical Activity is included in the curricula of all health professionals training where appropriate, depending on the health professional group.

### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

The National Food Consumption Survey NVS II (2006-2008) has collected data on current food consumption patterns, nutrition status, nutrition knowledge, behaviour, and physical activity of adults. *Kiggs*, especially the module *EsKiMo* analysed the nutrition of children from 6 to 18 years. Special studies on other population groups (elderly people living at home, elderly people living in institutions, infants and children up to 5) were also performed during the last decade. At present a representative study on the health status of adults is ongoing. Specific surveys

(iodine status, salt excretion, breast feeding rates among others) are carried out in regular intervals. The aim of all these monitoring activities is to collect nationwide data and create an evidence base for the development, implementation and evaluation of health promotion and disease prevention strategies.

## **Engaging private sector**

### **6 – Engaging commitment from commercial stakeholders**

With the aim of addressing the health threats of overweight and obese children, the German Platform for Nutrition and Exercise Activity has received commitments from the food industry, the health care system and other stakeholders.

Other partnerships with food manufacturers include the “Action Kids” guide with information and ideas on how to get children to exercise, published in collaboration with “Mars”.

## **Policy coherence at local level**

### **7 – Promoting and supporting community based interventions**

Several local initiatives promoting nutrition and physical activity have been carried out. Examples are the “Eat Healthy with Joy” project carried out between 2004 and 2009 in Berlin, and “Besser Essen. Mehr Bewegen. Der Wettbewerb.” which gathered 25 local projects (launched in 2003).

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

Signposting or the labelling of foods with nutritional information is not mandatory.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

Currently, there is no specific legislation to address food marketing to children. Nevertheless, in the private sector, the self-regulating “Greek Code on Marketing and Communication” was established by the Hellenic Association of Communication Agencies and the Hellenic Advertisers Association ([www.sde.gr](http://www.sde.gr)). It is largely based on the existing Code of Marketing and Advertising Practice of the International Chamber of Commerce ([www.iccbo.org](http://www.iccbo.org)). Membership to this code is being monitored and can be sanctioned by an independent non-profit association, “The Council of Communication Monitoring”. This Council is a member of the European Advertising Standards Alliance (EASA) and has created, with the collaboration of the Federation of Hellenic Food Industries and the Association of Businesses of Alcoholic Beverages, rules in relation to the marketing of foods and beverages, two of which address the food marketing to children. Greece is also involved in the European MS Action Network on reducing marketing pressure to children.

#### 1c - Information and education campaigns promoting healthy eating

Several education campaigns have been carried out, including “Focus on the Child” dealing with childhood obesity and nutrition, and “Life has colour”, focusing on increasing healthy nutrition and physical activity for children.

## **Making the healthy option available**

### **2a - Existence of measures affecting food prices**

No such measures have been taken at national level. However, a short campaign regarding the promotion of fruit and vegetables, carried out in 2006, involved the reduction of fruits and vegetables' prices in several supermarkets.

### **2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar**

Some private initiatives took place with regards to the fat content of food products.

### **2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)**

Greece is a member of the European MS Action Network on Salt reduction. Although there are no mandatory regulations on national level, a recommendation to reduce salt consumption to minimum was mentioned in the Dietary Guidelines of Healthy Adults in Greece. In 2009, the National Food and Nutrition Policy Committee started to collect data with regards to salt intake. The Bakery Industry has also been approached by the government to take initiatives and start chemical analysis of the different varieties of bread available in Greece; however, a lack of funding has been disrupting the process. The Greek Food Authority will enact a strategy in 2010 which will summarize how to proceed with regards to salt reduction initiatives. At this stage, nothing concrete has been implemented but the different stakeholders are involved.

## **Encouraging Physical activity**

### **3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity**

No initiatives in relation to the promotion of better urban design to provide safe and attractive structures for everyday physical activity and the expansion of green spaces and play areas in urban areas were reported. Actions on traffic safety for pedestrians and cyclists and the expansion of pedestrian zones and cycle and walking lanes are developed, but not fully implemented yet.

### 3b - Provision of guidelines for physical activity/ education campaigns

Guidelines for physical activity have been developed by the National Food and Nutrition Policy Committee and have been in place since 1999 and adopted by the Greece Ministry of Education and Agriculture.

## **Priority groups and settings**

### 4a - Mandatory inclusion of nutrition education in schools

The inclusion of nutrition education in schools is not mandatory.

### 4b - Mandatory inclusion of physical education in schools

The inclusion of physical education in primary and secondary schools is mandatory at national level.

### 4c - Provision of free or subsidised healthy school meals

There is no provision of free or subsidised school meals. In 2006, however, nutrition guidelines for school canteens have been developed in order to promote healthy nutrition. Vending machines are not allowed in schools.

### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

No actions have been taken, except the provision of exercise facilities in some public/governmental workplaces.

### 4e - Role of health and education professionals

Although not yet fully enforced at national level, several actions related to health education and promotion – including training of educational staff on healthy nutrition and physical activity- have already been approved.

Physical activity counselling is not provided in primary health care and neither nutrition nor physical activity is included in the curriculum of health professionals training.

However, the establishment of national obesity clinics and research centres providing free medical and dietetic care to patients requiring specialists' help and support, is under way.

### **Developing monitoring system**

#### **5 - Strengthening monitoring and evaluation**

No cost-effectiveness calculations of nutrition/physical activity policies or programmes have been carried out. No other monitoring measures were mentioned.

### **Engaging private sector**

#### **6 – Engaging commitment from commercial stakeholders**

A platform for successful collaboration between the food industry and the Ministry of Health is under development.

### **Policy coherence at local level**

#### **7 – Promoting and supporting community based interventions**

Some local initiatives were carried out, including the “Cretan health and nutrition education programme” of 1992-1993. However, no recent activities were reported.

## Hungary (HU)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

There is no specific national legislation regarding food labelling or signposting, although there are some voluntary initiatives regarding GDA.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

There is no national mandatory regulation when it comes to marketing of unhealthy food to children. However there is a legislation (No. XLVIII, 2008) that prohibits business advertising activities in institutions that take care of children under the age of 14, such as child welfare and protection institutes, kindergartens, elementary schools and elementary school dormitories. This legislation does not apply to advertising of activities and events related to a healthy lifestyle though.

There are also self-regulating initiatives. The Hungarian Marketing Ethical code was updated in 2009 by the Self-regulating Marketing Body with special attention paid to the marketing regarding the points of sale.

#### 1c - Information and education campaigns promoting healthy eating

There are a number of information and education activities carried out under the auspices of the National Public Health Programme 2003–2013, where nutrition and physical activity are among the priority areas. The National Public Health and Medical Officer's Service organizes regular health promotion days ("health days") supporting a healthy lifestyle including physical activity and nutrition. In 2009, the National Nutrition Action Plan for Hungary 2010-2013 was prepared for adoption. Under the auspices of the action plan, the National Salt Reduction Initiative was launched in early 2010. In this regard, the Stop-Salt Campaign was implemented in early 2010 for 6 weeks. The elements of this campaign were radio spots and written media, website, posters and flyers in pharmacies, health institutions and on public transportation. School-based information and education model programmes were also put into practice and evaluated, such as the HAPPY- Hungarian Aqua Promoting Programme among the Youth – programme encouraging water consumption; and the

"Healthy Can be Tasty" programme promoting healthy diet with a special focus on vegetable and fruit consumption. Based on the Happy Program, in Spring 2010, the Happy Week program was implemented with the support of the Ministry of Health to promote water consumption in 17 counties, involving 24300 school children. A public awareness raising campaign by an NGO media initiative (Mediaunio) regarding healthy lifestyle (nutrition, physical activity and smoking) took place on different media channels in 2009.

## **Making the healthy option available**

### **2a - Existence of measures affecting food prices**

No measures affecting food prices have been developed or carried out.

### **2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar**

The Nutrition Action Plan mentions initiatives with regards to reformulation but no action has been taken so far.

### **2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)**

Hungary is a member of the European MS Action Network on salt reduction in the population. There are no national mandatory regulations regarding salt reduction, but the National Salt Reduction Initiative was launched in 2009 by the Ministry of Health. This initiative has five elements: national data collection, setting benchmarks for salt reduction, reformulation, awareness raising campaign, monitoring and evaluation. The Salt Reduction Initiative is a continuous programme involving the industry targeted at population level. In February 2010, the Ministry of Health officially inaugurated the Stop Salt Campaign with the coordination of the National Institute for Food and Nutrition Science. On the launch day, the different stakeholders (industry and NGOs) were invited and produced an official commitment, which resulted in agreements with different groups such as mass catering company.

## **Encouraging Physical activity**

### **3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity**

Hungary reports to undertake actions in the area of traffic safety for pedestrians and cyclists, expansions of pedestrian zones, cycling and walking lanes, green spaces and play areas in the cities; however these actions are not fully implemented yet.

Infrastructure and development programs are described under the "Bicycling Hungary Program" and the "New Hungary Development Programme" for 2007-2013. Under the auspices of the Sport 21 National Sport strategy and the national program "Move Hungary", many local and regional initiatives arose to promote and improve access to leisure time physical activity (e.g. developing infrastructure for amateur sports, encouraging the use of bicycles, etc.).

### **3b - Provision of guidelines for physical activity/ education campaigns**

General guidelines for physical activity are included in the National Public Health Programme. The State Secretariat for Sport from the Ministry of Local Government launched the National Sport Strategy 21 programme aiming at the general promotion of physical activity in the population.

## **Priority groups and settings**

### **4a - Mandatory inclusion of nutrition education in schools**

Education about healthy lifestyle in general, which includes physical activity and nutrition, is mandatory in a separate school subject but no specific nutrition education is required.

### **4b - Mandatory inclusion of physical education in schools**

The inclusion of physical education in schools is mandatory. The minimum requirements are set forth in the law on public education: 3 hours/week of physical education plus half hour/week of health protection for elementary school (1<sup>st</sup> to 4<sup>th</sup> grade), and 2,5 hours/week for senior classes. As a recent development from July

2010, the approval of mandatory daily physical education class for all 8 grades of elementary school is in progress.

#### 4c - Provision of free or subsidised (healthy) school meals

Subsidized school meals are provided for disadvantaged social/socioeconomic groups. There are kindergarten and school food schemes supporting families with 3 or more children, disabled children and those who receive regular child welfare benefits (subsidizing up to 100% of the food cost). Recommendations for healthy school buffet options were included in a government resolution on education. The National School Milk Programme was reintroduced in 2004, while the Ministry of Agriculture and Rural Development launched the School Fruit Programme in Hungary from January 2010.

#### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

Although not entirely enforced at national level, efforts to ensure a choice of healthy food at the workplace have been made. Under the auspices of the National Public Health Programme, local initiatives for health promotion on the workplace are being run. Facilities for physical activity are also provided at some work settings, for instance under the Bicycle Hungary programme, the Move Hungary programme, and the New Hungary Development Plan of the period 2007-2013.

#### 4e - Role of health and education professionals

Nutrition and physical activity are generally included in the curriculum of health professionals training. Physical activity counselling is partly available at local level. Low cost/free nutrition counselling is not available in primary health care, however general practitioners and district nurses provide advice in the course of their work.

### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

The National Nutrition Survey in 2003, the National Nutrition and Nutritional Status Survey with measurements in 2009 and the European Health Interview Survey were implemented to monitor the Body Mass Index (BMI), diet and physical activity levels

of the Hungarian population. National surveys of kindergartens and schools assessed the public health nutrition environment in these institutions in order to monitor, among others, the implementation of school buffet recommendations. Hungary is also participating in the WHO COSI initiative from 2009. However, no cost-effectiveness calculations or health impact assessment of nutrition/physical activity programmes has been carried out.

## **Engaging private sector**

### **6 – Engaging commitment from commercial stakeholders**

Public-private partnerships exist mainly under the Hungary's Nutrition Lifestyle (TÉT) platform activity focusing on nutrition and physical activity. Voluntary actions by the food industry have been reported.

“Healthy Workplace” at Mars Hungary – providing opportunities for associates and their families to practice key elements of a healthy and balanced life-, and “Nutrikid” with Nestlé Hungary and the Hungarian Dietetic Association – offering free nutrition education programmes to elementary school children, with no advertising.

## **Policy coherence at local level**

### **7 – Promoting and supporting community based interventions**

Several community programmes were carried out within the framework of the National Public Health Programme and the New Hungary National Development Plan where NGOs were also very active in the field.

## Ireland (IE)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

No actions reported

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

There have been a number of initiatives by the government, regulators, private sector and consumer groups in relation to the practice of advertising of foods and beverages at children. Codes, rules and practices have been developed. Work was ongoing according to the Report of the Inter-sectoral Group on the Implementation of the Recommendation of the National Task Force on Obesity of April 2009, including measures in the Broadcasting Bill 2009 to prohibit TV and radio advertising of high fat, sugar and salt products subject to public concern in respect to the general public health interests of children. Ireland is involved in the European MS Action Network on reducing marketing pressure to children.

#### 1c - Information and education campaigns promoting healthy eating

The government responded to the increasing obesity rates with a four-year national obesity campaign covering the period 2003–2006 (<http://www.healthpromotion.ie/topics/obesity>).

Key messages in the obesity campaign include: reducing portion sizes, switching to healthier food choices, eating more fruits and vegetables, being more physically active, knowing waist circumference, and checking BMI. The campaign stakeholders include the Department of Health and Children and the Health Services Executive, Health Promotion and the Food Safety Promotion Board (safe food), community dieticians' and physical activity coordinators, nongovernmental organizations (e.g. the Irish Heart Foundation), retailers (supermarket chains, caterers, cafes, restaurants and hotels), schools, workplaces, health care facilities, and the print and radio media.

## **Making the healthy option available**

### **2a - Existence of measures affecting food prices**

Although not yet enforced, there are discussions about measures to affect food prices (e.g. taxes).

### **2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar**

Although a national legislation is not implemented, there are discussions to develop initiatives to reduce the content of fat and/or sugars in processed foods.

### **2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)**

There are developments when it comes to salt reduction initiatives. The department of Health and Children is aiming to implement the EU salt reduction programme with the target of 16% by 2012. Ireland is a member of the European MS Action Network on reducing salt intake in the population.

## **Encouraging Physical activity**

### **3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity**

Efforts to increase traffic safety for pedestrians and cyclists and to expand cycling and walking lanes are developed, but not fully implemented. No action is reported on the expansion of pedestrian zones, green spaces and play zones in the cities.

### **3b - Provision of guidelines for physical activity/ education campaigns**

Physical Activity Guidelines for Ireland were published by the Department of Health and Children and the Health Service Executive.

## **Priority groups and settings**

### **4a - Mandatory inclusion of nutrition education in schools**

The inclusion of nutrition education in schools is not yet fully mandatory. Following the Report of the Inter-sectoral Group on the Implementation of the Recommendation of the National Task Force on Obesity, the Department of Education and Science started to discuss the mandatory inclusion of nutrition and physical activity education in the curriculum of primary and secondary school pupils.

### **4b - Mandatory inclusion of physical education in schools**

The inclusion of physical education is mandatory in all Irish primary and secondary schools, as described in the Report of Inter-sectoral Group on the Implementation of the Recommendations of the National Task Force on Obesity ([www.dohc.ie](http://www.dohc.ie)).

### **4c - Provision of free or subsidised (healthy) school meals**

There is nationwide provision of free or subsidized school meals. Still, the majority of Irish primary schools have worked on devising healthy lunch policies. According to the Report of the Inter-sectoral Group on the Implementation of the Recommendation of the National Task Force on Obesity of April 2009, Healthy Eating Guidelines were planned to be sent to second level schools. Small scale capital funding was also made available for disadvantaged schools.

Together with the Department of Health, the Department of Agriculture and Food launched a fruit and vegetable programme in 120 primary schools.

### **4d - Promoting the provision of healthy food and facilities for physical activity at the work place**

Although there are no nationally mandatory regulations, there are recommendations regarding the choice of healthy food and provision of exercise facilities at the workplace within the Happy Heart at Work Programme by the Irish Heart Foundation and the Nutrition and Health Foundation (Food Industry funded body), which have been implemented to some extent.

#### 4e - Role of health and education professionals

Low cost/free nutrition counselling in primary health care is available at national level, while physical activity counselling is partly enforced, depending on the area.

Significant progress was reported in providing training to health professionals in nutrition and physical activity counselling.

### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

In order to share information and research, a food research committee was created.

### **Engaging private sector**

#### 6 – Engaging commitment from commercial stakeholders

Several examples of intersectoral collaboration were described in the Report of Intersectoral Group on the Implementation of the Recommendations of the National Task Force on Obesity of April 2009.

### **Policy coherence at local level**

#### 7 – Promoting and supporting community based interventions

Local community based interventions have been implemented in Ireland with regards to obesity and specific target groups such as children.

## Italy (IT)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

There is no specific national legislation about labelling in Italy, but the Ministry of Health is working with food industries to improve the quality of nutritional labelling and to provide clear information to citizens regarding food composition.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

A specific working group at the Ministry of Health was established to plan out, in agreement with the associations of food and beverages producers, a document to regulate advertisements and avoid incorrect and misleading messages, especially those targeted at children. However, legislation has not been enforced yet.

#### 1c - Information and education campaigns promoting healthy eating

The Ministry of Health initiated some information activities to promote healthy nutrition. In cooperation with the national public TV (RAI), the Ministry of Health produced educational TV programmes with experts and "short stories" to give people information about diet, healthy food and lifestyles in general.

In 2007 and 2009, the Ministry of Health supported the "Three days for health" event, which took place in some Italian cities (Torino, Roma Napoli in 2007; Verona, Roma, Napoli in 2009) in collaboration with other public institutions, associations and sports societies in order to promote the adoption of healthy lifestyles (<http://www.salastampa.salute.gov.it/salaStampa/dettaglioEvento.jsp?id=45>).

The Ministry of Agriculture launched an information campaign, called "SMS consumatori", which enabled consumers to compare the price of fruits and vegetables at the production, wholesale and retail levels to check if they are being offered at the market price ([www.smsconsumatori.it/](http://www.smsconsumatori.it/)).

## **Making the healthy option available**

### 2a - Existence of measures affecting food prices

No measures to affect food prices have been reported.

### 2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar

No national legislation was put into place, but there are some discussions to improve the partnership with food industry and develop initiatives to increase the availability of processed foods with reduced fat/added sugars. Some important results have been reached, like the reduction of trans-fats from sweet products (<http://www.dolceitalia.net/chisiamo.asp?id=130>) and the reduction of salt in bread.

### 2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)

There is no national legislation regarding salt reduction. However, Italy has developed a national "Salt reduction initiative" since 2008 to implement the national Plan "Gaining Health", approved by the Italian Government in 2007, which aims at preventing Non-Communicable Diseases (NCD). This Plan is based on an institutional alliance with the regions and the municipalities as well as a partnership with food industry, distribution networks and consumers' associations. A National Platform on Nutrition and Physical Activity has also been established, in order to increase salt reduction amongst other things. One specific achievement was thus the signature in July 2009 of a voluntary agreement between the national associations of craft bakers, the associations of plant bakeries and the Ministry of Health to reduce salt content in some of their products. At the end of 2010 the salt reduction is expected to be around 10%; a further reduction will be achieved over the next three years (<http://www.salute.gov.it/stiliVita/paginaInternaMenuStiliVita.jsp?id=1400&menu=protocolli>).

## **Encouraging Physical activity**

### **3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity**

Since 2007, the National Plan of Prevention has devised regional plans to encourage the development and implementation at local level of urban environments that favour physical activity. For instance the Veneto Region launched a program in cooperation with the regions, local health services and sport organizations, aiming to encourage urban mobility by creating safe routes for primary school children walking to school and by promoting physical activity by senior or disabled people. .

In agreement with the Youth Department, the Ministry of Health also activated a "pilot" national project for the promotion of physical activity and walking. The project is coordinated by the Veneto region and involves the Regions Piemonte, Marche, Emilia Romagna, Lazio, Puglia with the aims to increase physical activities in the everyday life (walking, cycling).

### **3b - Provision of guidelines for physical activity/ education campaigns**

No guidelines for physical activity are provided. Under the "pilot" national project for the promotion of physical activity and walking, a network of regional representatives and prevention departments of local health units has been established. The goal is to stimulate local networks (municipalities, schools, health workers, other private and public authorities) to promote physical activity, by creating at local level walking groups for elderly people and activities for children ("Pedibus" and other initiatives), by providing to participants basic nutritional information and by spreading among professionals scientific knowledge in order to keep promoting exercise and a healthy lifestyle.

## **Priority groups and settings**

### **4a - Mandatory inclusion of nutrition education in schools**

There is no mandatory inclusion of nutrition education in Italian schools. However, health education represents an important element of school activities and several projects aim to promote good nutrition at school. For instance, under the national

programme "Gaining Health" for NCD prevention, the Ministry of Health, in cooperation with the Ministry of Education and the National Research Institute for Food and Nutrition (INRAN), designed a specific multimedia educational package for primary schoolchildren providing information about good nutrition and physical activity.

The Ministry of Education has also activated a programme called "School and Food" to expand nutrition education in all Italian schools in the next years. Moreover, in 2010, the Ministry and the health sector collaborated into developing training activities for teachers in primary schools of three Italian regions. Next year, this training will be extended to all regions.

#### 4b - Mandatory inclusion of physical education in schools

Physical education is mandatory in the curriculum of Italian schools. In addition, many projects at national and local level seek to increase the time dedicated to sports and physical activity at school during the afternoon. To this end, the Ministry of Education has initiated, in partnership with the National Olympic Committee (CONI), a national programme called "Alfabetizzazione motoria", which aims at training teachers on physical education

([http://archivio.pubblica.istruzione.it/dgstudente/alfabetizzazione\\_motoria/index.shtml](http://archivio.pubblica.istruzione.it/dgstudente/alfabetizzazione_motoria/index.shtml)).

The National Plan of Prevention (NPP) 2005-2007 also intended to promote physical activity at school; in this regard, the new NPP 2010-2012 stresses the need for a strong collaboration with schools in order to promote healthy lifestyles and physical education. By 2010 the regions will present their plans for approval by the Ministry of health.

#### 4c - Provision of free or subsidised (healthy) school meals

Although there is no national legislation, there have been some developments in this regard. Based on the guidelines provided by the National Research Institute for Food and Nutrition, the Ministry of Health and the different regions have adopted a document which defines the main categories of foods in school canteens. This document is not mandatory, but is used as a guide by local administrations responsible of school meals (<http://www.salute.gov.it/dettaglio/phPrimoPianoNew.jsp?id=276>).

Italy also participates to the "EU School fruit scheme", which aims to increase fruits and vegetables consumption by children from six to eleven. This programme is coordinated by the Ministry of Agriculture in cooperation with the Ministry of Health and the Ministry of Education. In 2010 the project has involved approximately 870,000 children in about 5,000 schools from all regions (<http://www.fruttanellescuole.gov.it/>).

#### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

The National Plan of Prevention (NPP) and the regional "Gaining health" schemes endorse several projects to promote healthy nutrition or physical activity in the workplace. For example, the Tuscany region adopted a project to encourage healthy eating habits for workers having lunch in canteens of the workplace or in bar and restaurants ("Pranzo sano fuori casa"

[www.regione.toscana.it/pranzosanofuoricasa](http://www.regione.toscana.it/pranzosanofuoricasa)).

Through the "Gaining health" project, the Ministry of Health has been collaborating with an important society of catering to improve the supply of healthy food in the workplace and provide more information to the workers about healthy eating.

#### 4e - Role of health and education professionals

Some activities are offered by the education or health system to increase teachers' training in this field. A proposal for introducing nutrition and physical activity counselling for citizens in primary health care (in the National Essential Service Levels) is thus being discussed.

However, nutrition and physical activity are not included in the curriculum of health professionals training.

### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

Under the "Gaining health" project, the National Health Institute has been working since 2007 on developing a national surveillance system of Behavioural Risk Factors

(called PASSI) associated to adults' lifestyles (<http://www.epicentro.iss.it/passi/>). This project involves more than one hundred local health services in all the regions. The Institute also realised a survey of behavioural risks among young people (6-17 years old): by gathering information on their nutritional and physical activity habits and identifying risk factors (e.g. smoking, alcohol, diet...) that lead to chronic illnesses, this tool facilitates the support to National Health System and school programmes.

## **Engaging private sector**

### **6 – Engaging commitment from commercial stakeholders**

No specific commitment was reported, but the Ministry of Health has been encouraging the primary producers and the processing industry to progressively reduce the total content of fat, saturated fats, sugar and added salt in food products (see points 2b and 2c). Some voluntary agreements have been reached with the bakery industry (regarding salt reduction), sweet producers (regarding elimination of trans-fats) and retailers (through a national information campaign that encourages fruits and vegetables consumption and the reduction of alcohol consumption).

## **Policy coherence at local level**

### **7 – Promoting and supporting community based interventions**

Several local initiatives have been initiated, such as “Gaining Health plans” or “Community programs”. The latter are developed by the Health Care System, local authorities and health professionals to support social participation and support, as well as to encourage the promotion of healthy lifestyles within one's own family. These programs have the economical support of the National Centre for Disease Control (CCM).

For instance, the Piemonte Obesity Project is a large scale educational intervention programme in collaboration with general practitioners which seeks to help people reach and maintain a reasonable weight. Verona and many other cities also have developed a programme to get citizens moving.

## Latvia (LV)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

No initiatives in relation to food labelling have been taken.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

No regulation was adopted in relation to this field. However, in August 2006, the Cabinet of Ministers adopted regulations which aim to restrict and control the marketing of unhealthy foods and beverages in pre-schools and schools. Regarding advertising, Latvia has no policies in place to reduce the impact of marketing of foods to children. The only existing legislative framework is the advertising law but it does not contain a definition of "advertising to children". Latvia is also a member of the European MS Action Network on reducing marketing pressure to children.

#### 1c - Information and education campaigns promoting healthy eating

The Public Health Strategy and the "Concept of the Ministers –Healthy Nutrition 2003-2013" programme established a food pyramid and recommended dietary allowances as well as food-based dietary guidelines for specific target groups (adults, children aged 0-2 and 2-18 years, the elderly), and provided information about healthy nutrition on the Ministry of Health website.

### **Making the healthy option available**

#### 2a - Existence of measures affecting food prices

No such measures have been reported.

#### 2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar

No such initiatives have been reported.

### 2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)

In line with EU recommendations, Latvia has started to discuss with the food industry but negotiations have not succeeded yet.

## **Encouraging Physical activity**

### 3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity

No national initiatives have been taken.

### 3b - Provision of guidelines for physical activity / education campaigns

Guidelines on physical activity are developed and fully implemented. The National Sport Development Programme 2006-2012, developed by the Ministry of Education and Science, specifies that the government is responsible for children and young people's physical education, and that it should promote the development of young athletes' skills and ensure the availability of sport facilities. For instance, the "Shape Up" initiative started in 2006 and campaigned in favour of a healthy and balanced lifestyle by involving school, communities and families. Latvia is also part of the European Healthy Stadia Network 2007-2009 which promotes physical activity.

## **Priority groups and settings**

### 4a - Mandatory inclusion of nutrition education in schools

The inclusion of nutrition education in primary and secondary schools is mandatory at national level.

### 4b - Mandatory inclusion of physical education in schools

The inclusion of physical education in primary and secondary schools is mandatory at national level.

#### 4c - Provision of free or subsidised (healthy) school meals

Free school meals are provided to first grade schoolchildren at national level, while some local governments also subsidize meals for all schoolchildren (grades 1-12). Unhealthy foods or beverages in vending machines are not allowed in Latvian schools. Through the EU School Milk Scheme (since 2004) and the EU School Fruit Scheme (since 2010), low-priced milk and free fruits are provided to children from grade 1 to 6 in schools willing to participate.

#### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

No specific focus has been given to the provision of healthy food and/or exercise facilities in the workplace.

#### 4e - Role of health and education professionals

Teacher training in the promotion of healthy nutrition and physical activity is provided. While low cost/free nutrition counselling is not available in primary health care, patients do have the possibility to receive physical activity counselling. Nutrition and physical activity are included in the curriculum of health professionals' training.

### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

No monitoring/evaluation activities were reported.

### **Engaging private sector**

#### 6 – Engaging commitment from commercial stakeholders

No public-private partnerships or voluntary commitments from commercial stakeholders were reported.

## **Policy coherence at local level**

### 7 – Promoting and supporting community based interventions

No specific reporting has been made in this regard.

## Lithuania (LT)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

A norm concerning the labelling of foods was approved in December 2002 by order of the Minister of Health. An example of voluntary commitment by commercial stakeholders is the voluntary labelling of soft drinks by the National Association of Beverages Producers.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

The amendment of the Hygiene Norm in 2005 restricted the availability of unhealthy food products in schools. In 2004, the Government adopted the National Food and Nutrition Strategy and Action Plan. Specific targets and measures of the Action Plan include advertising and marketing. Besides, specific national advertising rules ensure no advertising on Lithuanian National Television.

#### 1c - Information and education campaigns promoting healthy eating

A national healthy nutrition and physical activity promotion campaign targeting the entire population was carried out as part of the State Food and Nutrition Strategy and Action Plan for 2003-2010.

### **Making the healthy option available**

#### 2a - Existence of measures affecting food prices

No such measures were reported.

#### 2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar

No initiatives were reported.

## 2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)

No initiatives were reported.

## **Encouraging Physical activity**

### 3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity

Programmes to increase traffic safety for pedestrians and cyclists and expansions of pedestrian zones, cycling and walking lanes have been developed and fully implemented through the National Safe Traffic Car Away Programme 2005-2010.

### 3b - Provision of guidelines for physical activity/ education campaigns

Specific guidelines regarding physical activity for children have been put in place. The Department of Physical Activity and Sports works closely with different other ministries to promote physical activity among the population. Besides, the Lithuanian sport sector supports a range of activities among school children, including initiatives such as the Children's Olympic festival involving about 220 000 children.

## **Priority groups and settings**

### 4a - Mandatory inclusion of nutrition education in schools

The topic of healthy nutrition is mandatory, but is incorporated in several subjects, especially biology and natural science.

### 4b - Mandatory inclusion of physical education in schools

The inclusion of physical education is mandatory in schools according to national legislation, specifying a minimum of three hours a week for 1<sup>st</sup>-5<sup>th</sup> grade and a minimum of 2 hours per week for 6<sup>th</sup>-12<sup>th</sup> grade.

### 4c - Provision of free or subsidised (healthy) school meals

Free school meals are provided to socially disadvantaged children according to the 2006 law on Social Security of Schoolchildren.

An amendment of Hygiene Norm was approved in 2005, restricting unhealthy food in school catering, especially in vending machines.

#### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

There is no regulation at national level, but Draft Guidelines for the Prevention of Obesity in the Workplace have been developed.

#### 4e - Role of health and education professionals

Guidelines for the promotion of healthy nutrition and physical activity in schools are provided to school teachers. These topics are also included in the undergraduate/postgraduate education of teachers.

Low cost/free nutrition counselling is available in primary health care.

### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

No specific information has been mentioned in this regard.

### **Engaging private sector**

#### 6 – Engaging commitment from commercial stakeholders

Several public-private partnerships have been established, through which a healthy nutrition and physical activity campaign was organised in several schools. Another example of voluntary commitment by commercial stakeholders is the voluntary labelling of soft drinks by the National Association of Beverages Producers.

### **Policy coherence at local level**

#### 7 – Promoting and supporting community based interventions

No specific information has been reported regarding this topic.

## Luxembourg (LU)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

Discussion is ongoing between different stakeholders, governmental representatives, associations, professional associations, but no legislation or regulation has been adopted yet.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

Efforts have been made at national and local level to remove energy-dense nutrient-poor foods and beverages in school vending machines. On the basis of the National program to promote healthy nutrition and physical activity, "Gesond iessen, mei bewegen", implemented since 2006, several voluntary initiatives have been taking place in different settings (local communities, cities, schools, day care centres, youth clubs, cantinas, associations, etc.) to improve the offer and the choice of healthy food and beverages.

#### 1c - Information and education campaigns promoting healthy eating

In 2006, the Ministries of Health, Education, Sports and Family committed through a common declaration to support concrete actions in each field, with a special focus to children and adolescents. The Ministry of Agriculture recently joined the pledge, mainly with the School fruit programme.

Furthermore, a national label was created to promote the adherence to the National program as well as further initiatives. At present, 135 requests for the allocation of the national Label for projects were validated.

Nutrition education and public awareness rising are two fundamental elements of the national program for healthy eating and physical activity. Thus, from 2007 to 2010, the Ministry of Sports has promoted health-enhancing physical activities such as walking, running, cycling and swimming. In 2009, swimming was sponsored in cooperation with the National Swimming Federation.

## **Making the healthy option available**

### **2a - Existence of measures affecting food prices**

No measures have been reported.

### **2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar**

Initiatives are being discussed but reformulation is not a priority for the moment.

### **2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)**

Initiatives to reduce the salt content of processed foods are being discussed. In 2008, the Government initiated a first meeting with the bakery federation to discuss salt reduction. In 2010, the issue was a priority of the political agenda opening the discussion with other relevant stakeholders. A training session for catering staff is planned with regards to salt reduction. Currently, a salt reduction committee is reviewing and updating initiatives to reduce salt intake in Luxembourg.

In previous years different initiatives were achieved to reduce the daily salt consumption such as carrying out population awareness campaigns in collaboration with health professionals (cardiologists, neurologists...) or favouring iodized salt in processed food (whenever possible) with the bakery and the butcher federations.

## **Encouraging Physical activity**

### **3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity**

Efforts to promote better urban design for everyday physical activity, increase traffic safety, and expand pedestrian zones, green spaces, play grounds and walking and cycling lanes are developed, but not fully implemented.

During the last years significant efforts have been made at national level as well as at municipality level to improve the possibilities to walk or cycle safely to the schools or the workplaces.

### 3b - Provision of guidelines for physical activity/ education campaigns

In the context of the national program "Gesond iessen, Méi Bewegen", national guidelines for healthy nutrition and physical activity were elaborated by an interdisciplinary expert group and published by the involved Ministries in 2007. In 2010, the national campaign for walking entitled "We are going to the moon" was launched.

## **Priority groups and settings**

### 4a - Mandatory inclusion of nutrition education in schools

Nutrition education is generally included in the curriculum of schools in Luxembourg. It is directly linked to the health promotion initiatives realized by the Ministry of Education and the Ministry of Health, in partnership with the teachers, the educators and the medical school services.

### 4b - Mandatory inclusion of physical education in schools

Physical education is generally included in the curriculum of schools in Luxembourg and is the responsibility of the Ministry of Education and the schools themselves

### 4c - Provision of free or subsidised (healthy) school meals

The provision of subsidized food has been developed as part of the "Wessen –Kennen-Wellen" Strategy of 2008-2009. Luxembourg is participating in the EU school fruit scheme for the school year 2010-2011.

Even if not regularly and not at national level, an increasing number of schools (classes, day care centres...) arrange various initiatives, such as weekly healthy breakfasts or healthy week or month, to promote health nutrition and physical activity.

### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

Initiatives to ensure a choice of healthy food at the workplace are being developed, such as the "Fruit at Office" project which provides fruits to employees. Physical activity is promoted through the promotion of cycling to work.

#### 4e - Role of health and education professionals

The health and education professionals are playing a crucial role in the national program. A great importance is given to the networking and the interdisciplinary approach. Different specific but also inter-professional education sessions were organised. Several actions in this field are initiated by health professionals and have repercussions at the local level. Many health professionals have a growing interest in healthy nutrition and physical activity and are adding health promoting activities to their professional activities or discussing them during national health conferences.

Low cost/free nutrition counselling is not available in primary health care, but physical activity counselling is available to some extent. Different organisations from the social-health area offer nutritional and physical activity counselling for free, such as the "Ligue Médico-Sociale".

Nutrition and physical activity are generally included in the curriculum of health professionals training.

#### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

Luxembourg reported to use different monitoring instruments, such as the Health Behaviour in School Aged Children (HBSC) or national statistical registers from different authorities (Direction of Health, General Inspectorate of Social Security, etc.).

#### **Engaging private sector**

#### 6 – Engaging commitment from commercial stakeholders

There have been several commitments by the private sector.

## **Policy coherence at local level**

### **7 – Promoting and supporting community based interventions**

A national interdisciplinary coordination body was set up to implement the action plan, entitled “Eat healthy, move more”, which seeks to evaluate the results, to identify further needs, and to adjust to the programme on nutrition and physical activity. This coordinating body will vouch for the commitment of local organizations, municipalities and other relevant stakeholders as identified in the action plan.

## Malta (MT)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

No information reported

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

Vending machines are not allowed in public schools and in most of the private schools. This is done through the HELP (Healthy Eating Lifestyle Plan) document, which includes a number of recommendations with regards to healthier eating and physical activity for school children. This Plan was prepared by the Ministry of Education in collaboration with the Health Division. All public schools and most private and church schools follow this plan and their implementation is currently being evaluated. No specific legislation aiming at reducing the impact of marketing of unhealthy foods to children was adopted yet. An obesity strategy is being drafted and initiatives on the marketing of unhealthy foods and beverages to children are being proposed. Currently, the Department of Health Promotion and Disease Prevention follows a policy that tries to reduce the impact of non-broadcast forms of advertising of such foods to children. For example food products high in fats, sugar and salt, are not allowed to be used as sponsors for health campaigns or any initiative that takes place within schools or that involves children.

#### 1c - Information and education campaigns promoting healthy eating

In 2010, Malta launched a National Obesity Campaign during which a number of adverts and booklets were distributed to advise people on how to lose weight; this initiative also carried out two free of charge programmes - Weight Reduction Programme and Aerobics classes – addressed to the overweight population. Moreover, nutritionists are quite active on the public scene since they participate to a weekly programme on national television (elaborated in collaboration with the Ministry for Rural Affairs and the Environment) and regularly contribute to other TV and radio programmes and talks on healthy eating in various settings including community, workplaces and schools.

Finally, commercials promoting fruit, vegetable and fish consumption were aired at local cinema theatres throughout 2008. In 2009, an intensive campaign was launched for the promotion of fruit and vegetables. This included leaflets, posters, a TV/radio PSA and a number of talks on the media and at community level.

### **Making the healthy option available**

#### **2a - Existence of measures affecting food prices**

No measures have been reported. With regards to tax rates, internal meetings started to take place but no official incentives have been reported.

#### **2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar**

The draft obesity strategy includes a number of recommendations regarding the availability of foods with lower fat/sugar content and salt reduction initiatives.

#### **2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)**

Malta is a member of the European MS Action Network on reducing salt intake in the population: the government started negotiating with the food industry in order to reduce salt in February 2010. In 2009 and 2010, salt awareness campaigns have been set up.

### **Encouraging Physical activity**

#### **3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity**

Actions to promote better urban design for everyday physical activity and the expansion of pedestrian zones, green spaces, play areas and cycling and walking lanes have been developed, but not fully implemented yet as the obesity strategy is still in drafting stage.

### 3b - Provision of guidelines for physical activity/ education campaigns

Guidelines for physical activity for youths have been developed by the National Health Council and launched in 2010 along with a number of campaigns to encourage more health enhancing physical activity. Furthermore, seminars have been set up to encourage health care professionals to promote physical activity with their patients. In 2010, a Strategy for the Prevention of Noncommunicable Diseases in Malta was launched by the Ministry of Health, which included a number of recommendations on promoting healthy nutrition and physical activity. The Department of Health Promotion and Disease Prevention also indicated that it planned to organize a yearly "Move for Health Day".

## **Priority groups and settings**

### 4a - Mandatory inclusion of nutrition education in schools

Nutrition education is taught in schools during the Personal & Social Development (PSD) or Home Economics classes or by Health & Safety teachers which are linked to the national curriculum for education in schools.

### 4b - Mandatory inclusion of physical education in schools

The inclusion of physical education is mandatory in primary and secondary schools.

### 4c - Provision of free or subsidised (healthy) school meals

Meals are not provided. However, the EU School Fruit Scheme is planned to start in October 2010 and will provide free/subsidized fruit and vegetables to all primary school children every week.

### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

No legislation as been reported in this regard. However, the Department of Health Promotion & Disease Prevention organizes "Health Weeks" and holds presentations on healthy eating, physical activity and/or obesity by nutritionists on the work places upon request.

#### 4e - Role of health and education professionals

Low cost/free nutrition counselling is not available in primary health care, but a nutrition helpline is offered by nutritionists of the Department of Health Promotion and Disease Prevention to provide nutritional advice. Physical activity counselling is not provided. Nutrition or physical activity is included in some of the curricula of health professionals training. Collaboration with primary health is provided through the delivery of weight management programmes in local councils. General practitioners have been trained to act as health promoters. Both the new Non-Communicable Disease plan and the draft obesity strategy focus on training and capacity building at Health Care level.

#### **Developing monitoring system**

##### 5 - Strengthening monitoring and evaluation

Evaluation of the 2010 obesity campaign is currently underway.

#### **Engaging private sector**

##### 6 – Engaging commitment from commercial stakeholders

No partnerships or commitments by the private sector have been reported. To achieve a more coordinated approach, a proposal to set up a multisectoral committee is currently being considered. During the National Salt Awareness Week in February 2010, negotiations started between the government and the private sector in order to make salt free bread without increasing its price.

#### **Policy coherence at local level**

##### 7 – Promoting and supporting community based interventions

Community based interventions are taking place in Malta but no clear information is provided about the link with the National Policy.

## Netherlands (NL)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

Nutrition labelling is not mandatory yet, but when nutrients are labelled, it has to be done according to the provisions in the Dutch Commodity Act. No provisions were regarding signposting. The Dutch industry set up a scheme for a voluntary and positive nutrition logo in order to inform the consumer about the healthier choice and to stress the importance of objective scientific criteria.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

A legislation banning marketing to children until the age of 7 was adopted, whereas a policy of co-regulation applies for children older than 7. In 2009 the Ministry of Health, Welfare and Sports and the Ministry of Youth and Families had several official meetings with the Dutch Food Industry Federation to try to define a code of conduct. It was agreed that current actions achieved by the industry in this field should be monitored first in order to get a better overview of the situation and then suggest adjustments.

The Netherlands is also a member of the European MS Action Network on reducing marketing pressure to children.

#### 1c - Information and education campaigns promoting healthy eating

The Dutch Nutrition Centre's main task is to inform and educate the public about nutrition and healthy eating. An example of fruit and vegetable promotion was a project in under-developed urban areas with a logo asking "Are you eating fruit (or vegetables) twice a day?". In 2005, the Nutrition Centre (Voedingscentrum) published "The Netherlands in balance: Preventing Obesity Master Plan 2005-2010". It also initiated the "Balance Day", the Healthy School programme as well as the "Don't get fat" campaign, which began in 2003.

## **Making the healthy option available**

### **2a - Existence of measures affecting food prices**

No measures affecting food prices are in place since consumer research is still unclear about the effect of changing food prices on healthier choices.

### **2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar**

No legislation in this regard has been reported. However, a taskforce on fatty acids was created by industry partners five years ago in order to reduce trans-fatty and saturated fatty acids. The issue of total fat and added sugar is being addressed by the Covenant on Overweight and Obesity since they are important factors related to energy balance. The Ministry of Health supports the reformulation initiative by facilitating product and consumption monitoring, educational activities by the Nutrition Centre and research on reformulation.

### **2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)**

Since 2007 an industry taskforce has been working on salt reduction with the government to facilitate monitoring at product and consumption level. Furthermore, the legally allowed maximum salt content in bread was lowered in 2009 and a further reduction will follow.

## **Encouraging Physical activity**

### **3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity**

Actions in this field have been developed and implemented. Since an extensive network of walking and especially cycling lanes already exist, focus rather lies on the improvement and expansion of regional cycling routes (for commuters) as well as of the national networks for recreational cycling and walking. Regarding the expansion of green spaces and play areas, non-binding guidelines were put in place for municipalities, recommending dedicating 3% of built area to play/sport purposes.

A strong cooperation between the different Ministries involved enables to develop an urban design that will stimulate and support healthy nutrition and physical activities. Examples of interventions and programs are the Cruijf Courts and the Richard Krajicek Foundation: both initiatives aim at disadvantaged social economic groups (children) to support them in having regular and safe physical activities in their neighbourhood.

### 3b - Provision of guidelines for physical activity/ education campaigns

Guidelines for physical activity have been developed. The Netherlands Institute for Sport and Physical Activity (NISB) aims to inform and educate the public about sport and physical activity. Thus it carried out the "Double 30" campaign to promote a minimum of 30 minutes daily physical activity.

Additionally, the Dutch Nutrition Centre incorporated recommendations on physical activity in the Dutch Food Bases Dietary Guidelines.

## **Priority groups and settings**

### 4a - Mandatory inclusion of nutrition education in schools

Inclusion of nutrition education is not mandatory in schools. Nonetheless, they can appeal to the Dutch Nutrition Centre, which will provide them with information, interventions and programmes related to healthy nutrition. Interventions performed by the Nutrition Centre are only on request and benefit from financial support of the Ministry of Health.

### 4b - Mandatory inclusion of physical education in schools

Inclusion of physical education is very common yet not mandatory in schools. Nonetheless, they can appeal to the Netherlands Institute for Sport and Physical Activity (NISB) which will provide them with information, interventions and programs related to physical activity. Interventions performed by the NISB are only on request and benefit from financial support of the Ministry of Health.

#### 4c - Provision of free or subsidised school meals

Given that most schoolchildren go home for lunch, no meals are currently offered at school.

#### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

Some actions have been established to ensure a healthy food choice at the workplace. Active travel to work and fitness to employees has also been encouraged, notably with the help of the Netherlands Institute for Sport and Physical Activity and the Dutch Nutrition Centre. In addition, the Covenant on Overweight and Obesity aims at promoting healthy food and physical activities at work.

However, no national legislation on the provision of facilities for physical activity at the work place has been enforced yet.

#### 4e - Role of health and education professionals

Teachers are provided with training to promote physical activity (all teachers in primary school and physical education teachers only in secondary school). The Netherlands Institute for Sport and Physical Activity and the Dutch Nutrition Centre constitute the main links between health and education professionals. Several programs such as Superchef, Supershopper, Smaaklessen, Schoolgruiten have been implemented since 2008 with the support of the Dutch Nutrition Centre to give to the target audience (here, schoolchildren) an understanding of public health nutrition through health and education professionals.

Low cost/free nutrition counselling is available in primary health care. Physical activity counselling in primary health care is not legally required, but generally standard in youth health care.

The inclusion of physical activity is included in the curriculum of specific health professionals training (sports physicians etc.), and nutrition is only included on local, not national level.

## **Developing monitoring system**

### **5 - Strengthening monitoring and evaluation**

The National Institute for Public Health and the Environment (RIVM) manages a Food Consumption Survey (FCS). This survey addresses both subgroups (young children, ethnic groups and elderly people) and the general population. Moreover, when necessary, additional micronutrient status surveys are performed in blood or urine samples, for example on sodium content of the body and iodine status.

In addition, obesity rates are monitored on a regular basis through self-reported data (CBS POLS-study) and addressed to children every ten years ("TNO growth study"). Monitoring of product composition, for example on unhealthy fats and salt content, is performed by the Food and Consumer Product Safety Authority by order of the Ministry of Health. Industry is also incited to monitor its own reformulation activities regularly as part of this taskforce.

Educational interventions and other activities are evaluated in order to select the most effective ones and gather them in the database of the RIVM Centre for Healthy Living.

## **Engaging private sector**

### **6 – Engaging commitment from commercial stakeholders**

The Covenant on Overweight and Obesity is made up of several stakeholders including the Ministry of Health, Welfare and Sport and the Ministry of Education, Culture and Science, together with the Dutch Food Industry Federation, the Food Retail Board and other representatives of the private sector. One example of initiative is the introduction of an energy value logo on packed food products by the Dutch Food Industry Federation, or the provision of cooking lessons in primary schools in cooperation with supermarkets, the food industry and other stakeholders.

## **Policy coherence at local level**

### 7 – Promoting and supporting community based interventions

The Dutch Nutrition Centre and the Netherlands Institute for Sport and Physical Activity are two institutions supported by the Ministry of Health that perform information and educational campaigns and develop interventions and programs for local prevention institutes.

These interventions are collected in the database of the RIVM Centre for Healthy Living and constitute a reliable source of information for local parties on how to proceed to implement actions.

In addition, scientific stimulation programs at the Netherlands Organisation for Health Research and Development also promote and support community based interventions.

## Poland (PL)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

No national legislation regulates the labelling of food products, but there are voluntary commitments by the industry.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

There are no regulations or voluntary initiatives regarding marketing of unhealthy food/drinks to children. Only the Act of 23 August 2007 on counteracting unfair market practices (Art. 9) and the Broadcasting Act of 29 December 1992 (Art. 16b) mentioned aggressive adverts to children as an unfair market practice.

In 2003, an Advertisement Council was created by associations of food producers, advertising agencies and media. They elaborated the code of Advertising Ethics which is a general self-regulatory tool and does not specifically address food advertising.

Poland is also a member of the European MS Action Network on reducing marketing pressure to children.

#### 1c - Information and education campaigns promoting healthy eating

The implementation of the National Health programme is scheduled for the period up to 2015, and its main objective is the reduction of morbidity and mortality attributable to non-communicable diseases.

### **Making the healthy option available**

#### 2a - Existence of measures affecting food prices

No measures have been reported.

#### 2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar

Initiatives are being discussed at governmental level, but no action has been enforced.

#### 2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)

Initiatives are being developed, but a national legislation does not exist. Poland is preparing a position paper in 2010 on undertaking initiatives aimed at reducing salt. Poland is a member of the European MS Action Network on reducing salt intake in the population.

### **Encouraging Physical activity**

#### 3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity

No action is reported on the expansion of pedestrian zones in cities. Initiatives to increase traffic safety and the expansion of green spaces, play areas and walking and cycling lanes are developed, but not fully implemented yet.

#### 3b - Provision of guidelines for physical activity/ education campaigns

Guidelines for physical activity are not provided and no information is indicated on the existence of an educational campaign.

### **Priority groups and settings**

#### 4a - Mandatory inclusion of nutrition education in schools

Inclusion of nutrition education is not mandatory in primary and secondary schools, but guidelines are mentioned in the Diet and Physical Activity Charter for Children and Youth at School. Nutrition education is therefore incorporated into biology lessons.

#### 4b - Mandatory inclusion of physical education in schools

Physical education is mandatory for children of 7-9 years old (three classes of 45 min per week) and of 10-15 years old (four classes of 45 min per week).

#### 4c - Provision of free or subsidized school meals

Free/subsidized school meals are provided. An action plan on the provision of free or subsidized school fruit and vegetable schemes is planned.

#### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

No initiatives have been taken in this regard.

#### 4e - Role of health and education professionals

While low cost/free nutrition counselling is partially available in primary care, physical activity counselling is not. Similarly, nutrition is to some extent included in the curriculum of health professionals training (although there are no national regulations), but physical activity is not.

### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

Monitoring and evaluation are being prepared in the framework of surveillance initiatives related to food consumption and food intake in order to have an overview of the situation at population level.

### **Engaging private sector**

#### 6 – Engaging commitment from commercial stakeholders

There are several commitments from commercial stakeholders, particularly through the “Polish Platform for Action on Diet, Physical Activity and Health” involving the food service sector and food industry among others.

### **Policy coherence at local level**

## 7 – Promoting and supporting community based interventions

Community based interventions (regulated at national level) include activities within the programme aiming for a reduction of salt intake by 2015, as part of the National Health Programme 2007-2015. No further information was provided.

## Portugal (PT)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

Voluntary initiatives from the food industry have been enforced.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

Portugal is a member of the European MS Action Network on reducing marketing pressure to children. Marketing of food and beverages to children is self-regulated through the EU-Pledge (Fipa, 2009) and the Portuguese Code for Food Product Advertising (ICAP, 2010) with regards to audiovisual industry.

#### 1c - Information and education campaigns promoting healthy eating

Several information and education campaigns have been set up focussing on the school setting, under the coordination of the National Programme of Obesity and the National Platform against Obesity.

### **Making the healthy option available**

#### 2a - Existence of measures affecting food prices

No measures have been reported.

#### 2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar

There are some developments in that respect through the National Platform against Obesity, set up in 2007, but no clear details about implementation were reported. Regulation has been issued to encourage the provision of healthy food products in schools.

### 2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)

Some developments were reported through the National Platform Against Obesity. A law was adopted on August 12, 2009 to set the maximum content of salt in bread and enact guidelines for the labelling of pre-packaged foods for human consumption, compelling the inclusion of visible data on the relative and absolute quantity of salt on the packaging. In parallel, contacts have been developed with the Associations of Manufacturers of Bread, the food industry and catering to implement the progressive reduction of salt in the food supply.

Portugal is a member of the European MS Action Network on reducing salt intake in the population.

## **Encouraging Physical activity**

### 3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity

Actions to expand pedestrian zones, green spaces, play areas and walking and cycling lanes are developed but not fully implemented yet. No programmes to increase traffic safety for pedestrians and cyclists are indicated. However, since urban design is governed at local level, several initiatives have been reported to promote better urban design and attractive structures for everyday physical activity (e.g. Association of Municipalities).

### 3b - Provision of guidelines for physical activity/ education campaigns

Guidelines for physical activity have been developed. The National Institute for Sport is responsible for education campaigns.

## **Priority groups and settings**

### 4a - Mandatory inclusion of nutrition education in schools

Nutrition education is mandatory in the curriculum of pupils aged from 6 to 15. In addition, around 98% of schools have developed projects in this area. The Ministry of

Education includes a National Coordinator and a dedicated team that supervise and support health promotion activities in schools.

#### 4b - Mandatory inclusion of physical education in schools

The inclusion of physical education is mandatory starting at 5<sup>th</sup> grade up to 12<sup>th</sup> grade (10 to 18 years-old).

#### 4c - Provision of free or subsidized school meals

Free/subsidized school meals are provided to children from low income families. Since 2008, a number of projects which involve the Ministry of Education have been launched, such as the School Fruit Scheme and SPARE, a free software that helps improve the quality of school meals.

#### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

There are some initiatives aiming to ensure a healthy food choice at the workplace.

#### 4e - Role of health and education professionals

The National Food and Nutrition Action Plan (2005-2009) emphasized the improvement of nutrition training to health professionals and school teachers, which implementation depends on the local governments. In this framework, the government has offered training in both nutrition and physical activity in primary care setting (doctors and nurses) all over the country to improve counselling. Since 2007, health professionals receive through the Platform training in physical activity.

### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

Through the National Platform against Obesity, different commitments of the stakeholders are being monitored and will be evaluated in its final stage.

## **Engaging private sector**

### **6 – Engaging commitment from commercial stakeholders**

Nestlé Portugal, in partnership with the Ministry of Education and the Portuguese Society of Nutrition and Food Science launched the “Apetece-me” educational programme, which provides tools for teachers to help them carry out a school project promoting a healthy lifestyle. Another example consists in FENACOOOP (Euro Coop's Portuguese members) offering seminars and consultations on healthy dietary habits to consumers.

## **Policy coherence at local level**

### **7 – Promoting and supporting community based interventions**

The education campaigns running via the national programme are being coordinated at the local council and community level. For instance, a protocol has been established between several municipalities in order to implement a nutritional surveillance system that will integrate socio-economic, demographic and environmental dimensions of health.

## Romania (RO)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

After 2002, a Guideline Daily Amount Nutrition Labelling Scheme was introduced as a voluntary initiative together with a campaign informing Romanian consumers about the new food labels. The information on the packaging of food products contains the energy content as well as the content of nutrients such as proteins, sugars, lipids, fibres and sodium per portion and per 100g in GDA.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

Marketing of food and beverages to children is self-regulated through the EU-Pledge and the Romanian Ethical Code for Food Product Advertising, under the auspice of the Romanian Food Industry. A taxation system for advertising foods to children is under discussion.

The Ministry of Health also issued a list of criteria on which basis some food products are not recommended for children. These products are not allowed to be sold within schools in order to create healthy diet habits for pupils.

#### 1c - Information and education campaigns promoting healthy eating

Through the National Health Programme, the Ministry of Health develops every year activities which promote healthy eating, increasing physical activity and avoiding the alcohol and tobacco consumption.

The National Council of Audio-Vision and International Advertising Association (IAA) has carried out the "Program for a healthy life style" campaign, whose goal is to incite the population to have a balanced diet and to exercise regularly.

The "V.I.A.T.A." - "LIFE" education and communication campaign will aim at encouraging both physical activity and healthy nutrition by broadcasting adverts on radio, TV and written press both at national and county level (starting from the fourth quarter of 2010).

Finally, the PRAIS Foundation (NGO), the Ministry of Health and the Ministry of Education, Research, Youth and Sport have started collaborating to implement the "I also live healthy!" project (starting in October 2010). This campaign promotes healthy nutrition, physical activity as well as a healthy lifestyle for schoolchildren, parents and primary teachers.

## **Making the healthy option available**

### 2a - Existence of measures affecting food prices

The government is currently discussing a new legislation. In the beginning of 2010, the Parliament adopted an amendment to its 2006 Healthcare reform to impose a new tax on several "non-recommended" foodstuffs as of March 1<sup>st</sup>, in an effort to combat obesity. Funds raised through the tax will be used by the Ministry of Health for health promotion schemes.

### 2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar

This issue is being addressed within the draft of the Romanian Food and Nutrition Action Plan but no national legislation has been enforced yet.

### 2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)

The Ministry of Health and the Romanian Food Industry Federation – Romalimenta have agreed to conclude an agreement on the food reformulation for salt. This agreement will be responsible for evaluating the current status of daily sodium intake, providing information to consumers on salt-related health risks and contributing to food reformulation for salt.

## **Encouraging Physical activity**

### **3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity**

Actions to increase traffic safety and expand pedestrian zones, green spaces, play areas and cycle/walking lanes have been developed, but have not been fully implemented yet.

### **3b - Provision of guidelines for physical activity/ education campaigns**

Guidelines on physical activity have been developed and implemented. The National Institute for Public Health has started two education campaigns that promote physical activity, namely "Healthy Community" and "I also live Healthy". The project called "Increasing access to high quality primary prevention services for children and adolescents in Romania" aims to create a "Toolkit for action on nutrition and physical activity". This guideline will be used as a resource pack for local partnerships to help them develop and monitor action plans in the field of nutrition and physical activity at the county or school level.

## **Priority groups and settings**

### **4a - Mandatory inclusion of nutrition education in schools**

Although there is no national legislation in place, an optional national curriculum for health education, including nutrition, is available.

### **4b - Mandatory inclusion of physical education in schools**

The inclusion of physical education in primary and secondary schools is mandatory, regulated at national level and specified for each grade.

### **4c - Provision of free or subsidized school meals**

- The government has developed two programmes for a healthy diet in schools. Since September 2003, it provides daily free dairy and bakery products to the pupils from grade 1 to 8. In addition, free distribution of fruits (apples) to children

under 14 will be undertaken starting in the 2010-2011 school year for a period of maximum 100 days.

#### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

Romania took part to the European project "Guidelines for the prevention of the obesity at the workplace", during which guidelines were issued [www.gpow.eu](http://www.gpow.eu).

#### 4e - Role of health and education professionals

8765 teachers were trained to teach health education in the framework of the "Health Education in the Romanian Schools" programme. Some school inspectors and teachers were also trained to promote physical activity.

Nutrition and physical activity counselling in primary care is encouraged, but there is no legal regulation at national level.

Nutrition and physical activity are included in the curriculum of health professional training. A toolkit for action is being developed especially for health and educational professionals to address behavior change at school, kindergarten and family doctor clinic level. The toolkit shall be made available at local level.

### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

Monitoring initiatives have been set up to overview food consumption and food intake at population level.

### **Engaging private sector**

#### 6 – Engaging commitment from commercial stakeholders

There have been some actions by commercial stakeholders, including an education and physical activity campaign targeting 4<sup>th</sup> grade children.

The Ministry of Health and the Romanian Food Industry Federation – Romalimenta, have agreed to conclude an agreement on the food reformulation for salt.

## **Policy coherence at local level**

### **7 – Promoting and supporting community based interventions**

Within the project “Improving access to primary prevention services to children and adolescents in Romania- healthy nutrition and physical activity”, strategic partnerships have been concluded at local/county level between institutions such as district health authorities, school inspectorates, county councils, etc. The purpose was to define county level plans of action for physical activity and healthy nutrition, joint monitoring and evaluation of micro-projects that promote healthy nutrition and physical activity in schools and kindergartens.

## Slovakia (SK)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

The April 2004 decree of the Ministry of Agriculture and the Ministry of Health (which was updated in 2009) describes current regulations concerning nutritional labelling.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

Slovakia reported in the WHO Global Marketing Consultation in 2009 that such a policy will be developed, but only after the WHO recommendation is finalized. At present, there is no specific legislation on marketing of unhealthy foods and beverages to children. The Act No. 355/2007 Coll. on the protection, support and development of public health as amended includes the obligation to provide safe food with the corresponding energetic and biological value in any institution for children and youth.

#### 1c - Information and education campaigns promoting healthy eating

Campaigns were carried out as part the National Obesity Prevention Programme and the Programme for the Improvement of Nutrition of Slovak Inhabitants, including media advertising and education of the public.

The Ministry of Agriculture, in collaboration with the Dairy association, also set up a campaign entitled "Discover milk", published a magazine "Discover milk" and organized promotional activities, especially for children and youth.

In addition, the Ministry of Agriculture cooperated with the Association of Consumer Organizations in the Slovak Republic to contribute to the "European diary" which advocates health food principles among the young generation.

Leaflets promoting healthy food – "Healthy food = one of the factors of your health", also informed about the basic principles of healthy eating. The Ministry of Agriculture also uploaded on their website articles to inform the population about ongoing campaigns such as the School Milk and School Fruit scheme and the Nutrition Policy strategies in the agriculture sector.

## **Making the healthy option available**

### **2a - Existence of measures affecting food prices**

There is direct support for fruits, vegetables and potatoes, particularly in the organic and integrated production, which enables to lower the price of fruits and vegetables for consumers. In 2009 the VAT was reduced from 16% to 9% for farm products – especially for milk, fruits and vegetables.

### **2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar**

There have been developments in that respect, as described in the Programme for Nutrition improvement of the Population in Slovakia but no specific changes in legislation have been made so far.

### **2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)**

There have been initiatives to reduce salt content of processed foods, as described in the Programme for Nutrition improvement of the Population in the Slovak Republic but no official legislation has been implemented yet. There is a voluntary initiative of some food business operators with the aim to reduce salt content of foods.

Slovakia is a member of the European MS Action Network on reducing salt intake in the population.

## **Encouraging Physical activity**

### **3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity**

Action to increase traffic safety has been undertaken as part of the National Programme of Care for Children and Adolescents. The Ministry of Transport, Post and Telecommunication has developed a pilot programme on road safety, named "You see me?".

Efforts have been achieved on the promotion of better urban design to provide safe and attractive structures for everyday physical activity, the expansion of green spaces, play grounds and walking and cycling lanes, for example through the "Safe community" project from the Ministry of Transport, Post and Telecommunication.

Within the framework of the National programme on Preventing Obesity, the construction of new sport centres and of routes for running, walking and cycling with the cooperation of state administration and self-administration is planned for 2010 and lies under the responsibility of the Ministry of Construction and Regional Development.

### 3b - Provision of guidelines for physical activity/ education campaigns

Guidelines for physical activity are included in the National Programme for Sport Development, which was approved in 2001. This Programme has two main priorities: promotion of physical activity in schools and promotion of sport as leisure activity. The Public Health Authority has set up a national education campaign, called "Be fit with gymnastics".

## **Priority groups and settings**

### 4a - Mandatory inclusion of nutrition education in schools

The inclusion of nutrition education in schools is mandatory, but only as part of biology, chemistry, ethics, physical education and other lessons.

### 4b - Mandatory inclusion of physical education in schools

The inclusion of physical education in schools is mandatory in all primary and secondary schools.

### 4c - Provision of free or subsidized school meals

There is provision of free/subsidized school meals, which is regulated by a law updated in 2008. A national strategy on the provision of fruit and vegetables is being developed. Slovakia participates to the EU School Fruit Scheme (subsidized) starting from 2009/2010, which has not been implemented in all kindergartens and primary schools and is a voluntary scheme.

### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

There is no national strategy in this regard.

#### 4e - Role of health and education professionals

Teacher training in promoting healthy nutrition/physical activity is not provided.

Low cost/free nutrition counselling in primary care is available in specific centres and physical activity counselling is available to some extent, but there is no enforcement at national level.

The inclusion of nutrition and physical activity in the curriculum of health professionals training is not mandatory at a national level.

### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

Monitoring initiatives have been set up to overview food consumption and food intake at population level.

### **Engaging private sector**

#### 6 – Engaging commitment from commercial stakeholders

One example comes from the Slovak Tourist Club which has organized events promoting physical activity, and other sport initiatives. The food business operators have voluntarily committed to reduce sodium gradually in 2009-2010 in their brand dehydrated food products such as soups and prepared foods.

### **Policy coherence at local level**

#### 7 – Promoting and supporting community based interventions

A National Obesity Prevention Programme was developed in 2008. The programme cooperates with the regional offices of Public Health, which are dealing with the prevention of non communicable diseases, risk factors of lifestyles such as smoking, insufficient physical activity, poor diet and obesity.

## Slovenia (SL)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

The labelling of nutrients is not mandatory. However, the Slovenian Heart Association developed a system where the food industry can buy an accreditation for a "Healthy Heart Symbol" on the packaging, which is assessed by the authorities and is in line with recommended amounts of salt, saturated fat, energy and cholesterol.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

Slovenia participates to the European MS Action Network on reducing marketing pressure to children. The Ministry of Education adopted the law on school nutrition in May 2010, introducing a ban on vending machines for foods and beverages in all Slovene primary and secondary schools. The Ministry of Culture is also implementing the EU Directive on Audiovisual Media Services After consultation with different stakeholders.

Several broad regulations on advertising to children are reported (e.g. 2001 Media Act), although none is specifically addressing marketing and advertising of food and beverages. In Slovenia, both legislation (Food Act: ZZUZIS and Consumer Act) and self-regulation (Code of Slovenian Advertising Chamber) are in place with regards to advertising food and beverages to children.

#### 1c - Information and education campaigns promoting healthy eating

Several campaigns have been carried out, including the "That's me" website created in 2004 providing information for adolescents on nutrition and physical activity. Further topics are covered in the National Programme of Food and Nutrition such as general promotion of healthy nutrition and healthy lifestyle for pregnant women, children and adolescents, promotion of work-related healthy nutrition of workers at the workplace etc.

## **Making the healthy option available**

### **2a - Existence of measures affecting food prices**

No strategy affecting food prices has been implemented, but incentives to produce healthy food products are promoted.

### **2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar**

This issue is addressed within the Slovenian Food and Nutrition Action Plan, but no national legislation exists.

### **2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)**

The National Action Plan for Salt was adopted in July 2010. In addition, a national salt campaign was launched in May 2010 and will take place until March 2011. Discussion with food industry (Chamber of Commerce) started in 2009 and a seminar was organized in this regard in April 2010. Slovenia takes part to the European MS Action Network on reducing salt intake in the population.

## **Encouraging Physical activity**

### **3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity**

A programme to increase traffic safety for pedestrians and cyclists has been developed and implemented as part of the National Health Enhancing Physical Activity Programme for 2007-2012. Similarly, actions to expand pedestrian zones, green spaces, play areas and walking and cycling lanes have been developed and are supported by a resolution on National Traffic Safety and a law on spatial planning.

### **3b - Provision of guidelines for physical activity/ education campaigns**

Physical activity guidelines are included in the National Health Enhancing Physical Activity Programme for the period of 2007-2012. Renovated physical activity guidelines for all subpopulation groups are under preparation.

"Body weight for adolescents" and "Getting active" (2004-2006) are health education programmes for adolescents aged 13-16 years that provide systematic checks of body weight and physical activity. "Getting active" in particular will be implemented by the Institute of Public Health in line with the National Slovenian Programme on Food and Nutrition Policy

([http://ivz.arhiv.over.net/javne\\_datoteke/katalog/datoteke/177-Telesna%20teza%20knjizica.pdf](http://ivz.arhiv.over.net/javne_datoteke/katalog/datoteke/177-Telesna%20teza%20knjizica.pdf)).

## **Priority groups and settings**

### **4a - Mandatory inclusion of nutrition education in schools**

The inclusion of nutrition education is mandatory in all schools.

### **4b - Mandatory inclusion of physical education in schools**

The inclusion of physical education is mandatory in all schools.

### **4c - Provision of free or subsidized school meals**

There is provision of free/subsidized meals in all schools, regulated at national level by the Ministry of Education and Sport. A national pilot project called "Jabolko" (English "Apple"), has been implemented in 30 schools. The EU School Fruit Scheme is also being implemented in more than 75 % of all Slovene primary schools. With regards to the provision of free or subsidized school milk schemes, the Slovenian Food and Nutrition Action Plan recommends the purchase of milk containing 3,5% fat in kindergartens and 1,5% fat in primary and secondary schools.

### **4d - Promoting the provision of healthy food and facilities for physical activity at the work place**

In 2008, the Ministry of Health launched the "Dietary guidelines for nutrition at work". Activities endorsing healthy lifestyles in the workplace within the "Fit for Work" and "Move Europe" and focusing on both nutrition and physical activity have also been implemented.

A further initiative was the promotion of work-related healthy nutrition and the improvement of nutrition options available to workers, as part of the Slovenian Food and Nutrition Action Plan.

#### 4e - Role of health and education professionals

Teacher training to promote healthy nutrition and physical activity is provided, including regular meetings and/or working groups. The “Healthy nutrition and physical activity for secondary school teachers” programme (2004-2005) empowers teachers to include nutrition and physical activity in the curriculum. A research on inhibitory and facilitating factors for healthy nutrition and physical activity among adolescents is conducted as part of the programme.

Basic nutrition counselling for infants, children and adolescents is provided by paediatricians on a free-access basis for all population as part of systematic checks. Physical activity, nutrition and weight management counselling in primary health care is provided by the Countrywide Integrated Noncommunicable Disease Intervention (CINDI) – part of the Institute of Public Health in Slovenia – for high-risk groups.

Nutrition is included in the curriculum of health professionals training on all levels, and the inclusion of physical activity is planned.

### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

The national policy is currently being evaluated. The school fruit scheme and the national school meals programme are regularly monitored and evaluated.

### **Engaging private sector**

#### 6 – Engaging commitment from commercial stakeholders

Voluntary actions by commercial stakeholders (involving food & drink producers and the media) include Guideline Daily Amount (GDA) labelling schemes to provide information about the nutritional properties of products or reduction of salt content in some food products.

## **Policy coherence at local level**

### 7 – Promoting and supporting community based interventions

Different community based interventions took place under the supervision of the Ministry of Health and the National Public Health Institute to implement the National Slovenian Programme on Food and Nutrition Policy.

## Spain (ES)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

No information reported.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

In collaboration with the Spanish Federation of Food and Drink Industries, a set of guidelines was drawn up to help companies in the development, implementation and dissemination of their advertising messages directed at minors in order to respect general legislation. A monitoring Commission is in charge of evaluating the application of the code. As a result of the code, for example, over the last six months 10% of food advertisements aimed at children have been refused permission to broadcast, 20% have been allowed after changes were made, and 70% were given permission. With regards to school vending machines, a national legislation has been proposed and needs to be adopted by the regional governments.

#### 1c - Information and education campaigns promoting healthy eating

As part of the 2005 Strategy for Nutrition, Physical Activity and Prevention of Obesity, 100 000 leaflets on healthy diet for children were distributed, and TV channels with a young target audience broadcasted healthy eating promotional messages. Other activities include promotional activities in shopping centres and educating children in schools.

Since the school setting is targeted in priority, the PERSEO programme was initiated by the Ministries of Health and Education, with the aim to prevent obesity by encouraging healthy eating habits and regular physical activity, not only among school children but also in their families, through parents' associations.

## **Making the healthy option available**

### **2a - Existence of measures affecting food prices**

No measures have been reported.

### **2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar**

There have been several voluntary initiatives achieved by the food industry, such as efforts to reduce saturated fats by Bimbo or food reformulation by Santiveri and Unifine.

### **2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)**

Several voluntary initiatives have arisen, such as the agreement for salt reduction in bread by the Spanish Bakery Confederation. A national plan for Spain with regards to salt reduction initiatives will also be launched. In 2009, Spain organized a conference to start discussing on salt reduction with stakeholders (e.g. industry and regional governments).

Spain is a member of the European MS Action Network on reducing salt intake in the population.

## **Encouraging Physical activity**

### **3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity**

Initiatives to promote better urban design to provide safe and attractive structures for everyday physical activity have been developed in line with the Integral Plan for Physical Activity and Sport Promotion which includes several measures to improve physical activity practices related to urban planning <http://www.csd.gob.es/csd/sociedad/plan-integral-para-la-actividad-fisica-y-el-deporte-plan-a-d>.

This comprehensive action Plan was presented by the State Secretariat for Sports in 2009 and includes 15 programs and 100 measures that will be implemented during the coming years.

Efforts to increase traffic safety and expand pedestrian zones, green spaces, play areas and walking and cycling lanes have also been developed.

### 3b - Provision of guidelines for physical activity/ education campaigns

Guidelines for physical activity were published by the Ministry of Health and Consumer Affairs

([http://www.msc.es/ciudadanos/proteccionSalud/adolescencia/actividad\\_fisica.htm](http://www.msc.es/ciudadanos/proteccionSalud/adolescencia/actividad_fisica.htm)).

The Integral Plan for Physical Activity and Sport Promotion will also put into place communication campaigns (e.g. "Move against childhood obesity") to promote physical activity in coordination.

## **Priority groups and settings**

### 4a - Mandatory inclusion of nutrition education in schools

The inclusion of nutrition education in schools is not mandatory. However, the soon-to-be adopted Food Safety and Nutrition Act will guarantee the training of nutrition and healthy habits at school. In addition, all representatives of health regional government signed in July 2010 a Document of Consent on Nutrition in Educational Centers (Documento de Consenso sobre la Alimentación en los Centros Educativos) with recommendations and technical criteria for the feeding and food supplies in schools. The PERSEO programme was piloted in 72 schools around the country (reaching approx. 12 000 primary pupils) to encourage healthy eating habits. The programme will be extended to more schools if successful, after being evaluated (by measuring the BMI of children).

### 4b - Mandatory inclusion of physical education in schools

The inclusion of physical activity in primary and secondary schools is mandatory in the whole country.

### 4c - Provision of free or subsidized school meals

Free/subsidized school meals are not provided, but initiatives of free or subsidized fruit and vegetables schemes are being developed.

#### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

In this regard, several programmes run by companies at the national, regional or local level are implemented. Annually, the Spanish government rewards the best program at the workplace to promote healthy food and physical activity. The Integral Plan for Physical Activity and Sport Promotion references some of these initiatives and evaluate them in order to facilitate the practice of physical activity at the workplace.

Furthermore, the NAOS Strategy (i.e. the Spanish Strategy for Nutrition, Physical Activity and the prevention of Obesity) provides detailed information and documentation about the programs to improve such initiatives launched or sponsored by a local, regional or national government.

#### 4e - Role of health and education professionals

A Royal Decree was approved in 2006 to define the common portfolio of services to be provided by the National Health System and coordinates the actions of the regional governments in this field. From then on, the health professionals' role will take into account the prevention and promotion of health, including assessment of the nutritional status and the early detection of obesity among young people.

Nutrition is included in the curriculum of all health professionals training, but physical activity is not.

### **Developing monitoring system**

#### 5 - Strengthening monitoring and evaluation

An Obesity Observatory was put into place to regularly quantify and analyse the prevalence of obesity in the Spanish population and measure progress in the prevention of the disease.

## **Engaging private sector**

### **6 – Engaging commitment from commercial stakeholders**

In collaboration with the Spanish Federation of Food and Drink Industries, a set of guidelines was drawn up to help companies in the development, implementation and dissemination of their advertising messages directed at minors.

Further initiatives include an agreement for salt reduction in bread involving the Spanish Bakery Confederation and several other activities carried out by commercial stakeholders (e.g. “Contigo”, a campaign aiming to prevent childhood obesity by Eroski supermarkets or the “A comer bien!” campaign which provides material informing on healthy nutrition by Nestle’s Spain, efforts to reduce saturated fats by Bimbo, etc.)

## **Policy coherence at local level**

### **7 – Promoting and supporting community based interventions**

As Public Health is decentralized in Spain, community based interventions have been set up under the coordination of the regional governments and local public health institutes.

## Sweden (SE)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

The Keyhole symbol is a national voluntary food labelling that identifies healthier food products. Foods and ready-made meals labelled with the Keyhole symbol have better fat quality, less sugar, less salt and more fibre than food products of the same type not carrying the symbol. The symbol can also be used on fruits, vegetables and fish. The Keyhole symbol helps consumers identifying the healthier options and stimulating manufactures to achieve product reformulation and development of healthier products. The Keyhole was established in Sweden in 1989 and has become a common Nordic label for healthier food products in Denmark, Norway and Sweden from 2009.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

In 2008, the public health policy was renewed, targeting marketing as one of the main issues to be discussed within the government's Forum for dialogue with representatives from the food industry, retailers, consumer organizations and media. In June 2009 the Forum agreed on a set of statements promoting healthy eating habits to the general public, especially among children.

In addition, since 1996 there has been a national ban on radio and television advertising targeting children under the age of 12. The ban includes advertising of unhealthy food and beverages before, after and during children's programmes. People associated with children's radio or television programmes are not allowed to take part to adverts targeted at children under the age of 12. The ban only covers broadcasters within Sweden.

The Swedish food and retail sector has also enacted codes of conduct with a self-regulatory framework limiting marketing to children in general, and an additional regulatory framework for marketing of food and non-alcoholic beverages.

Sweden is a member of the European MS Action Network on reducing marketing pressure to children.

### 1c - Information and education campaigns promoting healthy eating

Different education campaigns have been set up to ensure a better implementation and comprehension of the Swedish national policy. The Government has commissioned the Swedish National Institute of Public Health to coordinate an awareness week promoting healthy eating habits and physical activity among the general public. The week called "Ett friskare Sverige" ("A Healthier Sweden"), aims to increase the knowledge and awareness of healthy eating habits and physical activity and their impact on health; increase awareness regarding the social disparities in health, including people with intellectual disabilities/impairments; as well as improve the possibilities for individuals to participate in healthy activities. The institute shall work together with national and local organizations - public, private and civil - in order to get the message through. The week is scheduled for May 9-15, 2011.

The Food Based Dietary Guidelines for the general population have been summarized into five recommendations focusing on the most important changes in food habits. In 2009, these were analysed in light of the Swedish national environmental objectives.

The National Food Administration also provides extensive information about food and nutrition on the web and through a call- and mail service for the public.

To promote long-term improvements for healthy eating, interaction with stakeholders were organized when launching updated national guidelines to discuss what recommendations should be given to the public. For instance dialogue with employers and employees associations and trade unions about new national guidelines for healthy eating at work; dialogue with school authorities, headmaster and meal planner associations about updated national guidelines for healthy eating in schools and preschools; dialogue with professionals' associations in maternity care about new national dietary advices for pregnant and lactating women. At present updated national guidelines for food in elderly care and advices for healthy food for children are being prepared in collaboration with appropriate professional national associations.

### **Making the healthy option available**

#### 2a - Existence of measures affecting food prices

The issue is being discussed, but no measures have been reported.

## 2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar

Foods and ready made meals labelled with the Keyhole symbol have better fat quality, less sugar, less salt and more fibre than food products of the same type not carrying the symbol. The symbol can also be used on fruits, vegetables and fish. The keyhole symbol is there to help consumers identify the healthier options and stimulates manufactures to product reformulation and development of healthier products. The keyhole was established in Sweden in 1989 and from 2009 it has become a common Nordic label for healthier food products in Denmark, Norway and Sweden. The organization "Keyhole in restaurants" guides, certifies and monitor restaurants that train the staff in healthy cooking and daily offers an optional meal in accordance with the guidelines of the keyhole symbol.

## 2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)

Sweden participates in the European MS Action Network on reducing salt intake in the population and encourages co-operation with researchers to reduce salt intake, for future reporting of intake data on salt to the EU. National Food Administration has an active dialogue with food industry, retail and restaurants with the aim to reduce salt in food products and meals.

## **Encouraging Physical activity**

### 3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity

Actions on the expansion of green spaces play areas, and walking and cycling lanes are developed. The goal is to increase the number of travelling by bicycle by a third by 2010. Initiatives are described within the Environment Policy adopted by the Swedish Parliament in 1999 and 2005 and include the expansion of green spaces, cycle and walking lanes. There is a specific focus on traffic safety.

The government has commissioned the Swedish National Institute of Public Health as well to gain and spread knowledge on how decision-makers can work with urban design and public planning in order to create supportive environments for physical activity. A couple of reports were published concerning e.g. children and elderly.

Guidance has also been produced in order to facilitate the work for public planning personnel at different levels in Sweden.

### 3b - Provision of guidelines for physical activity/ education campaigns

Since 2001, guidelines for physical activity for both adults and children have been implemented at local level throughout the country (<http://www.fhi.se/sv/Vartuppdrag/Fysiskaktivitet/Rekommendationer>).

Initiatives reported as an example of education campaigns to promote physical activity are "Physical activity on prescription", where physical activity is prescribed by health professionals as treatment and prevention.

## **Priority groups and settings**

### 4a - Mandatory inclusion of nutrition education in schools

The inclusion of nutrition education in schools is mandatory.

### 4b - Mandatory inclusion of physical education in schools

The inclusion of physical education in schools is mandatory.

### 4c - Provision of free or subsidized school meals

Every child is offered a free daily lunch at school according to the law. Normally it is a hot lunch served in canteens. The new Education Act one requires that, from now on, in all forms of schools, school meals will have to be nutritious.

Guidelines from the National Food Administration on planning, producing and serving healthy food at school have also been issued.

### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

There is no mandatory regulation in this regard, but national guidelines are available.

### 4e - Role of health and education professionals

Teacher training in the promotion of healthy nutrition and physical activity is provided at several universities nationwide. In the national guidelines for healthy eating at

school, some chapters are specifically dedicated to education for health and education professionals. Handbooks and further readings for health professionals are distributed freely to provide information to the public. There are specific handbooks designed for maternity health care, infant health care and child health clinics.

Regarding physical activity, an initiative called "Physical activity on prescription" is prescribed by health professionals as a treatment and in prevention. The National Institute of Public Health was commissioned by the government to develop and spread the method. Evaluations show that the method is effective and that it is well used among the county councils (that are responsible for health care in Sweden).

The National Board of Health and Welfare is also producing preventive guidelines in the field of nutrition, physical activity, tobacco and alcohol. Recommendations will be provided, aimed at decision-makers and health care staff, regarding effective methods on how to promote a healthy living and how to change behaviours that may lead to overweight and obesity-related diseases. The guidelines, that will be presented in October 2010 (a preliminary version), will be an effective instrument in order to strengthen the preventive work in the health care system.

Nutrition and physical activity are not included in the curriculum of all health professionals training.

## **Developing monitoring system**

### **5 - Strengthening monitoring and evaluation**

Different types of surveys and reports regarding Public Health, Nutrition and Physical activity are being carried out regularly:

- National dietary surveys are done regularly
- National food frequency surveys are done every second year
- Monitoring of the Nordic Plan of Action on better health and quality of life through diet and physical activity
- The Swedish National Institute of Public Health conducts yearly a National Survey of Public Health and every fifth year a Public Health Policy Report
- The National Board on Health and Welfare presents every year a Report on Public Health

- The National Board on Health and Welfare is following up the frequency of breastfeeding in Sweden
- Nationwide evaluation of the guidelines for healthy eating at school was done in 2009

## **Engaging private sector**

### **6 – Engaging commitment from commercial stakeholders**

The government carries out an ongoing dialogue with food and retail industries on ways to promote better nutrition in order to reduce overweight and obesity. In June 2009, a joint report stressed the importance of improving eating habits, especially among children and youth.

## **Policy coherence at local level**

### **7 – Promoting and supporting community based interventions**

A Nordic catalogue of best practice initiatives for healthy food and physical activity has been implemented.

The National Food Administration is currently developing a web-based tool to monitor food habits for the use of local and regional public health workers.

Several local initiatives are being carried out, such as the “Enjoying life – Physical Activity and diets for a healthier future” campaign in Örebro, “Initiatives for a healthier life in Ale” (2007-2008), “Food, Exercise, and Motivation – a discussion group for overweight persons” in the Mittenälvsborgs region (2009-2011), “Active life in built environments” which is a tutorial in planning and designing of urban areas to promote physical activity (started in 2009), etc.

As stated under 1c the week of activities “Ett friskare Sverige” (“A healthier Sweden”) highlights various community based activities to people in order to promote regular physical activity and healthy eating habits.

## United Kingdom (UK)

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

The British Government has worked with the food industry to develop better information on the nutrient content of packaged foods. Industry has adopted a range of solutions from 'traffic colour' coding of the levels of nutrients to front of pack labelling based on Guideline Daily Amounts (GDAs). Whilst around 80% of foods carry nutrition labelling on the back of pack there is currently no national legislation requiring its provision and industry has provided the information voluntarily.

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

Ofcom, which is the independent regulator and competition authority for the UK communications industries, imposed TV advertising restrictions, which are in line with the government's policy objective of reducing obesity. In December 2003, the then Secretary of State for Culture, Media and Sport asked Ofcom to consider proposals for strengthening the rules on television advertising of food aimed at children, and in early 2004 Ofcom conducted research into the role that television advertising plays in influencing children's consumption of foods that are HFSS. This suggested that TV advertising had a modest effect on children's food preferences. Ofcom's impact assessment suggested that long-term benefits of advertising restrictions could exceed the costs and therefore concluded that it should play its part, and impose proportionate restrictions on TV advertising.

The restricted products in the UK are those that are high in fat or salt or sugar (HFSS), according to the nutrient profiling (NP) scheme developed by the Food Standards Agency (FSA). The objectives are to limit children's exposure to advertising for HFSS products and to restrict the use of advertising techniques appealing to children.

Currently, television services in the UK have co-regulatory arrangements stating that HFSS advertisements may not be shown during children's programmes and during programmes of particular appeal to children (e.g. family films). HFSS advertisements aimed at children at other times may not use techniques attractive to children (e.g.

licensed cartoon characters) or make health claims. There are also self-regulatory rules on advertising food to children in non-broadcast media in the UK Committee of Advertising Practice (CAP) Code which has recently been extended to cover advertising in digital media such as UK-based company websites and social networking sites. Food and drink advertisements targeted at children should not condone unhealthy diets, include promotional offers, use exploitative techniques, include licensed characters (e.g. cartoon characters) and encourage pester power. The United Kingdom is also a member of the European MS Action Network on reducing marketing pressure to children.

#### 1c - Information and education campaigns promoting healthy eating

Change4Life is a social marketing campaign with the goal to encourage a healthy diet and physical activity. It includes advertising on TV as well as extensive below the line activity. The "5 A DAY" Programme includes the School Fruit and Vegetable Scheme for England, which provides free fruit and vegetables for children aged 4-6 years. In addition, nutrient specific public awareness campaigns on saturated fat and salt have been undertaken by the Food Standards Agency.

### **Making the healthy option available**

#### 2a - Existence of measures affecting food prices

No measures have been reported to affect food prices.

#### 2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar

The responsibility for reformulation to reduce levels of saturated fat and salt in foods was transferred from the Food Standards Agency to the Department of Health as part of the work on a Responsible Deal with the UK food industry.

The Food Standards Agency has issued recommendations for reductions in saturated fat in foods such as biscuits, cakes and confectionary. There have also been initiatives to increase the availability of processed foods with reduced content of total fat and/or added sugars by retailers or individual catering companies.

The UK government has also monitored the reductions in nutrients in various food categories through the National Diet and Nutrition Survey and market data.

### 2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)

There have been initiatives to reduce the salt content of processed foods as the UK is a member of the European MS Action Network on reducing salt intake in the population.

Salt reduction targets were set by the Food Standards Agency. It also produced a Commitments and Achievements document in which details of the achievements of industry to lower levels of salt in foods are provided by company.

## **Encouraging Physical activity**

### 3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity

Initiatives to promote better urban design for everyday physical activity, increase traffic safety and to expand pedestrian zones, green spaces, play areas, cycle and walking lanes have been developed and implemented. Most of them are regulated through local government policies.

### 3b - Provision of guidelines for physical activity/ education campaigns

Guidelines for physical activity are developed and implementation is ongoing. An example of an education campaign for physical activity is the "Changes4Life" campaign that is a social marketing campaign with the goal to encourage people to be more active in order to achieve and maintain a healthy weight.

## **Priority groups and settings**

### 4a - Mandatory inclusion of nutrition education in schools

The inclusion of nutrition education in the curriculum of primary and secondary schools is mandatory at a national level.

#### 4b - Mandatory inclusion of physical education in schools

The inclusion of physical education in the curriculum of primary and secondary schools is mandatory at a national level.

#### 4c - Provision of free or subsidized school meals

Free/subsidized school meals are provided. The "Hungry for Success" initiative was first implemented in Scotland and is now being introduced in the whole of the UK. It consists in providing healthy food in schools, including free fruit for all pupils in 1<sup>st</sup> and 2<sup>nd</sup> grade of primary schools and the provision of drinking water. It is also characterized by new nutrient standards for school meals and standard portion sizes and product specifications.

#### 4d - Promoting the provision of healthy food and facilities for physical activity at the work place

Initiatives have been taken to ensure a choice of healthy food and provide facilities for physical activity at the workplace.

As part of the Health, Work and Well-Being agenda for instance, a Challenge Fund for small businesses and local partnerships was established to encourage the development of improved health and well-being in the workplace.

As an employer, the UK government is also encouraging the National Health Service – which is the largest employer in the country – to implement the recommendations from the Boorman review of NHS Health and Well-Being and develop local health and well-being strategies for their staff.

The authorities have also been cooperating with a range of companies within the newly instigated Responsibility Deal to improve public health through the workplace.

Finally, the government sponsored "Business in the Community", a national business-led coalition dedicated to Corporate Social Responsibility, in order to produce healthy eating and physical activity toolkits for the workplace.

#### 4e - Role of health and education professionals

Teacher training in promotion of healthy nutrition and physical activity is provided.

Low cost/free nutrition and physical activity counselling in primary care are provided, and both topics are included in the curriculum of health professionals training.

## **Developing monitoring system**

### **5 - Strengthening monitoring and evaluation**

Monitoring and evaluation is built into UK policy development and is written into all national policy documents.

## **Engaging private sector**

### **6 – Engaging commitment from commercial stakeholders**

The British Government works together with the food industry to develop better information on the nutrient content of packaged foods.

There are many examples of public-private partnerships. For example, the industry is involved in the “Change4Life” which promotes healthy nutrition and physical activity. Some of many examples of voluntary activities by commercial stakeholders are: “Be Treatwise” by Cadbury Schweppes providing information to consumers by visibly displaying Guideline Daily Amounts (GDAs), the Co-op responsible advertising and marketing practices, a programme by Nestle’ to promote Tennis, etc.

## **Policy coherence at local level**

### **7 – Promoting and supporting community based interventions**

There are several examples of local strategic partnerships. Primary care trusts and local authorities bring together local authorities, other public services and private, voluntary and community sector organizations to work with residents to improve local areas and services. The aim is to encourage access to healthy eating through local retailers, food growing schemes, cooking skills development, food cooperatives and community lunches.

Under the previous government's obesity strategy "Healthy Weight, Healthy Lives" (2008), several activities have taken place at local level to promote healthy eating and physical activity. The Healthy Towns programme provided funding to nine local areas across England and the Convenience Stores programme is a partnership between government and convenience stores to increase access to and the availability of fresh fruit and vegetables in deprived areas. In addition, the government has funded Cycling Towns to promote cycling across England.

## **Annex 1. EC areas/indicators linked with the actions/questions of the two country reporting templates**

### **Better informed consumers**

#### 1a - Legislation / voluntary initiatives requiring nutritional labelling or signposting

Template 1, table 7, 1.22: Legislation requiring labelling of foods with nutritional information such as ingredients and the corresponding energy intake

Template 1, table 7, 1.23: Signposting on food products

#### 1b - Legislation / voluntary initiatives on the marketing of unhealthy food and beverages to children

Template 1, table 7, 1.24: Regulations on marketing of unhealthy foods and non-alcoholic beverages to children

#### 1c - Information and education campaigns

Template 1, question 8 a: Does a clearly formulated, national programme or campaign for obesity education and public awareness raising exist?

*If yes, please specify name and link to web site, topics covered, responsible body, yearly budget in Euros*

Template 1, question 8 b: Does a clearly formulated, national programme or campaign for nutrition education and public awareness raising exist?

*If yes, please specify name and link to web site, topics covered, responsible body, yearly budget in Euros*

Template 1, question 8 c: Does a clearly formulated, national programme or campaign for physical activity education and public awareness raising exist?

*If yes, please specify name and link to web site, topics covered, responsible body, yearly budget in Euros*

## **Making the healthy option available**

### 2a - Existence of measures affecting food prices

Template 1, table 7, 1.19: Measures to affect food prices (e.g. taxes on soft drinks, chocolates and confectionary and/or incentives on fruits and vegetables)

### 2b - Initiatives to increase availability of processed foods with reduced content of total fat and/or added sugar

Template 1, table 7, 1.18: Initiatives to increase the availability of processed foods with reduced content of total fat and/or added sugars

### 2c - Salt reduction initiatives (in line with the EU target of 16% reduction by 2013)

Template 1, table 7, 1.17: Initiatives to reduce the salt content of processed foods

Template 2, table 3a, heading Salt: Promote use of iodized salt

Template 2, table 3a, heading Salt: Promote reduction of salt intake

## **Encouraging Physical activity**

### 3a - Initiatives promoting better urban design to provide safe and attractive structures for everyday physical activity

Template 1, table 7, 1.25: Programmes to increase traffic safety for pedestrians and cyclists

Template 1, table 7, 1.26: Expansion of pedestrian zones (car-free zones) in cities

Template 1, table 7, 1.27: Expansion of green spaces and play areas in urban areas

Template 1, table 7, 1.28: Expansion of cycle and walking lanes

Template 1, table 7, 1.41: Promotion of better urban design to provide safe and attractive structures everyday physical activity, cycling and walking, e.g. through Healthy Urban Planning

### 3b - Provision of guidelines for physical activity / education campaigns

Template 1, table 7, 1.2: Guidelines for physical activity

## **Priority groups and settings**

### 4a - Mandatory inclusion of nutrition education in schools

Template 1, table 7, 1.3: Mandatory inclusion of nutrition education in the curriculum of primary and secondary school pupils

### 4b - Mandatory inclusion of physical education in schools

Template 1, table 7, 1.4: Mandatory inclusion of physical education in the curriculum of primary and secondary school pupils

### 4c - Provision of free or subsidized school meals / promotion of healthy food

Template 1, table 7, 1.5: Provision of free or subsidized school meals

### 4d - Promoting the provision of healthy food and facilities for physical activity at the workplace

Template 1, table 7, 1.12: Ensuring a choice of healthy food at the workplace

Template 1, table 7, 1.14: Provision of facilities for physical activity at the work place (e.g. gym, basketball court, field etc.)

## 4e - Role of health and education professionals

Template 1, table 7, 1.32: Nutrition included in the curriculum of health professionals training

Template 1, table 7, 1.33: Physical activity included in the curriculum of health professionals training

### **Developing monitoring system**

## 5 - Strengthening monitoring and evaluation

Template 2, question 3 b "Evaluation of policies", I: Have cost-effectiveness calculations of nutrition/physical activity policies and programmes been carried out in your country?

Template 2, question 3 b "Evaluation of policies", II: Have health impact assessments of nutrition/physical activity policies from non-health sectors been carried out in your country?

### **Engaging private sector**

## 6 – Engaging commitment from commercial stakeholders

Template 1, question 11: Public-Private Partnerships

### **Policy coherence at local level**

## 7 – Promoting and supporting community based interventions





