



Statement by

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Director General da Silva  
Director General Chan  
Excellences,  
ladies and gentlemen,

It gives me great pleasure to address this Second International Conference on Nutrition and to share with you some developments in Iceland in the field of health and nutrition and to mention some of our policies and programs we have in place. At the outset allow me to welcome the Rome Declaration on Nutrition and the ICN2 Framework for Action and to thank FAO and WHO for their excellent work in convening this conference.

The challenges in Iceland are not much different from countries that have reached similar economic development; we are not reporting significant problems with micronutrient deficiencies nor do we have undernutrition. However, the prevalence of obesity has increased during the last decades. Even though we have seen slower increase rate since 2007, we reported 21% of adult population as obese in 2011.

Regarding child obesity, there has been no significant increase in the capital area since 2005. In 2012, 21% of school children in 1st to 9th grade were over ideal weight, there off 4,7% where obese.

Even though we have seen great positive results in reducing prevalence of coronary heart diseases, by decreasing mortality rates by 80% between 1981 and 2006, it still represents health challenges in Iceland, together with other Non Communicable Diseases. To some extent these signs of improved health, have been associated with better lifestyle including healthier diet.

Consumption of both fruits and vegetables has increased considerably during the past decade together with a decrease in intake of saturated fat, salt and added sugar. The intake has though not yet met the recommendations. However, intake of trans fatty acids has been reported within the recommended restricted level. In 2011 a ban on trans fatty acids was implemented in Iceland by regulation.

Our approach to promote better health and reduce health inequalities of the Icelandic population is to create an environment that supports good practices, among them good nutrition and physical activities. Under the leadership of The Directorate of Health, which is a government agency headed by the Chief Medical Officer of Iceland, we promote better health through community projects which have a life-cycle approach

from young children to older people. The approach is based on The Ottawa Charter for Health Promotion, where we go beyond health care, by recognizing that economic, social, physical and structural factors in the environment have considerable impacts on health. Furthermore communities are encouraged to take health into account in all policies decisions.

The Health Promoting Community approach acts as an umbrella for all our health promotion projects. Health promotion in our school system is one example. What children adopt in early life can shape their health behavior in the long run and it is now well documented that healthy students learn better, and investing in nutrition and health of young people will improve learning outcomes.

Food-Based Dietary guidelines are published by The Directorate of Health, first to mention as an example are guidelines for pregnant and breastfeeding women and infants, where exclusive breastfeeding during the first six months is recommended and with appropriate complementary feeding the first year. Breastfeeding rates have been increasing in the last decades, and has been reported 63% at 4 months of age.

Food-Based dietary guidelines for young and adults are under revision and will be published soon. They will be based on the Nordic Nutrition recommendations that were published last year, national dietary surveys in Iceland and the latest research in the field of nutrition. The emphasis is placed on the diet as a whole, and the quality of the diet rather than individual nutrients. Environmental concerns and sustainability are also taken into account, focusing on decreasing food waste and the CO2 footprint.

Other measures that have been put in place in Iceland worth mentioning are ban on inappropriate marketing and publicity of foods and non-alcoholic beverages to children.

Allow me also to mention our flagship partnership project, which is the Nordic cooperation in the field of nutrition under the Nordic Council of Ministers. The “Nordic Plan of Action on better health and quality of life through diet and physical activity” is the core framework for this partnership.

This partnership between Denmark, Finland, Iceland, Norway and Sweden, is wide ranging - from strategy and monitoring, to nutritional research, nutrition recommendations and consumer labeling. We share experiences in order to learn from each other through best practice and benchmarking.

Finally, regarding the outcome documents from this conference, the declaration and the framework, I would like to support what has been raised by other in their statements, that the importance fish as a source of micronutrients has not been adequately taken on board, and this has to be rectified in the follow up.

I thank you.