



NORWEGIAN NUTRITION POLICY AND NUTRITION CAMPAIGNS (MARCH 2009)

1. Introduction

The promotion of nutrition policy in any country is based on "a belief in State involvement to solve what is considered to be a social problem". However this involvement is complicated by "the liberal aim of sustaining the autonomy of the individual". This dilemma will influence the role that a state ultimately plays and to what extent information, fiscal and legal measures are applied. With reference to the traditional Scandinavian 'social democratic' solution, based on the belief of obtaining social welfare through market regulation, "decisions are commonly made as negotiated solutions between the state and organised interests". With respect to nutrition, there appears to be agreement within the Scandinavian region that efforts should be widespread so, in spite of conflicts with the agricultural sector, nutritional advice and its relevance for public policy has always been high.

Norwegian nutritional policy and nutrition campaigns have received considerable interest over the years, for several main reasons. Firstly Norway was among the first industrialised country to respond to the call from the World Food Conference in 1974 to produce a nutrition policy³ and its policy is therefore the oldest and best established of the Scandinavian countries. Secondly, the distinguishing feature of its nutrition policy has been its "structural orientation, i.e. towards production and market regulation, as opposed to individual, information-based strategies"⁴. Such policy was possible because of "distinctive Norwegian political traditions, with a heavily regulated agricultural sector, combined with a welfare policy tradition emphasising influence on other sectors"⁵.

2. Changes in the Norwegian Diet

Norwegian nutrition policy has focused extensively on fat reduction and this is where the results have been most positive. Over the past 25-30 years the proportion of fat

¹ Kjaernes, U (2003), Food and nutrition policies of the Nordic countries: how they have been developed and what evidence substantiates the development of these policies?, Proceedings of the Nutrition Society, 62, 563-570, page 563

² Kjaernes, U. (2003), Experiences with the Norwegian nutrition policy, *Appetite*, **41**, 251-257, An Institutional Approach

³ Roos, G. et. al. (2002), Dietary Interventions in Finland, Norway and Sweden: nutrition policies and strategies, *Journal of Human Nutr. Dietet.*, **15**, 99-110, page 102

⁴ Kjaernes, U. (2003), Experiences with the Norwegian nutrition policy, *Appetite*, **41**, 251-257, Abstract

⁵ Kjaernes, U. (2003), Experiences with the Norwegian nutrition policy, *Appetite*, **41**, 251-257, Abstract

in the Norwegian diet has decreased from 40% in 1975 to 34% in 2000 (however, the proportion of saturated fat has remained fairly constant). This decrease has been compensated by an increase in the amount of bread and other grain products and of sugar in the diet. The consumption of vegetables has increased by 52% form 1975 to 2000, while fruit consumption has increased marginally and that of potatoes has decreased⁶.

The impact these changes have had on health is undecided. It is known that the incidence of coronary heart disease (between the ages of 0-79 years) has decreased by 30-40% from 1970 to 1992 (however, it is understood that Finland and Sweden saw larger decreases of 50-60% during this period), but "body weight has increased considerably in this period (men up to 9.1Kg) followed by an increase in type II diabetes"⁷.

3. Norwegian Nutrition Policy - Time-line and Brief Details of Main Nutrition Policies and Initiatives (1960's to present day)

3.1 1960s and 1970s

After World War II, the Nordic countries experienced a sharp increase in the incidence of cardiovascular disease and in 1968 Nordic experts agreed on a redefinition of nutrition recommendations that recognised the association between fat consumption and cardiovascular disease. This "challenged the ...extensive subsidies to the dairy industry...From a status as essential foods, full-fat milk and butter were turned into a nutritional problem"8. Within the setting of controversy between nutrition recommendations and agricultural interests the nutrition recommendations were formulated in the 1976 first white paper from the Ministry of Agriculture, 'Report on Norwegian Nutrition and Food Policy', with goals of fat reduction included but moderated. It was noted as a political success but the policy was quite ambivalent as it tried to "match the needs of improved health through food behaviour changes with those of the (dairy dominated) agricultural sector"9. This first white paper was "closely linked with policies of agricultural self-sufficiency and regional development¹⁰. The policy goals were divided in to four broad categories as follows¹¹:

 Health – encourage healthy dietary habits, with the specific objective of decreasing fat consumption from 42% to 35% of total calorie intake, and a decrease in the ratio of saturated to polyunsaturated fats in the diet from 3.5:1 to 2:1 by reducing consumption of whole milk and margarine. The aim was an increase in the consumption of complex carbohydrates, fish and skimmed milk:

_

⁶ Kjaernes, U. (2003), Experiences with the Norwegian nutrition policy, *Appetite*, **41**, 251-257, Introduction

⁷ Kjaernes, U. (2003), Experiences with the Norwegian nutrition policy, *Appetite*, **41**, 251-257, Introduction

⁸ Kjaernes, U. (2003), Experiences with the Norwegian nutrition policy, *Appetite*, **41**, 251-257, Postwar nutrition policy: the problem of fat

⁹ Kjaernes, U. (2003), Experiences with the Norwegian nutrition policy, *Appetite*, **41**, 251-257, Postwar nutrition policy: the problem of fat

¹⁰ Roos, G. et. al. (2002), Dietary Interventions in Finland, Norway and Sweden: nutrition policies and strategies, *Journal of Human Nutr. Dietet.*, **15**, 99-110, page 102

¹¹ Klepp, K-I and Forster, J.L. (1985), The Norwegian Nutrition and Food Policy, Journal of Public Health Policy, 6(4), 447-463, page 449

- Global Aid to help stabilise world food supply in accordance with the recommendations of the World Food Conference (Rome, 1974) and decrease reliance on imported food which could be diverted to developing countries;
- Food Production Promote consumption of domestically produced food and strengthen national food self-sufficiency; and
- Rural Economy Strengthen the rural economy and halt decline in the number of small farms by making farming more profitable.

These goals were to "be achieved through a variety of implementation strategies to change the process of food production and distribution, and to provide consumers with information and incentives to choose a health-enhancing diet"¹². One of the most visible measures was the "dramatic increase between 1973 and 1980 in the consumer price subsidies on domestically produced food as well as direct support to farmers to expand the total agricultural area"¹³.

3.2 1980s

In 1981 there was a new white paper from the Ministry of Health and Social Affairs, in which the link between nutrition and health was emphasised and placed nutritional problems on the political agenda. The policy stressed "that the alterations in diet should take place by voluntary changes in food habits" and that it was "a public and community responsibility to ensure that circumstances are optimized to enable people to choose a nutritionally favourable diet" A wide range of measures were used to improve the diet including legal, economic, organisational and educational. There was a definite shift "toward implementation strategies emphasizing health education and individual responsibility for change" Nutrition, at this time, was regarded as an issue of knowledge and behaviour rather than a problem of food supply.

In the 1980s' the National Nutrition Council of Norway (established in the 1940s) also moved its agenda towards health by removing industry representatives and keeping only experts within the fields of nutrition and medicine. It also became the National Council for Nutrition and Physical Exercise, thus combining another field of health promotion¹⁶. However this National Council for Nutrition and Physical Exercise has now been replaced by an expert advisory board on nutrition that, along with similar boards, has secretarial functions placed within the Health Authority¹⁷.

In 1982 the <u>'Everyday Food' Nutrition Campaign</u> was launched. The following information regarding the campaign is extracted from Blythe, C.R. (1984) *The Norwegian nutrition campaign: setting goals and assessing results*¹⁸. The dietary goals of the campaign were presented as a series of small changes in the daily meal routine, for example, spreading butter thinly, using low fat varieties of traditional dairy

¹² Klepp, K-I and Forster, J.L. (1985), The Norwegian Nutrition and Food Policy, Journal of Public Health Policy, 6(4), 447-463, page 450

¹³ Klepp, K-I and Forster, J.L. (1985), The Norwegian Nutrition and Food Policy, Journal of Public Health Policy, 6(4), 447-463, page 450

¹⁴ Roos, G. et. al. (2002), Dietary Interventions in Finland, Norway and Sweden: nutrition policies and strategies, *Journal of Human Nutr. Dietet.*, **15**, 99-110, page 102

¹⁵ Klepp, K-I and Forster, J.L. (1985), The Norwegian Nutrition and Food Policy, Journal of Public Health Policy, 6(4), 447-463, page 450

¹⁷ Kjaernes, U. (2003), Experiences with the Norwegian nutrition policy, *Appetite*, **41**, 251-257, Postwar nutrition policy: the problem of fat, New Conditions – a new policy?

¹⁸ Proceedings of the Nutrition Society (1984), 43, 239-241

products. Prohibitions were avoided and a major theme was sensible eating during the week meant you could, more or less, eat what you liked at the weekends. Educational material for young children developed this idea of 'everyday food' and food to enjoy at weekends in books entitled "Best Friends and Saturday Friends".

The campaign was launched with a press conference, television and radio items and articles in the press. Posters were displayed in streets and on public transport. Fact sheets, school books, wall charts and games were produced. The centre piece was the widely advertised book *Everyday Food*.

The campaign placed a strong emphasis on involving people at local levels including worker's organisations, works canteens, institutional caterers, women's organisations, libraries and small food shops — all were encouraged to hold discussion groups, redesign menus, display posters and stock brochures.

3.3 1990s

In the early 1990s the third white paper, *Challenges in Health Promotion and Prevention Strategies*, was published by the Ministry of Health and Social Affairs and again the link between nutrition and health was emphasised. Policy became much more concerned with the prevention of diseases other than just cardiovascular disease, such as cancer, and promoted the consumption of fruit and vegetables. However, "far from being incorporated into a general health promotion agenda...nutrition policy seems to have retained a considerable part of its characteristic approach. Even now, indirect influence on the food market by negotiating with and influencing other sectors and actors is exercised with explicit ambitions...expressed as 'healthy food should be easy to get" 19

In 1990-94, the Norwegian National Association for Public Health together with the National Nutrition Council and other voluntary and professional organisations, implemented a nation-wide campaign called 'Spis med glede' (Enjoy Eating). The campaign specifically targeted the retail sector, school children and the elderly. It focused on the enjoyment of food and highlighted positive messages focusing on the foods people should consume more of. Activities included 'action weeks' for bread, cereal, fish, fruit and vegetables, meat, milk and poultry, which included TV spots, brochures, in-shop demonstrations and exhibitions. The goals of the campaign were to²⁰:

- Stimulate local activities which could change diet and exercise habits;
- Find key groups to disseminate information on diet and health;
- Stimulate collaboration between authorities, voluntary organisations, industry and the media in activities related to improving food habits:
- Increase understanding of the cultural and social meanings of food; and
- Target the retail sector to establish collaboration among food suppliers, wholesalers, retail chains and organisations

¹⁹ Kjaernes, U. (2003), Experiences with the Norwegian nutrition policy, *Appetite*, **41**, 251-257, New Conditions – a new policy?

²⁰ Roos, G. et. al. (2002), Dietary Interventions in Finland, Norway and Sweden: nutrition policies and strategies, *Journal of Human Nutr. Dietet.*, **15**, 99-110, page 104

3.4 Current Policy and Problems

The most recent Norwegian Action Plan on Nutrition (2007-2011) 'Recipe for a Healthier Diet'²¹ has been developed through the collaboration of 12 Ministries. The plan contains specific measures to promote health and prevent illness by changing eating habits in line with nutrition recommendations. Reducing social inequalities in diet is a main goal. The measures emphasise contributions that make it easier to make healthy choices, facilitate healthy meals in kindergarten, schools and among the elderly, and increase knowledge about food, diet and nutrition. The Action Plan is a follow-up of White paper No. 16 (2002–2003) – Recipe for a healthier Norway, and signals a stronger focus on disease prevention work, physical activity and diet. The plan is linked with the Nordic Plan of Action for Better Health and Quality of Life through Diet and Physical Activity, adopted July 2006, and the Action Plan on Physical Activity (2005–2009) Working together for physical activity.

Norway has in recent years seen a new food-related problem in the increase of sugar consumption, especially among young people. In this instance nutritional policy proponents appear to be "directing attention towards individual responsibility …as a question of personal discipline", as "the institutional 'landscapes' of milk, fruits and vegetables do not fit for sugar, and the issue seems to evade an understanding of sugar as a social problem"²².

Also now on the Norwegian agenda is school catering. There are no public school meals in Norway and children bring lunch from home. They can subscribe to milk and in some schools to the delivery of fruit. Through the Action Plan on Physical Activity (2005-2009) schools are considered a key setting for health-promoting interventions and models for school meals and daily physical activity at school are being tested. There are presently ongoing discussions around including one hour of daily physical activity as a national requirement and providing free school meals²³.

4. Concluding Comments

The Norwegian nutrition policy to date has been based on the premise that it is both feasible and worthwhile to declare through political decisions how the population should eat and regulate food supply accordingly and to alter the policy as nutritional advice is updated.

Historically the Norwegian policy is distinguished by its 'structural' orientation towards production and market regulation as opposed to individual, information-based strategies. However, over the past 10-15 years the focus has moved away from agriculture towards the health sector and schools and the present policy is more of a combination of the traditional 'indirect' measures and a health policy. "It is still an open question how this policy can handle the new emerging problems of increasing sugar consumption, overweight etc"²⁴.

With respect to lessons for Northern Ireland, it is not yet clear whether current Norwegian nutrition policy will manage to stem the rise of obesity in Norway.

http://www.regjeringen.no/upload/HOD/Dokumenter%20FHA/SEM/Kostholdsplanen/IS-0238%20kortversjon%20eng.pdf

²² Kjaernes, U. (2003), Experiences with the Norwegian nutrition policy, *Appetite*, **41**, 251-257, New Conditions – a new policy?

²³http://www.euro.who.int/eehc/implementation/20071218_28

²⁴ Kjaernes, U. (2003), Experiences with the Norwegian nutrition policy, *Appetite*, **41**, 251-257, Final Comments

Although not yet at the level of that in the UK, the growing obesity epidemic "has arrived in Norway" as "in 1984 the obesity rates were eight percent for men and nine percent for women [and] the figures from 2000-2003 show a rate of 19 percent for men and 16 percent for women"²⁵.

Norway's historically successful nutrition policy was first developed in the 1970's as a direct response to the rising levels of cardiovascular disease and the result was a shift in the national diet to one including firstly less fat and subsequently more fruit and vegetables. However, as stated above it is only in recent years that the nutrition policy has moved towards a health promotion agenda and is yet to be determined if it will succeed in tackling the newest dietary problems in Norway of increased sugar consumption and rising levels of obesity.

Despite not being designed specifically to tackle obesity, there may be aspects of the successful Norwegian nutrition campaigns of the 1980s (Everyday Food Campaign) and the 1990s (*Spis med glede*) which are transferable to a Northern Ireland context. Both campaigns focused on very positive messages rather than prohibitions, took a wide cross-sectoral collaborative approach, which involved the retail sector and industry, and had a strong emphasis on involving people at local levels.

November 2009

²⁵ One in Five Too Fat, Aftenposten, 04/01/07 www.aftenposten.no/english/local/article1588576.ece