

Report of the 2nd Meeting of National Information Focal Points

Copenhagen, Denmark, 23–24 June 2009



Abstract

The World Health Organization (WHO) Regional Office for Europe and the Directorate-General for Health and Consumers of the European Commission have established a joint three-year project to monitor progress in improving nutrition and physical activity and preventing obesity in the European Union (EU). As part of this project, the second meeting of the network of the National Information Focal Points of the 27 EU countries was convened in Copenhagen, Denmark on 23–24 June 2009. The main aims were to discuss the preliminary results of the first mapping exercise of data and policies on nutrition, physical activity and obesity, which were provided by the Focal Points through the first country reporting template, and the structure of the WHO European database on nutrition, obesity and physical activity. Parallel working group sessions were held to discuss information retrieval issues, the potential outputs of the database and the types of information that the Focal Points are currently searching for.

Keywords:

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List of abbreviations

The following abbreviations are used in this report:

DAFNE	Data Food Networking (database)
DG	Directorate-General
DG SANCO	Directorate-General for Health and Consumers (EC)
EC	European Commission
EFCOVAL	European Food Consumption Validation
EFSA	European Food Safety Agency
EHIS	European Health Interview Survey
ENHR	European Nutrition and Health Report
EU	European Union
EUPASS	European Physical Activity Surveillance System
EuroFIR	European Food Information Resource Network
EUROSTAT	European Commission Statistical Office
EURRECA	European micronutrient Recommendations Aligned Network of Excellence
FAO	Food and Agricultural Organization of the United Nations
FAOSTAT	Statistical database of the Food and Agricultural Organization of the United Nations
GPAQ	Global Physical Activity Questionnaire
HBSC	Health Behaviour in School-aged Children
IDAMES	Innovative Dietary Assessment Methods in Epidemiological Studies and Public Health
INFOODS	International Network of Food Data Systems
IPAQ	International Physical Activity Questionnaire
NOPA	Nutrition, Obesity and Physical Activity (database)
WHO	World Health Organization
WP	work package

Acknowledgements

This report is a deliverable of work package (WP) 5 of the three-year collaborative project between the World Health Organization (WHO) and the Directorate-General (DG) for Health and Consumers (DG SANCO) of the European Commission (EC), which began in January 2008 (2007WHO02) under the title *“Monitoring progress on improving nutrition and physical activity and preventing obesity in the European Union (EU)”*. WHO expresses gratitude to the EC for supporting this meeting. Sincere appreciation is expressed to those who took time to participate in this meeting and whose valuable contributions will assist the WHO Regional Office for Europe in developing a European database on nutrition, obesity and physical activity (NOPA database). WHO wishes to thank Philippe Roux from DG SANCO for his technical contribution to the meeting and the members of the project’s Advisory Group for their technical advice: Michele Cecchini, Barbara Legowski, Brian Martin, Irene Nørlund, Jean-Michel Oppert, Aileen Robertson and Harry Rutter. Grateful thanks are extended to Frank Theakston for the text editing, Lars Møller for the layout and typesetting of this report, and to WHO staff who have contributed to the development of this report: Caroline Bollars for writing the report, Lideke Middelbeek and Sonja Kahlmeier for their technical input, Sally Charnley for her administrative support and Trudy Wijnhoven for the overall coordination.

Welcome and introduction

The meeting was opened by Srdan Matic, Head of the Noncommunicable Diseases and Environment Unit at the WHO Regional Office for Europe. He emphasized the importance of the joint project between the Regional Office and the EC DG SANCO for monitoring the challenge of obesity in the WHO European Region. The participants were informed about the integration of the NOPA database, whose development will be a major outcome of the project, with the general work of WHO and the future prospects for a database on risk factors for noncommunicable diseases.

Trudy Wijnhoven officially thanked the National Information Focal Points of the 27 EU Member States for their support of the project and the efforts they have made in completing the first reporting country template during the first six months of 2009.

The main objectives of the second meeting of the network of the National Information Focal Points were to present and discuss:

- the preliminary results of the first mapping exercise of data and policies on nutrition, physical activity and obesity (provided by Focal Points through the first country reporting template);
- the structure of the WHO European NOPA database; and

- the outcomes of two workshops (a) on the integration of physical activity data (Zurich, Switzerland, 25–26 February 2009) and (b) on the integration of data on household food availability and individual dietary intakes (Copenhagen, Denmark, 28–29 April 2009).

Parallel working group sessions were held to discuss information retrieval issues, potential outputs of the NOPA database and the types of information currently being searched for.

See Annex 1 for the list of participants and Annex 2 for the programme of the meeting.

Brief overview on progress of the WHO/EC monitoring project

An overview was given of the various work packages of the WHO/EC monitoring project and of progress made since the previous Focal Points meeting in September 2008. The aim of the project is to develop an Internet-based information and reporting system capable of describing and monitoring progress in the fight against obesity. The system will be made accessible to policy-makers and will assist Member States in monitoring implementation of their policy on nutrition and physical activity and in making comparisons between countries. The objectives of the project are to evaluate the stage of policy development and the actions carried out in the EU Member States to implement policies with regard to key commitments contained in the three main policy documents: the European Charter on Counteracting Obesity, the 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.

WP 1: Surveillance of nutritional status, dietary habits and physical activity patterns

This WP deals with the mapping of national and international data sources on the prevalence of overweight and obesity and physical activity patterns in children, adolescents and adults, household food availability and individual dietary intake in the 27 EU Member States. Literature searches were conducted and updated information was collected by means of the first country reporting template during the first six months of 2009. In addition, two workshops were organized to discuss the integration of data on physical activity (Zurich, 25–26 February 2009) and on household food availability and individual dietary intakes (Copenhagen, 28–29 April 2009).

WP 2: National policies and actions

The main task under this WP is to collect policy documents and public policies on diet, nutrition and physical activity in the EU Member States. Data on voluntary action by economic actors and information on public–private partnerships are also collected. Updated information on these topics was collected by means of the first country reporting template during the first six months of 2009.

WP 3: Good practice in regional and local initiatives

Collection of public health programmes, projects and interventions addressing the promotion of healthy nutrition and physical activity or the prevention of obesity is the main task under this WP. A WHO good practice tool to evaluate good practice elements of the planning and implementation of these programmes has been pilot tested and is in its final stage. Information on interventions carried out in countries will be collected by means of the second country reporting template during the second six months of 2009.

WP 4: Establishment of the database and management

The architecture of the NOPA database has been prepared and data input and validation are planned for the second six months of 2009, to be carried out by WHO staff. A draft of the primary information sources and their sub-components that compose the NOPA system are given in Annex 3.

WP 5: Support to national surveillance and policy intelligence

In order to support national surveillance and provide guidance to WHO in following national policy developments, a network of National Information Focal Points for nutrition and physical activity was established in 2008. Supportive tools for surveillance of diet, nutrition and physical activity will be developed in order to provide the correct technical assistance.

WP 6: Coordination, management and reporting

The coordination and management of this project is guided by the WHO/EC Steering Group. The established Advisory Group provides WHO with technical input and advice on the various deliverables.

WP 7: Dissemination of results

The project was introduced at the meeting of WHO Nutrition and Food Safety Counterparts in September 2008. The results of the project will be disseminated through forthcoming meetings with WHO Nutrition Counterparts, the WHO web site and the final report of the WHO/EC monitoring project.

WHO European database on nutrition, obesity and physical activity

An overview was given of the indicators, i.e. process, output and outcome indicators. The database structure was explained and an overview of the different templates on surveillance, policy and interventions was given. The database output will allow a visible profile of regional and country information, showing surveillance data, policy development and stage of policy implementation. It will also be possible to screen examples of good practice in interventions on nutrition, diet, physical activity and obesity prevention, public–private partnerships and voluntary action carried out by economic actors.

The database will be maintained by the Regional Office, which will continue to monitor the situation in the European Region. Flexibility is ensured by the database manager, who will decide whether to include or exclude items in the database.

The importance was stressed of giving priority in the database to addressing disadvantaged groups. WHO confirmed that this information will be included in the database. Member States stressed the importance of providing a search by time in order to show trend data. In a discussion about validation, it was confirmed that all the information in the database is provided through WHO via the Member States. Final clearance before the publication would be done by the Focal Points, the WHO Nutrition Counterparts and members of the EC High Level Group on Nutrition and Physical Activity.

WHO hopes that the database will serve as a stimulus at political level and that countries will be able to identify gaps in data collection. Suggestions were made to include additional items in the database such as the age of children, birth weight and information on the implementation of the International Code of Marketing of Breast-milk Substitutes.

Preliminary results of the first mapping exercise

Summary tables were handed out to the participants, including an overview of the different nutrition and physical activity surveys and policy documents in the 27 EU Member States.

Surveillance of nutritional status, including anthropometry and micronutrient status

Currently, nationally representative data on the prevalence of overweight and obesity are available as follows:

- children, 0–5 years:
 - measured (10 countries)
 - self-reported (2 countries)
- children, 6–9 years:
 - measured (13 countries)
 - self-reported (3 countries)
 - WHO European childhood obesity surveillance initiative (13 countries)
- adolescents, 10–19 years:
 - measured (14 countries)
 - self-reported (4 countries)
 - Health behaviour in school-aged children (HBSC) survey (26 countries)
 - Pro-children study (6 countries)
- adults, >19 years (26 countries: 5 measured, 24 self-reported)
- older adults, 50–79, 60+ and 65+ years (12 countries: 2 measured, 11 self-reported).

For data on self-reported weight and height in adults, the following sources have been identified:

- *Austria*: Health interview survey
- *Belgium*: Health interview survey
- *Czech Republic*: Sample survey of the health status of the Czech population
- *Denmark*: Danish health and morbidity survey
- *Estonia*: Health behaviour among the Estonian adult population
- *Finland*: Health behaviour and health among the Finnish adult population
- *France*: ObEpi: National epidemiological survey on obesity and overweight in France
- *Germany*: Microsensus
- *Hungary*: National health interview survey
- *Ireland*: National health and lifestyle survey
- *Italy*: Lifestyle and health status: yearly multipurpose survey on families "Aspects of daily life"
- *Latvia*: Health behaviour among the Latvian adult population
- *Lithuania*: Health behaviour among the Lithuanian adult population
- *Netherlands*: Self-reported health and lifestyle
- *Spain*: National health survey
- *Sweden*: Survey of living conditions
- *United Kingdom (Wales)*: Welsh health survey.

Regarding trends in the prevalence of overweight and obesity, nationally representative data are available for the following target groups:

- children, 2–9 years:
 - Netherlands (self-reported)
- adolescents, 10–19 years:
 - HBSC survey: 2001/2002 and 2005/2006
 - 18-year-old conscripts: Austria, Norway, Poland, Sweden
 - Poland, United Kingdom (Northern Ireland, Scotland) (measured)
 - Belgium, Finland, Greece, Netherlands (self-reported)
- adults:

- measured trend data for four countries only: Bulgaria, Ireland (North/South Ireland food consumption survey), Portugal, United Kingdom (Health survey for England and Scottish health survey)
- self-reported trend data for 18 countries.

Surveillance of dietary habits, including per capita food supply, household food availability, and individual food consumption and nutrient intake

Data on per capita food supply will be obtained from the food balance sheets included in FAOSTAT, the database of the Food and Agriculture Organization of the United Nations (FAO). Data on household food availability will come mainly from the Data Food Networking (DAFNE) databank, which contains data on 20 EU countries: Austria, Belgium, Cyprus, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Luxembourg, Malta, Poland, Portugal, Slovakia, Slovenia, Spain, Sweden and the United Kingdom.

Relating to the availability of individual survey data on food consumption and nutrient intake, the following surveys have been identified:

- children, 0–9 years: national surveys from Austria, Belgium, Bulgaria, the Czech Republic, Denmark, Estonia, France, Greece, Lithuania, the Netherlands, Poland, Slovakia, Slovenia and Sweden;
- adolescents, 10–19 years: national surveys from Austria, Belgium, Bulgaria, the Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Lithuania, Luxembourg, Malta, Poland, Slovakia, Slovenia and Sweden;
- adults: national surveys from Austria, Belgium, Bulgaria, the Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Latvia, Lithuania, Luxembourg, Malta, the Netherlands, Poland, Romania, Slovakia, Slovenia, Sweden and the United Kingdom.

Relating to data availability on micronutrient status, the following countries have been identified:

- children, 0–9 years: national surveys from Austria, Bulgaria, the Czech Republic, France, Germany, Greece, Latvia, Lithuania, Poland, Romania, Slovakia, Slovenia, Spain, Sweden and the United Kingdom;
- adolescents, 10–19 years: national surveys from Austria, Bulgaria, the Czech Republic, France, Germany, Greece, Luxembourg, Malta, Poland, Romania, Slovakia, Slovenia, Spain, Sweden and the United Kingdom;
- adults: national surveys from Austria, Belgium, Bulgaria, the Czech Republic, Cyprus, Denmark, France, Germany, Malta, the Netherlands, Romania, Slovenia, Spain, Sweden and the United Kingdom.

From this overview of all available data sources, it was concluded that all 27 EU Member States have data on the prevalence of overweight and obesity in children, adolescents and/or adults. However, it was stressed that the lack of weight and height measurements influences the validity and/or reliability of the reported data. Data on dietary intake is accessible for almost all the EU Member States and some 50% of them have carried out surveys on micronutrient status. WHO assured the participants that any bias within the data sources would be taken into account and reported if necessary as a footnote to the NOPA database providing the information.

Surveillance of physical activity levels and patterns

The following international surveys on physical activity levels and patterns have been identified:

- the FINBALT health monitor (Estonia, Finland, Latvia and Lithuania);
- the European health and behaviour survey performed in 17 European countries, mainly looked at frequency of exercise over the previous two weeks and types of activity;
- the HBSC survey, performed in 1993/94, 1997/98, 2001/02 and 2005/06, looks at physical activity and sedentary behaviour in 11-, 13- and 15-year-old children;
- physical activity levels and body weight in a nationally representative sample in the EU assesses physical activity in 15 EU countries;
- the European Physical Activity Surveillance System (EUPASS), which can be seen as the predecessor of the Eurobarometer, uses the International Physical Activity Questionnaire (IPAQ) among eight EU countries;
- the World health survey, including the physical activity items from IPAQ, performed in six EU countries;
- Eurobarometer 58 included 15 EU countries and monitored physical activity using IPAQ;
- Eurobarometer 62 included one item on participation in sport;
- Eurobarometer 54 included all 27 EU countries and measured physical activity using the IPAQ items;
- Eurobarometer 67 included one item on frequency of performing exercises; and
- the European health interview survey (EHIS), including all EU countries, measures physical activity using IPAQ items.

For all EU countries, physical activity data for adults are available through international surveys but all the identified surveys are based on subjective measurement methods. Many international surveys include all or most of the items from the short version of IPAQ (IPAQ

short), which includes seven items focusing on the frequency and duration of moderate and vigorous physical activity, time and frequency of walking, and time spent sitting.

With regard to data availability for children, the only international survey identified was the HBSC survey, which has no data for Cyprus and Romania.

Results of the Eurobarometer on physical activity performed in 2002 in 15 EU countries, in which physical activity was assessed through IPAQ short, showed that two thirds of the study population did not reach recommended levels of physical activity.

Information on physical activity levels and patterns for adults is available for 25 EU Member States (Romania and Slovakia being the countries that do not have such data). For children and/or adolescents, 17 EU Member States have physical activity data available from a national survey/study.

Most nationally representative surveys were based on subjective measurements of physical activity levels using non-standardized instruments. Nevertheless, if the same instruments are used over a long period, valuable time series data will be available for a country. However, intercountry data comparisons remain difficult as the different studies and surveys use different definitions of physical activity and different recommendations for physical activity are used as a reference.

Awareness and knowledge

In the first reporting template, WHO requested information on population awareness and knowledge concerning nutrition and physical activity. Such information is considered important within the context of policies and community interventions on nutrition and physical activity at country level. Of the 20 EU Member States that responded, 9 (Bulgaria, Denmark, Estonia, Finland, France, Ireland, Latvia, Lithuania and Poland) reported having carried out national surveys and/or studies on population awareness and knowledge. It has to be noted, however, that interpretation bias occurred while analysing the results reported by the different Member States.

It was concluded that surveys regarding knowledge on nutrition have been reported more frequently than surveys regarding knowledge on the health benefits of physical activity and/or of maintaining a healthy weight. The second country reporting template will therefore address this item once again.

Policies on food and nutrition and on obesity

The definition of "policy" as used in the glossary of terms, i.e. a "written document that contains strategies and priorities, define goals and objectives and is issued by a part of the administration", was highlighted during the presentation.

More than two thirds of the 129 national food and nutrition or obesity policy documents identified were drafted after 2004 and 30 were published after 2008/2009. Of the total, 74 were reported to have been adopted by national administrations, 39 were in their final versions and 16 were still at draft stage. In most cases, countries reported the ministry of health to be the national issuing body. The kind of nutrition policy documents retrieved varied from "National health and nutrition programme" or "Public health strategy" to "Action plan targeted at ...".

The time frame of the policy documents varied from 3 to 10 years. Of the 129 documents, 38 described nutrition as main area addressed, 14 obesity and 12 nutrition and physical activity. A more general approach was taken by 28 policy documents, addressing public health as a whole, and 9 specified on noncommunicable diseases. The rest of the documents targeted children (11), education (6), agriculture (6), healthy ageing (2), consumers (2) and health inequalities (1).

An overview of EU regulations and national legislation on nutrition was presented and provided for the participants in a summary table distributed at the meeting.

EU regulation:

- health and nutrition claims
- food information to consumers
- contaminants
- school fruit scheme
- single common market organization.

National legislation:

- general laws on public health
- specific amendments of existing national guidelines and declarations
- legislation on the provision of food in recreational settings.

In conclusion, it was stated that a policy framework at national level could be identified for all 27 EU Member States and that information concerning national nutrition policies was up to date. At first glance, however, only minimal attention had been paid to disadvantaged or lower socioeconomic groups in the policy documents. As a final point, clarification of definitions and terms with regard to the policy context is needed and the glossary of terms should therefore be used when interpreting the indicators in the country templates.

Policies on promoting physical activity

The overview on physical activity promotion policies was presented by sector and type of policy document:

- public health
- sport
- transport
- environment
- legislative and/or non-legislative policy document.

The first analysis of the policy documents promoting physical activity showed a considerable increase in number from 79 to 124 policies, strategies and action plans. Five countries (Bulgaria, Latvia, Lithuania, Luxembourg and Malta) had provided new information on physical activity policy.

Most of the policy documents identified were national documents. Exceptions were Belgium, Ireland and the United Kingdom, caused by decentralization of health policy in their political systems. The lack of subnational documents is most likely due not only to variations in political organization among countries but also to underreporting, as the WHO template only required reporting on national documents.

An overview was presented of policy documents by sector and type of policy:

- public health: 21 countries, 53 documents
- transport: 11 countries, 32 documents
- environment: 3 countries, 3 documents
- road infrastructure/safety: 1 country (Sweden: *Future travel and transport – infrastructure for sustainable growth*, 2008)
- legislation: 6 countries, 8 documents.

The main conclusion was that there had been a considerable increase in reported documents, most of them taking public health policy approaches. Other sector approaches are still more seldom, including promotion of physical activity policy, although whether this is due to fewer such approaches or to poorer reporting through the country template is uncertain. The legislative approach is less common in physical activity promotion than in the field of nutrition.

A comment was made to the effect that inequality issues should be taken into account in the promotion of physical activity and sport for health. A more general discussion then

arose about the complexity of policy evaluation and the difficulty of assessing policy implementation. WHO confirmed that health inequalities would be dealt with at the level of content analysis when validating the information received from the country templates.

Implementation: policy actions and programmes

An overview was given on actions reported at country level and tools for implementing the actions. The background to the WHO policy framework was provided by highlighting the main goals of the European Charter on Counteracting Obesity and the WHO European Action Plan for Food and Nutrition Policy 2007–2012. The different action areas within the Action Plan were described and mapped against the information already available through the country templates. By doing so, a first picture emerged of current activity in the 27 EU Member States. Examples were given for three action areas.

- Action area 1 – supporting a healthy start:
 - protecting, promoting and supporting breastfeeding (16/26 countries);
 - promoting the development of school and preschool nutrition policies:
 - nutrition education as part of the curriculum (10/26 countries),
 - physical activity as part of the curriculum (16/26 countries).
- Action area 2 – ensuring a safe, healthy and sustainable food supply:
 - fruit and vegetables: school fruit scheme as an example of promoting fruit and vegetable consumption by schoolchildren;
 - reformulation: salt reformulation reported by 13 countries;
 - use of economic tools (taxes, subsidies): reported by a few countries, mainly in connection with “unhealthy products”.
- Action area 3 – providing comprehensive information and education to consumers:
 - guidelines on nutrition and physical activity: 15/26 countries;
 - appropriate marketing practices: described at country level but in most cases at draft stage and seemingly difficult to implement;
 - adequate labelling of food products: provided through the proposed EU regulation on food information to consumers.

A total of 20 Member States reported the ministry of health to be their main institutional mechanism. Collaboration with civil society and professional networks was reported on the following topics: obesity (14 countries), nutrition (13 countries) and physical activity (11 countries). Public–private partnerships were mentioned by fewer than 50% of countries. Voluntary actions by economic actors were reported from over 50% of the countries, but little information was provided on specific actions by advertisers and marketers aimed at attaining the nutrition goals.

A total of 17 countries reported having education and awareness campaigns on obesity; 11 of these reported having a budget ranging from €19 000 to over €25 million a year, while

6 countries reported no budget at all. Regarding education and awareness campaigns on nutrition, 19 countries reported having such campaigns; 12 of these reported a budget ranging from €20 000 to over €25 million a year, while 6 countries reported no budget at all. A total of 20 countries reported having education and awareness campaigns on physical activity but only 9 reported a budget of between €9000 and over €25 million a year, while 6 reported no budget at all.

In conclusion, it was stated that a large number of countries reported having nutrition counselling for pregnant women, mandatory physical education in the school curriculum and the development of national food-based dietary guidelines. More information is needed at the level of implementation for each action area of the WHO European Action Plan for Food and Nutrition Policy 2007–2012.

EC White Paper: A strategy for Europe on nutrition, overweight and obesity related health issues

The background to the policy framework at EU level and the need for monitoring the policy framework were explained. A first progress report to the European Council and Parliament is foreseen in 2010 and a final report is due in 2013. In order to compile the progress report for the EU, various sources will be used by the EC:

- country reporting templates completed by the Focal Points and analysed by the Regional Office;
- other policies that have an impact on overweight and obesity, such as those from the EC's DG Information and/or DG Agriculture;
- the EU Platform for Action on Diet, Physical Activity and Health, which will undergo an external evaluation.

In the context of the EU Platform, commitments by industry on salt, fat and sugar are well represented. Platform members are obliged to report back to the EU regarding the implementation of their commitments and describe links with national federations.

The EU progress report will document all activities by Member States and EC-led activities with regard to the EU policy framework, in particular the White Paper. The five priority areas in the White Paper and identified indicators are:

1. Better-informed consumers:
 - a. percentage of nutritional information available on pre-packed foods
 - b. consumer understanding of nutrition information on food packaging labels
 - c. percentage compliance with self-regulatory codes and initiatives on advertising.

2. Making the healthy option available:
 - d. consumption of fruit and vegetables among children by socioeconomic group
 - e. change in consumer prices for fruit, vegetables and potatoes compared with other food stuffs
 - f. number of tonnes less salt/sugar/saturated fat purchased by consumers yearly, as a result of reformulation.

3. Encouraging physical activity:
 - g. gymnasium membership as a proportion of total population by key Member States
 - h. percentage of population accumulating at least one hour of moderate-intensity activity daily
 - i. percentage of communities with formal transport plans encouraging physical activity.

4. Priority groups and settings:
 - j. percentage of children walking and cycling to school
 - k. numbers of and increase in cases of good practice for workplace health promotion
 - l. number of and increase in school nutrition awareness programmes.

5. Improving obesity monitoring systems (link with the WHO/EC monitoring project, as a tool and informant):
 - m. WHO National Information Focal Points
 - n. WHO and EU databases.

The indicators mentioned under each of these action areas are still at the draft stage but they are important for policy-makers in drafting policy. It is crucial to identify which of the indicators are essential for the Member States.

For the EC, the key actors are:

- the WHO Regional Office for Europe and the WHO/EC project's National Information Focal Points;
- DG SANCO, Health Determinants unit;
- other relevant DGs, such as DG Agriculture and DG Information;
- EUROSTAT (EC Statistical Office);
- members of the EC High Level Group on Nutrition and Physical Activity as policy-makers;
- the EU Platform for Action on Diet, Physical Activity and Health via the monitoring reports and evaluation.

The timeline for the first EU progress report in 2010 was presented:

- 2008/2009:
 - launch of the EU/WHO information monitoring system and setting up of the network of National Information Focal Points; and
 - development of the set of indicators;
- first quarter of 2010:
 - second round of data collection in Member States by the Regional Office; and
 - evaluation of the EU Platform for Action on Diet, Physical Activity and Health;
- second quarter of 2010:
 - compilation of data and integration of all data sources; and
 - preparation of the EU progress report.

During the presentation, feedback was solicited concerning the core set of indicators presented during the meeting. The EC was aiming for adoption of the indicators by the High Level Group on Nutrition and Physical Activity in July 2009.

WHO informed the participants that the indicators from the White Paper have been compared and checked with the WHO policy framework. However, questions with regard to the key policy implementation indicators are still open for discussion.

The EC explained the different actions and actors that play a role in its strategy and an update was given concerning EU regulatory activities and current policy initiatives affecting obesity.

Working group discussions

The scope and purpose of the working group discussions on database components, variables and indicators was explained (see Annex 4). The participants were asked to discuss the accompanying questions and reflect on recommendations. Each group was furnished with a facilitator and a rapporteur who would provide feedback in the plenary session of the next day.

Feedback from the different working groups covered the different levels of the database outputs such as surveillance and national policies and actions, including variables and indicators.

Surveillance

- More information is needed on environmental indicators affecting nutrition and physical activity behaviour.
- Use of different food composition tables should be considered.
- Information on the school environment should be expanded.
- Knowledge and awareness at population level should be included.
- Food security indicators should be considered.
- Other health indicators such as blood pressure should be included.

National policies and actions

- Terms such as “nongovernmental organization” and “public–private partnership” should be clarified.
- Instruments and actions should be explained.
- Information on health systems of countries should be included.
- Regionalization of health policy should be addressed.

General points in relation to the database included:

- data quality, assurance and transparency;
- benchmarking – “what the politicians want to know”;
- the impact on various social groups, together with costs and budget;
- the need for data on trends;
- the possibility of linking surveillance with policies and actions;
- international: country comparisons;
- national:
 - what is being done in other countries
 - the cost–effectiveness of specific interventions
 - what results mean in terms of burden of disease
 - what can be considered as best practice
 - what tools are available
 - what points could be learned from other interventions
 - what definitions are used by others.

After the presentations of the working group rapporteurs, a lively discussion took place. The project leader, Trudy Wijnhoven, addressed some of the points raised by the working groups. Before the NOPA database goes live, the Focal Points as well as the WHO Nutrition Counterparts will be contacted and asked to check their country data. The piloting of the database will be done via the Regional Office's SharePoint web site.

WHO will make the information publicly available and all users will be able to make use of it, provided always that they indicate a clear reference source. A discussion took place concerning the sustainability of the WHO European NOPA database after the WHO/EC project. It was stated that only WHO management can decide about a continuous working relation with the EC but the database would be continuously maintained by WHO staff. The database will be a powerful tool for reporting back to the WHO Regional Committee for Europe in September 2010.

Outcomes of the workshop on integration of data on physical activity patterns

The Regional Office organized a workshop on integration of data on physical activity patterns in Zurich on 25–26 February 2009. The workshop was hosted by the University of Zurich and supported by Swiss Federal Offices of Public Health and of Sport. The scope and purpose of the workshop was to provide an overview of available national and international data on physical activity behaviour, to identify the main challenges to be further addressed, and to identify a list of indicators for inclusion in the NOPA database for comparing physical activity patterns and levels among all population groups across Europe. The initial overview carried out of existing data provided information from European surveys on 25 EU Member States and national surveys for 19 EU countries, and will be completed with further information, including that from non-health sources (e.g. travel surveys).

The workshop identified the following challenges regarding the surveillance of physical activity in EU countries:

- the use of non-standardized instruments in national surveys (although time-series data are often available);
- considerations regarding switching to standardized instruments (IPAQ or the Global Physical Activity Questionnaire, GPAQ) with loss of time-series data;
- the use of different definitions of physical activity as well as recommendations on sufficient physical activity for health;
- a lack of comparability of physical activity/inactivity measurements within and across countries;
- difficulties in comparing time-series data from existing European surveys;

- the fact that standardized instruments are often not applied or analysed according to protocol; and
- considerations regarding comparability with other world regions (IPAQ versus GPAQ).

The workshop also included discussions in working groups to list possible indicators, based on available data for adults and young people. Four examples from countries, the report of WHO headquarters global meeting on physical activity surveillance, and an example from the Asia Pacific region were presented on physical activity surveillance in children.

The definition of the core indicators for adults and children was welcomed by countries too in support of their surveillance efforts. Final operational definition of the indicators will be based on a more complete overview of available data and in close collaboration with the WHO/EC project Advisory Group and WHO headquarters. Complete original survey reports (including questionnaire) and publications that provide details of the sampling methods were recommended for inclusion in the NOPA database. The use of a standardized instrument was discussed with the provision of information on validity and reliability. For the time being, all available years would be included in the database.

It was suggesting that all countries should carry out regular surveillance of physical activity, ideally covering different age groups such as children, adolescents, adults and the elderly. Surveillance data should ideally be based on a simple but “robust” instrument and aspire to be a “good enough” methodology. The administration of surveys and data cleaning and analysis according to protocols was considered crucial.

Member States were interested in support from WHO in carrying out surveillance and addressing the related challenges. Objective measurements should be further explored, especially in children and young people. The Regional Office will continue to address the surveillance of physical activity and to support Member States, in close coordination with other ongoing projects and activities and with the EC and WHO headquarters. The application of standardized tools such as GPAQ will be promoted by the Regional Office.

Outcomes of the workshop on integration of data on household food availability and individual dietary intakes

The workshop on integration of data on household food availability and individual dietary intakes was convened in Copenhagen on 28–29 April 2009. The main aims were to:

- discuss the implications of the application of different dietary data collection protocols and existing data sources on the development of a harmonized European database;
- recommend a list of indicators to be included in the database to compare food consumption and dietary intake patterns among all population groups across Europe;

- review a methodology for the calculation of dietary adequacy in nationally representative populations; and
- establish links between different existing international or European data sets.

The meeting was attended by 11 experts from national administrations or leading European dietary database and surveillance projects and 4 WHO staff members.

A short overview was provided of European, international and national projects, databases and surveys available from the European Region that will be relevant to the project.

European dietary or food consumption data were identified from the FAOSTAT database and the International Network of Food Data Systems (INFOODS) database linked to the European Food Information Resource (EUROFIR) and from the European DAFNE databank and the food consumption database of the European Food Safety Authority (EFSA).

Regarding European dietary projects, the preliminary results of the European Nutrition and Health Report 2009 (ENHR II) was presented. Information was also presented on the European Food Consumption Validation (EFCOVAL) project, the Innovative Dietary Assessment Methods in Epidemiological Studies and Public Health (IDAMES) project and the methodology to estimate dietary adequacy in Europe from the European micronutrients Recommendations Aligned (EURRECA) network of excellence.

Country experiences on national dietary intake and food consumption surveys were presented on Denmark, the Netherlands, Poland, Portugal and the United Kingdom.

During the workshop, the participants were divided into two working groups to discuss (a) dietary data collection protocols and harmonization of a European food consumption database and (b) dietary data, indicators and dietary adequacy.

The general conclusion and recommendation from the workshop was to include information about the methodology of the surveys in the NOPA database. WHO should take ethical and data protection policies into consideration when including data sources. Food balance sheets should not be taken as an alternative to information collected by individual surveys.

The NOPA database should include all available data on nutrient intake, food consumption and food availability. Specific groups such as lower socioeconomic groups, elderly and young people, and pregnant and breastfeeding women should be targeted. WHO was advised to work on recommendations for countries on the further development of national data collection to allow standardization and harmonization and make data more comparable in the future.

Second country reporting template

WHO informed the meeting that the second country reporting template would be sent out to the Focal Points by the end of the summer and would focus on WP 3 addressing good practice in regional and local initiatives. The aim will be to form a broad picture of existing public health programmes designed to improve nutrition and physical activity data at national, regional and local levels in the 27 EU Member States. WHO will retrieve information on existing EU projects through collaboration with the EC. The second country information reporting template will also address the section on awareness and knowledge, since the question did not seem clear to many Focal Points in the first template. Additional indicators for mapping the implementation of existing national policies will be included and information on the stage of implementation will be collected.

After receipt of all the completed templates by the end of the year, WHO will begin the validation process, including checking the sources provided in the country templates and contacting the Focal Points for their approval of the information retrieved. WHO will simultaneously begin processing all the data in the established database with a view to it being presented at the next joint meeting of WHO Nutrition Counterparts and National Information Focal Points in 2010. WHO will also send country reporting templates to the 26 non-EU countries in the European Region to monitor the implementation of the European Charter on Counteracting Obesity and the WHO European Action Plan for Food and Nutrition Policy 2007–2012 in these countries as well.

Closure

In her closing remarks, Trudy Wijnhoven thanked the participants for all their work and the valuable feedback provided. WHO would take all the recommendations into account, together with specific remarks concerning the use of the NOPA database. The needs and wishes of countries, such as the preferred regional profiles, would be considered.

The WHO Advisory Group had been asked to provide final comments to the meeting, and these were as follows:

- Much progress had been made since the previous meeting of Focal Points in September 2008.
- Training was needed on the influence of the media on food and nutrition policy.
- The continuity of the project and maintenance of the WHO European NOPA database should be ensured.
- Capacity-building in the context of policy development and revisiting the list of process indicators was recommended, so that the outcome indicators would not be the only focus of the database. For example, more detailed information should be available on the existing coordination mechanisms that were reported by the countries (i.e. how were

they established and who the members are) or on public–private partnerships (i.e. how were these partnerships developed).

The project partners had also been asked to provide final comments to the meeting, and these were as follows:

- Information should be presented on the 11th International Conference on Obesity planned for July 2010.
- Environmental factors and health inequalities should not be forgotten.
- The focal points should discuss with their group of stakeholders the information provided at the meeting about database outputs and the way they could make use of it.

Philippe Roux, on behalf of the EC, stressed that all the work done through the project should be made available to all EU Member States and he expressed the hope that the project would be continued from 2010 until 2013.

ANNEX 1. Participants

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ANNEX 2. Programme

Tuesday, 23 June 2009

- 08.00 – 09.00 *Registration*
- 09.00 – 09.30 **Welcome and introductions**
- 09.30 – 10.00 **Brief overview on progress of the WHO/EC monitoring project**
(Trudy Wijnhoven)
- 10.00 – 10.30 **WHO European database on nutrition, obesity and physical activity**
(Trudy Wijnhoven)
- 10.30 – 11.00 *Coffee/tea break*
- 11.00 – 12.30 **Results of the first country reporting templates**
Overview of current available surveys and data on:
- Nutritional status, food availability and nutrient intake
(Trudy Wijnhoven)
 - Physical activity *(Lideke Middelbeek)*
 - Awareness and knowledge *(Sonja Kahlmeier)*
- Plenary discussion and interventions by Member States**
- 12.30 – 13.30 *Lunch*
- 13.30 – 15.00 **Results of the first country reporting templates (continued)**
Information on:
- Food and nutrition policies *(Caroline Bollars)*
 - Physical activity promotion policies *(Sonja Kahlmeier)*
 - Specific policy actions and programmes *(Caroline Bollars)*
- Plenary discussion and interventions by Member States**
- 15.00 – 15.30 **Monitoring the EC White Paper on a strategy for Europe on nutrition, overweight and obesity related health issues** *(Philippe Roux, EC/ DG SANCO)*
- 15.30 – 16.00 *Coffee/tea break*
- 16.00 – 16.10 **Introduction to parallel working groups on database components, variables and indicators** *(Trudy Wijnhoven)*
- 16.10 – 18.45 **Parallel working group discussions**
- 20.00 *WHO invites participants to dinner at Hellerup Parkhotel*

Wednesday, 24 June 2009

- 08.30 – 09.00 **Reporting back by the rapporteurs of the three working groups**
(10-minute presentations by each rapporteur)
- 09.00 – 09.45 **Plenary discussion on the working group reports**
- 09.45 – 10.10 **Outcomes of the workshop on integration of physical activity data**
(Sonja Kahlmeier)
- 10.10 – 10.30 **Outcomes of the workshop on integration of data on household food availability and individual dietary intakes** *(Trudy Wijnhoven)*
- 10.30 – 11.00 **Coffee/tea break**
- 11.00 – 11.30 **Second country reporting template, information retrieval procedures and data sources** *(Sonja Kahlmeier)*
- 11.30 – 12.45 **Conclusions, recommendations and next steps**
- 12.45 **Closure**
- 12.45 – 14.00 **Lunch**
- 14.00 – 16.00 **Meeting of project Advisory Group (members only)**
- 17.00 – 20.00 **Meeting of project Steering Committee (members only)**

ANNEX 3. Diagram of the WHO European Database on Nutrition, Obesity and Physical Activity

Information System Components, Sources, Indicator Groups

1 Surveillance



FAO Food Balance Sheet



DAFNE Household Budget Surveys



WHO Vitamin and Mineral Nutrition Information System



WHO Global Database on BMI



WHO Global Database on Child Growth and Malnutrition



WHO Global Data Bank on Infant and Young Child Feeding



Other Data Sources

- Databases maintained by OECD, EFSA, EC (Eurostat)
- Governmental departments
- National research and academic institutions
- NGOs

Anthropometry

Micronutrient Status

Household Food Availability

Per Capita Food Supply

Food Consumption

Nutrient Intake

Breastfeeding and Complementary Feeding

Nutritional Status

Dietary Habits

Physical Activity and Physical Inactivity

Awareness and knowledge

3 Good Practices

Programmes
Initiatives
Preventative Interventions

Good Practice in National, Regional and Local Initiatives

Description

The above diagram represents the four primary sources and their sub components that compose the NOPA System.

WHO European NOPA
Database/Monitoring
Information System

WHO European
Database on NCD
and Risk Factors

2 National Policies and Actions

Policy Documents

Governmental Policy
Instruments and Actions

Legislative Documents

National Education and
Public Awareness

National Nongovernmental
Organizations

Public-Private Partnerships

Voluntary Actions by
Economic Actors

4 Status

Status of Key Commitment
Implementation

European Charter on Obesity
EC White Paper on Nutrition
Second European Action Plan

ANNEX 4. Briefing for the working group discussions on database components, variables and indicators

Objectives

- To discuss the structure of the WHO European database on nutrition, obesity and physical activity.
- To discuss the types of information on nutrition, physical activity and obesity surveys, policies and actions that users are currently looking for.
- To recommend potential outputs of the database.

Working group participants are invited to nominate a rapporteur.

- The rapporteur's role is to take notes on the discussion, prepare the presentation and report back at the plenary session.

Working group participants are invited to discuss the following three questions.

1. Based on the summary document on the structure of the WHO European database system, its different components and the way it is structured, please answer the following questions.
 - (a). Does the database contain the necessary information (data on nutrient intake, food consumption, obesity and physical activity; policy and actions on nutrition, obesity and physical activity; and good practice) to monitor the nutrition and physical activity situation in a country and assess trends over time?
 - (b). If not, what are the variables, actions and indicators you would recommend WHO to add?
2.
 - (a). Do you think that the content of the database will meet the needs and wishes of the potential users (policy-makers, health professionals, experts, scientists, nongovernmental organizations, etc.)?
 - (b). For instance, what would be the kind of information you would look for?
 - (c). Could you answer the main questions you are asked on these topics, such as from Parliament or from your supervisor?
3. Please have a look at the four illustrations of the possible database outputs, the so-called "mock-ups" of country profiles and a regional matrix on information availability. In this context, please note that examples of mock-ups of nutrition, physical activity or obesity-related indicators only have not been prepared but are planned.
 - (a). Based on your own experiences with other web-based databases, what would be your recommendation to optimize the user-friendliness of these database outputs?
 - (b). What kind of information/output would be most useful, taking into account the different potential users (policy-makers, health professionals, experts, scientists, nongovernmental organizations, etc.)?

Joint WHO/EC DG SANCO project: Monitoring progress on improving nutrition and physical activity and preventing obesity in the European Union (EU), 2008-2010

Report series

No. Title

- 1 Report of the 1st Meeting of National Information Focal Points, Brussels, Belgium, 23–24 September 2008
- 2 Report of the 2nd Meeting of National Information Focal Points, Copenhagen, Denmark, 23–24 June 2009
- 3 Report of the Meeting on community initiatives to improve nutrition and physical activity, Berlin, Germany, 21–22 February 2008
- 4 Report of the Workshop on integration of data on physical activity patterns, Zurich, Switzerland, 25–26 February 2009
- 5 Report of the Workshop on integration of data on household food availability and individual dietary intakes, Copenhagen, Denmark, 28–29 April 2009
- 6 Review of physical activity surveillance data sources in European Union Member States
- 7 Review of dietary intake surveillance data sources in European Union Member States
- 8 Review of obesity surveillance data sources in European Union Member States
- 9 Review of food and nutrition policy development and legislation in European Union Member States
- 10 Review of physical activity promotion policy development and legislation in European Union Member States
- 11 Overview of public-private partnerships aiming to prevent obesity in European Union Member States
- 12 Overview of implementation of statutory and self-regulatory codes in the area of marketing foods and beverages to children in European Union Member States

For further information please contact:



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