



EUROPE

# **Nutrition Policy in Europe**

## **The challenge of implementation**

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**1 - The Second Action Plan for Food and Nutrition Policy - current level of implementation**



# Challenges and action areas

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## HEALTH CHALLENGES

Diet related  
noncommunicable  
diseases

Obesity in children  
and adolescents

Micronutrient  
deficiencies

Foodborne  
diseases

## ACTION AREAS

1. Supporting a healthy start
2. Ensuring safe, healthy and sustainable food supply
3. Providing comprehensive information and education to consumers
4. Implementing integrated actions
5. Strengthening nutrition and food safety in the health sector
6. Monitoring and evaluation

## Action area 1

# Supporting a healthy start

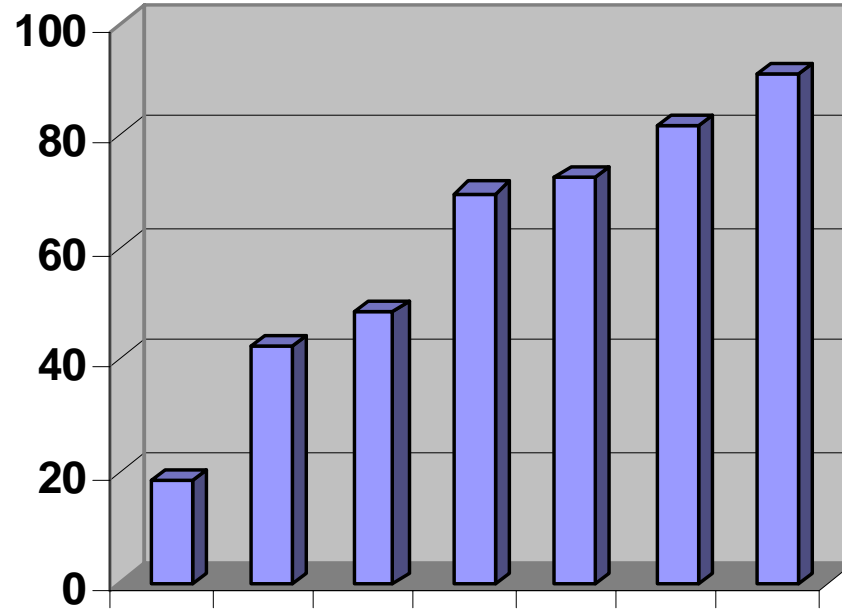
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- 1. Promote maternal nutrition and safe dietary habits**
- 2. Protect, promote and support breastfeeding and timely, adequate and safe complementary feeding of infants and young children**
- 3. Promote the development of school and pre-school nutrition and food safety policies**



School fruit and vegetable schemes  
No junk food in school vending machines  
School meals  
Baby Friendly Hospital Initiative  
Nutrition counselling for pregnant women  
Nutrition education in schools  
Physical education in schools

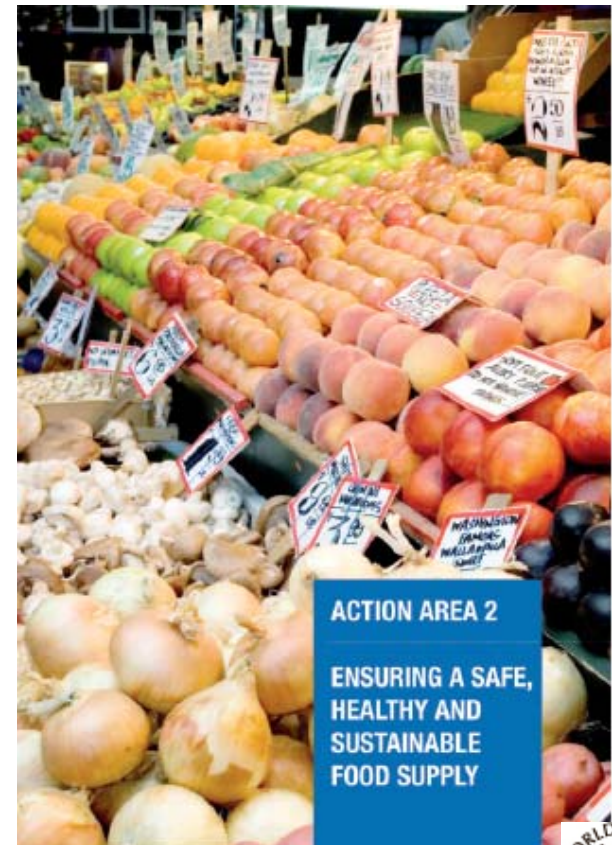


## Action area 2

# Ensuring safe, healthy and sustainable food supply

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1. Improve the availability of fruit and vegetables
2. Promote the reformulation of mainstream food products
3. Improve food supply and food safety in public institutions
4. Explore the use of economic tools (taxes, subsidies)



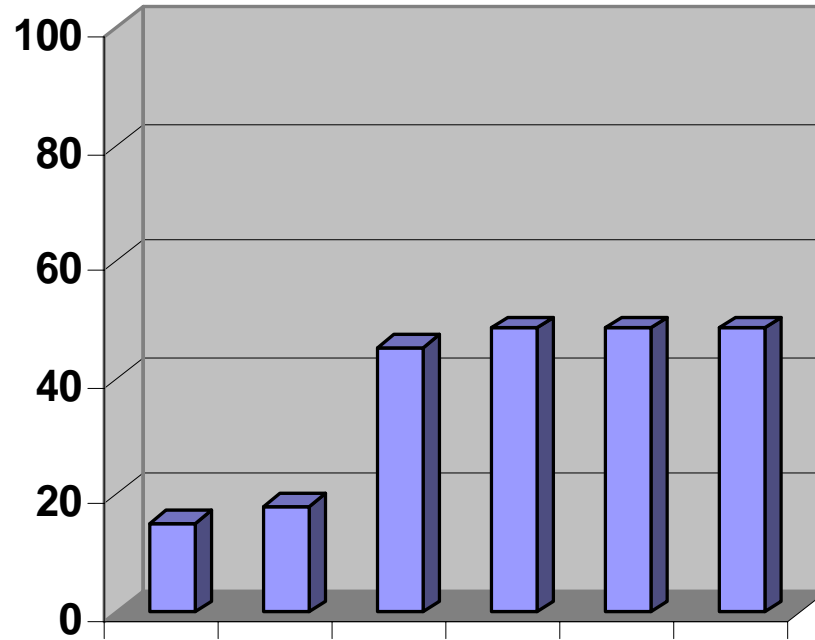
## Action area 2

# Ensuring safe, healthy and sustainable food supply

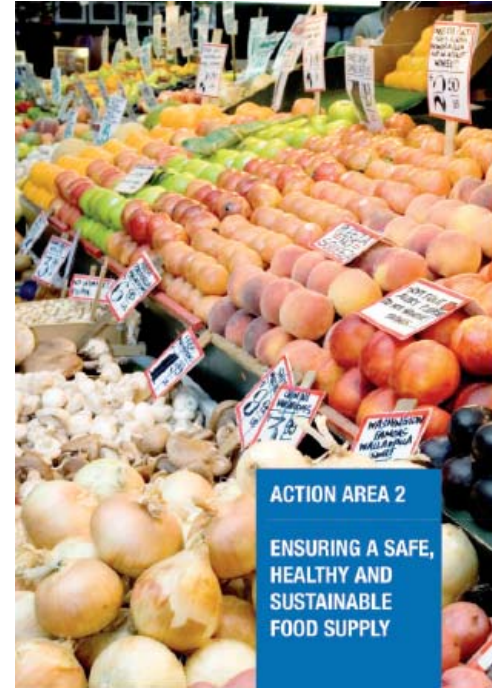
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5. Ensure that the commercial offer of food products is aligned to food-based dietary guidelines
6. Establish targeted programmes for the protection of vulnerable groups
7. Establish intersectoral food safety systems with a farm to fork approach



Incentives to fruit and vegetable production  
 Location and size of food outlets  
 Healthy meal options in private catering  
 Reduce the salt content of processed foods  
 Healthy food at the workplace  
 Reduce the content of fat and sugars



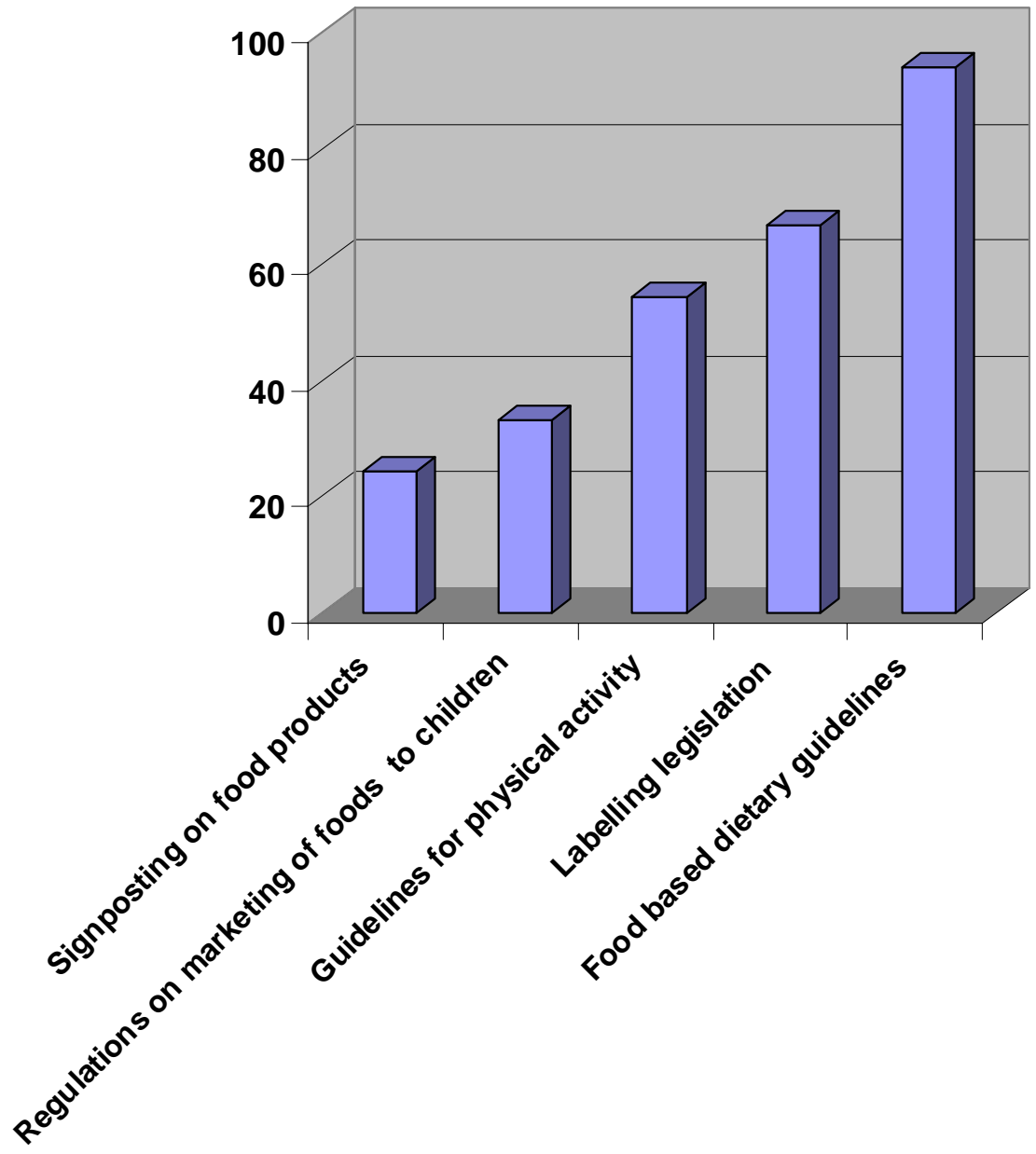


# Providing comprehensive information and education to consumers

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1. Food-based dietary guidelines and food safety guidelines, complemented by physical activity guidelines
2. Public campaigns aimed at informing consumers
3. Appropriate marketing practices
4. Adequate labelling of food products



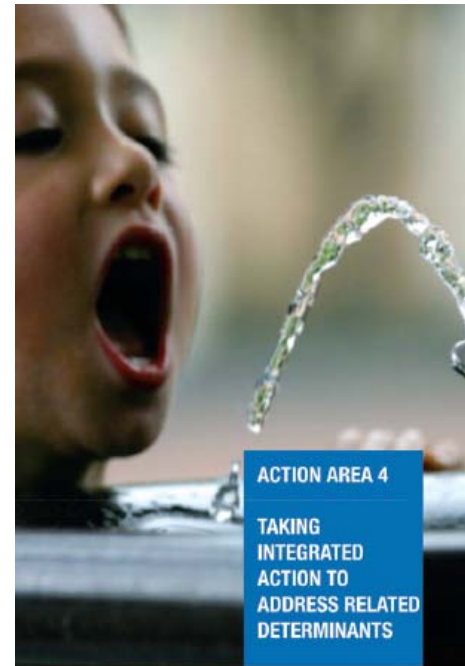


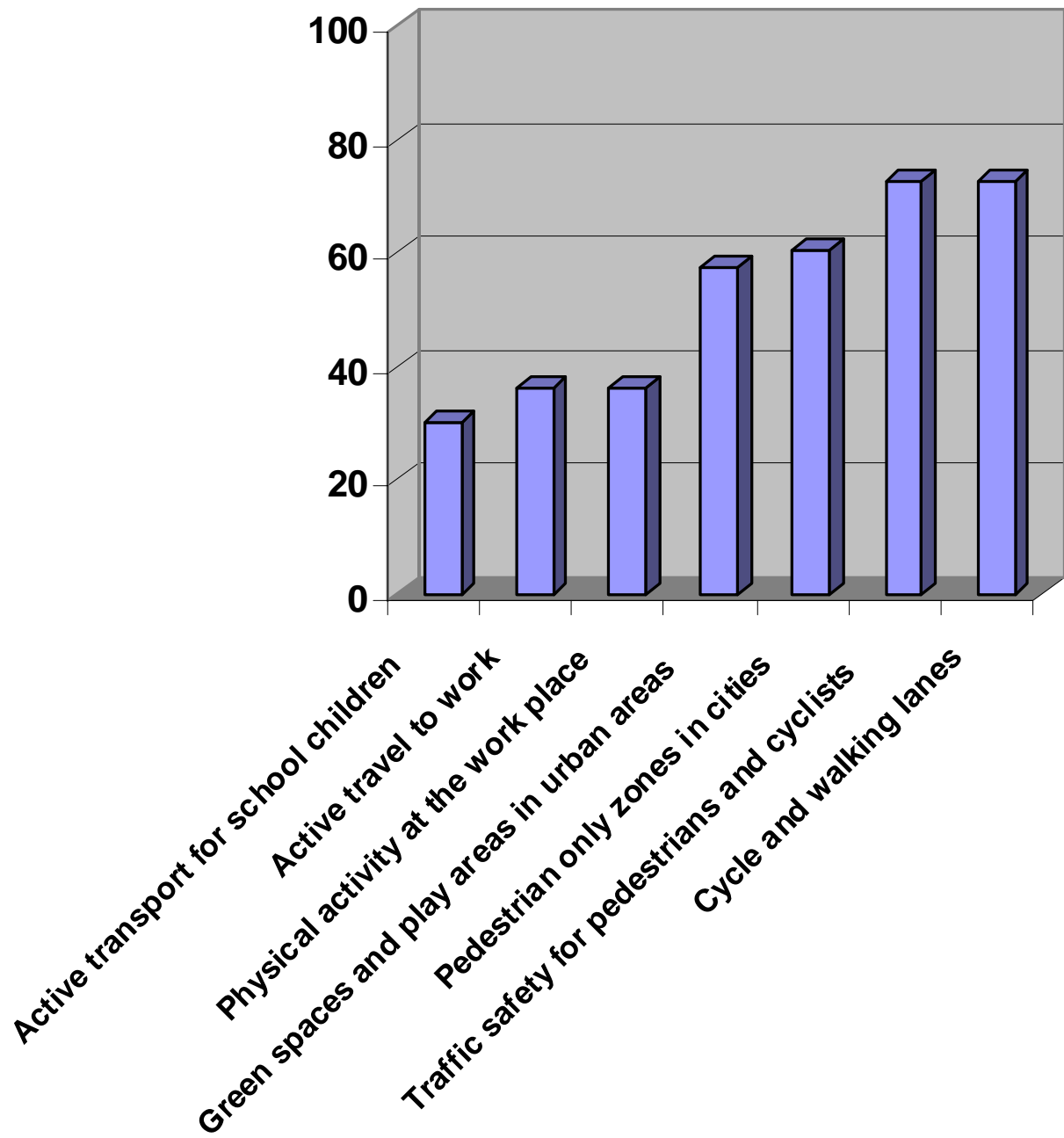
# Action area 4

## Integrated actions to address related determinants

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- 1. Increase opportunities to perform physical activity**
- 2. Reduce the consumption of alcohol**
- 3. Ensure the provision of safe drinking water**
- 4. Reduce environmental contamination of the food chain**





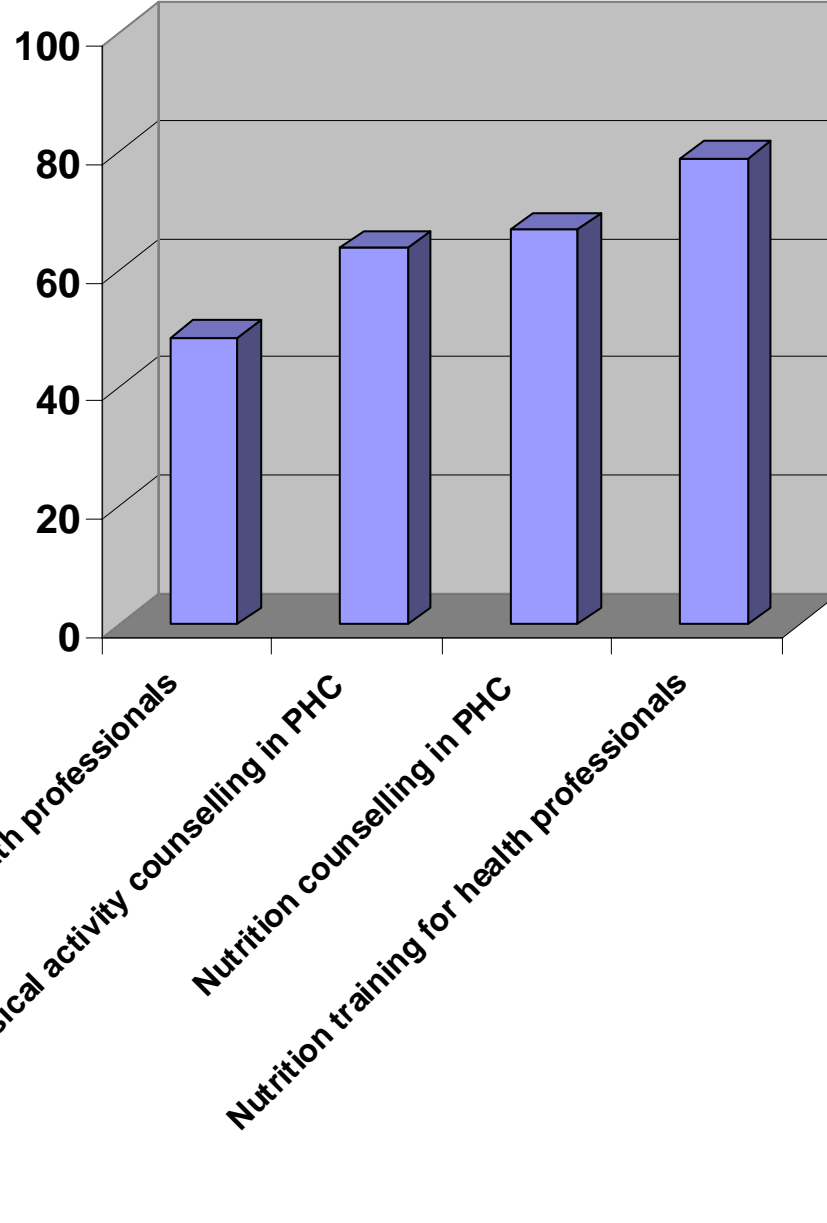
## Action area 5

# Strengthening nutrition and food safety in the health sector

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1. Engage primary care staff in nutrition assessment and in the provision of diet, food safety and physical activity counselling
2. Improve the standards of service delivery for the prevention, diagnosis and treatment of nutrition related diseases
3. Improve the quality of nutrition services and food safety in hospitals





**ACTION AREA 5**  
**STRENGTHENING**  
**NUTRITION AND**  
**FOOD SAFETY**  
**IN THE HEALTH**  
**SECTOR**

Physical activity training for health professionals  
 Physical activity counselling in PHC  
 Nutrition counselling in PHC  
 Nutrition training for health professionals

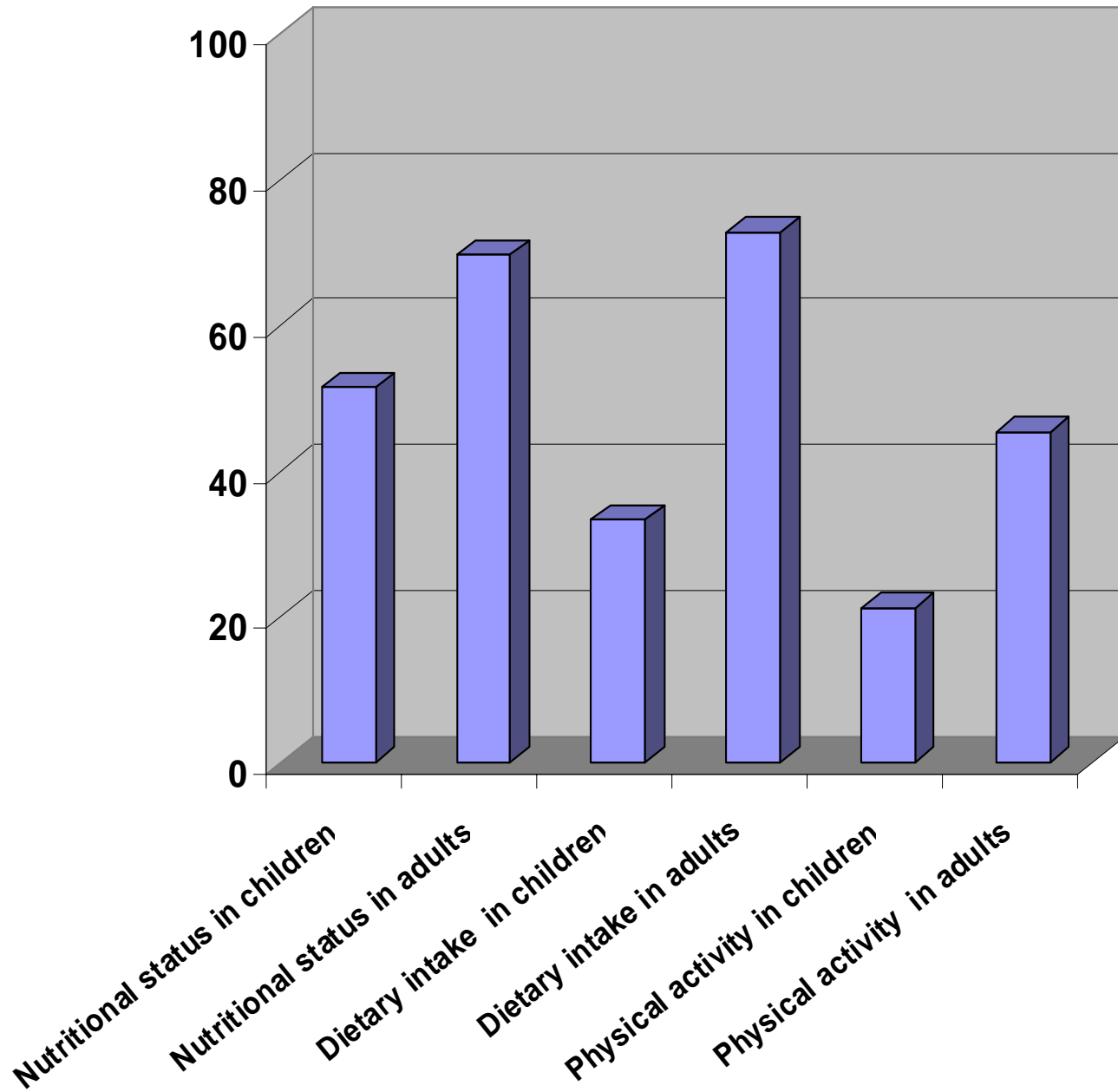
## Action area 6

# Monitoring and evaluation

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1. Establish national and international surveillance systems on nutritional status and food consumption
2. Establish monitoring and surveillance systems for microbial and chemical hazards in the food chain and foodborne diseases
3. Evaluate the impact of programmes and policies
4. Improve public and private research establishments





**ACTION AREA 6**  
**MONITORING,  
 EVALUATION  
 AND RESEARCH**





# 2 – Supporting implementation



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# WHO's role in ensuring implementation

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- Advocacy
- Building partnerships
- SMARTen and operationalise actions
- Guiding international action and ensuring critical mass in actions
- Surveillance and policy analysis
- Good practices in programmes and policies

# Action tools

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- Good practices in programmes and policies
- Nutrition friendly school initiative
- Food procurements in public institutions
- Nutrition profiles for use in labelling, marketing, economic tools and food procurements
- Cost effectiveness tool

# Action networks

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## ■ Concept:

Action networks would provide the for a for the exchange of good practice, as well as coalitions to foster greater political commitment

## ■ What is needed:

- Action listed in the Action Plan
- Government commitment in a sufficient number of countries
- Experience in some countries
- Leading country
- Workplan

# Action network on marketing foods and non alcoholic beverages to children

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■ Norway, Belgium, Bulgaria, Denmark, Finland, Portugal, Slovenia, Spain and the United Kingdom

■ Objectives:

- constitute a coalition of committed countries who can demonstrate specific and effective actions to protect children against marketing pressure
- discuss and share experiences
- discuss alternative approaches to regulation
- develop content and principles which may contribute to international recommendations
- establish working groups that can look further into various topics
- prepare reports to various international meetings such as to the World Health Assembly

# Action network on salt reduction

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- United Kingdom, Belgium, Bulgaria, Finland, France, Ireland, Portugal, Russian Federation, Serbia, Slovenia, Spain
- Objectives:
  - exchange experience and good practice
  - develop common tools (salt targets, monitoring system, communication with the public/stakeholders, technology and processing developments)

# Childhood Obesity Surveillance Initiative

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- Portugal, Belgium, Bulgaria, Cyprus, Czech, Hungary, Ireland, Italy, Latvia, Lithuania, Malta, Norway, Portugal, Slovenia, Sweden, United Kingdom
- Design:
  - Semi-longitudinal design with repeated cross-sectional samples in primary schools
  - One or more of the following age groups: 6.0-6.9; 7.0-7.9; 8.0-8.9 or 9.0-9.9 years
  - Nationally representative sample
  - Per age group:  $\approx$ 2800 children

# Surveillance and policy analysis project

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- Nutritional status, diet and physical activity
- National nutrition policies and physical activity promotion policies
- Actions to implement the policies (government programmes and initiatives, public-private partnerships, legislation in the different areas of action)
- Project and initiatives in different settings
- Status of implementation of key commitments



# Conclusions

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- Increase actions on food supply
- Increase actions on consumers' communication
- Increase actions on active transport
- Increase involvement of primary care staff in nutrition and PA counselling
- More surveillance in children

# Thank you



## More information

- Nutrition and Food Security  
<http://www.euro.who.int/nutrition>
- Obesity  
<http://www.euro.who.int/obesity>
- Database on nutrition policy and obesity  
<http://data.euro.who.int/nutrition/>
- WHO/Europe, Transport and health website  
[http:// www.euro.who.int/Transport](http://www.euro.who.int/Transport)
- HEPA Europe  
[http:// www.euro.who.int/hepa](http://www.euro.who.int/hepa)