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JOINT FAO/WHO FOOD STANDARDS PROGRAMME FAO/WHO COORDINATING COMMITTEE FOR EUROPE

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NUTRITIONAL ISSUES WITHIN THE COUNTRY OR REGION SUCH AS: OBESITY, NUTRITIONAL PROFILES, AND ANY PUBLIC HEALTH-ORIENTED ACTIONS TAKEN INCLUDING THE USE OF NUTRITIONAL LABELLING AND CLAIMS

ARMENIA

As mountainous country, Armenia is classified among iodine deficit endemic regions. Due to this reason, the national standards, which define edible salt iodization norms, have been reviewed and changed. "National Program on combating and prevention of consequences caused by iodine deficit in food of the Armenia's population" has been approved by the Government Decree No. 353-N of 12.02.2004. The information has been disseminated by mass media among population throughout Armenia. According to the survey done in 2005, the households, which use edible salt fortified with iodine, comprise 98%. National investigations served as a basis for reviewing the edible salt iodization norms and according to the Government Decree it was determined as 40+15mg/kg instead of previous 50+10mg/kg. Reduction of edible salt iodization norm will allow preventing health problems of population due to iodine excess in food. As a result of undertaken measures, Armenia is internationally recognized as iodine deficit-free country, which is confirmed by WHO and UNICEF, and certificate awarded by ICCIDD.

AUSTRIA

Information activities by the Ministry of Health, Family and Youth, Gesundes Österreich GmbH, Agency for Food safety (AGES), Austrian Nutrition Society and other bodies.

The Austrian Nutrition Report (Ministry of Health, Women and Youth) and the Austrian Food Report (Ministry of Agriculture, Forestry, Environment and Water Management) play an important role in these activities.

DENMARK

Within the last couple of years, Denmark has taken many initiatives regarding nutritional issues. Among other things a mandatory iodine fortification program was introduced in 2000. Rules on the level of trans fatty acids in foodstuffs were laid down in 2003. Recommendations on supplemental intake of folic acid are given to pregnant women. Elderly and people who are not regularly exposed to sunlight are recommended a supplemental intake of vitamin D and recommendations on the intake of fruit and vegetables of approximately 600 g per day have also been given. Finally, Denmark, Norway and Sweden are working on introducing a voluntary common "nutritional signposting" building on the existing Swedish "Keyhole"-symbol. Introduction of the symbol in Denmark is expected in 2009..

ESTONIA

In 2005 the Government approved the National Strategy for the Prevention of Cardiovascular Diseases 2005-2020. The overall goal of the strategy is to achieve a permanent decrease in premature cardiovascular (CVD) morbidity and mortality among the population. One of the main CVD factors addressed in this strategy is balanced nutrition. There are two measures to achieve the balanced nutrition target: 1) Facilitating the healthy nutrition choices of the population and improving knowledge of balanced nutrition and 2) Ensuring compliance with the principles of balanced nutrition in institutional catering.

There are different activities under these measures, e.g. creating the healthy eating recommendations for different population groups; developing computer program about nutrition in order to help people to assess their nutrition; information campaigns to promote healthy eating; training for family doctors and family nurses, school nurses on heart healthy nutrition; informing, training and thus motivating producers, caterers and food merchandisers to think about their role in shaping the eating habits of the people and influencing their choices; informing the population about the nature of the foodstuffs labelling system; developing recommended menus and training materials for child care facilities, schools, hospitals, nursing homes and other enterprises in which the state organises catering; continuing the school milk and school lunch programmes and launching the projects for offering fruits in child care facilities and schools etc.

Another CVD factor addressed in this national strategy is the physical activity. There are two measures to achieve the increase in the population's physical activity: 1) Enhancing the awareness of the population regarding healthy physical activity, and 2) Ensuring an environment and infrastructure which favour physical activity. Current health policy is based on the understanding that the health of the population can be improved only if the roots of the problems are tackled, and those are largely outside the health care system – in health education, in health-promoting workplaces, sufficient income to care for health, rejection of lifestyles that pose a health hazard, and the availability of healthy recreation.

In 17.07.2008 the Government approved the National Health Strategy 2009-2020, which consolidates from the health perspective a large number of strategies from different government sectors and creates the common understanding that the efforts for the population's health need to be done in different sectors on different levels. Healthy choices, incl. nutrition and physical activity, is one of the strategic targets in this strategy.

Regarding nutritional labelling and the use of nutrition and health claims the requirements are harmonized in the EU. The requirements of nutritional labelling are based on the Council Directive 90/496/EEC on nutrition labelling for foodstuffs. The use of nutrition and health claims is covered by the Regulation (EC) No 1924/2006 of the European Parliament and of the Council on nutrition and health claims made on foods.

It is common that the Estonian producers provide the content of energy and macronutrients (protein, carbohydrates, fat) on most of the packaged food even if it is not compulsory. In case of food produced in Estonia, for many food groups the maximum salt (sodium chloride) content of the product has to appear on the labelling.

In Estonia there are no nutritional profiles. For the purpose of governing the circumstances in which nutrition or health claims may be made, certain nutrition profiles are being developed at the EU-level. When they are established, they will be applicable also in Estonia.

FINLAND

The National Nutrition Council is an expert body under the Ministry of Agriculture and Forestry. Members of the Council serve three-year terms (current term 2008-2011) and they are representatives of handling nutrition issues, consumers, health promotion and catering organisations, food industry, trade and agricultural organisations. The aim of the Council is among others to observe and improve the nutritional situation in Finland by making nutrition recommendations, giving action programmes, submitting proposals and observing how action programmes are fulfilled and what the effects on the nutritional situation are. The Finnish Nutrition Recommendations were renewed in 2005. They are based on the Nordic Nutrition Recommendations which were approved in 2004 by the Nordic Council of Ministers. The goal of the recommendations is to improve the diet of the Finnish people and public health. Recommendations on physical activity are also included in the current nutrition recommendations

Meals prepared outside home have a significant impact on Finnish nutrition. The majority of these meals are served at schools. There is a long tradition for practical dietary guidelines, product development and quality

control directed to catering kitchens. The Finnish Nutrition Recommendations have been completed by nutrition recommendation for special groups. In June 2008 the Finnish Nutrition Council published renewed nutrition recommendations for school meals. These recommendations give guidance for timing and setting of meals, for snacks and for the nutritional content of the meals.

The Finnish Government approved in June 2008 National Strategy for health promotion by physical activity and nutrition. Action Plan included into the Strategy will be implemented by relevant authorities in close cooperation with relevant organisations as well as industry and commerce. According to the Strategy health shall be taken into account in all decision making so that environment would be healthier and healthy choices are possible, easy and attractive.

The “Heart symbol – a better choice” was introduced in Finland in 2000. The construction of this symbol and the criteria behind it have been founded on the main nutritional problems as regards public health in Finland. The symbol is not directed to heart health alone. The products which carry the “Heart Symbol – a better choice” are better choices as regards the intake of fat and salt in their respective product groups, and it is recommended that a text which tells about this be attached to the symbol. Since quite recently the use of the symbol has also been extended to catering services. The criteria behind the “Heart Symbol – a better choice” are specified separately for each product group (milk and milk products; edible fats; meat products; bread and cereals and cereal products; convenience foods, semi-processed foods and meal components; spices and seasoning sauces; vegetables, fruits and berries). Nutrients for which criteria have been set are the amount and type of fat, sodium and, in certain product groups, cholesterol and/or fibre. Sugar is included as an exclusive criterion. The main bodies responsible for use of the symbol in practice are the Finnish Heart Association and Finnish Diabetes Association. The right to use the symbol is granted upon application on the basis of the criteria. Although the right to use the symbol is granted by public health organisations, the decisions on the criteria are made together with a group of experts including also authorities.

Salt intake has been monitored in Finland since late 1970s in large population studies. Systematic work including education of the population as well as cooperation with the food industry has been done during this time. One of the ways to reduce salt intake has been requirements in the Finnish legislation for labelling the salt content of most important sources of salt since 1980s. There is a scientifically verified association between salt intake and cardiovascular diseases. Even a slight reduction in salt intake has positive health impacts. Scientific research also shows that labelling can effectively steer consumer choices towards low salt foods. Regardless of the remarkable beneficial health effect of implementing measures to reduce salt intake, Finns’ blood pressure is still high and morbidity and mortality from cardiovascular diseases is common. Salt intake in Finland has clearly fallen, however international recommendations have not yet been achieved. That is why the national requirements for labelling of salt content were amended in 2007. These amendments were based on the initiative of the National Nutrition council.

FRANCE

This issue relates to a domain harmonized by the European Community.

In France, the 2nd National Nutrition and Health Programme covers an array of actions and measures of prevention, education and mobilization of stakeholders in order to address nutrition as a challenge for public health. More particularly, as regards food supply and the Ministry of Agriculture and Fisheries, actions have included a broad working group on fats, the signature of undertakings by economic players, the creation of a watchdog on food quality, the regulation of school catering, greater accessibility to fruit and vegetables (distribution of fruit in schools and leisure centres), enhancement of food aid...

Development of on-line local initiatives (EPODE on nutritional education, PENSA on food for the elderly...)

Cf. Advisory Note N°58 of the CNA cited above.

GEORGIA

- Nutritional diseases are increasing in Georgia in relation to deficiency of micronutrients and overweight of some groups of the population.

- There should improve policy in food sector, define regulations on genetically modified food, develop and implement nutrition education and consumer protection.

HUNGARY

Different programs are initiated by the government and by the food industry (i.e CIAA's GDA system, national platform promoting healthy life style, educational programs).

IRELAND

Safefood (The Food Safety Promotion Board) - a North South Body co-funded (70%) by this Department - is working in conjunction with the Health Service Executive on the creative execution of a campaign aimed at childhood obesity. The campaign, which will include TV advertising, will support parents and guardians as positive role models for their children in the areas of healthy eating and physical activity.

Additionally Safefood has been tasked in its current 3 year Corporate Plan to establish an all-island obesity action forum for a three year period. The forum will be facilitated and supported by safefood, and will comprise a range of stakeholders including government departments, government agencies, health bodies and professional bodies. The forum will also include representation from stakeholders with a remit in physical activity to maximise cohesion. The forum will assist in identifying common areas in the obesity reduction policies of the two jurisdictions for action by forum participants (jointly or individually). It will also facilitate the exchange of best practice and promote networking.

The Department of Health & Children's (DoHC) Health Promotion Policy Unit will, in the coming months, publish a National Nutrition Policy which will include actions in respect of addressing childhood obesity.

DOHC is currently drafting a new policy on Cardiovascular Health including Stroke. Key prevention targets will relate to nutrition and salt.

DoHC's Health Promotion Policy Unit is actively engaged in addressing issues around lowering salt intake and proposes to hold a workshop on the issue, with key stakeholders, in early September.

The Food Safety Authority of Ireland (FSAI) is currently conducting a 2-month web-based consultation programme, to end in mid-September, on the EU proposed regulation on the Provision of Food Information to Consumers. Nutrition labelling is a key component of this proposal. In addition, it is hoped that the FSAI will conduct a survey on nutrition labelling (GDAs v. Traffic Lights presentation).

LATVIA

In March 2006 the Ministry of Health has formed the Nutritional Council, which main goal is to advise and to co-ordinate the food policy making, realization and actualisation, in order to assure high level public health.

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Latvia participates in the EU working groups on nutrition profiles

POLAND

Aiming at implementation of the WHO Global Strategy on Diet, Physical Activity and Health Poland has realised the following activities:

1. In May 2007 the Government approved the National Health Programme for the term 2007-2015. The main objective of the Programme is to improve the health condition of Polish population. One of the Programme's operational goal is to improve the way of population's nutrition and the health quality of food as well as to decrease the obesity occurrence. It is fulfilled by co-operation with the National Council of Nutrition and the National Platform of Diet, Physical Activity and Health established in 2005 under the auspices of the National Food and Nutrition Institute in Warsaw. Another task within the above mentioned goal relates to propagation of data on composition and nutritional value of food products and their labelling in a way that would help consumers to make aware choice.
2. In 2007 the Minister of Health has established the Council of Physical Activity, Diet and Health. It plays the role of advisory body to the Minister of Health aiming at prevention of overweight and obesity in Poland.

The Council consist of the 25 members which are the representatives of a different governmental authorities of health and education area, scientific institutes with the scope of competences relating to public health, non-governmental organisations converging producers and food distributors as well as representatives working in the area of advertisement and consumer's health.

The objectives of the Council are in particular:

- defining priorities of work in the area of promotion of balanced diet, physical activity and health and setting direction of their fulfilling all over country,
- giving opinions on and supporting actions aiming at improving public health, including promotion campaigns on preventing non-infectious diseases as a consequence of overweight, particularly taking into account public and private partnership,
- actions on promotion of healthy lifestyle in mass media, especially as concerns balanced diet and activity for particular age groups.

3. In term 2005/2006 the Sanitary Inspection in co-operation with the Polish Federation of Food Industry (that unites 25 Polish significant food industry companies and 6 associations) have implemented overall Polish educational „Keep fit!” programme. The main objective of the programme was to educate about developing healthy habits of the school adolescents (secondary schools) through the promotion of the principles of active lifestyle and balanced diet, based on individual responsibility and free selection of individual.

Ultimately 96 schools all over Poland participated in the programme (approx. 10 thousand children).

SERBIA

In procedure for the adoption: National strategy for improvement nutrition with action plan;

Strategy and Law on public health.

SLOVAK REPUBLIC

The Ministry of Agriculture in cooperation with Slovak nutrition experts has developed “The Strategy of Nutrition Policy”. The document defines priorities of Slovak agriculture department aimed at healthy nutrition. The strategy was elaborated in accordance with White Paper on the Strategy for Europe on Nutrition, Overweight and Obesity related health issues. It focuses on improvement of nutrition and disease prevention in the SR.

Slovak experts take part in EFSA working group in the area of nutrition and claims, Slovak Republic take part in the Food consumption data collection by EFSA.

The SR is actively engaged in the process of legislation development of the EU. Some European legislative acts are proposed:

Directive of the EP and of the Council on foodstuffs intended for particular nutritional uses and Regulation of the EP and of the Council on the provision of food information to consumers.

Regulation (EC) No 1924/2006 of the EP and of the Council on nutrition and health claims made on foods has been transposed into the Slovak law.

Four workshops were organized on legislation and its practical implications.

The Food Composition Databank was updated – new kinds of food and their nutrition values were filled in. Its main goal is to develop a project for upgrading the data management software system that is to become a software base for subsequent updating of the primary database on nutrition composition of foodstuffs under the current European recommendations and standards.

UNITED KINGDOM

A range of activities are underway in the UK to tackle obesity and improve the balance of the nation's diet. Activities include: voluntary initiative to reformulate processed foods, removing excess salt, fat and sugar; introduction of front of pack signpost labels to help consumers make at-a-glance healthy choices; development of a nutrient profiling model to determine which foods can be advertised to children during peak TV programming schedules, and the introduction of nutrient based standards for school meals.

A relatively new dimension is working with caterers to gain partnership on our eating for health agenda.

The FSA also updated its “Balance of Good Health” leaflet to illustrate commonly eaten food groups pictorially. The leaflet is aimed at consumers, educators and communicators.
<http://www.food.gov.uk/multimedia/pdfs/bghbooklet.pdf>