

The Healthy Food Environment Policy Index (Food-EPI): European Union

An overview of EU-level policies influencing food environments in EU Member States

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1 Lakerveld J, Woods C, Hebestreit A et.al. Advancing the evidence base for public policies impacting on dietary behaviour, physical activity and sedentary behaviour in Europe: The Policy Evaluation Network promoting a multidisciplinary approach. *Food Policy*. Published online: 5 March 2020. <https://doi.org/10.1016/j.foodpol.2020.101873>

Introduction

Overweight, obesity and diet-related non-communicable diseases have risen dramatically in the past decennia, caused by changes in dietary and physical activity patterns. The current food environment (e.g. easy availability of energy-dense, fat- and sugar-rich, and ultra-processed foods) is one of the key factors contributing to this public health problem. Government policies have the potential to improve these food environments, making a healthy choice easier. Our research will therefore answer the question:

'Which current EU-level policies have a (potential) positive influence on the food environment?'

Aim

The aim of our research is:

1. To provide an overview of EU public policies (i.e. policies developed by the European Commission and that apply to all EU member states) with a direct or indirect (potential) influence on food environments and;
2. To identify implementation gaps and policy priorities. We use the Healthy Food Environment Policy Index (Food-EPI) developed by the International Network for Food and Obesity/Non-communicable Diseases Research, Monitoring and Action Support (INFORMAS) for our analysis (<https://www.informas.org/modules/public-sector/>). This is a tool to assess the extent of implementation of government policies and actions for creating healthy food environments.

Scope of our research

Globally, the Food-EPI has already been applied in more than twenty countries, including Australia and New-Zealand ([INFORMAS Food-EPI](#)). This research will apply the Food-EPI tool to evaluate policies influencing food environments as developed by the European Commission. Similar studies will be conducted at national level in five European countries (Ireland, Germany, the Netherlands, Norway and Poland) as part of the JPI HDHL Policy Evaluation Network (PEN)-project (<https://www.jpi-pen.eu/>).

Collection of relevant policy documents and evidence of implementation at EU level

The Food-EPI consists of 13 domains, including 50 indicators, which reflect the extent to which actions and policies for creating healthy food environments have been developed and implemented (see Figure 1).

For each of the 50 Food-EPI indicators, evidence for the existence and degree of implementation of policies has been collected by a team of researchers, through searching for and reading EU policy documents. All policies identified at the EU level with a potential influence on the food environment have been summarized in this "evidence document" under the heading of the Food-EPI indicators. This document was compiled in October-December 2019 and summarizes policy actions that the European Commission has taken relating to the food environment up until 2 December 2019. This evidence document will be used by experts

in the areas of food, nutrition and health from across Europe to rate the strength of the EU policies for each indicator.

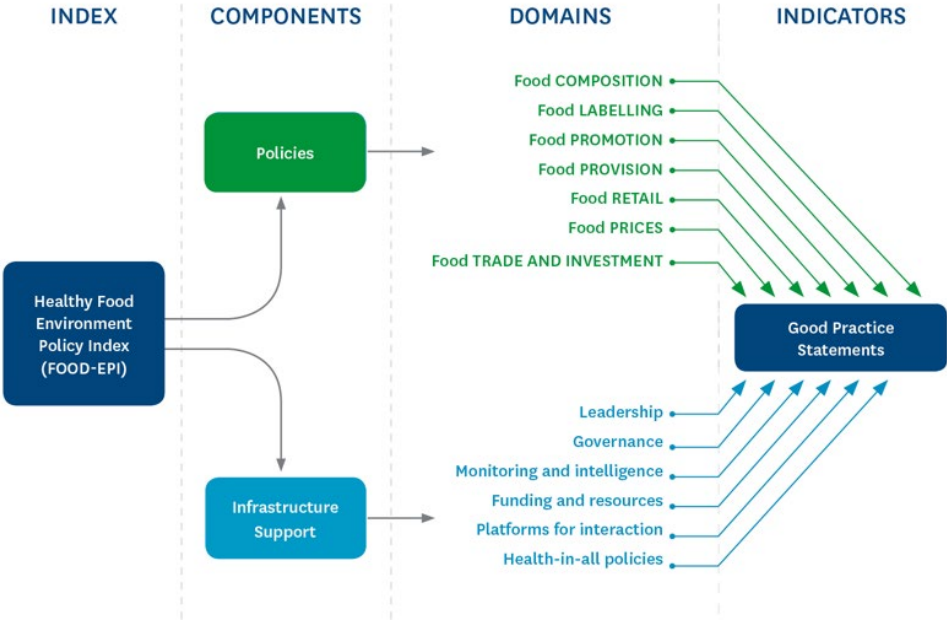


Figure 1 The Healthy Food Environment Policy Index (Food-EPI)

We used several main sources to search for the relevant policy documents. These sources included the European Commission’s websites:

- European Commission> Live, work, travel in the EU> Public Health> Nutrition and physical activity overview: https://ec.europa.eu/health/nutrition_physical_activity/overview_en
- JRC Health knowledge Gateway: <https://ec.europa.eu/jrc/en/health-knowledge-gateway/promotion-prevention/nutrition>
- EUR-Lex: <https://eur-lex.europa.eu/homepage.html>
- Organisation and governance of the European Commission: https://ec.europa.eu/info/about-european-commission_en

Via these websites we found information and links to additional useful documents including:

- The EU Action Plan on Childhood Obesity 2014-2020
- Initiatives on Nutrition and Physical Activity 2019 (https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf)
- DG Sante’s Strategic Plan 2016-2020

The Strategic Plan of DG Health and Food Safety (SANTE) refers to the Treaty on the Functioning of the European Union, which shapes the EU’s degree of influence in health and food policies, saying that Member States are responsible for the definition of their health policy and for the organization and delivery of health services and medical care. DG SANTE therefore states that EU action is mainly linked to incentive measures, e.g. raising awareness to prevent chronic disease and promote good health and cooperation measures. However, one of its missions is to ‘improve and protect human health’.

EU LEGAL INSTRUMENTS²

The term European legal instruments refers to the instruments available to the European institutions to carry out their tasks. The instruments listed in Article 288 of the Treaty on the Functioning of the European Union (TFEU) are:

	Binding in their entirety	Binding to the results to be achieved	Non-binding
Directly applicable in all countries	Regulations		
Have to be transposed into the national legal framework		Directives	
Directly applicable to whom they are addressed	Decisions		
No legal obligation on those to whom it is addressed			Opinions Recommendations

- **Regulations:** these are binding in their entirety and directly applicable in all EU countries;
- **Directives:** these bind the EU countries as to the results to be achieved; they have to be transposed into the national legal framework and thus leave margin for manoeuvre as to the form and means of implementation;
- **Decisions:** these are fully binding on those to whom they are addressed and are directly applicable.
- **Recommendations:** these are non-binding, declaratory instruments. A recommendation allows the institutions to make their views known and to suggest a line of action without imposing any legal obligation on those to whom it is addressed.
- **Opinions:** these are non-binding, declaratory instruments. An 'opinion' is an instrument that allows the institutions to make a statement in a non-binding fashion, in other words without imposing any legal obligation on those to whom it is addressed.

Furthermore, Article 290 of the TFEU introduces the possibility for the European legislator to delegate to the Commission the power to adopt **non-legislative acts of general scope** which supplement or amend non-essential elements of legislative acts.

In addition to the instruments listed in Article 288 of the TFEU, practice has led to the development of a whole series of other documents: **interinstitutional agreements, resolutions, conclusions, communications, green papers and white papers.**

Under the Common Foreign and Security Policy, specific legal instruments are used, such as **EU actions and positions.**

- **Interinstitutional agreements** regulate certain aspects of consultation and cooperation between the EU institutions and are the product of a consensus between them – i.e. they constitute a form of **joint rules of procedure**.³
- **Council conclusions:** are adopted after a debate during a Council meeting. They can contain a political position on a specific topic. It is important to distinguish between **Council conclusions** and **presidency conclusions**. Council conclusions are issued by the Council while presidency conclusions only express the position of the presidency and do not engage the Council.⁴

² https://eur-lex.europa.eu/summary/glossary/community_legal_instruments.html and https://europa.eu/european-union/eu-law/legal-acts_en.

³ https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=LEGISSUM:010302_1

⁴ <https://www.consilium.europa.eu/en/council-eu/conclusions-resolutions/>

- **Council resolutions:** usually set out future work foreseen in a specific policy area. They have no legal effect but they can invite the Commission to make a proposal or take further action. If the resolution covers an area that is not entirely an area of EU competency, it takes the form of a **'resolution of the Council and the representatives of the governments of the member states'**.⁵
- **A Communication is a policy document with no mandatory authority.**⁶ The Commission takes the initiative of publishing a Communication when it wishes to set out its own thinking on a topical issue. A Communication has no legal effect.
- **WHITE PAPER:** documents containing proposals for European Union (EU) action in a specific area. In some cases, they follow on from a Green Paper published to launch a consultation process at EU level. The purpose of a White Paper is to launch a debate with the public, stakeholders, the European Parliament and the Council in order to arrive at a political consensus.
- **GREEN PAPER:** documents published by the European Commission to stimulate discussion on given topics at European level. They invite the relevant parties (bodies or individuals) to participate in a consultation process and debate on the basis of the proposals they put forward. Green Papers may give rise to legislative developments that are then outlined in White Papers.

5 <https://www.consilium.europa.eu/en/council-eu/conclusions-resolutions/>

6 https://ec.europa.eu/civiljustice/glossary/glossary_en.htm

List of Abbreviations

- American Institute for Cancer Research (AICR)
- Common Agricultural Policy (CAP)
- Consumers, Health, Agriculture and Food Executive Agency (CHAFEA)
- Directorate-General (DG)
- DG for Agriculture and Rural Development (DG AGRI)
- DG for Health and Food Safety (DG SANTE)
- DG for Communication Networks, Content and Technology (DG CNECT)
- European Cancer Information System (ECIS)
- European Economic and Social Committee (EESC)
- European Environment Agency (EEA)
- European Core Health Indicators (ECHI)
- European Investment Bank (EIB)
- European Fund for Strategic Investments (EFSI)
- European Health Information Survey (EHIS)
- European Public Health Alliance (EPHA)
- European Social Fund Plus (ESF+)
- European and Structural Investment Funds (ESIF)
- Food Based Dietary Guidelines (FBDG)
- Food and Agriculture Organization of the United Nations (FAO)
- Fund for European Aid to the most Deprived (FEAD)
- Fighting Obesity through Offer and Demand (FOOD)
- Health-In-All-Policies (HIAP)
- International Network for Food and Obesity/Non-communicable Diseases Research, Monitoring and Action Support (INFORMAS)
- Integrated Surveillance on NCD's (iNCD's)
- Joint Action on Nutrition and Physical Activity (JANPA)
- Joint Programming Initiative- a Healthy Diet for a Healthy Life (JPI HDHL)
- Joint Research Centre (JRC)
- Environmental Impact Assessment (EIA)
- European Commission (EC)
- European Food and Safety Authority (EFSA)
- European Union (EU)
- European Free Trade Association (EFTA)
- Eurostat- Statistical Office of the EU
- Front-of-Pack (FOP)
- Health Behaviour in School-aged Children (HBSC)
- Non-communicable disease (NCD)
- Non-governmental organisation (NGO)
- Organisation for Economic Cooperation and Development (OECD)
- Open Method of Coordination (OMC)
- Point-of-sale (POS)
- Policy Evaluation Network (PEN)
- Quantitative Ingredients Declaration (QUID)
- Regulatory Fitness and Performance programme (REFIT)
- Schools for Health in Europe network (SHE)
- Strategic Environmental Assessment (SEA)
- Sustainable Development Goal (SDG)

- Sustainability Impact Assessment (SIA)
- Sugar-Sweetened Beverages (SSB)
- Treaty on the Functioning of the European Union (TFEU)
- World Cancer Research Fund International (WCRF)
- World Health Organization (WHO)
- WHO European Childhood Obesity Surveillance Initiative (COSI)
- WHO Nutrition, Obesity and Physical Activity (NOPA) database

Healthy Food Environment Policy Index: Policy domains

DOMAIN 1 – FOOD COMPOSITION

Food composition targets/standards/restrictions for processed foods: This domain concerns the extent to which the EU stimulated/proposed/developed/implemented systems to ensure that, where practicable, processed foods minimise the energy density and the nutrients of concern (salt, saturated fat, trans fat, added sugar).

COMP1: Food composition targets/standards/restrictions have been established by the EU for the content of the nutrients of concern (trans fats, added sugars, salt, saturated fat) in industrially processed foods, in particular for those food groups that are major contributors to population intakes of those nutrients of concern.

Definitions and scope of COMP 1

- Includes packaged foods manufactured within the EU countries or manufactured overseas and imported to the EU countries for sale.
 - Includes packaged, ready-to-eat meals sold in supermarkets.
 - Includes mandatory or voluntary targets, standards (e.g., reduce by X%, maximum mg/g per 100g or per serving).
 - Includes legislated ban on nutrients of concern.
 - Excludes legislated restrictions related to other ingredients (e.g. additives).
 - Excludes mandatory food composition regulation related to micronutrients e.g. vitamins, minerals (e.g. folic acid or iodine fortification).
 - Excludes food consumption standards/targets for fibre, healthy ingredients like fruits and vegetables.
 - Excludes food composition of ready-to-eat meals sold in food service outlets (see COMP2).
 - Excludes general guidelines advising food companies to reduce nutrients of concern.
 - Excludes the provision of resources or expertise to support individual food companies with reformulation.
 - Industrially processed foods are the processed and ultra-processed foods according to the **NOVA classification** (please find the complete definitions here: <https://world.openfoodfacts.org/nova>):
 - Processed foods, such as bottled vegetables, canned fish, fruits in syrup, cheeses and freshly made breads, are made essentially by adding salt, oil, sugar or other substances from Group 2 (processed culinary ingredients) to Group 1 (unprocessed or minimally processed) foods.
 - Ultra-processed foods, such as soft drinks, sweet or savoury packaged snacks, reconstituted meat products and pre-prepared frozen dishes, are not modified foods but formulations made mostly or entirely from substances derived from foods and additives, with little if any intact Group 1 (unprocessed or minimally processed foods) food. The overall purpose of ultra-processing is to create branded, convenient (durable, ready to consume), attractive (hyper-palatable) and highly profitable (low-cost ingredients) food products designed to displace all other food groups.
-

COMP2 Food composition targets/standards/restrictions have been established by the EU for the content of the nutrients of concern (trans fats, added sugars, salt, saturated fat) in meals sold from food service outlets, in particular for those food groups that are major contributors to population intakes of those nutrients of concern.

Definitions and scope

- Meals sold at food service outlets include foods sold at quick service restaurants, dine-in restaurants and take-away outlets, coffee, bakery and snack food outlets (both fixed outlets and mobile food vendors). This also includes foods from catering operations and delivery meals.
 - Includes legislated bans on nutrients of concern.
 - Includes mandatory or voluntary targets, standards (i.e. reduce by X%, maximum mg/g per 100g or per serving).
 - Excludes legislated restrictions related to other ingredients (e.g. additives).
 - Excludes mandatory out-of-home meal composition regulations related to micronutrients, e.g. vitamins, minerals (e.g. folic acid or iodine fortification).
 - Excludes food consumption standards/targets for fibre, healthy ingredients like fruits and vegetables.
 - Excludes general guidelines advising food service outlets to reduce nutrients of concern.
 - Excludes the provision of resources or expertise to support food service outlets with reformulation.
-

POLICY EVIDENCE SUMMARY

Food composition targets/standards/restrictions for the content of nutrients of concern in industrially processed foods (COMP1) and in meals sold from food service outlets (COMP2)

The EU has not made a distinction in their policy documents between nutrients of concern in industrially processed foods and in meals sold from food service outlets. Therefore the same policy documents apply for both indicators. Some policy documents propose certain food categories for establishing food composition targets, including restaurant meals, catering meals, school food offer and ready meals.

1. Mandatory food composition targets/standard/restrictions

Policy documents which contain mandatory food composition restrictions at EU level are the Directive for the prohibition of added sugars in fruit juices and the Regulation on trans fats.

1.1 Directive for the prohibition of added sugars in fruit juices⁷

Since 2012, added sugars in fruit juices is no longer allowed under the Directive 2012/12/EU of the European Parliament and the Council.

⁷ Directive 2012/12/EU of the European Parliament and the Council of 19 April 2012 amending Council Directive 2001/112/EC relating to fruit juices and certain similar products intended for human consumption. Official Journal of the European Union L 115, 27.4.2012, p. 1–11. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32012L0012&from=EN>

1.2 Regulation on trans fats⁸

In April 2019, the Commission adopted an EU-wide legal limit for industrially produced trans fat (amending Annex III to regulation (EC) No 1925/2006). The adopted Regulation (No 2019/649 of 24 April 2019 as regards trans fat) prescribes a maximum limit of trans fat, other than trans fat naturally occurring in fat of animal origin, in food which is intended for the final consumer and food intended for supply to retail, of 2 grams per 100 grams of fat.

2. Voluntary food composition policies

The EU Framework for National Salt Initiatives and the Framework for National Initiatives on selected nutrients, with the Annexes on Saturated Fat and Added Sugars set voluntary targets/goals to establish a benchmark for overall reduction of the nutrients of concern. Participation by Member States in these frameworks is voluntary.

2.1 EU Framework for National Salt Initiatives⁹

In 2008, the High Level Group on Nutrition and Physical Activity developed the EU Framework for National Salt initiatives. The framework sets the goal to establish a benchmark for overall salt reduction of a minimum of 16% in 4 years against the individual baseline level in 2008. This is applicable to all food products as well as to food consumed in restaurants and catering facilities such as canteens (exceeding the 16% target is encouraged).

In order to effectively reduce salt intake, the framework proposes 12 food categories to concentrate activities on and member states are encouraged select at least 5 categories in their national plans. At least in four food categories (bread, meat products, cheeses and ready meals) the lowest possible salt levels ('best in class' levels) are identified at EU level but member states may also identify 'best in class' products within further food categories themselves.

The Commission published a report on the Implementation of the EU Salt Reduction Framework in 2012.¹⁰ It concluded that during the first two years of the implementation of the framework, 29 European countries (EU Member States, Norway and Switzerland) had salt reduction initiatives in place, but that the reduction of salt intake in populations a slow process is (e.g. concerning technological barriers, food safety concerns, consumer acceptance).

2.2 EU Framework for National Initiatives on selected nutrients¹¹

At the beginning of 2011 the High Level Group on Nutrition and Physical Activity agreed on the EU Framework for National Initiatives on selected nutrients (by selected nutrients the framework refers to a complex set of target variables that may vary nationally, such as saturated fat, trans fat, energy, total fat content, added sugars, portion sizes and consumption frequency. Member States initiatives may cover one or a combination of these elements). This sets out a framework for cooperation between EU Member States who want to work on reformulation issues, including setting goals to establish a benchmark for overall reductions of the nutrients of concern.

8 Commission Regulation (EU) 2019/649 of 24 April 2019 amending Annex III to Regulation (EC) No 1925/2006 of the European Parliament and of the Council as regards trans fat, other than trans fat naturally occurring in fat of animal origin (Text with EEA relevance.). OJ L 110, 25.4.2019, p. 17–20. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32019R0649&from=EN>

9 European Commission, High Level Group on Nutrition and Physical Activity, 2008. EU FRAMEWORK FOR NATIONAL SALT INITIATIVES. https://ec.europa.eu/health/archive/ph_determinants/life_style/nutrition/documents/salt_initiative.pdf

10 European Commission, 2012. Implementation of the EU Salt Reduction Framework. Results of Member States Survey. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/salt_report_en.pdf

11 European Commission, High Level Group on Nutrition and Physical Activity, 2011. EU FRAMEWORK FOR NATIONAL INITIATIVES ON SELECTED NUTRIENTS. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/euframework_national_nutrients_en.pdf

2.3 Annex on Saturated Fat¹²

Complementing this Framework, an Annex on Saturated Fat was published in 2012. This annex proposes to set a general benchmark for saturated fat reduction of a minimum of 5% in 4 years and a minimum of an additional 5% reduction by 2020 against the individual baseline levels at the end of 2012. The annex suggests that priority is given to food categories that commonly represent major sources of saturated fat in European diets. In order to maximize the impact of reformulation, food business operators would prioritize the products with the largest market share. Furthermore, the annex emphasizes that care should be taken that reductions are delivered across the full range of food products (premium to economy) so that all population groups can benefit.

For dairy and meat products, the annex proposes special arrangements, like a fat content for dairy products at or below 1,5% and the provision that lower fat options of meat should at least not be more salted than higher-fat options. The annex further indicated that for ready meals, fats, oils and margarines, food items served in modern restaurants, breakfast cereals and meat products 'best in class' saturated-fat levels would be identified at EU level, but member states may also identify 'best in class' products within other food categories.

2.4 Annex on Added Sugars¹³

Following the EU framework for national initiatives on selected nutrients, the High Level Group on Nutrition and Physical Activity agreed in December 2015 to an Added Sugars Annex. This Annex promoted a voluntary reduction of 10% in added sugars in processed foods by 2020, against the Member State baseline levels at the end of 2015 or to move towards 'best in class' levels. In general, the Annex mentions that the reduction of added sugars should not lead to an increase of the absolute amount or caloric content, saturated fat, trans fat or salt, but should lead to a decreased energy content. The annex prioritizes food categories like Sugars Sweetened Beverages, sugars sweetened dairy, breakfast cereals, bread, confectionary, bakery products, ready meals, savoury snacks, sauces, sugars sweetened desserts, canned fruit and vegetables, school food offer and catering meals.

2.5 Other developments on Product Improvement

In 2016, a Roadmap for Action on Food Product Improvement was endorsed by the EU Member States and EFTA countries, food business operators and NGO's. They endorsed the urgency to develop more concerted action towards a healthier product offer, by lowering levels of salt, saturated fat and added sugars.¹⁴

A pilot database on the nutritional characteristics of food products in the EU was commissioned in 2017 to help monitor whether food products have increasingly less (or increasingly more) salt, fat or sugars.¹⁵ It will inform authorities, consumers and industry about the scope for improvements in food products. Since «what gets measured gets done», this can strengthen national reformulation initiatives and support consumer choice, innovation and a level playing field for industry.

Also, a joint initiative of all the Member States and the Commission (a Joint Action) will adapt and

12 European Commission, 2012. ANNEX I: SATURATED FAT. EU FRAMEWORK FOR NATIONAL INITIATIVES ON SELECTED NUTRIENTS. Ref. Ares(2012)699700 - 12/06/2012. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/saturated_fat_eufnism_en.pdf

13 European Commission, High Level Group on Nutrition and Physical Activity, 2015. Annex II, Added Sugars. EU FRAMEWORK FOR NATIONAL INITIATIVES ON SELECTED NUTRIENTS. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/added_sugars_en.pdf

14 Dutch Presidency EU Conference Food Product Improvement, 22 February 2016. Roadmap for Action on Food Product Improvement. http://www.agripres.be/_STUDIOEMMA_UPLOADS/downloads/roadmap.pdf

15 European Commission, 2019. Initiatives on Nutrition and Physical activity. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf

implement practices that have already proven to work in the three areas: reformulation, marketing and public procurement.¹⁶ Starting in 2020, it will promote the monitoring of food reformulation (namely the monitoring of reformulation initiatives) but also, the reduction of aggressive marketing to children of foods high in fat, salt and sugar, and the improvement of public procurement of food.

16 European Commission, 2019. Initiatives on Nutrition and Physical activity. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf

DOMAIN 2 – FOOD LABELLING

This domain concerns the extent to which the EU proposed/developed a regulatory system for consumer-oriented labelling on food packaging and menu boards in restaurants to enable consumers to easily make informed food choices and to prevent misleading claims.

LABEL1 Ingredient lists and nutrient declarations in line with Codex recommendations are present on the labels of all packaged foods.

Definitions and scope

- Includes packaged foods manufactured within the EU countries or manufactured elsewhere and imported to the EU countries for sale.
- Nutrient declaration means a standardized statement or listing of the nutrient content of a food.
- Excludes health and nutrition claims (see 'LABEL 2').
- Includes trans fats and added sugar which are not part of the standard seven elements generally part of mandatory nutrient declarations (energy, total fat, saturated fat, trans fat, carbohydrates, sugar, protein, sodium).

LABEL2 Evidence-based regulations are in place for approving and/or reviewing claims on foods, so that consumers are protected against unsubstantiated and misleading nutrition and health claims.

- Nutrition claims include references to the nutritional content on food (e.g. low in fat).
- Health claims are claims that state, suggest or imply that a relationship exists between a food category, a food or one of its constituents and health. These include function claims, such as 'calcium strengthens bones' and disease risk reduction claims, such as 'a healthy diet rich in a variety of vegetables and fruit may help reduce the risk of some types of cancer'.
- Includes the use of a nutrient profiling system to classify food products into permitted/not permitted to carry health claims and/or nutrition claims.
- 'Evidence-based' refers to regulations that are based on an extensive review of up-to-date research and expert input or a validated nutrient profiling model to inform decision-making about nutrition or health claims.

LABEL3 One or more interpretive, evidence-informed front-of-pack supplementary nutrition information system(s) proposed/required by the EU, which readily allow consumers to assess a product's healthiness, is/are applied to all packaged foods (examples are the Nutri-Score and traffic lights).

Definitions and scope

- Nutrition information systems include traffic light labelling (overall or for specific nutrients); Warning labels; Nutri-Score; star or points rating; percent daily intake.
- Keyhole and Finish heart symbol are not considered FOP labelling systems (but rather claims).
- 'Evidence-informed' refers to systems that utilize robust criteria (based on an extensive review of up-to-date research and expert input) or a validated nutrient profiling model to inform decision-making about the product's healthiness.

LABEL4 A simple and clearly-visible system of labelling the menu boards of all quick service restaurants (i.e. fast food chains) is set/proposed by the EU to be implemented by the Member States, which allows consumers to interpret the nutrient quality and energy content of foods and meals on sale.

Definitions and scope

- Quick service restaurants: In the EU' context this definition includes fast food chains as well as gas stations, kiosks, coffee, bakery and snack food chains. It may also include supermarkets where ready-to-eat foods are sold.
 - Definition Euromonitor: Fast food outlets offer limited menus that are prepared quickly. Customers order, pay and pick up their order from a counter. Outlets tend to specialize in one or two main entrees such as hamburgers, pizza, ice cream, or chicken, but they usually also provide salads, drinks, dessert etc. Food preparation is generally simple and involves one or two steps, allowing for kitchen staffs generally consisting of younger, unskilled workers. Other key characteristics include: • A standardised and restricted menu; • Food for immediate consumption; • Tight individual portion control on all ingredients and on the finished product; • Individual packaging of each item; • Counter service; • A seating area, or close access to a shared seating area, such as in a shopping centre food court • For chained fast food, chained and franchised operations which operate under a uniform fascia and corporate identity. • Take out is generally present, as is drive-through in some markets.
 - Labelling systems: Includes any point-of-sale (POS) nutrition information such as total kilojoules; percent daily intake; traffic light labelling; star rating, or specific amounts of nutrients of concern, salt warning labels.
 - Includes endorsement schemes (e.g. accredited healthy choice symbol) on approved menu items.
-

POLICY EVIDENCE SUMMARY

Ingredient lists and nutrient declarations in line with Codex recommendations (LABEL1)

Mandatory policy instruments

The Regulation (EU) No 1169/2011 on the provision of food information to consumers¹⁷

The Regulation (EU) No 1169/2011 on the provision of food information to consumers was introduced on 13 December 2014 and it was obligatory to provide nutrition information from 13 December 2016.¹⁸ Article 6 of the Regulation prescribes as a basic requirement that 'any food intended for supply to the final consumer or to mass caterers shall be accompanied by food information in accordance with this Regulation'.

Chapter IV, section I, article 9 of this Regulation contains mandatory food information regarding the content and presentation of food. It contains a list of mandatory particulars including rules for a list of ingredients and a nutrition declaration. This is in line with Codex recommendations.¹⁹

17 Regulation (EU) No 1169/2011 of the European Parliament and of the Council of 25 October 2011 on the provision of food information to consumers, amending Regulations (EC) No 1924/2006 and (EC) No 1925/2006 of the European Parliament and of the Council, and repealing Commission Directive 87/250/EEC, Council Directive 90/496/EEC, Commission Directive 1999/10/EC, Directive 2000/13/EC of the European Parliament and of the Council, Commission Directives 2002/67/EC and 2008/5/EC and Commission Regulation (EC) No 608/2004. OJ L 304, 22.11.2011, p. 18–63. EUR-Lex : <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32011R1169&from=EN>.

18 https://ec.europa.eu/food/safety/labelling_nutrition/labelling_legislation_en

19 Codex Alimentarius, 2018. GENERAL STANDARD FOR THE LABELLING OF PREPACKAGED FOODS CXS 1-1985. Adopted in 1985. Amended in 1991, 1999, 2001, 2003, 2005, 2008 and 2010. Revised in 2018. http://www.fao.org/fao-who-codexalimentarius/sh-proxy/en/?lnk=1&url=https%253A%252F%252Fworkspace.fao.org%252Fsites%252Fcodex%252Fstandards%252FCXS%2B1-1985%252FCXS_001e.pdf

The list of ingredients shall include all the ingredients of the food, in descending order of weight. Some foods are exempted from bearing a list of ingredients, like fresh fruits and vegetables, carbonated water, foods consisting of a single ingredient, etc.

With regard to the nutrient declaration, declaration of the energy value and the amounts of fat, saturates, carbohydrate, sugars, protein and salt is mandatory, which is in line with Codex recommendations.²⁰ (This may voluntarily be supplemented with other declarations, e.g. mono-unsaturated fats, fiber, vitamins). The Regulation No 1169/2011 does not allow for declaration of added sugars or trans fat in the nutrition declaration.

Nutrition declarations for foods listed in Annex V of the Regulation are not mandatory, for example unprocessed products that comprise a single ingredient or category of ingredients. The Regulation contains an annex (XIV) with conversion factors to be used for calculating the energy value, which are in line with Codex recommendations.²¹ The energy value and the amounts of nutrients shall be expressed per 100 g or per 100 ml, using the measurement units (kilojoule, kcal, grams, milligrams or micrograms) listed in an annex (XV) of the Regulation.

Commission Notice on the application of the principle of quantitative ingredients declaration (QUID)²²

On 20 November 2017, the Commission adopted a Commission Notice on the application of the principle of quantitative ingredients declaration (QUID). **The purpose of this Notice is to provide guidelines on the application of the principle of quantitative ingredients declaration in the context of Regulation (EU) No 1169/2011.**

Article 22(1) of the Regulation provides that 'The indication of the quantity of an ingredient or category of ingredients used in the manufacture or preparation of a food shall be required where the ingredient or category of ingredients concerned:

- a. Appears in the name of the food or is usually associated with that name by the consumer;
- b. Is emphasised on the labelling in words, pictures or graphics; or
- c. Is essential to characterise a food and to distinguish it from products with which it might be confused because of its name or appearance.'

With regard to article 22 point a of this Regulation, QUID is mandatory where the **ingredient** ('ham and mushroom pizza', 'strawberry yoghurt', 'salmon mousse', 'chocolate ice cream') or the **food category of the ingredients** ('vegetable pasty', 'fish fingers', 'nut loaf', 'fruit pie') appears in the name of the food. In these cases QUID should refer to the total vegetable, fish, nut or fruit content of the food.

When compound ingredients (for example cream filling, containing eggs) appear in the name of the food the QUID of these ingredients should also be given. There are again some exemptions to these rules, for example for foods consisting of a single ingredient, or naturally occurring constituents in foods.

20 Codex Alimentarius, 2017. GUIDELINES ON NUTRITION LABELLING CAC/GL 2-1985. Adopted in 1985. Revised in 1993 and 2011. Amended in 2003, 2006, 2009, 2010, 2012, 2013, 2015, 2016 and 2017. ANNEX adopted in 2011. Revised in 2013, 2015, 2016 and 2017. http://www.fao.org/faowhocodexalimentarius/shproxy/en/?lnk=1&url=https%253A%252F%252Fworkspace.fao.org%252Fsites%252Fcodex%252Fstandards%252FCXG%2B2-1985%252FCXG_002e.pdf

21 Idem.

22 European Commission, 2017. Commission Notice on the application of the principle of quantitative ingredients declaration (QUID). OJ C 393, 21.11.2017, p. 5–12. EUR-Lex : [https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52017XC1121\(01\)&from=EN](https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52017XC1121(01)&from=EN).

Evidence-based regulations for approving and/or reviewing claims on foods (LABEL2)

Mandatory policy instruments

Regulation (EC) No 1924/2006 on Nutrition and Health Claims²³

European Union rules on nutrition and health claims have been established by Regulation (EC) No 1924/2006. The definition provided for claims in the Regulation is:

“any message or representation which is not mandatory under Community or national legislation...”. It includes foods placed on the market or supplied in bulk and foods intended for supply to restaurants, hospitals, schools, canteens and similar mass caterers.

The definitions provided for nutrition and health claims in the Regulation are:

“ ‘nutrition claim’ means any claim which states, suggests or implies that a food has particular beneficial nutritional properties due to (a) the energy (calorific value) it provides (at a reduced or increased rate) or does not provide; (b) the nutrients or other substances it contains (in reduced or increased proportions or does not contain”.

“ ‘health claim’ means any claim that states, suggests or implies that a relationship exists between a food category, a food or one of its constituents and health”.

General principles for all claims included in the regulation are that nutrition and health claims shall not:

- Be ambiguous, false or misleading;
- Give rise to doubt about the safety and/or the nutritional adequacy of other foods;
- Encourage or condone excess consumption of a food;
- State, suggest or imply that a balanced and varied diet cannot provide appropriate quantities of nutrients in general;
- Refer to changes in bodily functions, which could give rise to, or exploit fear in the consumer.

Article 4 of the Regulation contains the conditions for the use of nutrition and health claims, including the use of nutrient profiles, which are thresholds of nutrients such as fat, salt and sugars above which nutrition and health claims are restricted. Although the Regulation (Article 4) prescribes that the Commission by 19 January 2009 shall establish specific nutrient profiles, the Roadmap for the Evaluation of the Regulation published in 2015 indicates that the Commission did not establish nutrient profiles yet, due to the complexity of the subsequent discussions in relation to scientific issues and potential economic impacts.

Article 5 of the Regulation consists of general conditions which must be fulfilled to use nutrition and health claims. An example is that the presence, absence or reduced content of a nutrient in respect of which a claim is made has been shown to have a beneficial nutritional or physiological effect as established by generally accepted scientific data.

The Regulation further contains rules for authorization procedures for nutrition and health claims. Nutrition claims shall only be permitted if they are listed in the Annex of Regulation (EU) No

23 REGULATION (EC) No 1924/2006 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 20 December 2006 on nutrition and health claims made on foods. OJ L 404, 30.12.2006, p. 9-25. EUR-Lex: <https://eurlex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2006:404:0009:0025:EN:PDF>

1047/2012²⁴ and are in conformity with the conditions set out in the Regulation (EC) No 1924/2006. Unlike nutrition claims, an application for authorization shall be submitted for health claims, in which the European Food and Safety Authority (EFSA) gives an opinion. After receiving the opinion of EFSA, the Commission shall submit to the Standing Committee on the Food Chain and Animal Health a draft decision on the list of permitted health claims. A public EU register of Nutrition and Health Claims lists all permitted nutrition claims and all authorized and non-authorized health claims.

The Directive on Fruit Juices (2012/12/EU)²⁵ includes specific rules for claims on fruit nectar products. According to the Directive, sugars and/or honey up to 20% of the total weight of the finished fruit nectar products and/or sweeteners are allowed. A claim stating that sugars have not been added to fruit nectar, and any claim likely to have the same meaning for the consumer, may only be made where the product does not contain any added mono- or disaccharides or any other food used for its sweetening properties.

Front-of-pack supplementary nutrition information system(s) (LABEL3)

Under the current EU rules, the indication of nutrition information on the front-of-pack is voluntary under certain conditions:

Voluntary EU policies

The Regulation EU 1169/2011²⁶ allows Member States to recommend or food business operators to use, on a voluntary basis, additional forms of expression and presentation of the nutrition declaration (on the front-of-pack) or other voluntary nutrition information provided that specific requirements are met. The EU does not allow Member States to implement mandatory front-of-pack labels.

Member States shall provide the Commission with the details of such additional forms of expression and presentation. These additional forms of expressions and presentation are usually provided on the front of the pack. The Regulation specifies that such expression/presentation of nutrition declarations or information has to be presented in the 'principle field of vision' (commonly known as the 'front of pack' as mentioned in recital 41 of the Regulation).

Article 35 of the Regulation (EU) required the Commission to submit by December 2017 a report to the European Parliament and Council on the use of front-of-pack nutrition labelling schemes, on their effect on the internal market and on the advisability of further harmonisation in the area. Considering the limited experience with front-of-pack labelling schemes in the EU, the adoption of the report was postponed with a view to including the experience with recently introduced schemes.

The Working Group of the Standing Committee on Plants, Animals, Food and Feed – Regulation

24 COMMISSION REGULATION (EU) No 1047/2012 of 8 November 2012 amending Regulation (EC) No 1924/2006 with regard to the list of nutrition claims. EUR-Lex: <https://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2012:310:0036:0037:EN:PDF>

25 Directive 2012/12/EU of the European Parliament and the Council of 19 April 2012 amending Council Directive 2001/112/EC relating to fruit juices and certain similar products intended for human consumption. Official Journal of the European Union L 115, 27.4.2012, p. 1–11. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32012L0012&from=EN>

26 <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32011R1169&from=EN>

(EU) No 1169/2011 on the provision of food information to consumers and the Advisory Group on the Food Chain, Animal and Plant Health held meetings in 2018 on the front-of-pack labelling. The Joint Research Centre (JRC) conducted a study on FOP labelling schemes, which will be published together with the Commission report. At the moment of writing this evidence document (November 2019), the report has not yet been adopted and therefore, it is not yet available.

There are currently six front-of-pack schemes developed or endorsed by the public sector: the Keyhole logo (used in Sweden, Denmark, Lithuania), the Nutri-Score (used in France and Belgium and future implementation announced by Spain and Germany), the Multiple Traffic Light combined with Reference Intakes (UK), the Finnish Heart Symbol, the Slovenian 'Little Heart' logo and the Croatian 'Healthy Living' logo. The Mid-Term Evaluation of the Action Plan on Childhood Obesity 2014-2020²⁷ showed that front-of-pack labelling was seen as one of the most difficult activities to work on, due to difficulties with placing foods in certain categories with respect to their nutritional value and resistance from the industry.

Labelling system of the menu boards of quick service restaurants (LABEL4)

There is no system at EU level which prescribes the labelling of menu boards at quick service restaurants, which allows consumers to interpret the nutrient quality and energy content of foods and meals on sale. As regulated via Regulation (EU) No 1169/2011²⁸ only the allergen information is mandatory for non-prepacked food in restaurants and cafes (article 44). Information of other particulars is voluntary unless Member States adopt national measures. In the EU Action Plan on Childhood Obesity 2014-2020²⁹ 'implementing a clear signposting scheme for foods and meals in supermarkets and restaurants' included as a voluntary objective for Member States is recommended. However, the Mid-Term Evaluation of the Action Plan on Childhood Obesity 2014-2020³⁰ showed that menu labelling was seen as one of the most difficult activities to work on, due to difficulties with placing foods in certain categories with respect to their nutritional value and resistance from the industry.

27 Directorate-General for Health and Food Safety (European Commission), European Public Health Alliance (EPHA), National Institute for Public Health and the Environment (RIVM), Netherlands Institute for Health Services Research (NIVEL), 2018. Supporting the mid-term evaluation of the EU action plan on childhood obesity. Luxembourg: Publications Office of the European Union, 2019 <https://publications.europa.eu/en/publication-detail/-/publication/7e0320dc-ee18-11e8-b690-01aa75ed71a1/language-en>

28 Regulation (EU) No 1169/2011 of the European Parliament and of the Council of 25 October 2011 on the provision of food information to consumers, amending Regulations (EC) No 1924/2006 and (EC) No 1925/2006 of the European Parliament and of the Council, and repealing Commission Directive 87/250/EEC, Council Directive 90/496/EEC, Commission Directive 1999/10/EC, Directive 2000/13/EC of the European Parliament and of the Council, Commission Directives 2002/67/EC and 2008/5/EC and Commission Regulation (EC) No 608/2004. OJ L 304, 22.11.2011, p. 18–63. EUR-Lex : <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32011R1169&from=EN>

29 European Commission, 2014. EU Action Plan on Childhood Obesity 2014-2020. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/childhoodobesity_actionplan_2014_2020_en.pdf

30 Directorate-General for Health and Food Safety (European Commission), European Public Health Alliance (EPHA), National Institute for Public Health and the Environment (RIVM), Netherlands Institute for Health Services Research (NIVEL), 2018. Supporting the mid-term evaluation of the EU action plan on childhood obesity. Luxembourg: Publications Office of the European Union, 2019 <https://publications.europa.eu/en/publication-detail/-/publication/7e0320dc-ee18-11e8-b690-01aa75ed71a1/language-en>

DOMAIN 3 – FOOD PROMOTION

This domain concerns the extent to which the EU has set/proposed policies to reduce the impact (exposure and power) of promotion of unhealthy foods to children including adolescents across all media.

- **Exposure of food marketing concerns the reach and frequency of a marketing message. This is dependent upon the media or channels, which are used to market foods.**
- **The power of food marketing concerns the creative content of the marketing message. For example, using cartoons or celebrities enhances the power (or persuasiveness) of a marketing message because such strategies are attractive to children.**

PROMO1 Effective policies are set/proposed by the EU to be implemented by the Member States to restrict exposure and power of promotion of unhealthy foods to children including adolescents through broadcast media (TV, radio).

Definitions and scope

- Includes mandatory policy (i.e. legislation or regulations) or voluntary standards, codes, guidelines set by the EU or by industry where the EU plays a role in development, monitoring, enforcement or resolving complaints (i.e. co-regulation).
- Includes free-to-air and subscription television and radio only (see PROMO2, PROMO3 and PROMO5 for other forms of media).
- Effective means that the policies are likely to reduce overall exposure of children, including adolescents to unhealthy food advertising over the day.

PROMO2 Effective policies are set/proposed by the EU to be implemented by the Member States to restrict exposure and power of promotion of unhealthy foods to children including adolescents through online and social media.

Definitions and scope

- Includes online media (e.g. social media, branded education websites, online games, competitions and apps).
- Where the promotion is specifically through other non-broadcast media than online and social media, this should be captured in 'PROMO3 and PROMO5'.
- Where the promotion is specifically in a children's setting, this should be captured in 'PROMO4'.
- Effective means that the policies are likely to reduce overall exposure of children, including adolescents to unhealthy food advertising over the day.

PROMO3 Effective policies are set/proposed by the EU to be implemented by the Member States to restrict exposure and power of promotion of unhealthy foods to children including adolescents through non-broadcast media other than packaging and online/social media.

Definitions and scope

- Non-broadcast media promotion includes: print (e.g. children's magazines), on/around public transport (e.g. signage, posters and billboards), cinema advertising, product placement and brand integration (e.g. in television shows and movies), direct marketing (e.g. provision of show bags, samples or flyers), or point-of-sale (POS) displays.
- Non-broadcast media is excluding the media covered through other indicators like online and social media (PROMO2) and packaging (PROMO5).

- Where the promotion is specifically in a children's setting, this should be captured in 'PROMO4'.
- Effective means that the policies are likely to reduce overall exposure of children, including adolescents to unhealthy food advertising over the day.

PROMO4 Effective policies are set/proposed by the EU to be implemented by the Member States to ensure that unhealthy foods are not commercially promoted to children including adolescents in settings where children gather (e.g. preschools, schools, sport and cultural events).

Definitions and scope

- Children's settings include: areas in and around schools, preschools/kindergartens, daycare centres, children's health services (including primary care, maternal and child health or tertiary settings), sport, recreation and play areas/venues/facilities and cultural/community events where children are commonly present.
- Includes restrictions on marketing in government-owned or managed facilities/venues (including within the service contracts where management is outsourced).
- Includes restriction on unhealthy food sponsorship in sport (e.g. junior sport, sporting events, venues).
- Effective means that the policies are likely to reduce overall exposure of children, including adolescents to unhealthy food advertising over the day.

PROMO5 Effective policies are set/proposed by the EU to be implemented by the Member States to ensure that unhealthy foods are not commercially promoted to children (including adolescents) on food packages.

Definitions and scope

- Includes product design and packaging (e.g. use of celebrities or cartoons, competitions and give-aways).
- Where the promotion is specifically in a children's setting, this should be captured in 'PROMO4'.
- Effective means that the policies are likely to reduce overall exposure of children (including adolescents) to unhealthy food advertising over the day.

POLICY EVIDENCE SUMMARY

Policies to restrict exposure and power of unhealthy foods to children through broadcast, online and social media, non-broad cast media, in settings where children gather and on packages. (PROMO1-5)

In the EU, there are no strict regulations that prohibit Member States to market unhealthy foods to children through broadcast, online and social media, non-broadcast media, in settings where children gather and on packages. However the EU recognizes the influence of marketing and advertising to children and encourages Member States to take action.

EU Action Plan on Childhood Obesity 2014-2020³¹

The EU Action Plan on Childhood Obesity 2014-2020 developed by the EU Member States recognizes that efforts to restrict marketing and advertising to children and young people should include not only TV, but all marketing elements, including in store environments, promotional actions, internet presence and social media.

In the EU Action Plan on Childhood Obesity 2014-2020 several objectives are related to restrict the exposure and power of promotion of unhealthy foods to children through different kinds of media and settings. However non-broad cast media is not mentioned specifically. These objectives fall under Action area 4 of the Plan: 'Restrict Marketing and advertising to children.' Main priority of this action area is 'to limit the exposure of children to advertisement of food/drinks high in fats, sugars and salt. The objectives are:

- Defining nutrition criteria to use in a framework for marketing of foods to children. Target: consolidated nutrition criteria for restricting marketing of less healthy food options to children by 2016 at latest. Responsible: Member States and Stakeholders.
- Setting recommendations for marketing foods via TV, internet, sport events etc. Target: 30% of Member States with recommendations. Responsible: Member States.
- Encouraging media service providers to set up stricter codes of conduct on audiovisual communications to children regarding foods which are less healthy options. Actions to strengthen the implementation of Article 9.2 of the Directive on Audiovisual Media Services. Target: 80% of Member States with fully implemented Directive on Audiovisual Media Services. Responsible: Commission and Member States.
- Ensure that schools are free from marketing of less healthy food and drink options. Target: less than 5% of schools reporting violation, annually per Member State. Responsible: Member States and Stakeholders.

There are no objectives specifically related to the restriction of marketing to children on food packages. However the EU recognizes in the Plan the possible impact of marketing on food packages to children.

Supporting the mid-term Evaluation of the Action Plan on Childhood Obesity 2014-2020

The mid-term evaluation of the Action Plan³² showed that almost 90% of the countries have initiatives to restrict marketing and advertising of foods and beverages that are high in salt, sugar or fat or that otherwise do not fit national or international nutritional guidelines to children or have plans in this area (6% of the countries). Two thirds of the initiatives being (voluntary) codes issued by the private sector. About half of the countries use nutrient criteria to restrict marketing of foods to children or have plans for it.

Directive 2018/1808 on Audiovisual Media Services³³

The EU's Audiovisual Media Services Directive governs EU-wide coordination of national legislation

31 European Commission, 2014. EU Action Plan on Childhood Obesity 2014-2020. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/childhoodobesity_actionplan_2014_2020_en.pdf

32 Directorate-General for Health and Food Safety (European Commission) , European Public Health Alliance (EPHA) , National Institute for Public Health and the Environment (RIVM) , Netherlands Institute for Health Services Research (NIVEL), 2018. Supporting the mid-term evaluation of the EU action plan on childhood obesity. Luxembourg: Publications Office of the European Union, 2019 <https://publications.europa.eu/en/publication-detail/-/publication/7e0320dc-ee18-11e8-b690-01aa75ed71a1/language-en>

33 DIRECTIVE (EU) 2018/1808 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 14 November 2018 amending Directive 2010/13/EU on the coordination of certain provisions laid down by law, regulation or administrative action in Member States concerning the provision of audiovisual media services (Audiovisual Media Services Directive) in view of changing market realities. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32018L1808&from=HR>

on all audiovisual media, both traditional TV broadcasts and on-demand services.³⁴ The provisions included in the Directive to restrict the exposure and power of unhealthy food marketing to children are not mandatory, but they encourage the Member States to ensure that self- and coregulation, including through codes of conduct, is used to effectively reduce the exposure of children to audiovisual commercial communications regarding foods and beverages that are high in salt, sugars, fat or that otherwise do not fit national or international nutritional guidelines (Article 9). This leaves a lot of space for Member States and media service providers to do or not do anything with the restriction of unhealthy foods marketing to children. However, giving only encouragements to Member States on the commercial communications, the Directive prohibits product placement in children's programmes.

The Directive doesn't give any definition of the notion of a child.³⁵ Under the EU Pledge, signatory companies have committed (1) not to advertise food on mass media where children under 12 make up 35% or more of the audience, except for products that meet common EU Pledge Nutrition Criteria (e.g. on sodium, saturated fat and salt), or (2) not to advertise their products at all to children under the age of 12 years.³⁶ The WHO therefore recommends to extend the scope of the rules to protect all children. The Action Plan on Childhood Obesity 2014-2020 has already done this, by setting the goal to contribute to halting the rise in overweight and obesity in children and young people from 0 to 18 years by 2020.

Furthermore the Directive on Audiovisual Media Services is designed to limit unhealthy food marketing that is 'on children's programmes'. According to the WHO this means that existing regulations are not very successful as children watch mixed audience programmes as well.

Studies on the impact of marketing on children's behaviour and the exposure of minors to TV and online marketing of unhealthy foods

March 2016, key findings from an EU-funded research project focusing on the impact of marketing through social media, online games and mobile applications on children's behaviour' were published.³⁷ Study recommendations included making marketing and advertisements more transparent to consumers and enhancing protection of children, introduce protective measures targeting children directly and to update the Regulatory framework. In 2017, the DG for Health and Food Safety (SANTE) and the DG for Communication Networks, Content and Technology (CNECT) launched a study on the exposure of minors to TV and online marketing of foods high in fat, salt or sugar.³⁸ Results will be available in May 2020. December 2019, the Joint Research Centre released a toolkit to support Member States in reducing the exposure of children and adolescents (up to 18 years old) to marketing of unhealthy food, non-alcoholic and alcoholic beverages.³⁹ The toolkit supports Member States in developing and updating codes of conducts in this area. The 2017 study and toolkit include tools for the Member States to use the full potential of the Audio Visual Media Services Directive.

34 <https://ec.europa.eu/digital-single-market/en/policies/audiovisual-media-services>

35 WHO Regional Office for Europe, 2018. Evaluating implementation of the WHO Set of Recommendations on the marketing of foods and non-alcoholic beverages to children. Progress, challenges and guidance for next steps in the WHO European Region. http://www.euro.who.int/_data/assets/pdf_file/0003/384015/food-marketing-kids-eng.pdf

36 <https://eu-pledge.eu/our-commitment/>

37 Consumers, Health, Agriculture and Food Executive Agency (Chafea) on behalf of Directorate-General for Justice and Consumer (European Commission), 2016. Study on the impact of marketing through social media, online games and mobile applications on children's behaviour. Final report: https://ec.europa.eu/info/sites/info/files/online_marketing_children_final_report_en.pdf

38 European Commission, 2019. Initiatives on Nutrition and Physical activity. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf and <https://etendering.ted.europa.eu/cft/cft-display.html?cftid=2733>

39 <https://ec.europa.eu/jrc/en/news/toolkit-limit-marketing-food-non-alcoholic-and-alcoholic-beverages-minors>

Joint Action

A joint initiative of all the Member States and the Commission (Joint Action Best ReMaP⁴⁰) will adapt and implement practices that have already proven to work in the areas: reformulation, marketing and public procurement. Starting in 2020, it will promote the monitoring of food reformulation (namely the monitoring of reformulation initiatives) but also, the reduction of aggressive marketing to children of foods high in fat, salt and sugar, and the improvement of public procurement of food.⁴¹

Strategy for a Better Internet for Children⁴²

In 2012, the Commission published a European Strategy for a Better Internet for Children. One of the pillars in this Strategy is 'creating a safe environment for children online'. However, the Strategy does not say anything about restricting (unhealthy food) marketing to children.

Comments/notes

The EU and EU countries must respect, protect and promote children's rights. All EU policies that have an impact on children must be designed in line with the best interests of the child.⁴³

40 <https://www.rivm.nl/en/international-projects/best-remap>

41 European Commission, 2019. Initiatives on Nutrition and Physical activity. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf

42 European Commission, 2012. COMMUNICATION FROM THE COMMISSION TO THE EUROPEAN PARLIAMENT, THE COUNCIL, THE EUROPEAN ECONOMIC AND SOCIAL COMMITTEE AND THE COMMITTEE OF THE REGIONS. European Strategy for a Better Internet for Children. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52012DC0196&from=EN>

43 https://ec.europa.eu/info/policies/justice-and-fundamental-rights/rights-child_en

DOMAIN 4 – FOOD PRICES

This domain concerns the extent to which food pricing policies (e.g., taxes and subsidies) are aligned with health outcomes by helping to make the healthy eating choices the easier, cheaper choices.

PRICES1 Taxes or levies on healthy foods are minimised to encourage healthy food choices (e.g. low or no sales tax, excise, value-added or import duties on fruit and vegetables).

Definitions and scope

- Includes exemptions from excise tax, ad valorem tax or import duty.
 - Includes differential application of excise tax, ad valorem tax or import duty.
 - Excludes subsidies (see 'PRICES3') or food purchasing welfare support (see 'PRICES4').
-

PRICES2 Taxes or levies on unhealthy foods (e.g. sugar-sweetened beverages, foods high in nutrients of concern) are in place and increase the retail prices of these foods by at least 10% to discourage unhealthy food choices, and these taxes are reinvested to improve population health.

Definitions and scope

- Includes differential application of excise tax, ad valorem tax or import duty on high calorie foods or foods that are high in nutrients of concern.
-

PRICES3 The intent of existing subsidies on foods, including infrastructure funding support (e.g. research and development, supporting markets or transport systems), is to favour healthy rather than unhealthy foods.

Definitions and scope

- Includes agricultural input subsidies, such as free or subsidised costs for water, fertiliser, seeds, electricity or transport (e.g., freight) where those subsidies specifically target healthy foods.
 - Includes programs that ensure that farmers receive a certain price for their produce to encourage increased food production or business viability.
 - Includes grants or funding support for food producers (i.e. farmers, food manufacturers) to encourage innovation via research and development where that funding scheme specifically targets healthy food.
 - Includes funding support for wholesale market systems that support the supply of healthy foods.
 - Includes population level food subsidies at the consumer end (e.g. subsidising staples such as rice or bread).
 - Excludes incentives for the establishment of, or ongoing support for, retail outlets (including greengrocers, farmers' markets, food co-ops, etc. See 'RETAIL2').
 - Excludes subsidised training, courses or other forms of education for food producers.
 - Excludes the redistribution of excess or second grade produce.
 - Excludes food subsidies related to welfare support (see 'PRICES4').
 - Should be in line with population nutrition goals related to the prevention of obesity and diet-related NCDs (e.g. reducing intake of nutrients of concern, and should not relate to micronutrient deficiencies).
-

PRICES4 The EU ensures that food-related income support programs are for healthy foods within EU countries.

Definitions and scope

- Includes programs such as 'food stamps' or other schemes where individuals can utilise government-administered subsidies, vouchers, tokens or discounts in retail settings for specific food purchasing.
 - Excludes general programs that seek to address food insecurity such as government support for, or partnerships with, organisations that provide free or subsidised meals (including school breakfast programs) or food parcels or redistribute second grade produce for this purpose.
 - Excludes food subsidies at the consumer end (e.g. subsidising staples at a population level – see 'PRICES3').
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POLICY EVIDENCE SUMMARY

Taxes or levies on healthy and unhealthy foods (PRICES1 and PRICES2)

At EU level there are no specific rules to minimize taxes or levies for encouraging healthy food choices or increase taxes to discourage unhealthy food choices. The Council Directive (2006/112/EC of 28 November 2006)⁴⁴ on the common system of value added tax has laid down rules that Member States shall apply a minimum of 5% VAT on all foods. This includes fruit and vegetables but also unhealthy foods. However, largely for historical reasons and under certain conditions, some countries (e.g. the UK and Ireland) have been allowed to continue a zero VAT rate on certain products, like fruit and vegetables.⁴⁵

Subsidies to favour healthy foods (PRICES3)

An EU subsidy scheme to promote healthy foods is the School Fruit and Vegetable Scheme- a scheme to provide free fruit and vegetables to children in schools. This Scheme is part of the Market Measures of the Common Agricultural Policy (CAP) of the EU and has been included in the Regulation on Common Market Organisation.⁴⁶ The Scheme began in the 2009/2010 school year and had an initial budget of 90 million euros with co-financing by national or private funds required in each country.⁴⁷ Next to the Fruit and Vegetable Scheme a School Milk Scheme has been set up, which promotes the consumption of milk as an alternative to sugar-sweetened beverages (SSBs). Both Schemes are part of the objectives in action area 2 'promote healthier environments, especially at schools and pre-schools' of the EU Action Plan on Childhood Obesity.⁴⁸ The School

44 COUNCIL DIRECTIVE 2006/112/EC of 28 November 2006 on the common system of value added tax. OJ L347, pp. 1-118. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32006L0112&from=EN>

45 https://ec.europa.eu/taxation_customs/business/vat/eu-vat-rules-topic/vat-rates_en and https://en.wikipedia.org/wiki/European_Union_value_added_tax

46 REGULATION (EU) No 1308/2013 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 17 December 2013 establishing a common organisation of the markets in agricultural products and repealing Council Regulations (EEC) No 922/72, (EEC) No 234/79, (EC) No 1037/2001 and (EC) No 1234/2007. OJ L347, pp. 671-854. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32013R1308&from=EN>

47 WHO Regional Office for Europe, 2015. Report: using price policies to promote healthier diets. http://www.euro.who.int/_data/assets/pdf_file/0008/273662/Using-price-policies-to-promote-healthier-diets.pdf

48 European Commission, 2014. EU Action Plan on Childhood Obesity 2014-2020. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/childhoodobesity_actionplan_2014_2020_en.pdf

Fruit and Vegetable Scheme and School Milk Scheme have been merged into a single School Food Scheme since the school year 2017/2018.⁴⁹ A budget of €250 million has been allocated to the scheme for the 2017/18 school year, of which €100 million has been set aside for milk and €150 million for fruit and vegetables. The mid-term evaluation of the Action Plan on Childhood Obesity⁵⁰ mentioned that none of the respondents saw the provision of fruit and vegetables in schools as one of the most successful activities. Nonetheless, the Schemes reached over 20 million children in 28 countries across the EU during the school year 2017/2018. During that time, a total of 255,500 tonnes of fresh fruit and vegetables and 178 million litres of milk were distributed due to more than 182 million euros from the EU budget.⁵¹

Liberalization of the sugar market

On 30 September 2017, after nearly 50 years, the sugar quota system has been ended.⁵² This decision was agreed between the European Parliament and Member States in the 2013 reform of the Common Agricultural Policy.⁵³ The end of the quota system and other measures such as the minimum purchase price per tonne of sugar beet, has removed limitations on how much EU producers can put on the market⁵⁴ and gives producers the possibility to adjust their production to real commercial opportunities.⁵⁵ However, despite this liberalization, the sugar sector can still fall back on various measures from the Common Agricultural Policy to deal with unexpected disturbances on the market.

This liberalization has raised concerns among various stakeholders (e.g. the European Public Health Alliance and the Centre for Diet and Activity Research) for the negative impact on health.⁵⁶ They fear that sugar will become cheaper potentially increasing sugar contents in existing products and the diversity of products containing sugar. A study carried out by JRC would have supported the expected price drop. The sugar market observatory provides the EU sugar sector with more transparency by means of disseminating market data and short-term analysis in a timely manner.⁵⁷ However, no data are available on whether higher amounts of sugar were added to foods sold to EU consumers.

49 https://ec.europa.eu/info/news/eu-school-fruits-vegetables-and-milk-scheme-launched-coming-school-year_en

50 Directorate-General for Health and Food Safety (European Commission), European Public Health Alliance (EPHA), National Institute for Public Health and the Environment (RIVM), Netherlands Institute for Health Services Research (NIVEL), 2018. Supporting the mid-term evaluation of the EU action plan on childhood obesity. Luxembourg: Publications Office of the European Union, 2019 <https://publications.europa.eu/en/publication-detail/-/publication/7e0320dc-ee18-11e8-b690-01aa75ed71a1/language-en>

51 https://ec.europa.eu/commission/news/eu-school-fruit-vegetables-and-milk-scheme-2019-mar-27_en

52 http://europa.eu/rapid/press-release_IP-17-3487_en.htm

53 Regulation (EU) No 1308/2013 of the European Parliament and of the Council of 17 December 2013 establishing a common organisation of the markets in agricultural products and repealing Council Regulations (EEC) No 922/72, (EEC) No 234/79, (EC) No 1037/2001 and (EC) No 1234/2007, OJ L 347, pp. 671-854. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex:32013R1308>

54 European Union, 2018. The sugar sector in the EU. [http://www.europarl.europa.eu/RegData/etudes/ATAG/2018/620224/EPRS_ATA\(2018\)620224_EN.pdf](http://www.europarl.europa.eu/RegData/etudes/ATAG/2018/620224/EPRS_ATA(2018)620224_EN.pdf)

55 http://europa.eu/rapid/press-release_IP-17-3487_en.htm

56 European Public Health Alliance (EPHA), AISBL, 2016. A CAP for a Healthy Living. Mainstreaming Health into the Common Agricultural Policy. https://ec.europa.eu/agriculture/sites/agriculture/files/future-of-cap/foc-fb-ha_en.pdf Centre for Diet and Activity Research, 2015. EU Common Agricultural Policy Sugar Reforms Implications for Public Health <https://www.cedar.iph.cam.ac.uk/wp-content/uploads/2015/10/Evidence-Brief-9-CAP-and-Sugar-v.1.3-27.10.15.pdf>

57 https://ec.europa.eu/info/food-farming-fisheries/farming/facts-and-figures/markets/overviews/market-observatories/sugar_en

Food-related income support programs (PRICES4)

In 2014, the Fund for European Aid to the most Deprived (FEAD) was adopted as the successor to the most deprived persons (MDP) programme.⁵⁸ This programme offers material assistance and social inclusion measures, in addition to food aid. Eighty three percent of the total funding of this programme is devoted to food support according to the European Court of Auditors.⁵⁹ Management of the programme moved from the DG for Agriculture and Rural Development to the DG of Employment and Social Affairs. The programme provides 3.8 billion euros of EU funding for the period 2014-2020 and is implemented at national level through operational programmes, which are approved by the European Commission.⁶⁰ Although FEAD is a food-related income support programme, healthy foods are not really a subject in the FEAD regulation.⁶¹ It does mention however that 'where appropriate the choice of food products to be distributed shall be made having considered their contribution to the balanced diet of the most deprived persons.'

In May 2018, the Commission adopted a legislative proposal for a new European Social Fund Plus (ESF+) Programme, based on the Multiannual Financial Framework for the period 2012-2027, which merges the FEAD programme with other programmes (e.g. the Health Programme, Employment and Social Innovation programme, European Social Fund and Youth Employment Initiative programme).⁶² Although this ESF+ Programme includes a strong health dimension with a budget of 413 million euros, the provision about food support has not been changed a lot compared to the FEAD provision. The same reference (Article 17) has been made that "where appropriate the choice of food products to be distributed shall be made having considered their contribution to the balanced diet of the most deprived persons."⁶³

58 European Court of Auditors, 2019. FEAD-Fund for European Aid to the Most Deprived: Valuable support but its contribution to reducing poverty is not yet established. Special Report, No.5. https://www.eca.europa.eu/lists/ecadocuments/sr19_05/sr_fead_en.pdf

59 Idem.

60 <https://ec.europa.eu/social/main.jsp?catId=1089>

61 Regulation (EU) No 223/2014 of the European Parliament and of the Council of 11 March 2014 on the Fund for European Aid to the Most Deprived. OJ L 72, pp. 1-41. EUR-Lex: <https://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2014:072:0001:0041:EN:PDF>

62 European Commission. https://ec.europa.eu/health/funding/future_health_budget_en

63 European Commission, 2018. Proposal for a REGULATION OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL on the European Social Fund Plus (ESF+). https://ec.europa.eu/commission/sites/beta-political/files/budget-may2018-european-social-fund-plus-regulation_en.pdf

DOMAIN 5 – FOOD PROVISION

This domain concerns the extent to which the EU ensures that there are healthy food service policies to be implemented by Member States in government-funded settings to ensure that food provision encourages healthy food choices, and the extent to which the EU actively encourages and supports private companies to implement similar

PROV1 The EU ensures that there are clear, consistent policies (including nutrition standards) to be implemented by Member States in schools and early childhood education services for food service activities (canteens, food at events, fundraising, promotions, vending machines etc.) to provide and promote healthy food choices.

Definitions and scope

- Includes early childhood education and care services (0-5 years).
 - Schools include government and non-government primary and secondary schools (up to age 18 years).
 - Includes policies and nutrition standards to provide and promote healthy food choices or to limit or restrict the provision or promotion of unhealthy food choices.
 - Includes policies that relate to school meals programs, where the program is partly or fully funded, managed or overseen by the government.
 - Excludes programmes in schools that are targeted to children of low socioeconomic groups only (as these would be covered under PRICES4).
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PROV2 The EU ensures that there are clear, consistent policies to be implemented by Member States in other public sector settings for food service activities (canteens, food at events, fundraising, promotions, vending machines, etc.) to provide and promote healthy food choices.

Definitions and scope

- Public sector settings include: – Government-funded or managed services where the government is responsible for the provision of food, including public hospitals and other in-patient health services (acute and sub-acute, including mental health services), residential care homes, aged and disability care settings, custodial care facilities, prisons and home/community care services – Government-owned, funded or managed services where the general public purchase foods including health services, parks, sporting and leisure facilities, community events etc. – Public sector workplaces.
 - Includes private businesses that are under contract by the government to provide food.
 - Excludes ‘public settings’ such as train stations, venues, facilities or events that are not funded or managed by the government (see ‘RETAIL4’).
 - Excludes school and early childhood settings (see ‘PROV1’).
 - Includes policies and nutrition standards to provide and promote healthy food choices or to limit or restrict the provision or promotion of unhealthy food choices.
 - Includes the strategic placement of foods and beverages in cabinets, fridges, on shelves or near the cashier.
 - Includes the use of signage to highlight healthy options or endorsements (such as traffic lights or a recognised healthy symbol).
 - Includes modifying ingredients to make foods and drinks healthier, or changing the menu to offer healthier options.
 - Excludes public procurement standards (see ‘PROV3’).
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PROV3 The EU ensures that there are clear, consistent public procurement standards to be implemented by Member States in public sector settings for food service activities to provide and promote healthy food choices.

Definitions and scope

- Includes standards for the public sector which encourage the procurement of healthy foods.
 - Includes standards for the public sector which discourage the procurement of unhealthy foods.
 - Includes public sector settings as defined in PROV 1 and PROV 2.
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PROV4 The EU ensures that there are good support and training systems to be implemented by Member States to help schools and other public sector organisations and their caterers meet the healthy food service policies and guidelines.

Definitions and scope

- Includes support for early childhood education services as defined in 'PROV1'.
 - Public sector organisations include settings defined in 'PROV2'.
 - Support and training systems include guidelines, toolkits, templates (e.g. policy/guidelines or contracts), recipes and menu planning tools, expert advice, menu and product assessments, online training modules, cook/caterer/other food service staff information and training workshops or courses.
-

PROV5 The EU actively encourages and supports private companies to provide and promote healthy foods and meals in their workplaces.

Definitions and scope

- For the purpose of this indicator, 'private companies' includes for-profit companies and extends to non-government organisations (NGOs) including not-for-profit/charitable organisations, community-controlled organisations, etc.
 - Includes healthy catering policies, fundraising, events – Includes support and training systems including guidelines, toolkits, templates (e.g. policy/guidelines or contracts), recipes and menu planning tools, expert advice, menu and product assessments, online training modules, cook/caterer/other food service staff information and training workshops or courses (where relevant to the provision of food in a workplace).
 - Excludes the provision or promotion of food to people not employed by that organisation (e.g. visitors or customers).
 - Excludes support for organisations to provide staff education on healthy foods.
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POLICY EVIDENCE SUMMARY

Policies to be implemented by Member States in schools and early childhood education services (PROV 1) and other public sector settings to provide and promote healthy food choices (PROV 2)

EU Action Plan on Childhood Obesity 2014-2020⁶⁴

The EU Action Plan on Childhood Obesity 2014-2020, developed by Member States' delegates, proposes voluntary policies to be implemented by Member States to provide and promote healthy food choices in schools and pre-schools under Action area 2: 'promote healthier environments, especially at schools and pre-schools', Action area 3 'make the healthy option, the easier option' and Action area 4 'restrict marketing and advertising to children'.

An objective in Action area 2 is to provide the healthy option and increase daily consumption of fresh fruit and vegetables, healthy food and water in schools (with a targeted focus on schools in underprivileged districts). Focus should also be on making the school environment attractive to eat in. Actions named for this objective are the (extension of national implementation of the) EU School Fruit Scheme and the EU School Milk Scheme⁶⁵, the promotion of the intake of tap water whilst reducing the intake of sweetened beverages, and the implementation of pilot projects on the distribution of healthy foods to vulnerable groups, including children, in the populations of EU NUTS2 regions in Romania, Bulgaria and Slovakia as well as in Poland and Hungary.

Action area 3 ('make the healthy option, the easier option'), also includes objectives and actions for schools. Examples are the development of a sign posting scheme promoting healthy options in schools and preschools, providing quality standards for the foods included in school meals and free supply of fresh drinking water. Action area 4 has the objective to ensure that schools are free from marketing of less healthy food and drink options.

The High Level Group on Nutrition and Physical Activity wrote an opinion in 2017 in which they called the Member States' national health authorities to take another step in creating a healthier school environment for children by convincing agriculture authorities to only fund the distribution of products with no added sugars under the School Fruit, Vegetables and Milk Scheme.⁶⁶

The Action Plan on Childhood Obesity 2014-2020 proposes voluntary policies to be implemented by Member States to provide and promote healthy food choices in other public sector settings under Action area 1: 'support a healthy start in life' and Action area 3 'make the healthy option, the easier option'. The Action Plan mentions as objectives/activities in these areas: create a healthy environment in hospitals and primary health care facilities, continue to encourage all food producers to enhance their reformulation actions especially those providing food and drinks in sport halls and venues and community activity centres, and promote free water in public areas like administrations and hospitals.

64 European Commission, 2014. EU Action Plan on Childhood Obesity 2014-2020. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/childhoodobesity_actionplan_2014_2020_en.pdf

65 These Schemes have now been merged into one EU school fruit, vegetables and milk Scheme.

66 https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/hlg_opinion_added_sugars_school_fruitvegetablesmilk_scheme_en.pdf

Supporting the mid-term evaluation of the EU Action Plan on Childhood Obesity⁶⁷

From the mid-term evaluation of the EU Action Plan on Childhood Obesity, Action area 2 'Promote healthier environments, especially in schools' is one of the areas for action that has been and continues to be addressed by most countries. According to the evaluation, policies to improve the school environment are in place or planned in all countries, whereas policies on supplying easily accessible free drinking water in schools are available in 64% of the countries. In another 21% of the countries tap water is safe, so free drinking water is considered to be available in these schools. Most school food policies include policies on vending machines and energy drinks. All but three EU Member States participated in the EU School Fruit and Vegetable Scheme in the 2015/2016 school year. All EU Member States participated in the new School Fruit, Vegetable and Milk Scheme, that was introduced in the 2017/2018 school year.

JRC Toolkits to promote healthy food and drink choices in school-aged children⁶⁸

In 2016, JRC published two toolkits to promote healthy food and drink choices in school-aged children. The first toolkit is about 'how to promote fruit and vegetable consumption in schools'⁶⁹ and the second about 'how to promote water intake in schools'.⁷⁰

Public Procurement standards to be implemented by Member States in public sector settings to provide and promote healthy food choices (PROV 3)

Regarding to the procurement of food services, every year, around €82 billion is spent in the EU on the purchase of food services.⁷¹ The Commission acknowledges that public procurement on food represents an opportunity to help steer both demand and supply of healthier food options.⁷²

The EU rules for public procurement have been laid down in Directive 2014/24/EU.⁷³ This Directive aims to introduce a minimum body of the public procurement rules for the award of public contracts into national law. There are no specific provisions in this Directive that relate to the provision and promotion of healthy food choices. However, the Directive states that "nothing in the Directive should prevent the imposition or enforcement of measures necessary to protect public policy, public morality, public security, health etc."

Next to this Directive, JRC has written a technical report (2017) on public procurement of food for health in school settings to help schools draft better food catering contracts.⁷⁴ Mentioned in

67 Directorate-General for Health and Food Safety (European Commission), European Public Health Alliance (EPHA), National Institute for Public Health and the Environment (RIVM), Netherlands Institute for Health Services Research (NIVEL), 2018. Supporting the mid-term evaluation of the EU action plan on childhood obesity. Luxembourg: Publications Office of the European Union, 2019. <https://publications.europa.eu/en/publication-detail/-/publication/7e0320dc-ee18-11e8-b690-01aa75ed71a1/language-en>

68 <https://ec.europa.eu/jrc/en/science-update/promoting-healthy-food-and-drink-choices-school-age-children>

69 Tsz Ning Mak, Stefan Storcksdieck genannt Bonsmann, Sandra Caldeira and Jan Wollgast; How to promote fruit and vegetable consumption in schools: a toolkit; EUR 27946 EN; doi:10.2788/678338

70 JRC, Stefan Storcksdieck genannt Bonsmann, Tsz Ning Mak, Sandra Caldeira, Jan Wollgast, 2016. How to promote water intake in schools: a toolkit. EUR 27945 EN; DOI: 10.2788/95048

71 JRC. Maltese EU Presidency team. DG SANTE. Public Procurement of Food for Health. Technical report on the school setting. 2017.

72 European Commission, 2019. Initiatives on Nutrition and Physical Activity. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf

73 DIRECTIVE 2014/24/EU OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 26 February 2014 on public procurement and repealing Directive 2004/18/EC. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32014L0024&from=en>

74 JRC, 2017. Maltese EU Presidency team. DG SANTE. Public Procurement of Food for Health. Technical report on the school setting. <https://ec.europa.eu/jrc/sites/jrcsh/files/public-procurement-food-health-technical-report.pdf>

this report are the guide 'buying social'⁷⁵ which is a very concrete tool to help public authorities to buy goods and services in a socially responsible way in line with EU rules and the EU Handbook 'buying green'⁷⁶, which is including food and catering services and focuses mostly on sustainable and organic foods. Regarding fruits and vegetables the handbook recommends 'specify minimum percentages and/or award points for the use of fruit and vegetables that are in season'.

A joint initiative of all the Member States and the Commission (a Joint Action) will adapt and implement practices that have already proven to work in the three areas: reformulation, marketing and public procurement. Starting in 2020, it will promote the monitoring of food reformulation, the reduction of aggressive marketing to children of foods high in fat, salt and sugar, and the improvement of public procurement of food.⁷⁷

Support and training systems to be implemented by Member States to help schools and other public sector organisations and their caterers meet the healthy food service policies and guidelines (PROV 4).

JRC Toolkits to promote healthy food and drink choices in school-aged children⁷⁸

As we have seen above, JRC published two toolkits in 2016 to promote healthy food and drink choices in school-aged children. The fruit and vegetable consumption toolkit provides policymakers with successful measures to promote fruit and vegetable consumption in schools and to support in implementing and evaluating these measures in schools. The water intake toolkit aims to provide policymakers with successful measures to promote water consumption and reduce SSBs in schools and to support in implementing and evaluating these measures in schools.

EU Action Plan on Childhood Obesity 2014-2020⁷⁹

In the EU Action Plan on Childhood Obesity 2014-2020 there are objectives including training, supporting of schools, health care staff, catering/restaurant staff with dedicated responsibility for these objectives and activities to Member States and Stakeholders (but not to the European Commission). Examples are cooperation between teachers, catering staff school managers and health care providers to create a healthy school environment, providing nutritional training to school kitchen staff and restaurant staff, providing quality standards for the foods in school meals, providing guidelines on portion sizes and providing nutrition guidelines for health experts working with socially disadvantaged communities and children. However, the EU did not develop guidelines and/or trainings themselves.

75 http://europa.eu/rapid/press-release_IP-11-105_en.htm

76 European Union, 2016. Buying green! A handbook on green public procurement 3rd Edition. <https://ec.europa.eu/environment/gpp/pdf/Buying-Green-Handbook-3rd-Edition.pdf>

77 European Commission, 2019. Initiatives on Nutrition and Physical Activity. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf

78 <https://ec.europa.eu/jrc/en/science-update/promoting-healthy-food-and-drink-choices-school-age-children>

79 European Commission, 2014. EU Action Plan on Childhood Obesity 2014-2020. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/childhoodobesity_actionplan_2014_2020_en.pdf

Encouraging and supporting private companies to provide and promote healthy foods and meals in their workplaces (PROV 5)

European FOOD Programme⁸⁰

The European Fighting Obesity through Offer and Demand (FOOD) Programme is very much focusing on improving the nutritional quality of the food offered in restaurants and workplaces. Two main objectives of the programme are: (1) educating employees to help them improve their nutritional choices and (2) improving the nutritional quality of nutrition on offer by liaising with food providers. FOOD developed a communication campaign (guides, leaflets, posters, video's, training sessions, websites etc.) on nutrition that reached out to 352,000 restaurants and four million employees in Belgium, the Czech Republic, France, Italy, Spain and Sweden. FOOD succeeded from a co-funded project in 2009 to a self-sustained programme. It took on board four additional countries: Austria, Romania, the Slovak Republic and Portugal.

Health and Safety at Work

The EU Strategic Framework on Health and Safety at Work 2014-2020⁸¹ does not say anything about nutrition/diet in relation to health. However the Communication from the Commission on Safer and Healthier Work for All (2017)⁸² does mention unhealthy diets as a threat to workers health. One key action identified is helping businesses to comply with occupational and health rules. As a result of this the Commission wrote the Guidance 'Health and Safety at work is everybody's business- practical guidance for employers'.⁸³ However nutrition/diet-related health is not mentioned in this guidance.

80 <http://www.food-programme.eu/en/about/food-from-2009-to-today/article/fighting-obesity-through-offer-and-demand>

81 European Commission, 2014. COMMUNICATION FROM THE COMMISSION TO THE EUROPEAN PARLIAMENT, THE COUNCIL, THE EUROPEAN ECONOMIC AND SOCIAL COMMITTEE AND THE COMMITTEE OF THE REGIONS on an EU Strategic Framework on Health and Safety at Work 2014-2020. Brussels, 6.6.2014 COM(2014) 332 final. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52014DC0332&from=GA>

82 European Commission, 2017. COMMUNICATION FROM THE COMMISSION TO THE EUROPEAN PARLIAMENT, THE COUNCIL, THE EUROPEAN ECONOMIC AND SOCIAL COMMITTEE AND THE COMMITTEE OF THE REGIONS Safer and Healthier Work for All - Modernisation of the EU Occupational Safety and Health Legislation and Policy. Brussels, 10.1.2017 COM(2017) 12 final. EUR-Lex : <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=COM:2017:012:FIN>

83 European Commission, 2016. 'Health and Safety at work is everybody's business'- practical guidance for employers. Luxembourg: Publications Office of the European Union. doi:10.2767/721956 <https://publications.europa.eu/en/publication-detail/-/publication/cbe4dbb7-ffdc-11e6-8a35-01aa75ed71a1>

DOMAIN 6 – FOOD IN RETAIL

This domain concerns the extent to which the EU has the power to set/propose policies and programs to be implemented by Member States to support the availability of healthy foods and limit the availability of unhealthy foods in communities (outlet density and locations) and in-store (product placement).

RETAIL1 Zoning laws and policies are proposed by the EU to be implemented by the Member States to place limits on the density or placement of quick serve restaurants or other outlets selling mainly unhealthy foods in communities and/or access to these outlets (e.g. opening hours).

Definitions and scope

- Includes the consideration of public health in EU programs and policies that guide national policies and the policies, priorities and objectives to be implemented at the local government level through their planning schemes.
- Includes the consideration of public health in subordinate planning instruments and policies.
- Includes an EU guideline that sets the policy objective of considering public health when reviewing and approving fast food planning applications.
- Includes limitations to access of unhealthy food outlets (i.e. opening hours).
- Excludes laws, policies or actions of national and local governments.

RETAIL2 Zoning laws and policies are proposed by the EU to be implemented by the Member States to encourage the availability of outlets selling fresh fruit and vegetables and/or access to these outlets (e.g. opening hours, frequency i.e. for markets).

Definitions and scope

- Outlets include supermarkets, produce markets, farmers' markets, greengrocers, food cooperatives.
- Includes fixed or mobile outlets.
- Excludes community gardens, edible urban or backyard gardens (usually regulated by local governments).
- Includes policies that support local governments to reduce license or permit requirements or fees to encourage the establishment of such outlets.
- Includes policies that guide streamlining and standardising planning approval processes or reducing regulatory burdens for these outlets.
- Includes actions to improve access to healthy food outlets (i.e. opening hours; frequency i.e. for markets).
- Includes the provision of financial grants or subsidies to outlets.

RETAIL3 The EU ensures existing support systems are in place to be implemented by the Member States to encourage food stores to promote the in-store availability of healthy foods and to limit the in-store availability of unhealthy foods.

Definitions and scope

- Food stores include supermarkets, convenience stores (including 'general stores' or 'milk bars'), greengrocers and other specialty food retail outlets.
- Support systems include guidelines, resources or expert support.
- Includes all settings with food retail stores, including but not exclusive to; train stations, venues, facilities or events frequented by the public etc.

- Excludes settings owned or managed by the government (see 'PROV2' and 'PROV4').
- Includes the strategic placement of foods and beverages in cabinets, fridges, on shelves or near the cashier.
- Includes the use of signage to highlight healthy options or endorsements (such as traffic lights or a recognised healthy symbol).
- Includes offering healthier food and drink products, or changing the menu or store layout to offer more healthy options.
- Includes decreasing the offer of unhealthy food and drink products.
- Excludes reformulation and labelling in relation to nutrients of concern (COMP1; LABEL4).

RETAIL4 The EU ensures existing support systems are in place to be implemented by the Member States to encourage the promotion and availability of healthy foods in food service outlets and to discourage the promotion and availability of unhealthy foods in food service outlets.

Definitions and scope

- Food service outlets include for-profit quick service restaurants, eat-in or take-away restaurants, pubs, clubs.
 - Support systems include guidelines, resources or expert support.
 - Includes settings such as train stations, venues, facilities or events frequented by the public.
 - Excludes settings owned or managed by the government (see 'PROV2' and 'PROV4').
 - Includes the strategic placement of foods and beverages in cabinets, fridges, on shelves or near the cashier.
 - Includes the use of signage to highlight healthy options or endorsements (such as traffic lights or a recognised healthy symbol).
 - Includes modifying ingredients to make foods and drinks more healthy, or changing the menu to offer more healthy options.
 - Excludes reformulation and labelling in relation to nutrients of concern (COMP2; LABEL4).
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POLICY EVIDENCE SUMMARY

Zoning laws and policies to place limits on the density or placement of quick service restaurants or other outlets selling mainly unhealthy foods (RETAIL1) or to encourage the availability of outlets selling fruits and vegetables (RETAIL2)

The EU does not have regulatory control in the field of spatial planning, or on implementing zoning laws and policies to place limits on the density or placement of quick service restaurants selling mainly unhealthy foods or to encourage the availability of outlets selling fruits and vegetables. While, the EU has some legal instruments on spatial planning that relate to human health, these lack explicit assessment or declaration with respect to healthy food environments:

Environmental Impact Assessments

One example is the Strategic Environmental Assessment (SEA, Directive 2001/42/EC)⁸⁴ which requires an impact assessment to be conducted for land use and other spatial programmes

84 DIRECTIVE 2001/42/EC OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 27 June 2001 on the assessment of the effects of certain plans and programmes on the environment. OJ L 197, pp. 30-37. 27.1.2001. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32001L0042&from=EN>

prepared or adopted by national, regional or local authorities. The SEA assesses these plans according to the environmental effects including “human health” in general. Another legal instrument of the EU is the Environmental Impact Assessment (EIA, Directive 2011/92/EU)⁸⁵. The EIA requires an impact assessment for certain types of large scale projects, e.g long distance railway lines, motorways, airports). For urban development projects national authorities have to decide whether an EIA is needed. The assessment must include information on all relevant environmental effects including human health, but it does not specifically include food environmental indicators.

Agenda and discourse setting

In the reports of the EU to set agenda and discourse around spatial planning a notable gap in relation to healthy food environments is evident. Some reports like the ‘Urban Europe report- Statistics on Cities, Towns and Suburbs’⁸⁶ do address sustainable consumption and production, public health or healthy living environments (but neither specifically address the food environment).

The most recent EU policy documents within the environmental domain are based on the 7th Environment Action Programme (2014-2020)⁸⁷. One objective of this programme is to safeguard the quality of life and well-being of its habitants. Although this objective refers to human health and well-being there is no reference made to healthy food environments. This report mostly relates to improving implementation and legislation of air quality, noise regulation, drinking water and hazardous chemicals, as part of a broader, strategic approach for a non-toxic environment.

Spatial planning policies

Spatial planning policies like the Territorial Agenda of the European Union 2020⁸⁸ do not refer to health or healthy food environments. The objective of the Territorial Agenda 2020 is to provide strategic orientations for territorial development, fostering integration of territorial dimension within different policies at all governance levels and to ensure implementation of the Europe 2020 Strategy according to territorial cohesion principles.

The European Spatial Development Perspective refers to health and food a few times, but this is in relation to health of the population in general and food production rather than healthy food environments.⁸⁹

European Environment Agency (EEA)

While one of the themes of the European Environment Agency (EEA) is ‘environment and health’, it mainly focuses on topics such as chemicals, human biomonitoring and noise. Food environments do not feature in the EEA’s brief.

85 DIRECTIVE 2011/92/EU OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 13 December 2011 on the assessment of the effects of certain public and private projects on the environment. OJ L26, pp.1-21, 28.1.2012. EUR-Lex: <https://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2012:026:0001:0021:EN:PDF>

86 Eurostat, 2016. Urban Europe : Statistics on cities, towns and suburbs. Luxembourg: Publications office of the European Union. doi: 10.2785/91120. <https://ec.europa.eu/eurostat/documents/3217494/7596823/KS-01-16-691-EN-N.pdf>

87 DECISION No 1386/2013/EU OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 20 November 2013 on a General Union Environment Action Programme to 2020 ‘Living well, within the limits of our planet’. OJ L 354, pp. 171-200. 28.12.2013. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32013D1386&from=EN>

88 Territorial Agenda of the European Union 2020. Towards an Inclusive, Smart and Sustainable Europe of Diverse Regions; agreed at the Informal Ministerial Meeting of Ministers responsible for Spatial Planning and Territorial Development on 19th May 2011 Gödöllő, Hungary. https://www.nweurope.eu/media/1216/territorial_agenda_2020.pdf

89 European Commission, 1999. ESDP European Spatial Development Perspective Towards Balanced and Sustainable Development of the Territory of the European Union. Agreed at the Informal Council of Ministers responsible for Spatial Planning in Potsdam, May 1999. https://ec.europa.eu/regional_policy/sources/docoffic/official/reports/pdf/sum_en.pdf

Support systems for food stores and food service outlets (RETAIL3 and RETAIL4)

There are no support systems at EU level to encourage food stores to promote the in-store availability of healthy foods and to limit the in-store availability of unhealthy foods. Neither are there support systems at EU level to encourage the promotion and availability of healthy foods in food service outlets and to discourage the promotion and availability of unhealthy foods in food service outlets.

DOMAIN 7 – FOOD TRADE AND INVESTMENT

This domain concerns the extent to which the EU ensures that trade and investment agreements protect food sovereignty, favour healthy food environments, are linked with domestic health and agricultural policies in ways that are consistent with health objectives, and do not promote unhealthy food environments.

** The evidence description in this domain has not been checked by relevant EU governmental officials/experts*

TRADE1 The EU undertakes risk impact assessments before and during the negotiation of trade and investment agreements, to identify, evaluate and minimize the direct and indirect negative impacts of such agreements on population nutrition and health.

Definitions and scope

- Includes policies or procedures that guide the undertaking of risk impact assessments before or during negotiation to assess risks and benefits in relation to public health and population nutrition.
- Includes policies or procedures that guide the evaluation of trade and investment agreements after an agreement is finalised to monitor the impact for the purpose of informing future negotiations or reviews.
- Includes policies or procedures that guide public consultation procedures before and during negotiations.
- Any trade or economic agreements still considered active.

TRADE2 The EU adopts measures to manage investment and protect their regulatory capacity with respect to public health nutrition.

Definitions and scope

- Includes provisions in trade or economic agreements that protect the capacity of government to implement domestic policy in relation to food environments. This includes protections with respect to tariffs, non-tariff measures (such as quotas, regulations, standards, testing, certification, licensing procedures) and measures related to foreign direct investment.
 - Binding commitments made under Trade and Investment Agreements (TIA's) can constrain the way countries can regulate goods, services, and investments to promote public interests (including public health) in a way that is upstream from domestic policy processes.
-

POLICY EVIDENCE SUMMARY

Risk impact assessments before and during the negotiation of trade and investment agreements to identify, evaluate, and minimize the direct and indirect negative impacts of such agreements on population nutrition and health (TRADE1)

The European Commission conducts analysis on various aspects of EU trade policy in order to assess the impact of trade on the EU and the global economy.⁹⁰ The economic assessment of the negotiated outcome after the conclusion of the negotiation and before the signature of the agreement is mandatory and undertaken by the Chief Economist team in DG Trade and independent consultants with funding from the Commission. Additionally, three other major types of assessments and evaluations can be conducted during the life of a proposed new trade agreement: an impact assessment at the initial design stage, a Sustainability Impact Assessment (SIA) during the negotiations, and finally, an ex post evaluation, after implementation.⁹¹

Regarding the impact assessments, the European Commission has published guidelines (Better Regulation guidelines- impact assessment)⁹². Possible identified impacts in these guidelines are the impacts on health. However, it is not further specified if this also refers to population nutrition and health. The European Commission wrote a handbook for trade sustainability impact assessment⁹³, which contains a detailed description of the environmental and social analysis included in the SIA. There are no clear references made to health and nutrition in this handbook. The handbook mentions only that the environmental analysis 'should try to identify how the agreement under negotiation could contribute to promote sustainable consumption and production' and for the social analysis that 'potential impacts on the health and safety of individuals or populations should also be considered' (health related employment).

The assessment of impact of new trade agreements on population nutrition and health are minimal (if mostly absent). In addition, health impact assessments are not mandatory for new trade agreements.

Measures to manage investment and protect regulatory capacity with respect to public health nutrition (TRADE2)

The EU has adopted trade rules that protect the capacity of the EU to implement EU policy. However, these rules are not specifically related to public health nutrition or healthy food environments. Nevertheless, we will summarise the EU trade policy and highlight how it relates to health and food environments.

The EU manages its trade and investment relation with non-EU countries through its trade and investment policy.⁹⁴ The Treaty on the Functioning of the European Union sets out rules on EU

90 <http://ec.europa.eu/trade/policy/policy-making/analysis/>

91 European Commission, 2016. Handbook for trade sustainability impact assessment. 2nd edition. Luxembourg: Publications Office of the European Union. doi:10.2781/999660. http://trade.ec.europa.eu/doclib/docs/2016/april/tradoc_154464.PDF

92 European Commission. Chapter III, Guidelines on Impact Assessment. <https://ec.europa.eu/info/sites/info/files/better-regulation-guidelines-impact-assessment.pdf>

93 European Commission, 2016. Handbook for trade sustainability impact assessment. 2nd edition. Luxembourg: Publications Office of the European Union. doi:10.2781/999660. http://trade.ec.europa.eu/doclib/docs/2016/april/tradoc_154464.PDF

94 <http://ec.europa.eu/trade/policy/policy-making/>

trade policy.⁹⁵ In Article 207 it mentions 'The Council shall act unanimously for the negotiation and conclusion of agreements: in the field of trade in social, education and health services, where these agreements risk seriously disturbing the national organization of such services and prejudicing the responsibility of Member States to deliver them'. Specific rules to protect its regulatory capacity with respect to agricultural policy have been included in Article 39 and 40 of the Treaty, aiming to stabilize imports and exports as means to address market volatility, and deliver on the objectives of the CAP. Sustainability is also an important aspect in EU trade policy. The EU's Trade for All Strategy⁹⁶ sets out the EU's priorities for trade policy, to make trade policy-making more effective, transparent, and ethical. In this Strategy health is mentioned several times like 'The Commission will continue promoting an ambitious global health agenda', 'EU health, safety, consumer protection, labour and environmental rules are amongst the most protective and effective in the world' and 'one of the aims of the EU is to ensure that economic growth goes hand in hand with social justice, respect for human rights, high labour and environmental standards, and health and safety protection.' The report on the implementation of the Trade for All Strategy published in 2017⁹⁷ does not mention anything relevant in relation to population nutrition and health.

95 European Union, 2012. Consolidated version of the Treaty on the Functioning of the European Union. OJ C 326, pp. 47-390. 26. 10.2012. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:12012E/TXT&from=EN>

96 European Union, 2015. Trade for All. Towards a more responsible trade and investment policy. Luxembourg: Publications Office of the European Union, 2014. DOI: 10.2781/472505. https://trade.ec.europa.eu/doclib/docs/2015/october/tradoc_153846.pdf

97 European Commission, 2017. REPORT FROM THE COMMISSION TO THE EUROPEAN PARLIAMENT, THE COUNCIL, THE EUROPEAN ECONOMIC AND SOCIAL COMMITTEE AND THE COMMITTEE OF THE REGIONS. Report on the Implementation of the Trade Policy Strategy Trade for All Delivering a Progressive Trade Policy to Harness Globalisation. Brussels, 13.9.2017. COM(2017) 491 final. https://trade.ec.europa.eu/doclib/docs/2017/september/tradoc_156037.pdf

Healthy Food Environment Policy Index: Infrastructure domains

DOMAIN 8 – LEADERSHIP

This domain concerns the extent to which political leadership ensures that there is strong support for the vision, planning, communication, implementation and evaluation of policies and actions to create healthy food environments, improve population nutrition, and reduce diet-related inequalities.

LEAD1 There is strong, visible, political support (at the head of European Commission/ Parliament level) expressed at European, supra national as well as national level for improving food environments, population nutrition, diet related NCDs and their related inequalities”.

Definitions and scope

- Visible support includes statements of intent, election commitments, budget commitments, establishing priorities and targets, demonstration of support in the media, other actions that demonstrate support for new or strengthened policy.
- Documents that contain evidence of strong political support include media releases, speeches, pre-election policy papers, introduction of a bill, strategic plans with targets or key performance indicators.

LEAD2 Clear population intake targets have been proposed by the EU for the nutrients of concern and/or relevant food groups to meet WHO and European recommended dietary intake levels.

Definitions and scope

- Includes targets which specify population intakes according to average reductions in percentage or volume (e.g. mg/g) for salt/sodium, saturated fat, trans fats or added or free sugars*. Typically requires the government to establish clear dietary guidelines on the maximum daily intake of nutrients of concern.
- * Free sugar is defined as is sugar no longer in its naturally-occurring state (i.e. no longer in whole fruits, vegetables, unsweetened dairy, and grains) and can be consumed as is or incorporated into other foods. Examples include table sugar, syrup, honey, fruit juice and nectars. Added sugar is defined as the free sugar that has been added to foods, however regulatory definitions vary widely under different jurisdictions, some of which are currently under review. These differ from naturally occurring sugars, defined as the sugar found naturally within whole foods (i.e. within whole fruits, vegetables, dairy, and some grains).

LEAD3 Clear, interpretive, evidenced-informed food based dietary guidelines have been established and conveyed to EU countries.

Definitions and scope

- Food-based dietary guidelines should be for both genders and key age groups including infants and pregnant women.
- Evidence-informed includes extensive review of up-to-date research and mechanisms to seek expert input.

→ Evidence includes ways the FBDG have been used to develop/implement policies to improve diets.

LEAD4 There is a comprehensive, transparent, up-to-date implementation plan linked to EU countries' needs and priorities, to improve food environments, reduce the intake of the nutrients of concern to meet WHO and European recommended dietary intake levels, and reduce diet-related NCDs.

Definitions and scope

- Includes documented plans with specific actions and interventions (i.e. policies, programs, partnerships).
 - Plans should be current (i.e. maintain endorsement by the current government and/or are being reported against).
 - Plans should refer to actions to improve food environments (as defined in the policy domains above) and should include both policy and program strategies.
 - Excludes overarching frameworks that provide general guidance and direction.
 - Includes priority policy and program strategies, social media marketing for public awareness and threat of legislation for voluntary approaches.
-

LEAD5 EU priorities have been established to reduce inequalities or protect vulnerable populations in relation to diet, nutrition, obesity and NCDs.

Definitions and scope

- Frameworks, strategies or implementation plans specify aims, objectives or targets to reduce inequalities including taking a preventive approach that addresses the social and environmental determinants of health.
 - Frameworks, strategies or implementation plans identify vulnerable populations or priority groups.
 - Implementation plans specify policies or programs that aim to reduce inequalities for specific population groups.
 - Excludes priorities to reduce inequalities in secondary or tertiary prevention.
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POLICY EVIDENCE SUMMARY

Strong, visible, political support (at the head of European Commission/Parliament level) for improving food environments, population nutrition, diet related NCDs and their related Inequalities (LEAD1)

EU political support for improving food environments, population nutrition, diet-related NCDs and their related inequalities, is mainly linked to voluntary incentive measures e.g. raising awareness to prevent chronic disease and promote good health and cooperation measures.

White Paper 'A Strategy on Nutrition, Overweight and Obesity-related health issues' (2007)⁹⁸

The White Paper 'A Strategy on Nutrition, Overweight and Obesity-related health issues' (2007) expresses the political support of the European Commission for improving food environments and

⁹⁸ Commission of the European Communities, 2007. White Paper on Nutrition, Overweight and Obesity-related health issues. Brussels, 30.5.2007 COM(2007) 279 final. https://ec.europa.eu/health/archive/ph_determinants/life_style/nutrition/documents/nutrition_wp_en.pdf

population nutrition, and their related inequalities. The purpose of this White Paper was to set out an integrated EU approach to contribute to reducing ill health due to poor nutrition, overweight and obesity. The European Commission states that it will aim to complement and optimize actions undertaken at national and regional level and recognizes its responsibility regarding actions directly relating to the functioning of the internal market (e.g. labelling requirements, health claims authorisations), specific frameworks (e.g. Common Agricultural Policy and the Fruit and Vegetables Scheme), regional policy (structural funds) and audiovisual and media policy. 'Better informed consumers', 'making the healthy option available', 'priority groups and settings', 'developing the evidence-base to support policy making' and 'developing monitoring systems' are subjects addressed in the White Paper with regard to the European Commission's actions.

In 2010, a resolution of the European Parliament on this White Paper was published.⁹⁹ The European Parliament calls for example: to recognize obesity as a chronic disease, for more tangible measures especially targeted at children and at risk groups, for improved labelling, to develop guidelines on nutrition policies at schools, to cut VAT on fruit and vegetables and to reconsider the voluntary approach in the Audiovisual Media Services Directive. It further approves setting up the High Level Group on Nutrition and Physical Activity and European health survey systems, urges the Commission to take a more holistic approach to nutrition, and urges the European Union to take a leading role in formulating a common approach and the coordination between Member States.

Council Conclusions¹⁰⁰

The Council Conclusions on nutrition and physical activity of 2014¹⁰¹, on food product improvement of 2016, on Childhood Obesity of 2017 and on healthy nutrition for children of 2018 show further political support. These conclusions recognize that healthy diets and physical activity significantly reduce the risk of non-communicable diseases and contribute significantly to the healthy growth of children, healthy life years, and quality of life of children, adolescents and adults. The council urges further to address inequalities in relation to nutrition and physical activity between and within Member States. The Council Conclusions on healthy nutrition for children of 2018¹⁰² invite the Member States for example to actively fight an obesogenic environment, especially in settings where children gather, invites the Commission and the Member States to monitor the compliance of national and EU voluntary initiatives aimed at reducing the impact on children of marketing of food with a high content of fat, salt and sugars and invites the Commission to continue prioritising public health, in particular by addressing issues of cross-border importance, such as marketing of food to children, food product improvement and labelling.

Strategic Plan DG Health and Food Safety 2016-2020¹⁰³

The Strategic Plan of the DG for Health and Food Safety refers to the Treaty on the Functioning of the European Union, which shapes the EU's degree of influence in health and food policies, saying that Member States are responsible for the definition of their health policy and for the organization

99 European Parliament, 2010. White Paper on Nutrition, Overweight and Obesity-related health issues. P6_TA(2008)0461. European Parliament resolution of 25 September 2008 on the White Paper on nutrition, overweight and obesity-related health issues (2007/2285(INI)). OJ C8 E, pp. 97-105. 14.1.2010. EUR-Lex: <https://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:C:2010:008E:0097:0105:EN:PDF>

100 https://ec.europa.eu/health/nutrition_physical_activity/key_documents_en#anchor3

101 Council of the European Union, 2014. Council conclusions on nutrition and physical activity. EMPLOYMENT, SOCIAL POLICY, HEALTH and COSUMER AFFAIRS. Council meeting Luxembourg, 20 June 2014. Brussels, press office, consilium. <https://www.consilium.europa.eu/media/28049/143285.pdf>

102 Council of the European Union, 2018. Healthy nutrition for children: The healthy future of Europe - Council conclusions (22 June 2018). Outcome of proceedings. 10355/18. <http://data.consilium.europa.eu/doc/document/ST-10355-2018-INIT/en/pdf>

103 European Commission. Strategic Plan 2016-2020, DG Health and Food Safety. Ref. Ares(2017)6260978 - 20/12/2017 https://ec.europa.eu/info/sites/info/files/strategic-plan-2016-2020-dg-sante_en_0.pdf

and delivery of health services and medical care. The DG for Health and Food Safety therefore states that EU action is mainly linked to incentive measures, e.g. raising awareness to prevent chronic disease and promote good health and cooperation measures. However, one of its missions is to 'improve and protect human health'.

Paper 'Initiatives on Nutrition and Physical Activity'¹⁰⁴

The Paper 'Initiatives on Nutrition and Physical Activity' makes clear that the Commission offers practical tools to help Member States and EU citizens to make real progress in the areas of nutrition and physical activity.

European Commission's Reflection Paper towards a sustainable Europe by 2030 (2019)¹⁰⁵

The Commission recognizes that overweight and obesity are the EU's central nutrition issues. Achieving safe and healthy diets and ensuring productive and sustainable agricultural systems, fisheries and aquaculture are a priority in the EU.

European action supporting the 2030 Agenda and the Sustainable Development Goals¹⁰⁶

In the Commission Staff Working document on European Action supporting the 2030 Agenda and the Sustainable Development Goals, the European Commission gives an overview of key existing European initiatives related to the achievement of the 2030 Agenda for Sustainable Development. Related to SDG 2 'End hunger, achieve food security and improved nutrition, and promote sustainable agriculture' the Common Agricultural Policy is mentioned including the promotion of healthy diets among schoolchildren through the EU School Fruit and Vegetables and Milk Scheme. Under this SDG FOOD 2030 is also referred to. This will explore at EU level what is needed to transform and future-proof our food systems to be sustainable, resilient, competitive, diverse, responsible and performant in their provision of accessible, healthy and sustainable food and diets for all. Related to SDG 3 'Ensure healthy lives and promote well-being for all at all ages' it stresses that the EU supports, coordinates and complements the Member States in their health policy. In relation to chronic, non-communicable diseases and mental health and well-being the Commission co-funds joint actions with Member States on chronic diseases and ageing, mental health, cancer, dementia, physical activity, nutrition and obesity and concluded a joint action on alcohol under the Health Programme.

Tartu Call for a Healthy Lifestyle¹⁰⁷

In the Tartu Call for a Healthy Lifestyle¹⁰⁸ launched in 2017, Tibor Navracsics, Commissioner for Education, Culture, Youth and Sport, Vytenis Andriukaitis, Commissioner for Health and Food Safety, and Phil Hogan, Commissioner for Agriculture and Rural Development, made 15 commitments to promote healthy lifestyles through sport, food, innovation or research.

Steering Group on Health Promotion, Disease Prevention and Management of non-communicable diseases

Members of the Steering Group had identified nutrition and physical activity as their main priority for implementation in 2019.¹⁰⁹

104 European Commission. DG Health and Food Safety, 2019. Initiatives on Nutrition and Physical Activity'. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf

105 European Commission, 2019. Reflection paper Towards a sustainable Europe by 2030. Brussels, COM(2019)22 of 30 January 2019. https://ec.europa.eu/commission/sites/beta-political/files/rp_sustainable_europe_30-01_en_web.pdf

106 European Commission, 2016. Key European action supporting the 2030 Agenda and the Sustainable Development Goals. Commission Staff Working Document SWD(2016) 390 final. Strasbourg, 22.11.2016. https://ec.europa.eu/europeaid/sites/devco/files/swd-key-european-actions-2030-agenda-sdgs-390-20161122_en.pdf

107 https://ec.europa.eu/commission/presscorner/detail/en/ip_19_3028

108 https://ec.europa.eu/sport/sites/sport/files/ewos-tartu-call_en.pdf

109 https://ec.europa.eu/health/sites/health/files/major_chronic_diseases/docs/ev_20180411_flash_en.pdf

Establishment of clear population intake targets (LEAD 2)

There are no clear population intake targets established at EU level. EFSA publishes intake recommendations in Scientific Opinions. JRC collates intake recommendations from authoritative public health bodies in the Health Promotion and Knowledge Gateway.

EFSA

EFSA's Panel on Nutrition, Dietetics and Allergies (NDA) advises on request of the European Commission on recommended intake value for macro and micro nutrients, by writing Scientific Opinions.¹¹⁰ Since 2004, the Panel has published Opinions on Dietary Reference Values for macro and micronutrients (e.g. water, energy, carbohydrates and dietary fibre, fats, protein, molybdenum, fluoride, vitamin C, iron, selenium, calcium and manganese). The most recent Opinions are on the dietary reference values for sodium and chloride, published in September 2019.¹¹¹ EFSA was asked to provide scientific advice on the daily intake of added sugars in 2017. A scientific protocol was developed. A draft is expected to be ready for public consultation in 2020.¹¹²

European Commission-JRC

The Joint Research Centre seeks to support Member States in setting nutrition policies based on authoritative recommendations. JRC therefore collates dietary recommendations of nutrients of concern and policy options/actions in the Health Promotion and Knowledge Gateway.¹¹³ It refers to different sources for their recommendations, like the EFSA, the WHO, WCRF/AICR, Food Based Dietary Guidelines in EU Countries, and the FAO.

Clear, interpretative, evidence-informed food based dietary guidelines (LEAD3)

The EU has not established food-based dietary guidelines for Member States. The Commission requested EFSA in 2010 to provide guidance on the translation of nutrient based dietary advice into food-based dietary guidelines.¹¹⁴ In reply to this, the EFSA Panel on Nutrition, Dietetic Products, and Allergies (NDA) published a Scientific Opinion on establishing Food-based dietary guidelines.¹¹⁵ This Opinion states that the differences in EU countries regarding dietary habits, the prevalence of nutrient imbalances and diet-related public health issues require that food-based dietary guidelines (FBDGs) are established by the country or region. All countries in the EU plus Switzerland, Norway and Iceland have FBDGs, which are published on the website of the European Commission.¹¹⁶

Comprehensive, transparent, up-to-date implementation plan (LEAD4)

At EU level, there is one implementation plan to improve food environments, reduce the intake of the nutrients of concern and reduce diet-related NCDs, which is the EU Action Plan on Childhood Obesity 2014-2020, developed by the EU Member States.¹¹⁷ This plan contains eight areas for

110 <https://www.efsa.europa.eu/en/panels/nda>

111 <https://www.efsa.europa.eu/en/efsajournal/pub/5778> and <https://www.efsa.europa.eu/en/efsajournal/pub/5779>

112 <https://www.efsa.europa.eu/en/press/news/190719>

113 <https://ec.europa.eu/jrc/en/health-knowledge-gateway/promotion-prevention/nutrition>

114 European Food Safety Authority, 2010. Scientific Opinion on establishing Food-Based Dietary Guidelines. EFSA Panel on Dietetic Products, Nutrition, and Allergies (NDA). Parma, Italy. EFSA Journal 2010; 8(3):1460, pp.1-42. <https://efsa.onlinelibrary.wiley.com/doi/epdf/10.2903/j.efsa.2010.1460>

115 Idem.

116 <https://ec.europa.eu/jrc/en/health-knowledge-gateway/promotion-prevention/nutrition/food-based-dietary-guidelines>

117 European Commission, 2014. EU Action Plan on Childhood Obesity 2014-2020. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/childhoodobesity_actionplan_2014_2020_en.pdf

action, the following five of which directly relate to the food and nutrition environment:

1. Support a healthy start in life
2. Promote healthier environments, especially at schools and pre-schools
3. Make the healthy option, the easier option
4. Restrict marketing and advertising to children
5. Inform and empower families

For each area operational objectives and responsible parties (EC, Member States, stakeholders) are identified.

EU priorities to reduce inequalities or protect vulnerable populations in relation to diet, nutrition, obesity and NCDs (LEAD5)

The EU recognizes that obesity has a higher prevalence among people in lower socioeconomic groups, that these groups need particular attention and that reducing health inequalities is important to mitigate the vicious cycle of ill health and poverty, as appears from documents like the White Paper of the European Commission in 2007 on the Strategy for Europe on Nutrition, Overweight and Obesity related health issues¹¹⁸, and the Strategic Plan 2016-2020 of DG Sante¹¹⁹. The EU Action Plan on Childhood Obesity 2014-2020¹²⁰ also states that it is important to tackle health inequalities. Furthermore, the EU Cohesion Policy which is the EU's main investment policy and supports investments in health,¹²¹ aims to achieve economic, social and territorial cohesion, by reducing economic and social inequalities between EU regions. It has a thematic objective dedicated to promoting social inclusion and tackle poverty and discrimination by for example investing in health and social infrastructure, reducing inequalities in terms of health status and promoting social inclusion through improved access to social, cultural and recreational services.¹²²

118 Commission of the European Communities, 2007. White Paper on Nutrition, Overweight and Obesity-related health issues. Brussels, 30.5.2007 COM(2007) 279 final. https://ec.europa.eu/health/archive/ph_determinants/life_style/nutrition/documents/nutrition_wp_en.pdf

119 European Commission. Strategic Plan 2016-2020 DG Health and Food Safety. Ref. Ares(2017)6260978 - 20/12/2017. https://ec.europa.eu/info/sites/info/files/strategic-plan-2016-2020-dg-sante_en_0.pdf

120 European Commission, 2014. EU Action Plan on Childhood Obesity 2014-2020. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/childhoodobesity_actionplan_2014_2020_en.pdf

121 https://ec.europa.eu/health/funding/structural_funds_en and European Commission, 2016. COMMISSION STAFF WORKING DOCUMENT Key European action supporting the 2030 Agenda and the Sustainable Development Goals. Strasbourg, 22.11.2016 SWD(2016) 390 final. https://ec.europa.eu/europeaid/sites/devco/files/swd-key-european-actions-2030-agenda-sdgs-390-20161122_en.pdf

122 European Commission, 2016. COMMISSION STAFF WORKING DOCUMENT Key European action supporting the 2030 Agenda and the Sustainable Development Goals. Strasbourg, 22.11.2016 SWD(2016) 390 final. https://ec.europa.eu/europeaid/sites/devco/files/swd-key-european-actions-2030-agenda-sdgs-390-20161122_en.pdf

DOMAIN 9 – GOVERNANCE

This domain concerns the extent to which the EU has structures in place to ensure transparency and accountability, and encourage broad community participation and inclusion when formulating and implementing policies and actions to create healthy food environments, improve population nutrition, and reduce diet-related inequalities.

GOVER1 There are procedures in place to restrict commercial influences on the development of policies related to food environments where they have conflicts of interest with improving population nutrition. for example: restricting lobbying influences.

Definitions and scope

- Includes government policies, guidelines, codes of conduct or other mechanisms to guide actions and decision-making by government employees, for example conflict of interest declaration procedures.
 - Includes procedures to manage partnerships with private companies or trade associations representing industries that are consulted for the purpose of developing policy, for examples committee procedural guidelines or terms of reference.
 - Includes publicly available, up to-to-date registers of lobbyist and/or their activities.
-

GOVER2 Policies and procedures are implemented for using evidence in the development of food and nutrition policies.

Definitions and scope

- Includes policies, procedures or guidelines to support government employees in the use of evidence for policy development including best practice evidence review methodology (including types and strength of evidence needed) and policy implementation in the absence of strong evidence (where the potential risk or harms of inaction are great).
 - Includes policies, procedures or guidelines that stipulate the requirements for the establishment of a scientific or expert committee to inform policy development.
 - Includes the use of evidence-based models, algorithms and tools to guide policy development or within policy to guide implementation (e.g. nutrient profiling model).
 - Includes government resourcing of evidence and research by specific units, either within or across government departments.
-

GOVER3 Policies and procedures are implemented for ensuring transparency in the development of food and nutrition policies.

Definitions and scope

- Includes policies or procedures that guide the use of consultation in the development of food policy.
 - Includes policies or procedures to guide the online publishing of private sector and civil society submissions to government around the development of policy and subsequent government response to these.
 - Includes policies or procedures to guide the online publishing of scoping papers, draft and final policies.
 - Include policies or procedures to guide public communications around all policies put forward but not progressed.
-

GOVER4 The EU ensures public access to comprehensive nutrition information and key documents (e.g. budget documents, annual performance reviews and health indicators) for the public.

Definitions and scope

- Includes policies and procedures to guide the timely, online publishing of government budgets, performance reviews, audits, evaluation reports or the findings of other reviews or inquiries.
 - Includes 'freedom of information' legislation and related processes to enable the public access to government information on request, with minimal restrictions and exemptions.
 - Includes policies or procedures to guide the timely, online publishing of population health data captured/owned by government.
-

POLICY EVIDENCE SUMMARY

Procedures to restrict commercial influences on the development of policies related to food environments where they have conflict of interests with improving population nutrition (GOVER1)

There are procedures in place to restrict commercial influences on the development of policies where they have conflict of interests. These procedures are not specifically related to policies related to the food environment, but more generally to 1) commissioners and 2) commission staff.

Commissioners

The Treaty on the Union¹²³ and the Treaty on the Functioning of the European Union¹²⁴ provide rules with regard to the independence of Commissioners and to make sure they behave with integrity and discretion. Commissioners also have to sign a Code of Conduct, which states that Members shall avoid any situation which may give rise to a conflict of interest or which may be perceived as such.¹²⁵ Any financial or other interest or assets which create a conflict of interest must be declared. These declarations must be made public. Gifts with a value of more than 150 euros shall not be accepted. The Commission's Protocol Department shall keep a public register of gifts. After ceasing to hold office, former Members shall be bound to their duty of integrity and discretion. The Commission further established an Independent Ethical Committee which advises the Commission on ethical questions related to the Code of Conduct. The Commission publishes annually a report on the application of the Code of Conduct including the work of the independent Ethical Committee.

123 European Union, 2016. Consolidated version of the Treaty on European Union. TITLE III - PROVISIONS ON THE INSTITUTIONS Article 17 OJ C 202, 7.6.2016, p. 25–26. EUR-Lex: https://eur-lex.europa.eu/eli/treaty/teu_2016/art_17/oj

124 European Union, 2012. Consolidated version of the Treaty on the Functioning of the European Union. OJ C326, 26.10.2012, pp. 47-390. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:12012E/TXT&from=EN>

125 European Commission, 2018. Commission Decision of 31 January 2018 on a Code of Conduct for the Members of the European Commission. OJC 65, 21.2.2018, pp. 7-20. EUR-Lex: Commission Decision of 31 January 2018 on a Code of Conduct for the Members of the European Commission Commission Decision of 31 January 2018 on a Code of Conduct for the Members of the European Commission [https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:32018D0221\(02\)](https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:32018D0221(02))

Commission staff

The rules for EU staff has been laid down in the Staff Regulations of Officials (No 31 (EEC), 11 (EAEC)).¹²⁶ This Regulation prescribes that an official shall carry out his duties and conduct himself solely with the interests of the Union in mind. He shall neither seek nor take instructions from any government, authority, organization or person outside his institution. He shall not accept without the permission of the appointing authority any honour, decoration, favour, gift or payment of any kind, from any government or from any source outside the organization. The appointing authority, shall before recruiting an official, examine whether the candidate has any personal interest which impairs his independence or any other conflict of interest. The candidate has to fill a form by which he informs the authority about any potential conflict of interest. After leaving the office, officials continue to be bound to their duty of integrity and discretion. During the 12 months after leaving, officials are prohibited to engage in lobbying or advocacy against staff of their former institution on matters for which they were responsible during the last three years of employment.

Next to these Staff Regulations, there is a Code for Good Administrative Behaviour¹²⁷, which emphasizes the importance of objectivity and impartiality of staff and Guidelines on Gifts and Hospitality for staff members¹²⁸.

EU Transparency Register¹²⁹

The European Commission has set up a database of special interest groups whose goal is to influence policy and law-making at the European institutions. Registrants are bound by a Code of Conduct (Annex 3 of the Interinstitutional Agreement)¹³⁰, which set out rules for all registrants and establishes the underlying principles for standards of behaviour in all relations with the EU institutions.

Commissioners, their cabinet members and Directors-General publish information on meetings held with organizations or self-employed individuals.¹³¹ Meetings related to policy-making and implementation in the EU can only take place if the interest representatives are registered in the EU Transparency Register.

Policies and procedures for using evidence in the development of food and nutrition policies (GOVER 2)

Pilot Projects

Between February 2016 and February 2018, the European Parliament funded pilot projects for more effective and efficient action to tackle challenges related to nutrition and physical activity and to help prevent non-communicable diseases among vulnerable people and disadvantaged people

126 Regulation No 31 (EEC), 11 (EAEC), laying down the Staff Regulations of Officials and the Conditions of Employment of Other Servants of the European Economic Community and the European Atomic Energy Community, OJ P 045 14.6.1962, p. 1385. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A01962R0031-20140501>

127 European Commission, 2000. Rules of Procedure of the Commission. OJ L308, 8.12.2000, pp. 26-34. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32000Q3614&from=EN>

128 Šefčovič, 2012. COMMUNICATION TO THE COMMISSION - Communication from Vice-President Šefčovič to the Commission on Guidelines on Gifts and Hospitality for the staff members. Brussels, 7.3.2012 SEC(2012) 167 final https://ec.europa.eu/info/sites/info/files/communication-to-the-commission-guidelines-on-gifts-and-hospitality_2012_en.pdf

129 https://ec.europa.eu/info/about-european-commission/service-standards-and-principles/transparency/transparency-register_en

130 http://ec.europa.eu/transparencyregister/public/staticPage/displayStaticPage.do?locale=en&reference=CODE_OF_CONDUCT

131 https://ec.europa.eu/info/about-european-commission/service-standards-and-principles/transparency/transparency-register_en

in particular.¹³² Scientific evidence and policies were reviewed to create a comprehensive evidence-base for the benefit of possible future nutrition and physical activity initiatives.

Expert Group on Health Information

The Expert Group on Health Information (EGHI) is an advisory group for evidence-based policy made up of representatives from EU countries, European Economic Area Countries, possible future EU members and international organisations.¹³³

Joint Research Centre

The Joint Research Centre supports EU policies with independent scientific evidence throughout the whole policy cycle, more specifically JRC provides scientific and technical support to EU policies on food, consumer products, chemicals and public health.¹³⁴ JRC supports the Strategy on nutrition, overweight and obesity related issues and the EU Action Plan on Childhood Obesity 2014-2020. The Knowledge Gateway on Health Promotion and Disease Prevention and healthy and sustainable diets are major areas of focus of JRC.

JRC produced for example a collection of targeted briefs for policy makers, which evolved into a Health Promotion and Disease Prevention Knowledge Gateway.¹³⁵ The Joint Research Centre was also asked to collect information on the national nutritional guidelines. The Food Based Dietary Guidelines have been published on the Knowledge Gateway¹³⁶ and presentations on the content have been given both at a Fund for European Aid to the most Deprived (FEAD) event on food aid and a couple of DG AGRI meetings on the School Fruit, Vegetables and Milk scheme.

European Food and Safety Authority

The mission of the European Food and Safety Authority includes providing scientific advice and scientific and technical support on human nutrition in relation to Community legislation and, at the request of the Commission, assistance concerning communication on nutritional issues within the Framework of the Community Health Programme.¹³⁷

OECD

The Commission makes use of scientific evidence coming from the OECD, to provide additional support for Member States in the development of food and nutrition policies.¹³⁸ In October 2019 the OECD published the report 'the Heavy Burden of Obesity'. The report makes the urgent economic case to scale up investments in policies to promote healthy lifestyles and tackle this growing global public health problem. The report evaluates a number of policies which could significantly improve health outcomes while being an excellent investment for countries.¹³⁹

132 https://ec.europa.eu/health/nutrition_physical_activity/projects/ep_funded_projects_en#fragment4

133 https://ec.europa.eu/health/indicators_data/eghi_en

134 <https://ec.europa.eu/jrc/en/about/jrc-in-brief>

135 European Commission, DG Health and Food Safety, 2019. Initiatives on nutrition and physical activity. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf
<https://ec.europa.eu/jrc/en/health-knowledge-gateway/promotion-prevention/nutrition/food-based-dietary-guidelines>

136 <https://ec.europa.eu/jrc/en/health-knowledge-gateway/promotion-prevention/nutrition/food-based-dietary-guidelines>

137 REGULATION (EC) No 178/2002 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 28 January 2002 laying down the general principles and requirements of food law, establishing the European Food Safety Authority and laying down procedures in matters of food safety. OJ L31, 1.2.2002, pp. 1-24. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32002R0178&from=EN>

138 European Commission, DG Health and Food Safety, 2019. Initiatives on nutrition and physical activity. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf

139 OECD, 2019. The Heavy Burden of Obesity: The Economics of Prevention. Published on October 10, 2019. <https://www.oecd.org/health/the-heavy-burden-of-obesity-67450d67-en.htm>

DG Health and Food Safety- Directorate Health and food audits and analysis

The Directorate Health and food audits and analysis, also contributed to the development of evidence-based policies, in particular, through the increased country knowledge available. The knowledge is presented in 'country profiles' which outline the performance of Member States and provide country specific knowledge.¹⁴⁰

Other initiatives¹⁴¹

Further initiatives at EU level to use evidence in the development of food and nutrition policies are:

1. The collection of validated best practices from Member States through a Best Practice portal to support implementation since 2017.¹⁴²
2. Multiple workshops on reformulation have been organized as well as one workshop on food taxation, presenting the latest scientific evidence on impact (OECD and the WHO), legal advice from other services and real life experiences from Member States.

Policies and procedures for ensuring transparency in the development of food and nutrition policies (GOVER 3)

The general principle of transparency has been laid down in the Treaty on the Functioning of the European Union.¹⁴³ Article 15 states that in order to promote good governance and ensure the participation of civil society, the Union's institutions, bodies, offices and agencies shall conduct their work as openly as possible.

The Commission's Better Regulation Agenda was set up in 2015 to achieve better results, by opening up policy and law-making and listen more to people it affects.¹⁴⁴ Transparency in the preparation and reviewing of policies, in the legislative process and in public consultations is a very important theme of this Agenda.

Regulations related to food and nutrition policies also include text phrases related to transparency. The Regulation on the provision of food information to consumers¹⁴⁵ and the General Food Law¹⁴⁶ prescribe that during the preparation, evaluation and revision of food (information) law an open and

140 European Commission, DG Health and Food Safety, 2018. Health and Food Audits and Analysis Programme 2019. Luxembourg: Publications Office of the European Union. doi:10.2875/469690 https://ec.europa.eu/food/sites/food/files/hfaa_progr_en_2019.pdf

141 European Commission, DG Health and Food Safety, 2019. Initiatives on nutrition and physical activity. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf

142 <https://webgate.ec.europa.eu/dyna/bp-portal/index.cfm>

143 European Union, 2012. Consolidated version of the Treaty on the Functioning of the European Union. OJ C326, 26.10.2012, pp. 47-390. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:12012E/TXT&from=EN>

144 European Commission, 2015. COMMUNICATION FROM THE COMMISSION TO THE EUROPEAN PARLIAMENT, THE COUNCIL, THE EUROPEAN ECONOMIC AND SOCIAL COMMITTEE AND THE COMMITTEE OF THE REGIONS Better regulation for better results - An EU agenda. COM/2015/0215 final. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/?qid=1451989021436&uri=CELEX:52015DC0215>

145 REGULATION (EU) No 1169/2011 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 25 October 2011 on the provision of food information to consumers, amending Regulations (EC) No 1924/2006 and (EC) No 1925/2006 of the European Parliament and of the Council, and repealing Commission Directive 87/250/EEC, Council Directive 90/496/EEC, Commission Directive 1999/10/EC, Directive 2000/13/EC of the European Parliament and of the Council, Commission Directives 2002/67/EC and 2008/5/EC and Commission Regulation (EC) No 608/2004. OJ L 304, 22.11.2011, pp. 18-63. EUR-Lex: <https://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2011:304:0018:0063:EN:PDF>

146 REGULATION (EC) No 178/2002 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 28 January 2002 laying down the general principles and requirements of food law, establishing the European Food Safety Authority and laying down procedures in matters of food safety. OJ L 31, 1.2.2002, pp. 1-24. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32002R0178&from=EN>

transparent public consultation shall be conducted. The Regulation on nutrition and health claims¹⁴⁷ stipulates the establishment of a public register of claims¹⁴⁸ for the sake of transparency.

The evaluation of the General Food Law¹⁴⁹ concludes that EFSA has been highly transparent since its operation. However, with regard to risk assessment, EFSA is bound to strict confidentiality rules laid down in the General Food Law and some sectorial acts, which creates a perception of a certain lack of transparency, which is further reinforced by civil society's concern over EFSA's independence from industrial interests, as studies conducted by the industry form a big part (but are not the only part) of the basis of EFSA's risk assessment. Following these conclusions the Commission has put forward a proposal for revising the General Food Law and eight other sectorial acts to increase transparency and sustainability of the risk assessments. This new Regulation has been published the 6th of September 2019 and will start applying as of 27 March 2021.¹⁵⁰

Following negotiations between the EU institutions¹⁵¹

The European Parliament provides a "Legislative Observatory" (online at <http://www.europarl.europa.eu/oeil/home/home.do>) to enable the process of a particular legislative proposal to be followed in detail.

Public access to comprehensive nutrition information and key documents for the public (GOVER4)

The general rights of individuals to access documents of EU bodies are laid down in Article 15 of the Treaty on the Functioning of the European Union¹⁵² and Article 42 of the Charter of Fundamental Rights of the EU¹⁵³ and implemented through the Regulation (No 1049/2001) regarding public access¹⁵⁴ to European Parliament, Council and Commission documents. Article 2 of that Regulation prescribes that any citizen of the Union and any person residing in a Member State, has a right to access documents of the European Union institutions. There are some exceptions, which are for example documents where disclosure would undermine the protection of public interests, privacy and integrity, commercial interests, court proceedings and the purpose of audits/inspections/ investigations. Different types of documents that are available online are official documents and publications (e.g. agenda's, meeting minutes, reports), legislative documents, responses to petitions sent to Commissioners. Registers and databases that are accessible are the financial transparency

147 REGULATION (EC) No 1924/2006 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 20 December 2006 on nutrition and health claims made on foods. OJ L 404. 30.12.2006, pp. 9-25. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32006R1924&from=en>

148 http://ec.europa.eu/food/safety/labelling_nutrition/claims/register/public/?event=register.home

149 COMMISSION STAFF WORKING DOCUMENT THE REFIT EVALUATION of the General Food Law (Regulation (EC) No 178/2002) { 15.1.2018 SWD(2018) 38 final PART 1/2. https://ec.europa.eu/food/sites/food/files/gfl_fitc_comm_staff_work_doc_2018_part1_en.pdf

150 European Union, 2019. REGULATION (EU) 2019/1381 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 20 June 2019 on the transparency and sustainability of the EU risk assessment in the food chain and amending Regulations (EC) No 178/2002, (EC) No 1829/2003, (EC) No 1831/2003, (EC) No 2065/2003, (EC) No 1935/2004, (EC) No 1331/2008, (EC) No 1107/2009, (EU) 2015/2283 and Directive 2001/18/EC. OJ L 231, 6.9.2019, pp.1-28. <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32019R1381>

151 Scott L. Greer, Nick Fahy, Heather A. Elliott, Matthias Wismar, Holly Jarman, Willy Palm, World Health Organization 2014, European Observatory on Health Systems and Policies. Everything you always wanted to know about European Health policies but were afraid to ask. United Kingdom: London.

152 European Union, 2012. Consolidated version of the Treaty on the Functioning of the European Union. OJ C326, 26.10.2012, pp. 47-390. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:12012E/TXT&from=EN>

153 European Union, 2000. CHARTER OF FUNDAMENTAL RIGHTS OF THE EUROPEAN UNION. OJ C 364, 18.12.2000, pp. 1-22. EUR-Lex: https://www.europarl.europa.eu/charter/pdf/text_en.pdf

154 REGULATION (EC) No 1049/2001 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 30 May 2001 regarding public access to European Parliament, Council and Commission documents. OJ L 145, 31.5.2001, pp. 43-48. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32001R1049&from=EN>

system, the transparency register and the documents on EU institutional issues.

Regarding public access to nutrition and health data, provisions have been included in several regulations. The Regulation on nutrition and health claims¹⁵⁵ prescribes for example the establishment and maintenance of a Register on nutrition and health claims¹⁵⁶, which is available online. The General Food Law¹⁵⁷ contains an article which prescribes that EFSA shall ensure wide access to the documents it possesses. With the revision of the General Food Law, citizens will have automatic access to all studies and information submitted by the industry in the risk assessment process.

Eurostat is the main source of EU Health data. Health data is based on the Regulation on Community Statistics on public health and health and safety at work (No1338/2008)¹⁵⁸. This Regulation prescribes that the Commission (Eurostat) shall take the necessary steps to improve the dissemination, accessibility and documentation of statistical information. Eurostat's dissemination policy is characterized by free access to European statistics for all users, which is together with other principles laid down in Regulation on European statistics (No 223/2009)¹⁵⁹ and in the European Statistics Code of Practice.¹⁶⁰

Joint Action on Health Information

The Joint Action on Health Information was established in 2018 to facilitate the development of a sustainable EU health information infrastructure by improving the availability of comparable, robust and policy-relevant health data and health system performance information.¹⁶¹

155 REGULATION (EC) No 1924/2006 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 20 December 2006 on nutrition and health claims made on foods. OJ L 404, 30.12.2006, pp. 9-25. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32006R1924&from=en>

156 http://ec.europa.eu/food/safety/labelling_nutrition/claims/register/public/?event=register.home

157 European Commission, 2018. COMMISSION STAFF WORKING DOCUMENT THE REFIT EVALUATION of the General Food Law (Regulation (EC) No 178/2002) {SWD(2018) 37 final}. Brussels, 15.1.2018 SWD(2018) 38 final PART 1/2 . https://ec.europa.eu/food/sites/food/files/gfl_fitc_comm_staff_work_doc_2018_part1_en.pdf

158 REGULATION (EC) No 1338/2008 of the EUROPEAN PARLIAMENT and of the COUNCIL of 16 December 2008 on Community statistics on public health and health and safety at work. OJ L 354, 31.12.2008, pp. 70-81. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32008R1338&from=EN>

159 REGULATION (EC) No 223/2009 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 11 March 2009 on European statistics and repealing Regulation (EC, Euratom) No 1101/2008 of the European Parliament and of the Council on the transmission of data subject to statistical confidentiality to the Statistical Office of the European Communities, Council Regulation (EC) No 322/97 on Community Statistics, and Council Decision 89/382/EEC, Euratom establishing a Committee on the Statistical Programmes of the European Communities. OJ L 87, 31.3.2009, pp. 164-173. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32009R0223&from=EN>

160 EUROSTAT, 2017. European Statistics Code of Practice, Revised Edition 2017. Publication Office of the European Union 2018. doi:10.2785/798269. <https://ec.europa.eu/eurostat/web/products-catalogues/-/KS-02-18-142>

161 https://webgate.ec.europa.eu/chafea_pdb/health/projects/801553/summary

DOMAIN 10 – MONITORING AND INTELLIGENCE

This domain concerns the extent to which the EU’s monitoring and intelligence systems (surveillance, evaluation, research and reporting) are comprehensive and regular enough to assess the status of food environments, population nutrition and diet-related NCDs and their inequalities, and to measure progress on achieving the goals of nutrition and health plans.

MONIT1 Monitoring systems, implemented by the EU, are in place to regularly monitor food environments (especially for food composition for nutrients of concern, food promotion to children, and nutritional quality of food in schools and other public sector settings), against codes/guidelines/standards/targets.

Definitions and scope

- Includes monitoring systems funded fully or in part by government that are managed by an academic institution or other organization.
- Includes regular monitoring and review of the impact of policies implemented by the EU on food environments and described in the policy domains above), in particular:
 - Monitoring of compliance with voluntary food composition standards related to nutrients of concern in out-of-home meals (as defined in the ‘Food composition’ domain).
 - Monitoring of compliance with food labelling regulations (as defined in the ‘Food labelling’ domain above).
 - Monitoring of unhealthy food promoted to children via broadcast and non-broadcast media and in children’s settings (as defined in the ‘Food promotion’ domain above).
 - Monitoring of compliance with food provision policies in schools, early childhood services and public sector settings (as defined in the ‘Food provision’ domain above).

MONIT2 There is regular monitoring of adult and childhood nutrition status and population intakes against specified intake targets or recommended daily intake levels.

Definitions and scope

- Includes monitoring of adult and child intake in line with X Countries Food Guide and dietary recommendations.
- Includes monitoring of adult and child intake of nutrients of concern and noncore/discretionary foods including sugar-sweetened beverages (even if there are no clear intake targets for all of these).
- ‘Regular’ is considered to be every five years or more frequently.

MONIT3 There is regular monitoring of adult and childhood overweight and obesity prevalence using anthropometric measurements.

Definitions and scope

- Anthropometric measurements include height, weight and waist circumference.
- ‘Regular’ is considered to be every five years or more frequently.

MONIT4 There is regular monitoring of the prevalence of NCD metabolic risk factors and occurrence rates (e.g. prevalence, incidence, mortality) for the main diet-related NCDs.

Definitions and scope

- Diet-related NCD risk factors and NCDs include, amongst others, hypertension,

hypercholesterolemia, Type 2 Diabetes, cardiovascular disease (including ischaemic heart disease, cerebrovascular disease and other diseases of the vessels), diet-related cancers.

- May be collected through a variety of mechanisms such as population surveys or a notifiable diseases surveillance system.

MONIT5 Major programs and policies are regularly evaluated to assess their effectiveness and contributions to achieving the goals of the nutrition and health plans.

Definitions and scope

- Includes any policies, guidelines, frameworks or tools that are used to determine the depth and type (method and reporting) of evaluation required.
- Includes a comprehensive evaluation framework and plan that aligns with the key preventive health or nutrition implementation plan.
- The definition of a major programs and policies is to be defined by the relevant EU department.
- Evaluation should be in addition to routine monitoring of progress against a project plan or program logic.

MONIT6 Progress towards reducing health inequalities or health impacts in vulnerable populations and social and economic determinants of health are regularly monitored.

Definitions and scope

- Monitoring of overweight and obesity and main diet-related NCDs includes stratification or analysis of population groups where there are the greatest health inequalities including Indigenous peoples and socio-economic strata.
- Includes reporting against targets or key performance indicators related to health inequalities.

POLICY EVIDENCE SUMMARY

Monitoring systems are in place to regularly monitor food environments against codes/guidelines/standards/targets (MONIT 1)

According to the EU Action Plan on Childhood Obesity 2014-2020¹⁶², Member States are responsible for implementing monitoring mechanisms like national food composition databases. The WHO is, according to the plan, responsible for collecting data from the Member States on the monitored initiatives, e.g. via the WHO Nutrition, Obesity and Physical Activity (NOPA) database and the WHO Health Behaviour in School-aged Children (HBSC) and for Health-Promoting Schools surveys.

Monitoring of compliance with food composition standards

EFSA has a food composition database,¹⁶³ which gives information on the amount of vitamins and minerals contained in foods but not on the nutrients of concern. However, there have been some developments at EU level.

162 European Union, 2014. EU Action Plan on Childhood Obesity 2014-2020. 24 February 2014. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/childhoodobesity_actionplan_2014_2020_en.pdf

163 <https://www.efsa.europa.eu/en/data/food-composition> and <https://www.efsa.europa.eu/en/microstrategy/food-composition-data>

The Joint Action on Nutrition and Physical Activity (JANPA) project which ran from September 2015 to November 2017 conducted a pilot study on food composition monitoring, which highlighted the importance of a European harmonized monitoring tool (referring to the French “Oqali” tool as a good example) and setting up a monitoring network.¹⁶⁴ Currently, a new Joint Action (Best ReMaP¹⁶⁵) is being prepared to start in 2020, which will adapt and implement practices that have already proven to work in the three areas: reformulation, marketing and public procurement.¹⁶⁶ The Joint Action will implement a European Standardised Monitoring system for the reformulation of processed foods.

In 2017, the European Commission (the Consumers, Health, Agriculture and Food Executive Agency) commissioned a pilot database on the nutritional characteristics of food products in the EU to help monitor whether food products have increasingly less (or increasingly more) salt, fat or sugars.¹⁶⁷ ICF is leading in a partnership which will tackle this challenge by collecting data on the ingredients and nutritional content of more than 50,000 processed food products in 16 European countries.¹⁶⁸ The database will inform authorities, consumers and industry about the scope for improvements in food products. Since ‘what gets measured gets done’, this can strengthen national reformulation initiatives and support consumer choice, innovation and a level playing field for industry.

Monitoring of compliance with food labelling regulations

** The evidence description in this paragraph has not been checked by relevant EU governmental officials/experts*

Compliance with the food labelling regulations on food information to consumers and health and nutrition claims is mainly regulated by the Official Controls Regulation (EU) 2017/625¹⁶⁹ and Regulation (EC) No 882/2004¹⁷⁰ (As this report is currently being drafted both regulations are still in force). The Regulation stipulates that it is the responsibility of Member States to designate the competent authority or authorities on which they confer the responsibility to organize or perform official controls and other activities (article 4). Regarding the monitoring of nutrition and health claims, Article 26 of the Regulation (EC) No 1924/2006 on nutrition and health claims¹⁷¹ states further that Member States may require the manufacturer or person placing foods on the market to notify the competent authority of that placing on the market by forwarding to it a model of the label used for the product. Regarding additional forms of expression and presentation of nutrition labelling, Article 35 of the Regulation on the provision of food information to consumers¹⁷², states

164 http://www.janpa.eu/outcomes/Deliverables/4_Scheda%20inform_Facsheet%205.2_V9_2p_210x297_JANPA.pdf

165 <https://www.rivm.nl/en/international-projects/best-remap>

166 European Commission, 2019. Initiatives on Nutrition and Physical activity. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf

167 European Commission, 2019. Initiatives on Nutrition and Physical Activity. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf and <https://etendering.ted.europa.eu/cft/cft-display.html?cftId=3068>

168 <https://www.linkedin.com/pulse/eu-investing-data-learning-needed-understand-increase-andrew-jarvis/>

169 REGULATION (EU) 2017/625 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 15 March 2017 on official controls and other official activities performed to ensure the application of food and feed law, rules on animal health and welfare, plant health and plant protection products. OJ L 95, 7.4.2017, pp.1-142. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32017R0625&from=EN>

170 REGULATION (EC) No 882/2004 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 29 April 2004 on official controls performed to ensure the verification of compliance with feed and food law, animal health and animal welfare rules. OJ L 191, 28.5.2004, p. 1-59. EUR-Lex: <https://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=CONSLEG:2004R0882:20060525:EN:PDF>

171 REGULATION (EC) No 1924/2006 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 20 December 2006 on nutrition and health claims made on foods. OJ L 404, 30.12.2006, pp.9-25. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32006R1924&from=en>

172 REGULATION (EU) No 1169/2011 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 25 October 2011 on the provision of food information to consumers.

that Member States may require food business operators to notify the competent authority of the use of an additional form of expression or presentation and to provide them with the relevant justifications.

The Commission produces reports on the overall operation of official controls in EU countries, in which the Commission incorporates information based on the annual reports submitted by the national authorities on their control activities and the outcome of Commission controls carried out in the Member States.¹⁷³ The most recent report covers the years 2014-2016. Furthermore, DG Health and Food Safety (Directorate on Health and Food Audits and Analysis) contributes to the effective implementation of food legislation by conducting Audits and Analysis.^{174 175}

Monitoring of compliance with food provision policies in schools, early childhood services and public sector settings

Establishing a harmonized monitoring of school nutrition in the EU (primary and secondary schools) is an objective in the EU Action Plan on Childhood Obesity 2014-2020¹⁷⁶, for which Member States are responsible. Euridyce, which is a source of information on education systems and policies in 38 countries (established by the European Commission and Member states in 1980) is mentioned as a possible monitoring tool for this. School nutrition indicators could be defined and implemented to the Eurydice.

In addition, the EU Action Plan on Childhood Obesity refers to the WHO Health Behaviour in School-aged Children (HBSC) and for Health-Promoting Schools surveys for monitoring. These surveys, which collect data every four years on 11-, 13- and 15-years old in 49 countries and regions, include questions around the school environment.

The new Joint Action project (Best ReMap¹⁷⁷), which will start in 2020, will also cover the monitoring of the improvement of public procurement of food.¹⁷⁸ A prototype catalogue of food will be tested in the public procurement procedure to contribute to the higher quality of menus by assuring transparent quality of the procured foods within public institutions.

We have not found any information on the monitoring of compliance with food provision policies in other public sector settings.

Monitoring of unhealthy food promoted to children

Article 9 of the Audiovisual Media Services Directive¹⁷⁹ prescribes that Member States adopt codes of conduct, which aim to reduce the exposure of children to unhealthy food promotion and which shall provide for regular, transparent and independent monitoring and evaluation of the objectives aimed at. In addition, these codes of conduct shall also provide for effective enforcement including effective and proportionate sanctions.

173 https://ec.europa.eu/food/audits_analysis/annual_reports_en

174 https://ec.europa.eu/food/sites/food/files/hfaa_progr_en_2019.pdf

175 DG Sante Strategic Plan 2016-2020

176 European Union, 2014. EU Action Plan on Childhood Obesity 2014-2020. 24 February 2014. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/childhoodobesity_actionplan_2014_2020_en.pdf

177 <https://www.rivm.nl/en/international-projects/best-remap>

178 European Commission, 2019. Initiatives on Nutrition and Physical Activity. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf

179 DIRECTIVE (EU) 2018/1808 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 14 November 2018 amending Directive 2010/13/EU on the coordination of certain provisions laid down by law, regulation or administrative action in Member States concerning the provision of audiovisual media services (Audiovisual Media Services Directive) in view of changing market realities. OJ L 303, 28.11.2018, p. 69-92. EUR-Lex: <https://eur-lex.europa.eu/eli/dir/2018/1808/oj>

In addition, there are some monitoring initiatives at EU level: (1) DG SANTE and DG CNECT launched in 2017 a study on the exposure of minors to TV and online marketing of unhealthy foods (results will be available in May 2020) and (2) JRC produced (released 18 December 2019) a toolkit to support Member States in developing and updating codes of conduct on marketing of food, non-alcoholic and alcoholic beverages.^{180 181}

The new Joint Action, starting in 2020, will also cover monitoring activities on the reduction of aggressive marketing to children of foods high in fat, salt and sugar.¹⁸² The Joint Action aims to deliver a harmonised EU approach to reducing unhealthy (digital) food marketing to children and adolescents and to use already developed tools for harmonised monitoring of (digital) marketing.

Monitoring of adult and childhood nutrition status and population intakes (MONIT2), overweight and obesity prevalence (MONIT3) and the prevalence of NCD metabolic risk factors and occurrence rates for the main diet-related NCDs (MONIT4)

There are different initiatives at EU level, regarding monitoring of adult and childhood nutrition status and population intakes, overweight and obesity prevalence and the prevalence of NCD metabolic risk factors and occurrence rates for the main diet-related NCDs. Regarding the monitoring of adult and childhood intakes, the European Commission notes that this is clearly the responsibility of the Member States.

EFSA

EFSA has a database, 'the Comprehensive European Food Consumption Database'¹⁸³ which contains data on food consumption habits and patterns across the EU. Member States used different methods to collect food consumption data. However, as can be concluded from information on the European Commission's website it is still difficult to draw conclusions and make comparisons on the intake of for example sugars, salt and fat across the EU, due to differences in methodology. Therefore, in 2011, EFSA launched the EU Menu project, which aims to provide standardized, harmonized information on what people eat in all countries and regions across the EU.¹⁸⁴ Under this project, EFSA funded 32 surveys for different age groups across Europe. Data from all surveys are expected to become available by 2023.

Eurostat- European Health Interview Survey (EHIS)¹⁸⁵

The European Health Interview Survey, coordinated by Eurostat, aims at measuring on a harmonized basis with a high degree of comparability, the health status, health determinants and access to health care services of EU citizens. EHIS is conducted every five years¹⁸⁶ and includes health status (e.g. self-perceived health, chronic diseases, limitation in activities, mental health, pain, accidents, etc.) and health determinants like height and weight, the consumption of fruits, vegetables and juice.

180 European Commission, DG Health and Food Safety, 2019. Initiatives on Nutrition and Physical Activity. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf

181 <https://ec.europa.eu/jrc/en/news/toolkit-limit-marketing-food-non-alcoholic-and-alcoholic-beverages-minors>

182 European Commission, 2019. Initiatives on Nutrition and Physical Activity. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf

183 <https://www.efsa.europa.eu/en/data/food-consumption-data>

184 <https://www.efsa.europa.eu/en/data/food-consumption-data>

185 European Commission, Eurostat. European Health Interview Survey. https://ec.europa.eu/eurostat/cache/metadata/en/hlth_det_esms.htm

186 This periodicity will change to 6 years for future EHIS waves that will be conducted under the new Regulation (EU) 2019/1700 of the European Parliament and of the Council establishing a common framework for European statistics relating to persons and households, based on data at individual level collected from samples.

Eurostat- Health in the European Union- facts and figures¹⁸⁷

Eurostat publishes the data on NCD's on their website and reports on it in the 'Health in the European Union- facts and figures'. Indicators reported on are for example: cardiovascular diseases, cancers, and respiratory diseases.

Eurostat- Sustainable development indicators

Eurostat monitors yearly policies contributing to the UN Sustainable Development Goals, based on the EU SDG indicator set.¹⁸⁸ Indicators selected for Goal 3 on health and well-being are for example: Life expectancy at birth, Self-perceived health *and* death rate due to chronic diseases (included in the indicator are malignant neoplasms, diabetes mellitus, ischaemic heart diseases, cerebrovascular diseases, chronic lower respiratory diseases and chronic liver diseases).

European Core Health Indicators (ECHI)¹⁸⁹

The ECHI data tool, contains 88 indicators, resulted from the European Community Health Indicators Monitoring (ECHIM) project. These include health determinant indicators on Body Mass Index and the consumption of fruit and vegetables and indicators on health status like diabetes (self-reported and register-based prevalence) and cancer incidence.

State of Health

The State of Health is a two-year initiative undertaken by the European Commission, that provides policy makers, interest groups, and health practitioners with factual, comparative data and insights into health and health systems in EU countries.¹⁹⁰ Country Health Profiles are drafted that may report on health status like the prevalence of overweight and obesity (based on self-reported data), cancer, cardiovascular diseases and diabetes.

JRC- European Cancer Information System (ECIS)¹⁹¹

The European Cancer Information System (ECIS) by JRC provides the latest information on indicators that quantify cancer burden across Europe. It permits the exploration of geographical patterns and temporal trends of incidence, mortality and survival data across Europe for the major cancer entities.¹⁹²

WHO COSI, NOPA database and WHO HBSC surveys

In the EU Action Plan on Childhood Obesity 2014-2020¹⁹³ is referred to the WHO, as being responsible for collecting from the Member States on the monitored initiatives, e.g. via the WHO European Childhood Obesity Surveillance Initiative (COSI), WHO Nutrition, Obesity and Physical Activity (NOPA) and the WHO Health Behaviour in School-aged Children (HBSC) surveys.

The WHO COSI¹⁹⁴ objectively measures trends in overweight and obesity among primary school aged children (6-9 years). It's a survey based on nationally representative samples and takes

187 European Commission, Eurostat. Health in the European Union- facts and figures. https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Health_in_the_European_Union_%E2%80%93_facts_and_figures

188 European Commission, Eurostat, 2017. EU SDG INDICATOR SET Final version of 28 April 2017 as agreed with Commission Services, which received a favourable opinion by the European Statistical System Committee at its meeting of 17-18 May 2017. <https://ec.europa.eu/eurostat/documents/276524/7736915/EU-SDG-indicator-set-with-cover-note-170531.pdf>

189 https://ec.europa.eu/health/indicators/echi/list_en

190 https://ec.europa.eu/health/state/summary_en

191 <https://ecis.jrc.ec.europa.eu/>

192 <https://ecis.jrc.ec.europa.eu/>

193 European Union, 2014. EU Action Plan on Childhood Obesity 2014-2020. 24 February 2014. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/childhoodobesity_actionplan_2014_2020_en.pdf

194 <http://www.euro.who.int/en/health-topics/disease-prevention/nutrition/activities/who-european-childhood-obesity-surveillance-initiative-cosi/about-cosi>

standardized weight and height measurements and collects information on school environments and dietary habits.

The WHO NOPA database¹⁹⁵ compiles information to monitor progress on nutrition, diet, physical activity and obesity. The country information contains surveillance data, policy documents, action to implement policy and examples of good practice in programmes and interventions.

These WHO HBSC surveys, which collect self-reported data every four years on 11-, 13- and 15-years old in 49 countries and regions, include questions around areas like eating behaviour, obesity, the socio-economic environment and the school environment.¹⁹⁶

Integrated surveillance on NCD's (iNCD)

The WHO has started the Integrated surveillance on NCD's project in 2013 which was co-financed by the EU. The project aimed to describe how Member States of the European Union can optimize their use of the ECHI indicators to report on progress towards reaching the nine global targets of the Global Monitoring Framework on NCDs¹⁹⁷, including the targets:

- A 25% relative reduction in the overall mortality from cardiovascular diseases, cancer, diabetes, or chronic respiratory diseases.
- A 30% relative reduction in mean population intake of salt/sodium.
- A 25% relative reduction in the prevalence of raised blood pressure or contain the prevalence of raised blood pressure, according to national circumstances.
- Halt the rise in diabetes & obesity.

Evaluation of major programs and policies to assess their effectiveness and contributions to achieving the goals of the nutrition and health plans (MONIT 5)

In the Strategic Plan of DG Sante 2016-2020 it is emphasized that Better Regulation is a key horizontal priority for the Commission.¹⁹⁸ Impact assessments, public consultations, ex-post evaluations and Fitness Checks are instruments for the Commission to ensure the regulatory cycle is transparent and of good quality. The Commission published Guidelines on evaluation and Fitness Checks.¹⁹⁹ A Fitness Check is a type of evaluation that assesses several related actions like the interaction of laws, policies and programmes.

The Guidelines state about the periodicity of evaluations:

"In general, it is recommended to evaluate only once sufficient time has elapsed from the implementation of the intervention to allow at least 3 years of reasonably full data to be collected. See Tool #45 on How to undertake a proportionate evaluation."

195 <http://data.euro.who.int/nopa/>

196 <http://www.hbsc.org/about/index.html>

197 WHO, Regional Office for Europe. Integrated surveillance of Noncommunicable Diseases (iNCD) A project co-financed with the European Commission. http://www.euro.who.int/_data/assets/pdf_file/0018/253422/WHO-iNCD-June-2014-WEBnew-3.pdf?ua=1

198 European Commission. Strategic Plan 2016-2020 DG Health and Food Safety. Ref. Ares(2017)6260978 - 20/12/2017. https://ec.europa.eu/info/sites/info/files/strategic-plan-2016-2020-dg-sante_en_0.pdf

199 European Commission. Better Regulation guidelines. Chapter VI Guidelines on evaluation (including fitness checks). <https://ec.europa.eu/info/sites/info/files/better-regulation-guidelines-evaluation-fitness-checks.pdf>

Evaluations or fitness checks, that have been completed or are in progress, are:

- Monitoring the activities of the EU Platform for Action on Diet, Physical Activity and Health (annual monitoring reports and an assessment report of the EU Platform (planned to be published in December 2019)).
- Evaluation of the implementation of the Strategy for Europe on Nutrition, Overweight and Obesity related issues (covering 2007-2011, report published in 2013).
- Mid-term evaluation of the third Health Programme 2014-2020 (covering 2016-2017).
- REFIT Evaluation of the General Food Law (published in 2018).
- Supporting the mid-term evaluation of the EU Action Plan on Childhood Obesity 2014-2020 (covering 2014-2017, published in 2018).
- REFIT: Evaluation of the Regulation on nutrition and health claims (started in 2016, in progress).
- Monitoring of the EU Fruit and Vegetable Scheme (countries provide annual monitoring reports, Evaluation reports cover five school years and will be available from 1 March 2023).

Progress towards reducing health inequalities or health impacts in vulnerable populations and monitoring of social and economic determinants of health (MONIT6)

Different monitoring tools at EU level include background variables on demography and socio-economic status and/or report on health or socioeconomic inequalities.

EU Menu project- harmonising collection of food consumption data

EFSA's EU Menu project (2011-2023), aims to provide standardised information on what people eat in all countries and regions across the EU. The guidance on the EU menu methodology²⁰⁰ provides recommendations on how to collect harmonised and high quality data (in age groups ranging from three months to 74 years) on food consumption information, weight, height, physical activity levels and background information of the participants. The guidance recommends to stratify the sample at least by age group and sex and where possible by region of residence, urban and rural areas, seaside and countryside area, ethnic groups and household size. The guidance further recommends to consider and clearly describe variability in dietary patterns, because of regional, socioeconomic, ethnic or other differences.

European Health Interview Survey (EHIS)²⁰¹

The European Health Interview Survey (EHIS) includes background variables on demography and socioeconomic status. All indicators are expressed as percentages within the population and statistics are broken down by age groups and sex and one other dimension such as educational attainment level, income quintile group or degree of urbanization.

State of Health²⁰²

Countries report in their Country Health Profile on the socioeconomic inequalities (people with different education or income levels) in their country (based on self-reported data). The Companion report published along with the Country Health Profiles reports on health inequalities, such as life expectancy in the different countries.

200 <https://www.efsa.europa.eu/en/efsajournal/pub/3944>

201 Eurostat. European Health Interview Survey. https://ec.europa.eu/eurostat/cache/metadata/en/hlth_det_esms.htm

202 https://ec.europa.eu/health/state/summary_en

European Core Health Indicators (ECHI)²⁰³

The ECHI data tool, includes indicators related to demography and socioeconomic situation, e.g. population by education, population by occupation, total unemployment, population below poverty line and income inequality. It further contains health status indicators, such as life expectancy by educational attainment and healthy life expectancy.

Integrated surveillance on NCD's (iNCD)²⁰⁴

iNCD reviewed key international databases, assessing the completeness and quality of indicators. Furthermore the iNCD project assessed the comparability and availability of data broken down by age, sex and/or socio-economic risk factors in order to address inequalities.

Evaluations of major nutrition and health programs and policies

Evaluations of major nutrition and health programs and policies at EU level have addressed health and/or socioeconomic inequalities.

The Evaluation of the implementation of the Strategy for Europe on nutrition, overweight and obesity related issues,²⁰⁵ states that EU-level initiatives in the area of social inequalities in obesity have mainly focused on strengthening the evidence base, EU added value in addressing the social dimension in overweight and obesity has been limited. The report recommends the EU to take a careful consideration of effects on lower socioeconomic groups to ensure that initiatives do not further exacerbate health inequalities. The evaluation mentions a few key policy interventions which are particularly effective in reducing social inequalities in obesity, such as school fruit and vegetables schemes, fat taxes and policies relevant to the life-course approach. Less effective interventions are information campaigns and food labelling interventions.

The mid-term evaluation of the EU Action Plan on Childhood Obesity 2014-2020²⁰⁶ used interviews to obtain relevant policy developments, of which one of the questions was about how health inequalities are addressed in policies that are relevant to childhood obesity.

The annual report of 2016 on the Monitoring of the activities of the EU Platform for Action on Diet, Physical Activity and Health reports on commitments of the Platform which addressed reducing health inequalities or focused on lower socioeconomic groups in their objectives. The report recommends to further reinforce the theme of reducing health inequalities.²⁰⁷

The EU Health Programme has a main goal to improve the health of Europeans and reduce inequalities by promoting health, encouraging innovation, boosting the sustainability of health systems and protecting Europeans from serious cross-border health threats. Joint Actions such as

203 https://ec.europa.eu/health/indicators/echi/list_en

204 WHO, Regional Office for Europe. Integrated surveillance of Noncommunicable Diseases (iNCD) A project co-financed with the European Commission. http://www.euro.who.int/_data/assets/pdf_file/0018/253422/WHO-iNCD-June-2014-WEBnew-3.pdf?ua=1

205 Public Health Evaluation and Impact Assessment Consortium (PHEIAC), 2013. Evaluation of the implementation of the Strategy for Europe on Nutrition, Overweight and Obesity related health issues FINAL REPORT. 29 April 2013. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/pheiac_nutrition_strategy_evaluation_en.pdf

206 European Commission, 2017. REPORT FROM THE COMMISSION TO THE EUROPEAN PARLIAMENT, THE COUNCIL, THE EUROPEAN ECONOMIC AND SOCIAL COMMITTEE AND THE COMMITTEE OF THE REGIONS. Mid-term evaluation of the 3rd Health programme 2014-2020 under Regulation (EU) No 282/2014 on the establishment of a third programme of Union action in the field of health (2014-2020) {SWD(2017) 331 final}; {SWD(2017) 333 final}. Brussels, 11.10.2017 COM(2017) 586 final. https://ec.europa.eu/health/funding/programme/2014-2020/midterm_evaluation_nl https://ec.europa.eu/health/sites/health/files/programme/docs/2014-2020_evaluation_midtermreport_en.pdf

207 European Commission, 2016. Monitoring the activities of the EU Platform for Action on Diet, Physical Activity and Health. Annual Report 2016. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2016_report_en.pdf

Equity Action²⁰⁸ and JANPA addressed health and socioeconomic inequality, identifying tools such as Health Impact Assessments with an equity focus, Health Equity Audits and developing models of good practice with special attention to social inequality aspects. The mid-term evaluation of the EU Health Programme mentions inequalities, but doesn't really report on this.²⁰⁹

208 <https://eurohealthnet.eu/hpe/equity-action-joint-action>

209 European Commission, 2017. REPORT FROM THE COMMISSION TO THE EUROPEAN PARLIAMENT, THE COUNCIL, THE EUROPEAN ECONOMIC AND SOCIAL COMMITTEE AND THE COMMITTEE OF THE REGIONS. Mid-term evaluation of the 3rd Health programme 2014-2020 under Regulation (EU) No 282/2014 on the establishment of a third programme of Union action in the field of health (2014-2020) {SWD(2017) 331 final} {SWD(2017) 333 final}. Brussels, 11.10.2017 COM(2017) 586 final. https://ec.europa.eu/health/funding/programme/2014-2020/midterm_evaluation_nl https://ec.europa.eu/health/sites/health/files/programme/docs/2014-2020_evaluation_midtermreport_en.pdf

DOMAIN 11 – FUNDING AND RESOURCES

This domain concerns the extent to which the EU has sufficient funding invested in ‘Population Nutrition Promotion’ (estimated from the investments in population promotion of healthy eating and healthy food environments for the prevention of obesity and diet-related NCDs, excluding all one-on-one promotion (primary-care, antenatal services, maternal and child nursing services etc.), food safety, micronutrient deficiencies (e.g. folate fortification and undernutrition) to create healthy food environments, improved population nutrition, reductions in obesity, diet-related NCDs and their related inequalities.

FUND1 The ‘population nutrition’ budget, as a proportion of total health spending and/or in relation to the diet-related NCD burden sufficiently contributes to reducing diet-related NCD’s.

Definitions and scope

- ‘Population nutrition’ includes promotion of healthy eating, and policies and programs that support healthy food environments for the prevention of obesity and diet-related NCDs.
- The definition excludes all one-on-one and group-based promotion (primary care, antenatal services, maternal and child nursing services etc.), food safety, micronutrient deficiencies (e.g. folic acid fortification) and undernutrition.
- Includes estimates for the budget allocated to health related DG’s within the EU (e.g. DG Health and Food Safety (SANTE), that has primary responsibility for population nutrition.
- The workforce comprises anyone whose primary role relates to population nutrition and who is employed full time, part time or casually by the Department of Health or contracted by the Department of Health to perform a population nutrition-related role (including consultants or funding of a position in another government or nongovernment agency). The number of full time equivalent persons in the workforce will be reported in ‘FUND4’.
- Excludes budget items related to physical activity promotion.

FUND2 EU funded research is targeted for improving food environments, reducing obesity, NCDs and their related inequalities.

Definitions and scope

- Includes the clear identification of research priorities related to improving food environments, reducing obesity, NCDs and their related inequalities in health or medical research strategies or frameworks.
- Includes identifying research projects conducted or commissioned by the government specifically targeting food environments, prevention of obesity or NCDs (excluding secondary or tertiary prevention).
- It is limited to research projects committed to or conducted within the last 12 months.
- Excludes research grants administered by the government (including statutory agencies) to a research group where the allocation of a pool of funding was determined by an independent review panel.
- Excludes evaluation of interventions (this is explored in ‘MONIT5’ and should be part of an overall program budget).

FUND3 There is a statutory health promotion agency in place that includes an objective to improve population nutrition with a secure funding stream.

Definitions and scope

- Agency was established through legislation.
 - Includes objective to improve population nutrition in relevant legislation, strategic plans or on agency website.
 - Secure funding stream involves the use of a hypothecated tax or other secure source.
-

POLICY EVIDENCE SUMMARY

The 'population nutrition' budget, as a proportion of total health spending and/or in relation to the diet-related NCD burden (FUND1)

Funding for DG SANTE's activities is fixed within the EU's 2014-2020 Multiannual Financial Framework.²¹⁰ Expenditure related to 'Food and Feed' and 'Public Health' falls under the Heading 3: Security and Citizenship of the Multiannual Financial Framework²¹¹. The budget for activities linked 'Food and Feed' (animal and plant health programme) is 1891 million euros and for activities linked to 'Public Health' (EU Health Programme) 449 million euros.^{212, 213}

Expenditure of the Health Programme is directly managed by DG SANTE and the Consumer, Health and Food Executive Agency (CHAF-EA).²¹⁴ The Commission also receives additional funding from the European Parliament for pilot projects to improve future policy action in the area of nutrition and physical activity and to identify good practices. Under the Third Health Programme (2014-2020) the Commission has contributed (till 22.10.2019) a total of €16.611.981,00 on different projects related to population nutrition and to the promotion of healthy diets (the amount is also including projects related to the promotion of energy-balance related lifestyles in general, e.g. physical activity).²¹⁵ Examples of projects are the Schools for Health in Europe network (SHE), Mapping Member States' fiscal measures and pricing policies applied to food, non-alcoholic drinks and alcoholic beverages and the feasibility study for a monitoring system on reformulation initiatives for salt, sugars and fat.

Funding for the Common Agricultural Policy (CAP) falls under Heading 2: Sustainable growth: natural resources of the Multiannual Financial Framework.²¹⁶ For the EU Fruit and Vegetable Scheme which falls into the first pillar of the CAP (direct payments and market measures, 312,735 million euros)²¹⁷

210 European Commission. Strategic Plan 2016-2020 DG Health and Food Safety. Ref. Ares(2017)6260978 - 20/12/2017. https://ec.europa.eu/info/sites/info/files/strategic-plan-2016-2020-dg-sante_en_0.pdf

211 Council of the European Union, 2017. ANNEX to the COMMUNICATION FROM THE COMMISSION TO THE COUNCIL AND THE EUROPEAN PARLIAMENT Technical adjustment of the financial framework for 2019 in line with movements in GNI (ESA 2010) (Article 6 of Council Regulation No 1311/2013 laying down the multiannual financial framework for the years 2014-2020) <https://data.consilium.europa.eu/doc/document/ST-9147-2018-ADD-1/en/pdf> https://ec.europa.eu/info/sites/info/files/about_the_european_commission/eu_budget/com_2017_220_annex_en.pdf

212 European Commission. Strategic Plan 2016-2020 DG Health and Food Safety. Ref. Ares(2017)6260978 - 20/12/2017. https://ec.europa.eu/info/sites/info/files/strategic-plan-2016-2020-dg-sante_en_0.pdf and https://ec.europa.eu/info/about-european-commission/eu-budget/spending/topic/eu-funding-programmes-2014-2020/heading-3-security-and-citizenship_en

213 https://ec.europa.eu/info/about-european-commission/eu-budget/spending/topic/eu-funding-programmes-2014-2020/heading-3-security-and-citizenship_en

214 European Commission. Strategic Plan 2016-2020 DG Health and Food Safety. Ref. Ares(2017)6260978 - 20/12/2017. https://ec.europa.eu/info/sites/info/files/strategic-plan-2016-2020-dg-sante_en_0.pdf

215 European Commission, 2019. Nutrition projects Health Programme. Excel overview, 22.10.2019.

216 https://ec.europa.eu/info/about-european-commission/eu-budget/spending/topic/eu-funding-programmes-2014-2020/heading-2-sustainable-growth-natural-resources_en#common-agricultural-policy-pillar-i

217 https://ec.europa.eu/info/about-european-commission/eu-budget/spending/topic/eu-funding-programmes-2014-2020/heading-2-sustainable-growth-natural-resources_en#common-agricultural-policy-pillar-i

is a maximum of 150 million euros per school year available for requesting Member States, taking into account their number of six-to ten-year-old children and the degree of development of their regions.²¹⁸ All Member States except Sweden and the UK have received EU Fruit and Vegetable Scheme funds for the 2017-2018 and 2018-2019 school years. The European Public Health Alliance (EPHA) states in a report²¹⁹ that the School fruit and vegetable Scheme only represents 0.25% of the overall CAP budget. EPHA therefore recommends to gradually increase the budget for this scheme, in line with increased take-up, and enhance co-financing rates for schools in economically deprived areas where vegetable and fruit intake is especially low.

Next to the Public Health Programme, the EU provides other funds to promote investing in health as a broader means of achieving smart and inclusive growth. These funds are the European and Structural Investment Funds (ESIF)²²⁰ and the European Fund for Strategic Investments (EFSI).²²¹ The health sector receives ESIF for investments through the European Regional Development Fund and the European Social Fund. For 2014-2020 more than 9 billion euros was foreseen in all Member States for health-related investments.²²² EFSI is a partnership of the Commission and the EIB, providing a financial guarantee to the value of 315 billion euros over a three year period and with an extension up to 500 billion euros until 2020.²²³

For the next Multiannual Financial Framework 2021-2027, the European Social Fund Plus Programme (ESF +) will be the main investment fund for investing in Health.²²⁴ This programme merges existing funds like the Health Programme, The European Social Fund (ESF) and the Youth Employment Initiative (YEI), The Fund for European Aid to the Most Deprived (FEAD) and The Employment and Social Innovation (EaSI) programme. The ESF + Programme opens up potential for a stronger financial translation of health in all policies. For the Health strand an amount of 413 billion euros will be available. How much specifically is related to nutrition and promoting healthy diets is unknown in advance as there is no earmarking with such level of detail.

EU funded research targeted for improving food environments, reducing obesity, NCDs and their related inequalities (FUND2)

The European Union's strategy 2020 for smart, sustainable and inclusive growth, sets the strengthening of research and innovation as one of its main objectives. The implementation of the Innovation Union (to create jobs and growth by improving conditions and access to finance for research and innovation)²²⁵ including the European Research Area²²⁶ are part of this Strategy. Horizon 2020 and the Joint Programming Initiative 'A Healthy Diet for a Healthy Life' are research programmes contributing to a fully operational European Research Area on the prevention of diet-related diseases'.

218 European Union, 2019. Briefing: The EU Fruit and Vegetable Sector. EPRS | European Parliamentary Research Service Author: Rachele Rossi Members' Research Service PE 635.563 – March 2019. [http://www.europarl.europa.eu/RegData/etudes/BRIE/2019/635563/EPRS_BRI\(2019\)635563_EN.pdf](http://www.europarl.europa.eu/RegData/etudes/BRIE/2019/635563/EPRS_BRI(2019)635563_EN.pdf)

219 European Public Health Alliance (EPHA), 2016. A CAP for a Healthy Living. Mainstreaming Health into the EU Common Agricultural Policy. https://epha.org/wp-content/uploads/2016/03/A-CAP-for-Healthy-Living_EPHA_2016.pdf

220 https://ec.europa.eu/health/funding/structural_funds_en

221 https://ec.europa.eu/health/funding/investment_plan_en

222 European Commission. HEALTH INVESTMENTS BY EUROPEAN STRUCTURAL AND INVESTMENT FUNDS (ESIF) 2014-2020 https://ec.europa.eu/health/sites/health/files/health_structural_funds/docs/esif_factsheet_en.pdf

223 https://ec.europa.eu/health/funding/investment_plan_en

224 https://ec.europa.eu/health/funding/future_health_budget_en

225 <https://www.mariecuriealumni.eu/newsletter/all-you-need-know-about-innovation-union-iu>

226 https://ec.europa.eu/info/research-and-innovation/strategy/era_en

Horizon 2020 invests in innovative solutions that help tackle the adverse effects on human health²²⁷, with funding of nearly 80 billion euros available (2014-2020).²²⁸ 'Food and Healthy Diet' is marked as an area of Horizon 2020, with issues as 'promoting informed consumer choices' and delivering strategic solutions for healthy and safe foods and diets for all'.²²⁹ Examples of projects which have received funding from Horizon 2020 are 'FOOD 2030' which addresses Nutrition for sustainable and healthy diets²³⁰, STOP²³¹ and CO-CREATE²³² which addresses overweight and obesity in children and adolescents.

The Joint Programming Initiative 'A Healthy Diet for a Healthy Life' started in 2014 and is a voluntary partnership between Member States and Associated Countries of the European Union, to address societal challenges as Health and Nutrition.²³³ This includes research to increase the understanding of health-impacting behaviour with respect to making food choices, to create insight in how the environment influences this behaviour and to raise consumer understanding of healthy foods and diets. One of the projects financed by this JPI is the 'Policy-Evaluation Network (PEN)- Public policies addressing health-related behaviours in Europe'.

The Consumers, Health, Agriculture and Food Executive Agency (Chafea) has reserved funding for monitoring activities and behavioural studies, like the database on the nutritional characteristics of food products, to help monitor whether food products have increasingly less (or increasingly more) salt, fat or sugars²³⁴ and the study on the impact of marketing on children's behaviour.²³⁵

Statutory health promotion agency (FUND3)

At EU level there is a Steering Group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases,²³⁶ which was set up in July 2018.²³⁷ This Steering Group assists and advises the Commission on for example the coordination between Member States in addressing challenges caused by NCD's, the selection of best practices regarding health promotion, disease prevention and management of NCDs and monitoring progress towards reducing mortality due to NCD's. The Steering Committee is composed of one member per Member State and is chaired by DG SANTE.²³⁸ Interested parties in the field can discuss with the Steering Group via the Health Policy

227 European Commission, 2016. COMMISSION STAFF WORKING DOCUMENT Key European action supporting the 2030 Agenda and the Sustainable Development Goals Accompanying the document Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions Next steps for a sustainable European future: European Union action for sustainability. Strasbourg, 22.11.2016 SWD(2016) 390 final. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52016SC0390&from=en>

228 <https://ec.europa.eu/programmes/horizon2020/en/what-horizon-2020>

229 <https://ec.europa.eu/programmes/horizon2020/en/area/food-healthy-diet>

230 <https://ec.europa.eu/research/bioeconomy/index.cfm?pg=policy&lib=food2030>

231 <http://www.stopchildobesity.eu/what-is-stop/>

232 <https://www.fhi.no/en/studies/co-create/>

233 <https://www.healthydietforhealthylife.eu/index.php/about/vision>

234 <https://etendering.ted.europa.eu/cft/cft-display.html?cftid=3068>

https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf

235 https://ec.europa.eu/info/publications/study-impact-marketing-through-social-media-online-games-and-mobile-applications-childrens-behaviour_en

236 <http://ec.europa.eu/transparency/regexpert/index.cfm?do=groupDetail.groupDetail&groupID=3622>

237 COMMISSION DECISION of 17.7.2018 setting up a Commission expert group "Steering Group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases" and repealing the Decision setting up a Commission expert group on rare diseases and the Decision establishing a Commission expert group on Cancer Control. C(2018) 4492 final. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A32018D0718%2802%29>

238 COMMISSION DECISION of 17.7.2018 setting up a Commission expert group "Steering Group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases" and repealing the Decision setting up a Commission expert group on rare diseases and the Decision establishing a Commission expert group on Cancer Control. C(2018) 4492 final. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A32018D0718%2802%29>

Platform.²³⁹ The Steering Group has been set up by a Commission Decision.²⁴⁰ The costs of running the Steering group (secretariat, travel expenses) are born by the administrative budget of the Commission. The support to projects in areas identified as priority by the group can originate from – and follow the rules of – any of the financial support envelopes of the Commission.

239 https://ec.europa.eu/health/non_communicable_diseases/steeringgroup_promotionprevention_en

240 European Commission, 2018. COMMISSION DECISION of 17.7.2018 setting up a Commission expert group “Steering Group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases” and repealing the Decision setting up a Commission expert group on rare diseases and the Decision establishing a Commission expert group on Cancer Control. Brussels, 17.7.2018 C(2018) 4492 final. https://ec.europa.eu/health/sites/health/files/major_chronic_diseases/docs/c2018_4492_en.pdf

DOMAIN 12 – PLATFORMS AND INTERACTION

This domain concerns the extent to which there are coordination platforms and opportunities for synergies across EU departments, levels of government, and other sectors (NGOs, private sector, and academia) such that policies and actions in food and nutrition are coherent, efficient and effective in improving food environments, population nutrition, diet-related NCDs and their related inequalities.

PLAT1 There are robust coordination mechanisms across departments and levels of government (European, national, state and local) to ensure policy coherence, alignment, and integration of food, obesity and diet-related NCD prevention policies across governments.

Definitions and scope

- Includes cross-government or cross-departmental governance structures, committees or working groups (at multiple levels of seniority), agreements, memoranda of understanding, etc.
- Includes cross-government or cross-departmental shared priorities, targets or objectives.
- Includes strategic plans or frameworks that map the integration and alignment of multiple policies or programs across governments and across departments.
- Includes cross-government or cross-departmental collaborative planning, implementation or reporting processes, consultation processes for the development of new policy or review of existing policy.

PLAT2 There are formal platforms (with clearly defined mandates, roles and structures) for regular interactions between the EU and the commercial food sector on the implementation of healthy food policies and other related strategies.

Definitions and scope

- The commercial food sector includes food production, food technology, manufacturing and processing, marketing, distribution, retail and food service, etc. For the purpose of this indicator, this extends to commercial non-food sectors (e.g. advertising and media, sports organisations, land/housing developers, private childcare, education and training institutes) that are indirectly related to food.
- Includes established groups, forums or committees active within the last 12 months for the purpose of information sharing, collaboration, seeking advice on healthy food policies.
- Includes platforms to support, manage or monitor private sector pledges, commitment or agreements.
- Includes platforms for open consultation.
- Includes platforms for the government to provide resources or expert support to the commercial food sector to implement policy.
- Excludes joint partnerships on projects or co-funding schemes.
- Excludes platforms to engage with industry in relation to development of policies.
- Excludes initiatives covered by 'RETAIL3' and 'RETAIL4'.

PLAT3 There are formal platforms (with clearly defined mandates, roles and structures) for regular interactions between the EU and civil society on the development, implementation and evaluation of healthy food policies and other related strategies.

Definitions and scope

- Civil society includes community groups and consumer representatives, NGOs, academia, professional associations, etc.

- Includes established groups, forums or committees active within the last 12 months for the purpose of information sharing, collaboration, seeking advice.
- Includes platforms for consultation on proposed plans, policy or public inquiries.
- Excludes policies or procedures that guide consultation in the development of food policy (see 'GOVER3').

PLAT4 The governments work with a system-based approach with (local, national and European) organisations/partners/groups to improve the healthiness of food environments in EU countries.

Definitions and scope

- Systems-based approaches may include policies within other domains of health.
 - May include a social-determinants of health approach.
 - May bring together multiple departments or ministries to approach health.
 - Includes multiple levels of government.
 - Aim of a systems-based approach is:
 - resourcing and supporting a dedicated, reflective and skilled workforce at a EU, state and/or local level to engage, activate and influence at multiple levels of the system to combat obesity and chronic disease.
 - building relationships with prevention partners across the system, and across sectors and industries, to strengthen positive health outcomes on multiple fronts.
 - capturing and feeding back knowledge and data on progress, impact and effectiveness and calling for new types of research, policy and practice collaborations.
 - allocating resources based on best possible investment to effect change and population need, seeding long term change by resourcing local governments to lead action towards public health.
 - building leadership for sustained prevention across the system to drive effective and long lasting change.
-

POLICY EVIDENCE SUMMARY

Article 168 of the Treaty on the Functioning of the European Union includes an integration clause requiring that human health protection is ensured in all EU policies and activities.²⁴¹ The European Union shall encourage cooperation between the Member States, but the Member States themselves shall coordinate their policies and programmes in the area of improving public health and preventing physical and mental illness and diseases.

Coordination mechanisms to ensure policy coherence, alignment and integration of food, obesity, and diet-related NCD prevention policies (PLAT 1)

There are mechanisms at EU level, which aim to ensure cooperation and coordination at the level of the European Commission, the European Parliament, the Council, between the EU and the Member States, between Member States, and with subnational governments and social partners.

²⁴¹ European Union, 2012. Consolidated version of the Treaty on the Functioning of the European Union. OJ C 326, pp. 47-390. 26. 10.2012. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:12012E/TXT&from=EN>

Coordination at the European Commission

At the commission level there are rules of procedures for the cooperation and coordination between departments.²⁴² These rules prescribe that the Secretary-General ensures that the necessary coordination between departments in the preparatory stages takes place. Before submitting a document to the Commission, the responsible department shall consult other departments which are associated or concerned by virtue of their powers or responsibilities or by nature of the subject. In case, this did not happen, the responsible department shall inform the Secretary General.

Legislative and other proposal documents should be introduced by a consultative document or roadmap followed by a public consultation and a Commission impact assessment focusing on economic, environmental and social aspects (including a voluntary impact assessment on public health).^{243, 244, 245} Any important proposal needs to pass the Regulatory Scrutiny board, composed of three high-level Commission officials and three experts recruited from outside the Commission, before it can be agreed internally.²⁴⁶

Coordination at the European Parliament and Council

Legislative proposals prepared by the Commission have to be adopted by the European Parliament and the Council of Ministers.²⁴⁷

Members of the European Parliament are divided up among a number of specialized standing committees, to do preparatory work for the Parliament's plenary sittings.²⁴⁸ The lead committee for health is the Environment, Public Health and Food Safety Committee, but other committees also play a significant role in relation to health such as the Employment and Social Affairs Committee or the Industry, Research and Energy Committee.²⁴⁹ When a member of the European Parliament within a certain committee prepares a report, this report is then considered and revised by the committee as a whole, and then by parliament as a whole in one of the monthly plenary sessions. Furthermore, if several committees have interest in a file, they have an opportunity to be consulted and put forward amendments for their areas of responsibility. Where disagreements remain, these can be taken to the full plenary session of parliament.²⁵⁰

The Council of Ministers is made up of the relevant ministers from one Member State.²⁵¹ There is a Council for Employment, Social Policy, Health and Consumers Affairs and a Council for Agriculture

242 European Commission, 2000. RULES OF PROCEDURE OF THE COMMISSION (C(2000) 3614). OJ L 308. 8.12.2000, pp. 26-34. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32000Q3614&from=EN>

243 Scott L. Greer, Nick Fahy, Heather A. Elliott, Matthias Wismar, Holly Jarman, Willy Palm, World Health Organization 2014, European Observatory on Health Systems and Policies. Everything you always wanted to know about European Health policies but were afraid to ask. United Kingdom: London. And: European Commission. 2013 roadmaps. Luxembourg, Publications Office of the European Union, 2013. http://ec.europa.eu/governance/impact/planned_ia/roadmaps_2013_en.htm#SANCO.

244 European Commission, 2017. COMMISSION STAFF WORKING DOCUMENT Better Regulation Guidelines. Chapter III Guidelines on impact assessment. Brussels, 7 July 2017 SWD (2017) 350 <http://www.emcdda.europa.eu/system/files/attachments/7906/better-regulation-guidelines.pdf>

245 https://ec.europa.eu/info/law/law-making-process/evaluating-and-improving-existing-laws/refit-making-eu-law-simpler-and-less-costly_en

246 https://ec.europa.eu/info/law/law-making-process/regulatory-scrutiny-board_en

247 Scott L. Greer, Nick Fahy, Heather A. Elliott, Matthias Wismar, Holly Jarman, Willy Palm, World Health Organization 2014, European Observatory on Health Systems and Policies. Everything you always wanted to know about European Health policies but were afraid to ask. United Kingdom: London.

248 <http://www.europarl.europa.eu/about-parliament/en/organisation-and-rules/organisation/committees>

249 Scott L. Greer, Nick Fahy, Heather A. Elliott, Matthias Wismar, Holly Jarman, Willy Palm, World Health Organization 2014, European Observatory on Health Systems and Policies. Everything you always wanted to know about European Health policies but were afraid to ask. United Kingdom: London.

250 Idem.

251 Idem.

and Fisheries.²⁵² In practice these councils are made up of different representatives. Coordination in the Council is in the hands of the Council Presidency (agenda setting, chairing and brokering compromises), a role which is shared among the EU countries. The General Affairs Council also has a coordination role and is responsible for institutional, administrative and horizontal matters.²⁵³ However, this approach does not allow a Council with one thematic focus, to comment or engage with decisions taken by another Council. Therefore this relies on effective coordination of Member States at national level to ensure that positions expressed in one Council take account of the full range of views domestically and represent an integrated opinion.²⁵⁴

The European Council, is made up of the heads of state and government of the Member States, which cannot adopt legislation, but sets the overall direction of the EU and brokering solutions to its most intractable problems.²⁵⁵

The Council is supported by the Committee of Permanent Representatives of the governments of the Member States to the European Union (Coreper) and more than 10 specialized working parties and committees.²⁵⁶ The Working Party on Public Health is such a preparatory body. There is also a Working Party on Public Health at Senior Level (top officials) which aim is to better connect the EU agenda with the Member States' agenda's and preferences.²⁵⁷

Other treaty bodies

Other treaty bodies which may or have to be consulted during the legislative process are the Economic and Social Committee which represents social partners (Employers and workers) and the Committee of the Regions which agglomerates the opinions of subnational governments.²⁵⁸

High Level group on Nutrition and Physical Activity

The High Level group on Nutrition and Physical Activity led by the European Commission and composed of EU government representatives has a coordination role in the sense that it enables governments to share policy ideas and best practices and enhances contact between governments and the EU Platform for action on diet, physical activity and health.²⁵⁹ The High level Group has not met since October 2018.

Open Method of Coordination

The Open Method of Coordination is an EU policy making process or regulatory instrument initiated by the Lisbon European Council in 2000.²⁶⁰²⁶¹ The OMC does not result in EU legislation but is a method of soft governance which aims to spread best practice and achieve convergence towards EU goals in those policy areas which fall under the partial or full competence of Member States.

252 <https://www.consilium.europa.eu/en/council-eu/configurations/>

253 Idem.

254 Scott L. Greer, Nick Fahy, Heather A. Elliott, Matthias Wismar, Holly Jarman, Willy Palm, World Health Organization 2014, European Observatory on Health Systems and Policies. Everything you always wanted to know about European Health policies but were afraid to ask. United Kingdom: London.

255 Idem.

256 Idem.

257 Idem.

258 Scott L. Greer, Nick Fahy, Heather A. Elliott, Matthias Wismar, Holly Jarman, Willy Palm, World Health Organization 2014, European Observatory on Health Systems and Policies. Everything you always wanted to know about European Health policies but were afraid to ask. United Kingdom: London.

259 https://ec.europa.eu/health/nutrition_physical_activity/high_level_group_en

260 Scott L. Greer, Nick Fahy, Heather A. Elliott, Matthias Wismar, Holly Jarman, Willy Palm, World Health Organization 2014, European Observatory on Health Systems and Policies. Everything you always wanted to know about European Health policies but were afraid to ask. United Kingdom: London.

261 European Parliament, 2014. The Open Method of Coordination. At a glance, October 2014. <http://www.europarl.europa.eu/EPRS/EPRS-AaG-542142-Open-Method-of-Coordination-FINAL.pdf>

OMC has been mostly applied in the social policy area and not widely used in the health area. There is also some debate about the impact of the OMC process.^{262 263}

Platforms on the implementation of healthy food policies and other related strategies (PLAT2 and PLAT3)

The EU Platform for action on diet, physical activity and health

The EU Platform for action on diet, physical activity and health is a forum for European-level organisations which was founded in 2005 and includes food business operators, consumer organisations, public health NGO's and scientific and professional associations.²⁶⁴ The Platform receives guidance from the High Level Group on Nutrition and Physical Activity and holds joint meetings with the High Level Group. Platform members share their action plans with each other.²⁶⁵ All actions of the platform are available in the Platform database.²⁶⁶ On 3 July 2019, seven civil society organisations (BEUC, EHN, EPHA, CPME, COFACE, World Obesity, ERWCPT and IBFAN) announced their resignation because they did not find the Platform fit for purpose.²⁶⁷ The Commission announced an internal review of the Platform based on an external assessment of the Platform activities (due in December 2019). The Platform did not meet since October 2018.

The EU Pledge

The EU Pledge was launched in 2007 as part of a commitment to the Platform for action on diet, physical activity and health.²⁶⁸ The EU Pledge is a voluntary initiative by food and beverage companies to change advertising to children under 12 years in the European Union.

European Health Policy Platform

The European Health Policy Platform is a collaborative initiative under the 3rd Health Programme to ease communication among health stakeholders and with the European Commission.²⁶⁹ DG SANTE act's as the secretary of the Platform.

European Economic and Social Committee

The EESC enables civil society organisations (350 members) from the Member States to express their views at European level.²⁷⁰ Its opinions are addressed to the European Commission, Parliament and Council. Consultation of the EESC is mandatory for public health policies (Article 168 of the TFEU).²⁷¹ The EESC may also adopt opinions on its own initiative.²⁷²

262 Scott L. Greer, Nick Fahy, Heather A. Elliott, Matthias Wismar, Holly Jarman, Willy Palm, World Health Organization 2014, European Observatory on Health Systems and Policies. Everything you always wanted to know about European Health policies but were afraid to ask. United Kingdom: London.

263 European Parliament, 2014. The Open Method of Coordination. At a glance, October 2014. <http://www.europarl.europa.eu/EPRS/EPRS-AaG-542142-Open-Method-of-Coordination-FINAL.pdf>

264 https://ec.europa.eu/health/nutrition_physical_activity/platform_en
https://ec.europa.eu/health/nutrition_physical_activity/events_en#anchor0

265 https://ec.europa.eu/health/nutrition_physical_activity/platform_nl

266 https://ec.europa.eu/health/nutrition_physical_activity/platform/platform_db_en

267 <https://www.foodnavigator.com/Article/2019/07/03/BEUC-EPHA-and-others-leave-EU-Diet-Platform-claiming-structure-not-fit-for-purpose> and <https://www.babymilkaction.org/archives/22161>

268 <https://eu-pledge.eu/about-the-eu-pledge/>

269 <https://webgate.ec.europa.eu/hpfi/>

270 <https://www.eesc.europa.eu/en/about>

271 European Union, 2012. Consolidated version of the Treaty on the Functioning of the European Union. OJ C 326, pp. 47-390. 26. 10.2012. <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:12012E/TXT&from=EN>

272 Eric Davies, Cardiff University, 2013. European Economic and Social Committee. Information Guide. A guide to information sources on the European Economic and Social Committee (EESC), with hyperlinks to further sources of information within European Sources Online and on external websites http://aei.pitt.edu/75338/1/European_Economic_Social_Committee.pdf

System-based approach to improve the healthiness of food environments in EU countries (PLAT4)

We have found some evidence that the EU is aiming towards a system-based approach to improve the healthiness of food environments in EU countries.

In 2016, JRC published a foresight study 'Delivering on EU food safety and nutrition in 2050 – future challenges and policy preparedness'²⁷³ which aims to aid policy makers in their assessment of the resilience of the current food policy and regulatory framework with a time horizon to 2050, contributing to ensuring that EU citizens continue to enjoy high standards of safe, nutritious and affordable food. The REFIT of the General Food Law was led by JRC employees involved in the foresight study. JRC and DG Health and Food Safety published also a viewpoint around win-wins and trade-offs building on the foresight study.²⁷⁴ The publication states that future food policies need to be more sensitive to impacts on food safety and nutrition and health aspects. '*A holistic food systems approach must be taken to identify and discuss in advance possible tensions and trade-offs and to address them upfront in a systematic and transparent manner.*'

Earlier in 2014, JRC conducted a foresight study around research priorities for foods and diets towards a healthy society using a systems-based approach.²⁷⁵ The study aimed at informing DG Research and Innovation for the development of research calls during HORIZON 2020. This has for example led to the development of a multidisciplinary research program SUSFANs (Metric, Models and Foresight for European Sustainable Food and Nutrition Security)²⁷⁶, which overall objective is to build the conceptual framework, the evidence base and analytical tools for underpinning EU-wide food policies with respect to their impact on consumer diet and their implications for nutrition and public health in the EU, the environment, the competitiveness of the EU agri-food sectors, and global food and nutrition security.

The current work programme 2019-2020 of JRC is including projects using food system approaches, including work towards integrating assessments of food production, food waste and nutrition and health (Project 9500 – INTEGRATE).²⁷⁷

Furthermore, the political guidelines for the new Commission introduced the "Farm to Fork Strategy" on sustainable food.^{278 279} If the new college is confirmed, one Commission Vice-President has 'foresight' in his title, which means that this Commission Vice-President will focus on long-term trends and identify areas in which policy, research and technological developments are most likely to drive societal, economic and environmental progress.²⁸⁰

273 Mylona, K., Maragkoudakis, P., Bock, A.-K., Wollgast, J., Caldeira, S. and Ulberth, F., Delivering on EU Food Safety and Nutrition in 2050 – Future challenges and policy preparedness, EUR27957 EN, Publications Office of the European Union, Luxembourg, 2016, ISBN 978-92-79-58916-4, doi:10.2787/625130. <https://ec.europa.eu/jrc/en/publication/eur-scientific-and-technical-research-reports/delivering-eu-food-safety-and-nutrition-2050-future-challenges-and-policy-preparedness>

274 Mylona K, Maragkoudakis P, Mikob L, Bock AK, Wollgast J, Caldeira S, Ulbertha F. (2018) Viewpoint: Future of food safety and nutrition - Seeking win-wins, coping with trade-offs, Food Policy 74 (2018) 143–146.

275 Bock AK, Maragkoudakis P, Wollgast J, Caldeira S, Czimbalmos A, Rzychon M, Atzel B, Ulberth F, 2014. JRC FORESIGHT STUDY Tomorrow's Healthy Society Research Priorities for Foods and Diets. <https://ec.europa.eu/jrc/en/publication/eur-scientific-and-technical-research-reports/tomorrows-healthy-society-research-priorities-foods-and-diets>

276 <https://www.susfans.eu/>

277 JRC 2019-2020 Detailed Work Plan. https://ec.europa.eu/jrc/sites/jrcsh/files/adopted_jrc_2019-20_wp_europa_v2.pdf

278 By candidate for President of the European Commission Ursula von der Leyen. A Union that strives for more My agenda for Europe. Political Guidelines for the next European Commission 2019-2024. https://ec.europa.eu/commission/sites/beta-political/files/political-guidelines-next-commission_en.pdf

279 This Farm to Fork Strategy was published in May 2020, but is not included in this evidence document which contains evidence up to 2 December 2019.

280 Von der Leyen, U, President elect of the European Commission, 2019. Mission Letter, Brussels 10 September 2019. https://ec.europa.eu/commission/sites/beta-political/files/mission-letter-maros-sefcovic-2019_en.pdf

The FAO published in the frame of the Strategic Partnership with the Directorate for International Cooperation and Development of the European Commission a guideline (Food Systems for healthy Diets) to support the use of a comprehensive food system approach for policy makers in countries.²⁸¹

However, a lot of different organisations still have recommended a system-based approach for the EU, such as the EESC (opinion on civil society's contribution to the development of a comprehensive food policy in the EU)²⁸², the WHO (Connecting Food Systems for co-benefits Policy Brief)²⁸³ and IPES (Towards a Common Food Policy for the European Union report)²⁸⁴.

281 FAO, 2018. Food Systems for healthy diets. STRENGTHENING SECTOR POLICIES FOR BETTER FOOD SECURITY AND NUTRITION RESULTS. <http://www.fao.org/3/CA2797EN/ca2797en.pdf>

282 Schmidt, P, European Economic and Social Committee (EESC), 2019. Promoting healthy and sustainable diets in the EU (own-initiative opinion). Reference: NAT/755-EESC-2018-04568. Adopted on 20/02/2019 - Bureau decision date: 12/07/2019. <https://www.eesc.europa.eu/en/our-work/opinions-information-reports/opinions/promoting-healthy-and-sustainable-diets-eu-own-initiative-opinion>

283 WHO Regional Office for Europe, 2018. Hawkes, Parsons. Policy Brief 31: Connecting food systems for co-benefits: How can food systems combine diet-related health with environmental and economic policy goals? http://www.euro.who.int/_data/assets/pdf_file/0007/387070/policy-brief-31-austria-eng.pdf?ua=1

284 IPES Food Panel, 2019. TOWARDS A COMMON FOOD POLICY FOR THE EUROPEAN UNION THE POLICY REFORM AND REALIGNMENT THAT IS REQUIRED TO BUILD SUSTAINABLE FOOD SYSTEMS IN EUROPE. http://www.ipes-food.org/_img/upload/files/CFP_FullReport.pdf

DOMAIN 13 – HEALTH IN ALL POLICIES

This domain concerns the processes that are in place to ensure policy coherence and alignment, and that population health impacts are explicitly considered in the development of EU policies.

HIAP1 There are processes in place to ensure that population nutrition, health outcomes and reducing health inequalities or health impacts in vulnerable populations are considered and prioritised in the development of all EU policies relating to food.

Definitions and scope

- Includes policies, procedures, guidelines, tools and other resources that guide the consideration and assessment of nutrition, health outcomes and reducing health inequalities or health impacts in vulnerable populations prior to, during and following implementation of food-related policies.
 - Includes the establishment of cross-department governance and coordination structures while developing food-related policies.
-

HIAP2 There are processes e.g. Health Impact Assessment's (HIAs) to assess and consider health impacts during the development of other non-food policies.

Definitions and scope

- Includes a government-wide HiAP strategy or plan with clear actions for non-health sectors.
 - Includes policies, guidelines, tools and other resources that guide the consideration and assessment of health impacts prior to, during and following implementation of non-food related policies (e.g. HIAs or health lens analysis).
 - Includes the establishment of cross-department or cross-sector governance and coordination structures to implement a HiAP approach.
 - Includes workforce training and other capacity building activities in healthy public policy for non-health departments (e.g. agriculture, education, communications, trade).
 - Includes monitoring or reporting requirements related to health impacts for non-health departments.
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POLICY EVIDENCE SUMMARY

Health in All Policies at the EU (HIAP 1 and HIAP 2)

The importance of the 'Health in all Policies' principle is highlighted in several EU policy documents and objectives/tasks of EU institutions.

Article 168 of the Treaty on the Functioning of the European Union incorporates health in all policies stating 'A high level of human health protection shall be ensured in the definition and implementation of all Union policies and activities'.²⁸⁵

²⁸⁵ European Union, 2012. Consolidated version of the Treaty on the Functioning of the European Union. OJ C 326, 26.10.2012, p. 47–390. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex%3A12012E%2FTXT>

The Regulation (EU) No 282/2014 of the European Parliament and the Council on the establishment of the third Health Programme (2014-2020)²⁸⁶ also refers to health in all policies in the Annex about Thematic Priorities: 'Promote health, prevent diseases and foster supportive environments for healthy lifestyles taking into account the 'health in all policies' principle'. This principle is also guiding in one of the objectives of the European Health Policy Platform, which is an initiative under the 3rd Health Programme, i.e. 'provide information on other policy areas related to health following the 'Health in All Policies' approach.²⁸⁷

Furthermore, supporting Health in All Policies is an assigned task of the High Level Group on Nutrition and Physical Activity.²⁸⁸ Health in All Policies is also mentioned in the 'Initiatives on Nutrition and Physical Activity' document of DG Health and Food Safety.²⁸⁹ Examples mentioned are DG SANTE collecting best practices and providing input to the discussions of the Fruit, Vegetables and Milk Scheme and the modernisation of the Common Agriculture Policy.

However, other policy documents like the Europe 2020 Strategy do not mention anything about Health in All Policies.²⁹⁰ Also in practice, the health in all policies principle is not really implemented. Examples here are the Impact Assessments, where the Health Impact Assessment part remains voluntary. Every Directorate-General starts a political validation process to decide if an Impact Assessment is required for a certain proposal. When an Impact Assessment starts, DG's have the freedom to choose which impacts to describe, although the quality of each report is checked by an independent Regulatory Scrutiny Board. For the Strategic Environmental Assessments, health is included,²⁹¹ but SEA's are only applied to plans and programmes and not to policies.

In 2018, the European Public Health Alliance (EPHA) and several other health organisations made a joint statement to call on the European Union to do more for health.²⁹² They stated that population health is a precondition for economic prosperity. One of the key asks they made included a call on the EU to develop and routinely deploy a robust Health In All methodology to respect article 168 of the Treaty on the Functioning of the EU.

Impact Assessment of the CAP (HIAP1)

The Impact Assessment of the CAP (report of June 2018), which accompanied the legislative proposals for the CAP Post 2020 in the context of the next Multi Annual Financial Framework (MFF), refers several times to health.²⁹³ The Assessment states, for example, that 'a strong CAP is needed to address societal expectations on food and health' and that 'the CAP is expected to respond better to consumer demands on food and health'. One workshop to collect evidence for

286 REGULATION (EU) No 282/2014 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 11 March 2014 on the establishment of a third Programme for the Union's action in the field of health (2014-2020) and repealing Decision No 1350/2007/EC. OJ L 86, 21.3.2014. pp. 1-13. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32014R0282>

287 <https://webgate.ec.europa.eu/hpfi/>

288 https://ec.europa.eu/health/nutrition_physical_activity/high_level_group_en

289 European Commission, 2019. Initiatives on nutrition and physical activity. https://ec.europa.eu/health/sites/health/files/nutrition_physical_activity/docs/2019_initiatives_npa_en.pdf

290 European Commission, 2010. COMMUNICATION FROM THE COMMISSION EUROPE 2020 A strategy for smart, sustainable and inclusive growth. Brussels, 3.3.2010 COM(2010) 2020. <https://ec.europa.eu/eu2020/pdf/COMPLET%20EN%20BARROSO%20%20%20007%20-%20Europe%202020%20-%20EN%20version.pdf>

291 <https://ec.europa.eu/environment/eia/sea-legalcontext.htm>

292 EPHA, et.al, 2018. Joint Statement Europe let's do more for health. Our vision for health in the European Union. <https://epha.org/wp-content/uploads/2018/04/EU4health-joint-statement.pdf>

293 European Commission, 2018. COMMISSION STAFF WORKING DOCUMENT IMPACT ASSESSMENT. Brussels, 1.6.2018 SWD(2018) 301 final. EUR-Lex: <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=SWD%3A2018%3A301%3AFIN>

the impact assessment had the theme 'Food and related issues' which confirmed that the CAP can help in providing a mix of interventions which influence food consumption because the CAP is well aligned with food safety requirements and already includes schemes that promote healthy diets. The workshop further stated that 'the governance of food systems requires a coordinated approach across policy domains'. Nevertheless health organisations also have their remarks on this IA, saying that "the assessment however is not built on a systematic exposition of the main links between agriculture and public health."²⁹⁴

294 EPHA, 2018. A healthy future needs good impact assessments, today. <https://epha.org/a-healthy-future-needs-good-impact-assessments-today/>

Annex I Definitions

- **Food:** refers to food and non-alcoholic beverages. It excludes breastmilk or breastmilk substitutes.
- **Food environments:** the collective physical, economic, policy and socio-cultural surrounding, opportunities and conditions that influence people's food and beverage choices and nutritional status.
- **Government:** includes any government departments and, where appropriate, other agencies (i.e. statutory bodies such as offices, commissions, authorities, boards, councils, etc).
- **Government implementation:** refers to the intentions and plans of the government and actions and policies implemented by the government as well as government funding for implementation of actions undertaken by non-governmental organisations, academic institutions, private companies (including consultants), etc.
- **Healthy/unhealthy food:** Categorisation of foods as healthy/unhealthy are in accordance with the WHO and EU guidelines. Where it is not clear which category to use, categorisation of foods should be informed by rigorous criteria or the use of a nutrient profiling model.
- **Nutrients of concern:** salt (sodium), saturated fat, trans fat, added sugar.
- **Systems-based approaches:** This may include policies within other domains of health, a social-determinants of health approach, bringing together multiple departments or ministries to approach health and includes multiple levels of government.
- **Policy actions:** A broad view of "policy" is taken so as to include all government policies, plans, strategies and activities. Only current policy actions are considered, generally defined as policy activity of the previous 12 months (except where otherwise specified). A broad view of relevant evidence was taken, to include, inter alia:
 - Evidence of commitments from leadership to explore policy options
 - Allocation of responsibility to an individual/team (documented in a work plan, appointment of new position)
 - Establishment of a steering committee, working group, expert panel, etc.
 - Review, audit or scoping study undertaken
 - Consultation processes undertaken
 - Evidence of a policy brief/proposal that has been put forward for consideration
 - Preparation of a regulatory or economic impact assessment, health impact assessment, etc.
 - Regulations/legislation/other published policy details
 - Monitoring data
 - Policy evaluation report



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