



**A EUROPEAN PLATFORM FOR ACTION
ON DIET, PHYSICAL ACTIVITY AND HEALTH
24 NOVEMBER 2016
10.00 – 17.00**

FINAL MINUTES

1. INTRODUCTION BY THE EUROPEAN COMMISSION

The meeting was opened by **the Chair**, who welcomed the participants and introduced the agenda which focused on two activity areas of the Platform: 'Physical Activity Promotion' and 'Education, including Lifestyle Modification', on discussion on the revised Platform methodology, and on next steps on food reformulation.

The Chair welcomed the representatives of Slovakia and France as well as the Head of Unit of E1 'Food information and composition, food waste' to today's meeting and the new Head of Unit of C4 'Health determinants and inequalities', who will start as of 1 January 2017.

The draft agenda was adopted, with **FoodDrinkEurope** asking to add an update on the EU Action Plan on Childhood Obesity.

2. WHAT IS NEW

The **Joint Research Centre** provided an overview of scientific news and developments in the fields of nutrition and physical activity.

3. UPDATE ON IMPROVING THE MECHANISMS OF THE PLATFORM

The **Chair** provided an update of the discussion on the revising the current Platform methodology. This debate started one year ago on the premise of making the EU Platform as strong and ambitious as possible and culminated in the process described in the email of 18 November 2016..

The Chair stressed the importance of this revised methodology to improve the effectiveness of the Platform as a tool for public health improvement. The voluntary approach will be guaranteed, and the reporting will be more clear on the relevance of commitments. At the previous meeting in June there was already a general agreement on the new methodology and the Commission has tried to address all comments and input received. In the meantime it should now be made operational as soon as possible to all commitments.

European Heart Network (EHN) thanked the European Commission for the inclusiveness of the process and agreed to this new methodology.

FoodDrinkEurope expressed concern that their previous comments had not been taken into account and worries that the new methodology could create excessive bureaucracy and act as a disincentive to submit new commitments. They also added that with the new methodology,

the scope of action by the members could be reduced. They would however, not oppose the roll out of the methodology.

The Chair replied that the aim of the new methodology is to improve the contribution of the EU Platform to public health. He added that the new methodology reinforces the fact that commitments should support the priorities of the Platform and the policies of the Member States, as expressed by the High Level Group at several occasions. Furthermore, the revised approach answers the call by the EU Platform for additional guidance. Finally, the Chair mentioned that the new methodology reinforces the support and assessment process without creating additional burden, underlining that many actions already comply with WHO targets and other relevance criteria.

International Baby Food Action Network (IBFAN) expressed their approval to the new methodology adding that in general it should be the Member States directing what should be done to address obesity.

European Food Information Council (EUFIC) enquired why the promotion of healthy diets is not included in the document describing the new methodology. **The Chair** clarified that this is an overarching Platform priority and remains relevant, however the criteria set out in the document refer to the explicit WHO targets.

European Cycling Federation (ECF) thanked the Commission for its efforts. ECF also expressed fears of reputational damage and called for quality standards. In addition, ECF asked if it was possible to share the names of the NGOs who contributed to the new methodology. The **Commission** will make available the names of all contributors¹, and announced that the roll-out of the new Platform methodology will start in 2017, with all new commitments submitted. Existing commitments will be covered in sequence.

4. NEXT STEPS ON FOOD REFORMULATION

The **Chair** summarised the important and transparent process of consultation that has taken place in the last year in relation to the implementation of the Added Sugars Annex. 36 meetings addressing food reformulation have been held so far with numerous stakeholders. The Member States have taken a leading role in this process and, have suggested holding smaller, more focused meetings.

The monitoring (and benchmarking) process of the Added Sugars Annex was approved during the previous day's meeting of the High Level Group. The Member States decided that the monitoring methodology for national reformulation initiatives should include the collection of information at product level, using label information, for sugar, but also for other nutrients. The Joint Action on Nutrition and Physical Activity (JANPA) methodology was considered suitable to be used in this case. The information on added sugars which is not displayed on the labels, should be derived through appropriate algorithms. This process has already proved useful in several EU Member States. Where available, information will be collected also on market shares. Industry may be asked to provide information on product composition to public health authorities (a system could be conceived in which industry provides information to health authorities on a regular basis).

¹ FoodDrinkEurope, BEUC, IBFAN, EHN, WOF, EPHA, EuroHealthNet

The working groups on monitoring and benchmarks will continue in the following months. The Commission would welcome any additional feedback from the Platform members and stakeholders by mid-February 2017.

Nestlé commented that a European harmonised approach on food reformulation and its monitoring is welcomed. This will also stimulate innovation. Nestlé is also committed to providing data.

FoodDrinkEurope also underlined the importance of harmonised methodologies and would have preferred having been invited to the working group discussions. The **Commission** replied that it was the clear wish of the High Level Group to work with a selected group of associations at this stage.

FoodDrinkEurope and the **European Dairy Association (EDA)** inquired about the possibility to have the contact details of the High Level Group members so that their national members can get in touch with them. The **Commission** replied that it cannot share this information without the prior consent of the HLG members and again noted its availability to intermediate any contacts.

FoodDrinkEurope added that consumer surveys have only been conducted in a few countries (Belgium, Ireland). The Commission mentioned that Member States should indeed explore to launch consumption surveys.

European Committee of Sugar Manufacturers (CEFS) added that in their view calories intake, and not only sugars content, should be considered in product reformulation.

Union of European Soft Drink Associations (UNESDA) confirmed that they were committed to continue further efforts, and inquired whether their comments on the minutes from the previous working group meeting had been taken into account. The **Commission** replied that this was indeed the case.

COPA-COGECA highlighted that the consultation process is important and called for a harmonised approach with flexibility. The **Commission** replied that the Added Sugars Annex already provides such flexibility.

EDA mentioned that they have not been involved in all parts of the process. They added that the dairy category is broad and therefore national approach is needed, and that more dietary intake information is needed.

The **European Consumer Organisation (BEUC)** confirmed their support to this process and would like to see it operationalised soon. They also cautioned on portion sizes as in their opinion they are often not consistent nor realistic across product categories.

FoodDrinkEurope inquired if there had been a discussion in the High Level Group on out of home, and underlined the need for coordinated approach with national flexibility, which should not lead to limiting the use of artificial sweeteners. The **Commission** replied saying that the Member States are not considering out of home at this stage and that it agreed with the use of flexibility.

The **Commission** again noted its welcome of comments to take to the High Level Group by mid-February.

The Chair mentioned that DG RTD was present at the previous day's meeting of the High Level Group. He added that both the High Level Group and the EU Platform should be regularly involved in producing a list of research gaps and priorities, to be timely be shared with DG RTD.

5. UPDATE BY THE WHO

Due to logistical reasons, **WHO Europe** could not attend the meeting.

6. TRENDS IN OBESITY IN SCHOOL-AGE CHILDREN

WOF presented obesity trends in Europe including the wide variations between Member States and between social economic groups. WOF called for different types of interventions to differently address the various needs of the general population and specific groups.

The ongoing HEPP pilot project was mentioned. It contributes to maintaining an EU and Member State focus on health inequalities and help to mainstream measures to address them. The project has a particular focus on alcohol, nutrition and physical activity, related to the socio-economic gradient and disadvantaged areas. More information on:

https://ec.europa.eu/health/social_determinants/projects/ep_funded_projects_en#fragment1

IBFAN commented that industry has the responsibility to ensure its products are healthy and that highly processed food products do not target the most deprived groups in society.

ECF underlined the importance of physical activity and role of public transport in reducing obesity. **WOF** replied that the answer lies in mixed and targeted population-wide actions, and that active transport is part of this.

7. COMMITMENTS IN THE AREAS OF 'PHYSICAL ACTIVITY PROMOTION' AND 'EDUCATION, INCLUDING LIFESTYLE MODIFICATION'

7.1. State of play on commitments

DG SANTE provided an overview of the commitments. There are currently 304 commitments on the Platform database, of which 110 (36%) are active and 194 are completed (64%). Ten new commitments have been received in 2016. None of these address the Platform priority areas (i.e. food reformulation, marketing and advertising, and physical activity).

The submission period of the 2016 monitoring forms will start on the 1st of December 2016 and end on the 31st of January 2017. The Platform secretariat will share further information on this process in the coming weeks.

7.2. Commitments in these two areas

ICF presented an overview of commitments in the two activity areas on the basis of 2016 data and the results of the 2015 assessment of monitoring reports. The presentation covered the design and implementation of the commitments, as well as the overall assessment.

The main conclusions for the 12 active commitments on physical activity were that:

- Progress of active commitments in this field has slowed down (from 17 active commitments in 2013 to 12 in 2016); and that
- Although physical activity is a Platform priority, commitments in this area only constitute 12.5% of all Platform commitments (38 out of 304) and 10.8% of all active commitments (12 out of 110).

The conclusions for the 32 active commitments on education were that:

- Since 2013, 11 new commitments have been received;

- Education commitments constitute 34.5% of all Platform commitments (105 out of 304) and 29.1% of all active commitments (32 out of 110). FoodDrinkEurope holds the largest number of active education commitments (a total of 13).

ICF made the following general conclusions:

- There is still room for improvement with regards to setting measurable, specific and time bound objectives;
- The commitments could make more use of evidence in design (of need, or of likely effectiveness) or more often commit to generate data or information, as this would provide an indication of the relevance of the actions;
- Greater referencing of relevance to the Platform and EU objectives would not only provide a justification for the actions undertaken but also help demonstrate the relevance of the commitments;
- More details on inputs should be provided, as well as more detailed information on (measurable) outputs and outcomes;
- Commitments should be additional to the day-to-day activities of members and have EU-added value. Both these criteria matter to demonstrate the importance of EU Platform and the impact it can have on public health.

The **Commission** invited all participants to especially look at these conclusions and invited all to submit commitments in the priority areas (food reformulation, marketing and physical activity).

7.3. Initiatives in the field of physical activity

7.3.1. REPOPA project

The REPOPA (REsearch into POLicy to enhance Physical Activity) project integrates scientific research evidence and expert know-how into the policy making process to increase synergy and sustainability in promoting health and preventing disease. The five year project is cofounded by the Seventh Framework Programme and involves researchers from 7 countries. The project is finished and the **Finnish National Institute for Health and Welfare** presented its outcomes and barriers. The main results show that there is few systematic and explicit use of research evidence in policy making.

More project information: <http://www.repopa.eu/content/consortium>

The **Commission** noted that this links with the discussion at the High Level Group meeting on the need to link knowledge translation and bring evidence to policy making, and to reinforce the cross-sectoral approach.

The **Finnish National Institute for Health and Welfare** mentioned that in Finland the Ministries of Health and of Social Affairs are an example of such cooperation.

The **Commission** added that DG SANTE and the Joint Research Center are working on a reference guide to support knowledge translation.

7.3.2. Active Voice project and MOVEMENT Spaces project

The **International Sport and Culture Association (ISCA)** shared its disappointment with the time reserved for physical activity on the meeting agenda. The **Commission** replied that physical activity remains a high priority and called for more commitments in this field. It also added that there is a project on physical activity in the pipeline for 2017 and the Platform members will be kept informed.

ISCA presented two Erasmus+ Sport co-funded projects.

The **MOVEMENT Spaces** project (2017-2018) aims at enhancing innovation in the delivery of physical activity programmes in existing urban spaces/facilities. **MOVEMENT Spaces** will bring together a consortium of 14 partners from 7 countries (Bulgaria, Denmark, France, Poland, Slovenia, Spain and the UK), including a group of expert institutions, a group of key European Cities (Barcelona, Birmingham, Paris, Plovdiv and Wroclaw), and grassroots sport promoters to test project-based programmes in urban settings.

The **ActiveVoice** project (2016-2018) aims to build capacity in civil society organisations, in order to engage in active, cross-sector advocacy for the implementation of the EU Physical Activity Guidelines (HEPA).

Project website: <http://www.activevoice.eu/partners/>

7.3.3. Physical Activity Promotion and Nutrition Education – examples from the Danish experience

The **Danish Cancer Society** presented four projects on physical activity and diet improvement:

- **Go Cycling Denmark**, a public-private partnership promotes active transport for a healthy lifestyle. The results showed that providing bikes lanes alone is not enough; the Danish experience showed that an accompanying campaign is needed;
- **Play and Learn**, to increase physical activity of schoolchildren (age group 6-13 year-olds), and supporting the political decision to have a national goal of 45 minutes physical activity per day at school. The aim is to reach 50 percent of all schools. The programme is supported with relatively inexpensive tools.
- **The Danish Wholegrain Partnership**, which is an example of a successful multi-stakeholder partnership to drive change towards healthier eating. The results showed that the intake of whole grain doubled; and
- **Calorie Accounting**, a tool for food industry that can be used for monitoring and prioritising health interventions, and developed in collaboration with Danish supermarket chains (2010-2016).

IBFAN enquired about the Danish Wholegrain public-private Partnership, raising concerns in relation to public authorities working with industry on such initiatives. The **Danish Cancer Society** replied that public authorities had a prominent role in setting the standards for the wholegrain label. The wholegrain label cannot be used for products that do not comply with the criteria set and the criteria are revised periodically, to ensure compliance.

FoodDrinkEurope praised the Danish Wholegrain Partnership initiative, highlighting that it is a good example of how a public-private partnership could work. They confirmed that industry has access to data on product formulation, as mentioned by the Danish Cancer Society in their presentation, but added that it could be a complex task to collect the data. **FoodDrinkEurope** also asked whether revenues on the supplier side were affected and if the product taste was affected a consequence of the reformulation. The **Danish Cancer Society**

replied that the project did not negatively affect the revenues for retailers. In relation to product taste, as consumer acceptance is a prominent part of the project, tests are carried out on consumer substitution of the reformulated products to ensure that no negative effects arise.

8. UPDATE OF WORKING GROUP ON MONITORING AND REPORTING

ICF provided a summary of this year's Working Group meeting that was held on 3 November. The main points presented were the definitions document (shared with Platform members on 17 November), and main ideas on how to improve the Platform ICT tools. In 2017, the Working Group could consider working on implementing the main ideas related to improving the Platform ICT tools.

9. ANY OTHER BUSINESS

The **Commission** proposed to place on hold the membership of the **European Association of Communication Agencies (EACA)** as they have not had an active commitment since 1 January 2015, despite several reminders and audio meetings. The Plenary agreed with this and the Commission will inform EACA.

The Commission asked all to save the dates for the meetings in 2017 and to register at the Health Policy Platform as in the future this tool will be increasingly used for communication and information sharing.

The Commission also provided an update on the Action Plan on Childhood Obesity. The study on the mid-term implementation (2014-2017) has started and the results will be presented at a technical workshop organised by the Maltese EU Presidency.

The Commission also provided an update on the voluntary public procurement guidelines for schools that advocate for nutritional balance to be one of the criteria orientating public purchasing of food. The draft will also be presented by the Maltese EU Presidency. The draft will be shared with the Platform for input and comments.

10. CONCLUSION

The Chair:

- noted the agreement of the Plenary to the revised Platform methodology and the welcome to the developments agreed by the High level Group in the area of monitoring of national reformulation initiatives (any additional comments to be received by mid-February).
- concluded that physical activity remains a high priority for the Platform and urged members to develop ambitious actions in this area as well;
- noted the agreement by the Plenary to place on hold the membership of EACA;
- urged all to create an account at the Health Policy Platform;
- reminded participants that the next Platform meeting will take place on 9 March 2017 in Brussels and the members will discuss the **marketing and advertising**.