

Belgian comments on the WHO Draft Strategy on Diet, Physical activity and Health
(documents EB113/44 and EB113/44 add. 1)

Belgium is pleased with the opportunity to comment on the WHO draft Global Strategy on Diet, Physical Activity and Health, as it was decided by the recent WHO Executive Board meeting.

Belgium congratulates the secretariat for the work carried out so far. Belgium finds the Strategy timely and important, and looks forward to adoption of the Strategy at the World Health Assembly in May 2004 and to its effective implementation afterwards.

Belgium agrees with the background of the Strategy and stresses the need for it. The problem is great and the public health potential of a sound and combined Strategy on diet *and* physical activity is important. Due to the increasingly international and global features involved, international collaboration is needed.

The Background to the Strategy expresses the need for global collaboration in order to tackle the public health problem of noncommunicable diseases related to diet and physical activity. Noncommunicable chronic diseases like cardiovascular diseases, diabetes, cancer and respiratory diseases account for 59% of the 56.5 million disease-related deaths annually, and much of the global disease burden is related to diet. In Belgium, 2/3 of the mortality is due to noncommunicable diseases (cancer, cardiovascular diseases and diabetes). Heart disease is the major cause of death in people older than 65. In men younger than 65, 30 % of the mortality could be avoided by primary prevention, mainly by tobacco control and changes in dietary habits; in women this is 16 %. The global leadership by WHO is welcome to support the efforts in Member States.

Many efforts on health promotion are already done at different levels: healthy schools, community interventions, media campaigns... However, the prevalence of obesity is also in our country still increasing, with one in three men and one in four women being overweight now, and subsequently an increase in related comorbidities. Thus, Belgium wants to emphasize that further work is needed to promote healthy diets and physical activity in a more coordinated way, in order to prevent obesity, diabetes, cardiovascular diseases and other diet-related diseases. In the development of such a national action plan a global WHO Strategy would be of great support.

Relating to the issues discussed at the Executive Board, Belgium wants to make the following comments:

Concerning the scientific base, Belgium – although recognizing that further research is needed since science base is never complete – finds that the evidence shown constitutes a reliable base for the needed action.

The recommendations formulated in the WHO/FAO 916 report fits in with the Belgian recommendations. Furthermore the Strategy gives a policy framework to implement in Member States the nutrient and food based recommendations that have been nationally agreed upon.

The discussion at the Executive Board touched the question of individual responsibility. Belgium naturally recognizes the importance of individual responsibility, but emphasizes that public strategies and actions are needed to make the healthier choices the easy ones and more accessible for everyone. This is especially important for children who cannot yet decide for themselves. Parents, school authorities and other adults have the responsibility to decide for the children, whose future calls for healthy environments, which should also promote physical activity in everyday life. In health promotion and public health policy both incentives and restrictive measures are needed, in a sound balance. Belgium finds the proposed Strategy to be balanced, and allowing Member States to adapt measures as they fit their particular situation.

The Executive Board discussion also touched sensitive issues as taxation, pricing and subsidies. It is well known that people in low income groups are at the highest risk for noncommunicable diseases. Unhealthy food items are often cheaper than healthier foods. While insisting on the necessity of education and labelling, Belgium notes that the option of pricing policy might therefore be relevant to some countries and situations.

At the Executive Board discussion questions were also raised in relation to the reference to Codex Alimentarius. Belgium wants to refer to the WHA2003 resolution (WHA 56.23) on the topic: “Urges Member States : (2) to make full use of Codex standards for the protection of human health throughout the food chain, including assistance with making healthy choices regarding nutrition and diet;” and finds that the draft Strategy is in accordance with this.

In the discussion it was also mentioned that the Strategy does not address undernutrition and micronutrient deficiencies. WHO has for years been working on these issues and much further work is certainly needed. However, what is urgently needed is a complementary Strategy addressing diet and physical activity to help control the chronic diseases. It should be emphasized that the problem of noncommunicable diseases is also of increasing importance in developing countries, and that the proposed Strategy, when successfully applied, will also help reduce many deficiencies and add to overall sound nutrition policies.

Once more, Belgium expresses its gratitude for the possibility to comment and will be happy to be involved in the work of WHO to promote a healthy diet, physical activity and health and to prevent and reduce noncommunicable diseases.

Brussels, February 27, 2004