Nicole Wolfram • Michael Rigby Michael Sjöström • Rosa Giuseppa Frazzica Wilhelm Kirch Editors

# Nutrition and Physical Activity

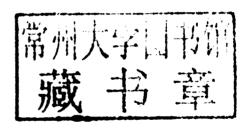
Health Information Sources in EU Member States, and Activities in the Commission, WHO, and European Networks



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### **Preface**

Je crois du moins que les hommes n' ont jamais cessé d'avancer dans la conscience qu'ils prenaient de leur destin. Les Amandiers Albert Camus

Many Health Information Activities related to nutrition and physical activity have been initiated during the past years by several institutions at national and international level as well as by several European networks. A multitude of projects with different scopes and methodologies has arisen. This variety makes it necessary to bring the results of these activities into a coordinated framework.

The report aims to give a structured overview on the availability of routinely repeated or repeatable data on the health determinants nutrition and physical activity in European countries. An Inventory of Health Information Activities on nutrition and physical activity was built up, which summarizes activities carried out by the European Commission, WHO, various European networks, as well as national examples.

The Health Information Activities collected as national examples assess data for all countries belonging to the European Union up to 2006, the European Economic Area (EEA), and all candidate countries. The Inventory considers activities that started in 1990 or later, which were still running or were approved but have not yet started. Food safety and food labeling are not constituent subjects of the report.

The report analyses institutional initiatives of the European Commission, WHO, selected European networks as well as examples of health information activities at national level. A network of European public health professionals identified available national health information activities and survey data, which were summarised in a structured online database.

The results section presents the analysis of the database, which summarises health information activities in European countries. The database is freely accessible at the Web site of the Working Party on Information on Lifestyle and Specific Subpopulations. Additionally, the printed report provides a summary of all project database entries in the form of *Project Identity Cards*. For each country, Health Information Activities have been summarised in *Country Profile* Sheets.

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The report provides a general overview on Health Information Activities related to nutrition and physical activity as well as a state-of-the-art investigation about available data in European countries. The concluding section of the report aims to recommend future Health Information actions that outline open issues.

The Scientific Platform of the Working Party on Information on Lifestyle and Specific Subpopulations has compiled this project report on Health Information Activities on nutrition and physical activity on request of DG SANCO of the European Commission.

Dresden July 2008 Grit Neumann, M.A. Prof. Dr. Dr. Wilhelm Kirch

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# **Background and Purpose**

Analysing people's health and reporting on health have become increasingly important for a large number of EU Member States. Health reporting is defined as "a system of different products and measures aiming at creating knowledge and awareness of important Public Health problems and their determinants (in different population groups) among policy makers and others involved in organisations that can influence the health of a population." [6] Health reporting systems are intended to monitor the status of health, health behaviour, and risk factors as well as the health care system at national level. Politicians, scientists, and stakeholders are thus offered an information background. Accordingly, effective health monitoring is an important instrument for health policy decisions and support for national health policy. Furthermore, it can lead to the identification of health data needs and health research priorities.

In the past, the European Commission has supported several activities to measure health in Europe and to implement a unique and comparable health monitoring system at the level of the European Union that allows for the measurement of health status, trends, and determinants throughout the community. First steps have been taken, but to ensure that health monitoring fulfils these functions at a national as well as at international level, future efforts are necessary.

On 23 September 2002, the European Parliament and the Council adopted a new Community Action Programme for Public Health. The programme started on 1 January 2003 and was originally intended to run for a 6-year period until 31 December 2008. This programme was designed to complement national policies; its overall aim was to protect human health and improve public health. There were three general objectives:

- To improve information and knowledge for the development of public health (health information)
- To enhance the capability of responding rapidly and in a coordinated fashion to threats to health (health threats)
- To promote health and prevent disease through addressing health determinants across all policies and activities (health determinants) [7, 8]

Under the thematic priority *health information* within the Community Public Health Programme 2003–2008, the European Commission is launching public

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health monitoring projects. This thematic strand sets the objective of establishing and operating a sustainable health monitoring system. The system aims at producing comparable information on health and health-related behavior of the European population, on diseases and health systems.

This will be based on European-wide common agreed indicators with regard to their definition, data collection, and use [9]. The system is to be established on the basis of the previous work in former Community Health Programmes and will now be continued intensively under the new Public Health Programme, which starts in 2007 and runs till 2013. The new Public Health Programme will substitute the old programme (2003–2008).

One of the key priorities in the EU Public Health Action Programme is the lifestyle-related health determinants of nutrition and physical activity, not least because of the linkage to the growing problem of overweight and obesity. During the past years, many Health Information Activities related to nutrition and physical activity have been initiated by several institutions on the national and international level as well as by European networks.

The majority of research activities in this field have been initiated because nutrition and inappropriate physical activity are significant risk factors for many common noncommunicable diseases. The top noncommunicable health problems (cardiovascular disease, obesity, diabetes, osteoporosis, and cancer) are life-style-related diseases and share common risk factors. These are unhealthy nutrition, lack of physical activity, smoking, and heavy drinking. For the majority of adults in Europe who neither smoke nor drink excessively, what they eat, and how physically active they are, are the most significant controllable risk factors affecting their long-term health. During the past decades, physical inactivity and high dietary fat intakes have becoming increasingly prevalent in people's daily living in industrialised countries [20, 23].

The awareness of the importance of nutrition and physical activity on health status has given rise to a multitude of projects with different scopes and methodologies. Until now the European Commission's aim to produce comparable information on health and health-related behavior of the population has not been fulfilled. The measurement of comparable health status, trends, and determinants throughout the Community is not yet possible.

One important reason that hampers the production of comparable data in the field of the lifestyle indicators nutrition and physical activity is the absence of agreed measures and related data definitions within Europe. As mentioned earlier, a considerable number of projects have been initiated. They used different definitions, indicators, and methods, which made the production of comparable data difficult.

First steps in the field to harmonise and compare health information activities have already been taken. A first set of European Community Health Indicators was produced by the European Community Health Indicators (ECHI) project in its first and second phases (ECHI 1 and ECHI 2), which included indicators on nutrition and physical activity. The objective of this project was to continue the work on specific indicators to complete the European Community Health Indicators list that

will serve as a basis for the European health information system including their operational definitions.

The project "Monitoring Public Health Nutrition in Europe" also contributed to comparable health indicator definitions across member states. This project aimed to clearly define the indicators for nutrition and physical activity that should be monitored for nutrition-related health outcomes [24].

To tie up to these efforts of harmonisation and standardisation, it is necessary to bring together into a coordinating framework the results of past activities related to nutrition and physical activity, with their different scopes and methodologies. In this context, a report on the availability of national data sources since 1990 concerning the health determinants, nutrition and physical activity has been initiated; at the same time, it should be noted that food safety and food labeling are not covered in this report.

The report also presents an Inventory of Health Information Activities on Nutrition and Physical Activity, which summarizes National Examples and activities carried out by the European Commission, the WHO, and selected European Networks. Therefore, the report provides a general overview on Health Information Activities, which are related to nutrition and physical activity, and thus provides a state-of-the-art investigation. The report aims to analyse which existing resources can be linked into one coordinated database. The concluding section of the report aims to recommend future Health Information Actions, which would address issues that have not yet been covered.