Norwegian National Action Plan for a Healthier Diet – an outline

Healthy diet, meal enjoyment and good health for everyone!
The Magic Meal
Eating involves more than just stopping the rumbling in your stomach.
Good food and good meals help us to play and learn.
Good food and good meals help us to lift heavy things and to think clearly.
Good food and good meals help people to enjoy each other's company.

Are you struggling with a poor school environment?
Let the children make good food and enjoy it together.

Is there a lot of sick leave at your workplace?
Create a pleasant cafeteria that encourages employees to sit down together.

Are there people coming from far away for a meeting to discuss challenging issues?
Serve food and drink before the discussions begin.
Do residents at the nursing home seem to have no appetite when dinner is served?
Serve them when they're hungry instead.

Good food and good meals don't come about by themselves.
That's why we need a plan of action for a better diet.
This plan is about nourishment and nutrition.
It deals with food that is good for the body and food that is good for the planet.
It deals with food that swims, food that flies, and food that does neither one.

It involves to make the healthier choices the easier choices.
It involves to make our choices more healthy.
It involves the magic that happens when we sit down at the table to eat.
In preschool. At school. At work. In nursing homes. In hospitals.

Good food and good meals can't solve all our problems.
But they will make it easier to solve them.

And it stops that rumbling in your stomach.

Bent Høie
Minister of Health and Care Services

Vidar Helgesen
Minister of Climate and Environment

Per Sandberg
Minister of Fisheries

Jon Georg Dale
Minister of Agriculture and Food

Per-Willy Amundsen
Minister of Justice and Public Security

Torbjørn Røe Isaksen
Minister of Education and Research

Solveig Horne
Minister of Children and Equality

Sylvi Listhaug
Minister of Immigration and Integration

This is a short version of the Norwegian National Action Plan for a Healthier Diet (2017–2021), which was launched in March 2017. The aim is that the plan will contribute to a healthier diet in the population, as well as strengthen the importance of the social and cultural functions of the meal.
The Norwegian National Action Plan for a Healthier Diet involves:

- **Meal enjoyment, and a tasty and healthier diet:** Healthy food is good for physical and mental health. A meal can create contentment through good flavours and good company.

- **Healthy and easy choices:** It should be easy to choose healthy, good and reasonably priced food. A sustainable and environmentally friendly diet is recommended.

- **Communication and knowledge:** The communication on food, diet and health aimed towards the public, should be clear, consistent and easily understood.

- **Food, meals and nutrition in health and care services:** Food is important throughout the course of our lives – for our quality of life, physical and mental health, and to help us to be active in our daily lives.

- **Research, development and innovation** should contribute to public health work and health care services of high quality. Knowledge is essential to reduce social inequalities in health and to enhance better public health.
Our goal is a healthy diet, meal enjoyment and good health for everyone!


- Norway will become one of the three countries in the world with the highest life expectancy
- We will have added years of life with good health and well-being for all
- We will reduce social inequalities in health
- We will create a society that promotes health for the entire population

Goals in the Action Plan

Vision

- Create a society that promotes meal enjoyment, a healthy diet and good health for the entire population.

Main goal

- A healthy and varied diet for the entire population, regardless of gender, age, geographical location, socioeconomic status, cultural background, level of ability, religion and life philosophy.

Subgoals

- Facilitate changes in diet in accordance with advice from the health authorities.
- Reduce social inequality in diet
- Enhance knowledge of the correlation between diet and physical and mental health
- Promote the development of safe and healthy foods, and strive for healthy and environmentally friendly practices in the production and consumption of food
- Enhance and assuring the quality of efforts for healthier food, meals and nutrition in the health and care services

The World Health Organization’s global targets to reduce noncommunicable diseases (NCD)

At the World Health Assembly in 2012, the World Health Organization (WHO) adopted a resolution for a 25 % reduction in premature mortality from noncommunicable diseases (NCDs), such as cardiovascular diseases, cancers, respiratory diseases and diabetes by 2025. Global targets that are relevant for the current Plan of Action include:

- Halt the rise in diabetes and obesity
- A 10 % relative reduction in the harmful use of alcohol
- A 10 % reduction in the prevalence of insufficient physical activity
- A 30 % reduction in the prevalence of tobacco use
- A 25 % reduction in the prevalence of raised blood pressure
- A 30 % reduction in the mean population intake of salt/sodium

The World Health Organization’s global targets to improve maternal, infant and young child nutrition

In 2012, the World Health Organization determined six global targets for improving maternal, infant and young child nutrition, by 2025. The two most relevant targets in a Norwegian context include:

- Objective 4. No increase in childhood overweight
- Objective 6. Increase the rate of exclusive breastfeeding in the first 6 months up to at least 50 %.
International cooperation

Norway participates in an international cooperation to promote a healthy diet and nutrition. The United Nations (UN) has declared this decade (2016–2025) as a “Decade of Action on Nutrition”. This Plan of Action will provide guidelines for national implementation, including the WHO Action Plan for the Prevention and Control of NCDs 2013–2020.

The Plan of Action will also contribute towards achieving the UN's Sustainable Development Goals. More sustainable and diversified consumption and production of food is necessary in order to nourish more people while nurturing the planet.

As early as 1972, Norway entered the International Covenant on Economic, Social and Cultural rights. Article 11 recognises the right of everyone to adequate food. This involves the right to a quantity and quality of food that is sufficient to satisfy the dietary needs of individuals, as a basis for an active life and good health. This Covenant was incorporated into Norwegian law through the Human Rights Act of 21 May 1999.

As described in the UN Guiding Principles on Business and Human Rights (UNGP) of 2011, the states have a duty to protect human rights and companies have a responsibility to respect them.

To achieve the UN’s Sustainable Development Goals

The UN’s 17 Sustainable Development Goals is a set of goals to end poverty, protect the planet and ensure prosperity for all by 2030.

The National Action Plan for a Healthier Diet will contribute towards achieving these goals.

The following three goals are essential to the National Action Plan

Goal 2. End hunger, achieve food safety and improved nutrition, and promote sustainable agriculture (including fisheries and the aquaculture industry)

Goal 3. Ensure healthy lives and promote well-being for all at all ages

Goal 12. Ensure sustainable consumption and production patterns
Why do we need a National Action Plan for a Healthier Diet?

Healthy food and meals are essential for good physical and mental health, while an unhealthy diet is one of the major risk factors for disease and premature death. The Action Plan for a Healthier diet also emphasises the importance of the social functions of a meal.

The aim is that the Action Plan will contribute towards a healthier diet and more enjoyable mealtimes for all. To ensure success, efforts will be required from all sectors, with cooperation from public, private and voluntary sectors.

Despite several positive trends in the food consumption in Norway in recent years, large parts of the Norwegian population still have a low intake of vegetables, fruits, fish and whole-grain foods and have a high intake of saturated fat, sugar and salt.

Another challenge involves those who eat too little, and who are therefore at risk of malnutrition and undernutrition, which is the case with many chronically ill and elderly individuals.

An unhealthy diet is associated with social inequality, and may lead to disease and a poor quality of life.

Non-communicable diseases (cardiovascular diseases, cancers, chronic respiratory diseases and diabetes) are responsible for more than 50% of all deaths occurring before the age of 75 in Norway. An unhealthy diet is one of the greatest risk factors in developing these diseases. Diet alone may be the cause of 8000 deaths per year in Norway.

If the population follows national dietary recommendations, both women and men could gain two extra healthy years of life, and save significant expenditures for the society.

The measures in this Action Plan are directed towards the entire population by facilitating healthy and easy choices for everyone. The Plan focuses particularly on children, adolescents, young families and senior citizens.

Key figures regarding the Norwegian diet

Vegetables, fruits and berries
34 % of men and 41 % of women eat the recommended amount of fruit and berries.

15 % of men and 13 % of women eat the recommended amount of vegetables.

Whole grain foods
25 % of adults eat the recommended amount of whole grain foods.

Fish
39 % of men and 31 % of women eat the recommended amount of fish.

24 % of men and 21 % of women eat the recommended amount of fatty fish.

Meat
45 % of men and 67 % of women eat the recommended amount of red meat.

25 % of men eat twice as much red meat as recommended.

Milk
The consumption of low-fat and skim milk has been reduced by 15 % from 2005 to 2015. The consumption of cheese has increased by more than 7%.

Breastfeeding
95 % of infants are breastfed at the age of 2 weeks of age, 81 % at 4 months, 55 % at 9 months, and 35 % at 12 months of age.

Sugar
55 % of 9 and 13 year olds have a higher consumption of sugar than recommended.

More than 20 % of adults have a higher consumption of sugar than recommended.

Saturated fat
85 % of 9 and 13 year olds have a higher consumption of saturated fat than recommended.

Nearly 80 % of adults have a higher consumption of saturated fats than recommended.

Salt
The mean intake of salt in the population is nearly twice the recommended amount.

Alcohol
The consumption of alcohol constitutes approx. 2 % of the total intake of energy, although this varies considerably.

Sources: Norwegian Directorate of Health, Norwegian Institute of Public Health

Photo: foodiesfeed.com
### Quantitative targets and indicators 2021

<table>
<thead>
<tr>
<th>Population Level</th>
<th>Target</th>
<th>Starting point</th>
<th>Level 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>A higher proportion has a diet consistent with the dietary guidelines of the Norwegian Directorate of Health</td>
<td>Increase the proportion</td>
<td>Different needs for changes depending on the various elements of dietary guidelines</td>
<td></td>
</tr>
<tr>
<td><strong>Increased consumption of:</strong></td>
<td><strong>A 20 % increase in consumption of each of the food groups</strong></td>
<td><strong>Wholesale figures</strong></td>
<td></td>
</tr>
<tr>
<td>• Vegetables</td>
<td></td>
<td>78 kg</td>
<td></td>
</tr>
<tr>
<td>• Fruits and berries</td>
<td></td>
<td>90 kg</td>
<td></td>
</tr>
<tr>
<td>• Fish</td>
<td></td>
<td>49 kg (whole)</td>
<td></td>
</tr>
<tr>
<td>• Whole grain foods</td>
<td></td>
<td>Data lacking</td>
<td></td>
</tr>
<tr>
<td><strong>Reduced dietary content of:</strong></td>
<td><strong>Added sugar: 11 percentage of energy (E%)</strong>*</td>
<td><strong>Approx. 10 g per day</strong></td>
<td></td>
</tr>
<tr>
<td>• Added sugar</td>
<td></td>
<td><strong>13 E %</strong></td>
<td></td>
</tr>
<tr>
<td>• Saturated fats</td>
<td></td>
<td><strong>14 E %</strong></td>
<td></td>
</tr>
<tr>
<td>• Salt</td>
<td></td>
<td><strong>Approx. 8 g per day</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Infants</strong></td>
<td><strong>Increased consumption of:</strong></td>
<td><strong>Data lacking</strong></td>
<td></td>
</tr>
<tr>
<td>Higher proportion of infants who are:</td>
<td></td>
<td>94 kg</td>
<td></td>
</tr>
<tr>
<td>• Exclusively breastfed</td>
<td></td>
<td>108 kg</td>
<td></td>
</tr>
<tr>
<td>• Breastfed</td>
<td></td>
<td>59 kg</td>
<td></td>
</tr>
<tr>
<td><strong>Children and adolescents</strong></td>
<td><strong>Lower proportion of 15-year olds who:</strong></td>
<td><strong>3</strong></td>
<td></td>
</tr>
<tr>
<td>a) eat sweets 5 times a week or more</td>
<td></td>
<td>a) 17 % b) 19%</td>
<td></td>
</tr>
<tr>
<td>b) drink soft drinks/sweetened beverages once a week or more</td>
<td></td>
<td>a) 8,5 % b) 9,5 %</td>
<td></td>
</tr>
<tr>
<td><strong>Higher proportion of 15-year olds who eat:</strong></td>
<td><strong>50 % increase</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a) vegetables</td>
<td></td>
<td>a) 32% b) 36%</td>
<td></td>
</tr>
<tr>
<td>b) fruits</td>
<td></td>
<td>a) 48 % b) 54%</td>
<td></td>
</tr>
<tr>
<td><strong>Higher proportion of 15-24 year olds who eat:</strong></td>
<td><strong>20 % increase</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a) fish for dinner at least once a week</td>
<td></td>
<td>a) 71% b) 7 % (tinned mackerel in tomato sauce)</td>
<td></td>
</tr>
<tr>
<td>b) fish spread on bread (in sandwiches) at least three times a week</td>
<td></td>
<td>a) 85 % b) 9 %</td>
<td></td>
</tr>
<tr>
<td><strong>Higher proportion of 15-year olds who eat breakfast every morning</strong></td>
<td><strong>30 % increase</strong></td>
<td></td>
<td>59 %</td>
</tr>
<tr>
<td><strong>No increase in the proportion of children and adolescents who are overweight</strong></td>
<td><strong>0 %</strong></td>
<td><strong>77 %</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Other</strong></td>
<td><strong>Higher proportion are aware of the dietary guidelines</strong></td>
<td><strong>46 %</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Higher proportion stating that Keyhole labelling makes it easier for them to choose healthier options</strong></td>
<td><strong>60 % answers “to a fairly large extent” or “to a very large extent”</strong></td>
<td><strong>46 %</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Higher proportion stating that they are interested in reducing their salt intake</strong></td>
<td><strong>80 % are interested in reducing salt intake</strong></td>
<td><strong>49 %</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Increased number of Keyhole products</strong></td>
<td><strong>Yearly increase in number of Keyhole products</strong></td>
<td><strong>Figure in 2016: 1419</strong></td>
<td></td>
</tr>
</tbody>
</table>

1 Percentage of energy (E%): Proportion of the total energy content in the diet from each of the energy yielding nutrients (fat, protein, carbohydrates and alcohol)
2 Recommended max. 10 E%
3 Average of boys and girls
Healthy and easy choices

It should be easy to choose healthy, good and reasonably priced food. All sectors and businesses must cooperate in changing Norwegian dietary habits in a healthier direction. Public authorities, private actors and organisations must work together in order to make changes in the diet of the population.

Cooperation with the food industry
In 2014 the Minister of Health and Care Services has established a high level group comprised of major actors in the food industry, to agree on measures that might contribute towards a healthier diet in accordance with the dietary guidelines, and to help achieve the targets of the World Health Organization regarding the reduction of noncommunicable diseases. Cooperation has begun on reducing salt, saturated fat and added sugar in foods, as well as facilitating an increased consumption of fruits, vegetables, whole grain foods and fish.

In 2016, the Minister of Health and Care Services signed a letter of intent with different actors in the food chain. By spring 2017 more than 70 different businesses have signed up. The aim is that even more companies will sign the agreement in the near future.

In the agreement, the parties commit to working towards achieving the following shared targets:

- The average intake of added sugar shall be reduced by at least 12.5% by 2021. This means to reduce the percentage of energy from sugar from 13 to 11 by 2021.
- The average intake of saturated fat shall be reduced to 13 percentage of energy by 2018. In 2015 the percentage of energy was 14.
- The average intake of salt shall be reduced to 8 grams per person per day by 2021. The intake in 2010 was 10 grams.
- There shall be an increase in the consumption of vegetables, fruits, whole grain foods and fish, in line with the targets in the national action plan.

The collaboration will be evaluated.

Photo: Ørjan Bertelsen/Norwegian Seafood Council
**Food and beverage marketing directed to children**

The Food and Drink Industry Professional Practices Committee (MFU), a self-regulatory committee, was established in 2014 and evaluated in 2016. Results of this evaluation shall be followed up. A Nordic protocol to monitor the marketing of unhealthy foods and beverages directed to children and young people was developed in 2016. Norway has participated actively in the international work on restrictions on marketing of foods and beverages to children.

In 2016, the World Health Organization (WHO) passed a resolution and Guidance on Ending the Inappropriate Promotion of Foods for Infants and Young Children. The implementation of these guidelines will be evaluated as part of the action plan.

**Government initiatives**

- Follow up a comprehensive and long-term letter of intent with the food industry
- Continue and develop the salt partnership
- Reduce the intake of saturated fat and sugar
- Continue and develop the Keyhole label as a brand system
- Follow up work on the marketing of unhealthy foods and beverages to children
- Promote the increased consumption of vegetables and other plant-based foods
- Promote the inclusion of fish and seafood in the diet
- Ensure that the population has a sufficient intake of iron and vitamin D
- Ensure proper attention to nutrition in the health enterprises and other public bodies
- Stimulate food production, product development and innovation

---

"Fiskesprell"

"Fiskesprell" ("Fish Fun") is a national dietary programme intended to increase the intake of seafood among children and adolescents. Together with staff from schools and preschools, efforts will be made to promote seafood as a natural choice for meals.
Sustainability

The National Action Plan for a Healthier Diet shall assist in promoting a sustainable and environmentally friendly development. This involves ensuring the needs of the current population, without destroying opportunities for generations to come. A diet consisting of more fruits and vegetables, more fish, and less meat, is a more sustainable diet.

This is not simply about what we eat, but also about the food that we don't finish. One-third of all food produced in the world is never eaten. This is due to food loss and waste at all stages, from production to consumer. If we can reduce the loss and waste of food, we can ensure food for everyone, without increasing production. This puts less strain on the climate and environment.

Authorities, manufacturers, distributors and consumers must all take responsibility to ensure a sustainable development. The government will follow up these efforts with an agreement with the food industry to reduce food loss and waste. The government aims to reduce greenhouse gas emissions from agriculture, increase carbon capture and storage and climate-friendly technologies, and maintain agricultural areas and adequate resource base.

We shall continue our efforts for a sustainable management of the ocean and marine resources through quota regulations, technical regulations for fishing, structural measures and international cooperation.

Food that's good for the body is good for the planet! Dietary guidelines by the Norwegian Directorate of Health facilitate a positive and sustainable development. The Directorate will consider the need to adjust the dietary guidelines to adequately safeguard the perspective of sustainability.

How to get less food waste

• Plan your shopping and use a shopping list.
• Clean in your refrigerator. Then you'll know what you have.
• Store your food properly.
• Remember to maintain a fridge temperature of 2 to 4 degrees C.
• Don't immediately throw out food after the “used by” date. Check the food to see if it's still good.
• Cool your food quickly and either freeze or refrigerate the leftovers.
• Store leftovers in sealed storage containers.
• Freeze bread that won't be eaten the next day.
• Let Thursday be “Leftover Thursday”. Use up your leftovers before shopping for the weekend.
• Remember that wilted lettuce will perk up after being dipped in icy water, and soft tomatoes can be used to make tomato sauce.

Source: Matvett.no
Meal enjoyment and a tasty and healthy diet for everyone

Food and meals are important throughout the course of life - for children in preschool, kids at school and in after-school programmes, adults at work, and for seniors in nursing homes or in their own homes.

The nutritional value of what we eat is important, but it is just as important to make mealtime a meeting place for social interaction and inclusion.

Children and adolescents are prioritised in the ten-year national programme for community public health work. This programme is intended to strengthen municipal efforts to improve mental health and quality of life. The Ministry of Health and Care Services, the Norwegian Association of Local and Regional Authorities (KS), the Norwegian Institute of Public Health, and the Norwegian Directorate of Health are all working together on this programme.

Tasty food, good meals and a good nutrition situation are essential for health and quality of life among seniors. Elderly individuals are just as different from one another as individuals in other groups, with different needs and preferences for what they like to eat, when they want to eat, and with whom they wish to share a meal. Many seniors enjoy combining meals with social activities, also across generations.

Government initiatives

- Promote good food and mealtime habits in preschools.
- Promote good meals and meal schemes in schools and after-school programmes.
- Help to ensure that the health authorities’ recommendation of 20-minute meals is carried out at school.
- Mobilise children as agents of change for food enjoyment and a healthy and sustainable diet.
- Enhance practical skills.
- Motivate for enjoyment of food and food care for seniors.
- Include food and meals as measures to promote a sense of community and to prevent loneliness.
- Healthy choices at the workplace and in other food service venues.

Diet and mental health

A healthy diet is essential for physical health, but has also importance for mental health and quality of life. The Action Plan has included this topic, which has rarely been addressed.

A growing body of research indicates that the dietary guidelines to promote health and prevent lifestyle diseases also apply to good mental health. However, we also know that mental illness has an impact on our lifestyle habits, and that a poor diet can have an impact on the course of mental illness. Individuals with severe mental illnesses have a significantly shorter life expectancy than the general population. The reasons for this are complex, but lifestyle habits such as little physical activity and poor nutrition are among the factors that may have an impact.
Communication and knowledge

Information and communication efforts shall contribute towards greater knowledge of food, diet and health in the population. A key task for health authorities is to get through to the entire population with clear, easily understood and straightforward information about diet and nutrition.

Children and adolescents, and some immigrant groups may be difficult to reach. In order to reach out to those who do not actively seek information about diet and health, it is necessary to consider new methods and channels of communication.

The Norwegian health authorities have launched a long time communication effort on nutrition and diet; the campaign “Small change, big difference”. The campaign promotes the idea that small adjustments in everyday life can make a big difference to health in the long term.

The campaign aims to increase knowledge of – and confidence in the dietary recommendations, while at the same time showing how they can easily be translated into everyday habits. The communication aims at being inspiring, informative and feasible for everyone – not moralizing.

Government initiatives

• Develop tools and resources for the subject of food and health in primary and lower secondary school, and contribute towards enhanced competency among teachers.
• Continue and develop the communication initiative “Small steps, big difference”.
• Further develop communication that supports efforts to better enable healthy choices.
• Further develop and distribute existing informational material about food and nutrition, for use by municipalities in their efforts to help refugees and immigrants.
• Introduce self-catering and create a cookbook that supports healthier food in prisons.
Ung.no (Youth.no) is Norway's largest information website directed at youth, with more than 800,000 users per month. Ung.no is a low-threshold gateway to public information services. This service is operated by the Norwegian Directorate for Children, Youth and Family Affairs (Bufdir).

The website provides quality assured articles and an anonymous question & answer service that responds to questions about different topics, ranging from choice of education to initial military service, youth rights and falling in love. Diet and nutrition is a separate topic.
MiRA Resource Centre for Women from Minority Groups

The MiRA Resource Centre for Women from Minority Groups offers training courses for mothers who would like to act as advisors for other mothers in their local community. The women participate in suggesting, developing and planning activities and topics for these courses. Health and nutrition are among the main topics. The courses also address the rights of the child, prevention of violence in close relationships, occupational rights and physical fitness training. The women learn more about the contents of various foods, how to make healthy choices, the importance of taking care of themselves in a hectic everyday life, and dealing with stress.

Canteen course “Påfyll” ("Replenish")

The Norwegian Directorate of Health has developed the course “Påfyll” ("Replenish"), together with the Agricultural Information offices and the Norwegian Seafood Council. This course combines food preparation with food theory, and is intended to inspire those working in cafeterias or food services in lower secondary schools to prepare more appealing and healthy food for pupils. The course also emphasises the important role of cafeteria employees in the social life of pupils at the school. A course brochure with recipes has been created for school cafeterias, and e-learning tools are posted on the websites of the National Centre for Food, Health and Physical Activity.
Food, meals and nutrition in health and care services

Nutrition is an essential part of treatment and follow-up in all health and care services. A healthy diet is important for quality of life, physical and mental health, and for the ability to stay active in everyday life.

Malnutrition reduces the immune response, and can increase the risk of complications, reduce physical and cognitive function, and lead to an increased risk of mortality.

“Live well throughout your life” – Creating a quality reform for senior citizens

To ensure that the basic needs of senior citizens are being met, in terms of food, activity and socialisation, the government will initiate work on a reform. The purpose of the reform is to ensure additional years of healthy life and greater mastery, and to ensure that the elderly feel secure that they are receiving appropriate and timely assistance to meet their health and social needs. Food and meals will be one of four primary areas.

Government initiatives

- Enhance competency regarding nutrition, food and meals throughout health and care services, through measures such as “Competence Plan 2020”.
- Follow up development of appropriate tools, guidelines and quality indicators.
- Implement the National guidelines on infant nutrition.
- Promote, support and protect breastfeeding, through the Baby-Friendly Hospital initiative and The Baby Friendly Initiative in Community Health Services
- Follow up efforts towards a comprehensive nutritional strategy in the health enterprises.
- Promote good measures on diet and nutrition in community health and care services.
- Follow up measures on nutrition in services directed at persons with intellectual disabilities.
- Ensure that nutritional considerations are included in health and social care services for mental health and substance abuse disorders.
- Follow up dietary measures as part of the National Guideline on Dental Health Services for Children and Adolescents.

Photo: Ministry of Health and Care Services
Oslo municipality: Food in housing for adults with intellectual disabilities

Personnel in residential facilities for adults with intellectual disabilities have requested courses in practical cooking. In 2012, Oslo municipality carried out one-day courses in practical cooking in cooperation with Oslo and Akershus University College. This measure has been carried forward in cooperation with Etterstad upper secondary school, and is part of Oslo municipality’s initiative entitled “Initiative for Better Nutrition”. By the end of 2016, 227 employees from approximately 70 residential facilities in all districts of the city had participated in the cooking courses. Gatherings have also been held, were personnel could share experiences regarding good nutritional practices. An evaluation indicated that the participants were very pleased with the content of the courses, and nearly all of them would recommend that their colleagues participate in similar courses.

Sami food traditions in nursing homes

The Centre for Development of Institutional and Home Care Services for the Sami population has asked if it might be possible to enhance the diet of Sami patients in municipal institutions and residential care homes. Personnel in seven Finnmark municipalities have replied to the questionnaire concerning Sami food traditions at their institution. The results indicate that personnel are interested in offering such meals, but that it was not routine practice to serve Sami food on a daily basis. It is, however, possible to offer patients food from their local community, prepared in a Sami manner. The project group recommends that the Centre for Development and the municipalities pursue this issue, and place greater focus on how institutions can grant the patients’ meal wishes. The report “Is it necessary and possible to enhance Sami food traditions at municipal nursing homes and residential care housing in Sami settlement areas” is available online.
The Norwegian National Advisory Unit on Breastfeeding (NKA) conducts research, participates in the development of national guidelines, assesses clinical issues regarding breastfeeding, and offers courses for, and supervision of healthcare personnel.

The NKA is responsible for work related to the Baby-friendly Hospital Initiative (BFHI) in Norway, and The Baby-friendly Initiative in community health services.

In 1991, the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) launched the Baby-Friendly Hospital Initiative (BFHI) to promote breastfeeding and early close contact between mothers and their infants at hospital maternity units. Norway adopted this initiative in 1993 with the Mother-Baby-Friendly Initiative. In order to be an approved Mother-Baby-Friendly hospital, a hospital must meet the requirements included in WHO/UNICEF's ten steps for successful breastfeeding. This professional standard is well-documented in WHO's report “Evidence for the ten steps to successful breastfeeding”, and has had a significant effect. Standards for neonatal units and the community health services have been developed based on the Baby-friendly Initiative.

40 out of 46 maternity units in Norway have been designated Baby-Friendly. More than 90 percent of all births in the country take place in these units.

In 2016, 110 out of 428 municipalities were designated as Baby-Friendly community health centres. More than half of the nation's infants and small children participate in the routine preventive programme offered by the community health centres.
Research, development and innovation

We need good monitoring systems in order to follow and describe changes in the Norwegian diet over time, and the relationship between dietary risk factors and health problems. Research, development and innovation will contribute towards high quality public health work and healthcare services. It will give us greater knowledge of how to reduce social inequality in health, and what is needed to give the population additional years of life with good health and well-being.

The National Nutrition Council advises the Norwegian Directorate of Health on matters regarding diet, nutrition and health. The Norwegian Scientific Committee for Food Safety (VKM) carries out independent risk assessments for the Norwegian Food Safety Authority (Mattilsynet) across the Authority’s field of responsibility as well as environmental risk assessments.

Government initiatives

• Follow and describe changes in the Norwegian diet over time. To further develop the food composition table, and determine whether to establish systems for keeping up with changes in declarations, volume and sales over time.
• Develop and implement food, nutrition and health indicators.
• Promote research on food, nutrition and health.
• Follow up the food and health section of the government’s plan of action for the implementation of Health&Care21 (HelseOmsorg21). Acquire more knowledge of, and highlight the relationship between mental health and diet.
• Enhance competency with respect to the effect of measures and behavioural economics.

The APPETITE App

Tablet applications can strengthen dietary measures by showing people what they are actually eating and drinking. They can also help to prevent weight loss and other problems that may ensue after falls, cognitive decline or loneliness. The University of Oslo has created an app called APPETITE, and is testing it out in four municipalities: Oslo, Tvedestrand, Bærum and Drammen.
Dietary guidelines by the Norwegian Directorate of Health

• Enjoy a varied diet with lots of vegetables, fruit and berries, whole-grain foods and fish, and limited amounts of processed meat, red meat, salt and sugar.

• Maintain a good balance between the amount of energy you obtain through food and drink and the amount of energy you expend through physical activity.

• Eat at least five portions of vegetables, fruit and berries every day.

• Eat whole grain foods every day.

• Eat fish two to three times a week. You can also use fish as a spread on bread.

• Choose lean meat and lean meat products. Limit the amount of processed meat and red meat.

• Include low-fat dairy products in your daily diet.

• Choose edible oils, liquid margarine and soft margarine spreads instead of hard margarines and butter.

• Choose foods that are low in salt and limit the use of salt when preparing food and at the table.

• Avoid foods and drinks that are high in sugar.

• Choose water as a thirst-quencher.

• Be physically active for at least 30 minutes each day.

Look for the Keyhole when shopping for food.

Source: Norwegian Directorate of Health