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What we are talking about in this presentation

- 1. Focus on data on childhood overweight and obesity in the Countries of European Mediterranean Area and in Italy
- 2. Focus on public health policies (Ministry of Health-MoH)
- 3. Public health policies for Mediterranean diet (MD) focus on two specific projects:
- ✓ ARIANNA AdheRence to mediterrANeaN diet in Italy
- ✓ EST DIEM Mediterranean diet as a model of traditional, healthy and sustainable diet for healthy nutrition education in adolescents







According to WHO surveillance, the Countries in European Mediterranean Area show the highest prevalence of childhood obesity and overweight among the Countries participating to the surveillance, ranging from 38% to 47%.

The problem of overweight and obesity has the same dimension, with a **cumulative prevalence of 46%.** The figures are paradoxical, if we consider that the Mediterranean basin was the cradle of the Mediterranean diet, whose beneficial impact on human health has been widely described in the scientific literature.

The data about childhood overweight and obesity are even more worrying, considering that these conditions can affect the health of the individuals later during their entire lifespan, in adulthood and elderly, increasing the risk of developing non communicable chronic diseases, such as cardio-vascular events, diabetes and some type of cancers. Those are the leading causes of mortality in Europe and have an important burden for the health care systems.



WHO European
Childhood Obesity
Surveillance
Initiative (COSI)
Report on the fifth
round of data
collection, 2018–2020



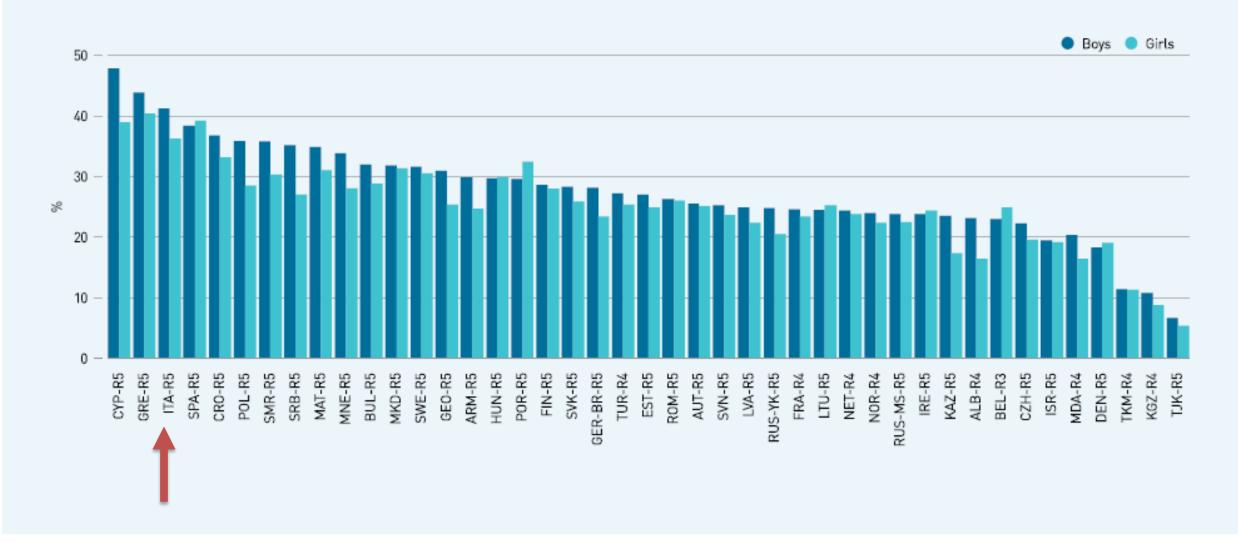




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Fig. 1.A Prevalence of overweight (including obesity – WHO definitions) in boys and girls aged 7–9 years, according to latest available COSI round (%)^a





WHO European Childhood Obesity Surveillance Initiative (COSI) Report on the fifth round of data collection, 2018– 2020







Over the last 20 years there has been a dramatic increase worldwide in the number of individuals affected by the so-called metabolic syndrome, a condition which sees the non-random association of at least three of the following five risk factors for diabetes and cardiovascular diseases:

- visceral obesity
- Hypertriglyceridemia
- reduction of HDL cholesterol
- Hypertension
- glucose intolerance.

In subjects suffering from metabolic syndrome, total mortality, regardless of age, smoking and total cholesterol, rises in these subjects by 1.44 times in men and 1.38 times in women; mortality from cardiovascular diseases instead rises 2.26 times in men and 2.78 times in women.









NUTRITIONAL TRANSITION is completed in three stages:

- an increased income causes the progressive disappearance of hunger and a slow decline in mortality, but with the introduction of free and disordered eating habits;
- changes in diet and a sedentary lifestyle lead to the emergence of obesity and other nutrition-related pathologies, with an increase in the prevalence of disability;
- over time, we observe an inversion in the distribution of nutritional problems with a relative change in the incidence and risk of "nutritional" diseases, with a direct transition from malnutrition to obesity, but... especially in industrialized countries, for about 30 years, the opposite, paradoxical, hidden and often underestimated problem has also existed: the state of malnutrition by default that characterizes patients hospitalized in hospital and care facilities.

The conscious change in eating behavior should lead to a reversal of these negative trends, making a process of "healthy aging" possible.







The nutritional transition of the food system in modern society affects both richer and developing countries with a strong environmental, social and economic impact, worsening the collective health status and increasing the risk of malnutrition and the development of NCDs. More aware and sustainable policies are therefore necessary starting from the production and transformation chain, up to influencing the food models underlying collective health at a global level, in the so-called "farm to fork" path. The solution cannot ignore two premises:

- think globally;
- redefine and clarify means and professionalism capable of collaborating at a preventive and clinical level to identify strategies capable of intercepting the needs and requirements to counteract this paradox.









Evidence: Unhealthy diet (dietary risks, high body-mass index) and malnutrition in the top ten risk factors for the global disease burden (Source IHME – Institute for health metrics and evaluation 2019).

Our task as an Institution:

Definition of strategies and programs to support the application of evidence based preventive strategies with a specific focus on a healthy diet.

...and we know that policy choices have reason to exist if based on technicalscientific considerations.







Nutrition and healthy ageing: the main factors that affect properties. nutrition

Individual behaviour

- ✓ Balanced diet
- ✓ Social and cultural engagement
- ✓ Economic equity
- ✓ Lifestyles
- ✓ Health and digital literacy

Public health policies

- ✓ Education in school age
- ✓ Collective catering
- √ Food environment (food choice)
- ✓ Correct information to citizens
- ✓ Breastfeeding
- ✓ Cooperation with stakeholders and development of guidelines
- ✓ Research and Innovation







Malnutrition from awareness towards control

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Public health policies

guidelines

Cooperation with stakeholders and development of

At the MoH (DGISAN) a working group for promoting healthy ageing through nutrition named TaSiN - Tavolo tecnico sicurezza nutrizionale includes both the insitutional and scientific sector and has been established with the aim to:

- implement policies to address a healthy diet and develop guidelines and training programs to integrate nutrition assessments, counseling, and interventions into routine care for the elderly.
- collaborate with stakeholders: other government agencies, non-profit organizations, food industry stakeholders and academia.
- suggest any useful nutritional strategy to be provided to the political body.





Tavolo tecnico sulla Sicurezza Nutrizionale



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Public health policies

COMPOSITION

- Ministries: Education and Merit; University and Research; Environment and energy security Businesses and Made in Italy - Agriculture, food sovereignty and forests
- Regions
- ANCI
- Research bodies: ISS;CREA; National Institute of **Statistics**
- Scientific societies: ADI, SINU, SItI, SINPE, SIO, SISA, ANSISA, ASAND, SINUC, SIGENP, SIDSCA, Federation of Italian Nutrition Societies (FESIN)
- Advertising Self-Regulation Institute (IAP)
- National Council of Consumers and Users Production sector
- Industry
- Italian Federation of Chefs (FIC)







Tavolo tecnico sulla Sicurezza Nutrizionale





The MoH (DGISAN) is working towards... **Research**

...investing in research together with the Italian National Institute of Health (ISS) to better understand the nutritional needs of elderly and to develop innovative strategies for promoting healthy aging through nutrition.

Innovation

...developing Guidelines on nutrition and sustainability (environmental, technological-innovative, socio-cultural and demographic) through the TaSiN.

...progressing HEALTH DEVELOPMENT AND COHESION PLAN to create an Action Programme to combat malnutrition in all its forms and to disseminate the principles of the Mediterranean diet (to complete by 2026).







Food environment (food choice)

The Ministry has worked with food industries.

The implementation of policies for correct dietary styles and food balanced in its components cannot be achieved effectively without the contribution of all the players involved within the overall system, not least the food industries.

Achievements: the Food industry in the last 15 years has improved the nutritional characteristics of over 4200 food products and reduced portion sizes for another 3600, so it has become a partner in finding a solution to the problem, in the awareness that health is linked to correct lifestyles, nutritional quality of food, portion size and frequency of intake of certain foods.









Education in school-age

As an institution, the Ministry has the task of encouraging the adoption of healthy and sustainable diets by helping consumers to make more informed food choices through food education starting from childhood up to adolescence.

In this regard, the Ministry of Health (Directorate General of Food Hygiene, Food Safety and Nutrition- DGISAN), has funded a series of scientifically based projects in recent years for:

- Italian schools carried out in co-working with the Italian National Institute of Health (Istituto Superiore di Sanità ISS);
- Italian schools abroad carried out in cooperation with Italian Ministry of Foreign Affairs and International Cooperation (MAECI) and Istituto Superiore di Sanità (ISS) with the aim to cross national borders: EST DIEM project (Mediterranean diet as a model of traditional, healthy and sustainable diet and prevention of chronic non-communicable diseases interventions in schools and international comparison).







Informative leaflets







6 - 10 years 11 - 13 years 14 - 18 years







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Public health policies

Collective catering

As an institution, the MoH (DGISAN) has developed Guidelines for schools, hospitals and healthcare catering.



The meals provided by the collective catering service can be a great opportunity, as it can play an important educational role in influencing individual and collective food choices, with positive effects on the habits, the practices and sustainability of eco-agro-food systems.

While having to respect the tastes and expectations of users, it is an indispensable tool in the prevention and treatment of diseases related to an altered state of nutrition, having the primary aim to improve the health status of the population.







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Linee di indirizzo nazionale per la ristorazione ospedaliera, assistenziale e scolastica

Decreto 28 Ottobre 2021









Correct information to citizens

MoH every year launches campaigns to educate the public, especially the elderly, about the importance of nutrition in healthy ageing through:

- Institutional web-site
- Informative leaflets
- Traditional and new media campaigns

We remain convinced of the central role in prevention of the direct involvement of citizens that need to be main actors in the health system.

- The Institutions have the duty to be transparent and inclusive.
- Citizens are intended to make an effort to stay informed.

ONLY THOSE WHO KNOW CAN CHOOSE











In order to guarantee continuity of all of these activities mentioned, our Directorate organized the *National Conference on Nutrition*.







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A Decalogue

1. Prioritize Nutrition for Well-being:

Focus public investments on nutrition to enhance both physical and mental health, ensuring the protection of citizens' health and the promotion of healthier lifestyles.

2. Promote the Mediterranean Diet:

Emphasize the benefits of the Mediterranean diet, based on local and seasonal products and the "Made in Italy" brand, to foster healthy eating habits, product safety, and environmental sustainability.

3. Ensure Uniform Nutritional Services:

Guarantee that specialized public nutrition services, both preventive (SIAN) and clinical, are available in every provincial capital, ensuring consistent quality of care nationwide.

4. Combat Malnutrition and Chronic Diseases:

Address malnutrition in all its forms (undernutrition and obesity) and prioritize the prevention of chronic noncommunicable diseases through a national strategic plan.

5. Collaborate Across the Food Chain:

Promote collaboration among all stakeholders in the food chain, from agriculture to distribution and consumers, to support healthy nutrition and sustainability.





CONFERENZA NAZIONALE SULLA NUTRIZIONE 21-23 Febbraio 2023 Auditorium Biagio d'Alba Ministero della Salute Viale Giorgio Ribotta 5, Roma

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6. Fight Misinformation:

Actively combat false and misleading nutritional information, protecting food sectors and dietary habits. Encourage cooperation among central and local authorities, scientific societies, and professional orders.

7. Teach Preventive Nutrition:

Integrate preventive nutrition education into medical and health-related curricula to ensure future health professionals are well-equipped to promote healthy nutrition.

8. Educate Early on Healthy Eating:

Incorporate nutritional education and the Mediterranean diet into primary and secondary school curricula, including early childhood education (0-6 years), and promote school meals based on these principles.

9. Monitor School Meals:

Elevate the monitoring of school meal quality by the National Health Service to an essential service level, ensuring high standards are maintained.

10. Reduce Food Waste:

Align with the European farm to fork strategy and global goals to reduce nutritional emergencies and ensure food access for all. Focus on reducing food waste throughout the food chain and at the household level to achieve a sustainable food system and address ethical and environmental concerns.







DGISAN is an example of the implementation of a One Health vision

We have just described how we are working to define strategies and programs to support the application of evidence based preventive strategies with a specific focus on a healthy diet.

In our organization medical doctors, veterinarians, chemists, biologists and pharmacists work in an integrated and multidisciplinary manner for a One Health (OH) system along with the whole agri-food production chain. The health of ecosystems has a direct impact on animal health and, consequently, on human health through the food chain.

The DGISAN is an example of the implementation of a One Health vision, comprising different activities which considered as a whole, with no distinction, have a deep and direct impact on each citizen's quality of life.







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Public health policies for Mediterranean diet (MD): focus on ARIANNA and EST DIEM projects.

The MoH and ISS are working together to promote the model of Traditional diet (such as the Mediterranean Diet) that join different positive aspects in OH vision such as:

- a positive health impact
- a "sustainable" model economically, socially and an environmental point of view.

In this view, the MoH togheter with the ISS, has funded some projects on MD:

- AdheRence to mediterrANeaN diet in Italy (ARIANNA)
- EST DIEM MEDITERRANEAN DIET AS A MODEL OF TRADITIONAL, HEALTHY AND SUSTAINABLE DIET FOR HEALTHY NUTRITION EDUCATION IN ADOLESCENTS (in Europe and USA).









Positive aspects of a good adherence to the Mediterranean diet:

- PREVENTION of chronic non-communicable diseases (NCDs).
- Reduction of the economic impact on public health system.
- Ensurance of healthy and sustainable environment: the production of foods that make up the Mediterranean dietary pattern requires less water, less land and produces less greenhouse gas emissions.
- Reduction of food waste.
- Rediscovery of conviviality, traditions and frugality that have been lost in the latest years.









ARIANNA project

Institution's commitment:

report/survey on dietary patterns of adolescents in Italian schools;

report/survey on dietary patterns of adolescents in Italian schools abroad: replicate in other geographical countries and settings the collection of data with the aim to have information on lifestyles and dietary habits (in 2023 we have challenged this model in EU (Losanna and Barcellona) and USA (Washington and Filadelfia).

As we know from ARIANNA project: only 5% of the Italian population shows a good adherence to a healthy diet as a traditional diet. For this reason we have implemented another project to disseminate the MD principles: EST DIEM.







EST DIEM - MEDITERRANEAN DIET AS A MODEL OF TRADITIONAL, HEALTHY AND SUSTAINABLE DIET FOR HEALTHY NUTRITION EDUCATION IN ADOLESCENTS

Institution's commitment:

- promotion of health of young Italians abroad and recall their traditions disseminating the MD principles (starting with proper nutrition that can as a scientifically validated tool lay the foundations for healthy growth and the prevention of MCNTs, such as hypertension, overweight, obesity, dyslipidemia, heart disease, diabetes and cancer).
- Prevention of chronic non-communicable diseases
- Interventions in schools and international comparisons
- Cooperation with Italian Ministry of Foreign Affairs and International Cooperation (MAECI) and Istituto Superiore di Sanità (ISS) to disseminate the MD principles in Italian schools abroad
- to invest not only in Europe (Barcelona e Losanna), but also in realities further away (distant food habits and lifestyles, not only in terms of geographical distance) from the Mediterranean basin, such as the USA (Washington and





Food for thoughts...

- We are working for <u>structural interventions</u> and dietary habit strategies considered priorities <u>in order to provide accessible the traditional diets (such as MD):</u> we know that healthy diets safeguard both the <u>individual wellbeing</u> and the <u>costs for the health systems.</u>
- We are in continuous contact with scientific sector to implement a monitoring system of the actions and policies, based on specific indicators that could guide policy making.
- We are convinced that healthy diets and healthy diets and healthy ageing cannot be separated by the concept of circular health: as a institution, the MoH has a clear idea of the link among environment, animal health and food safety. Be aware that a threat to one of the above listed aspects might have a significant impact on all the others. In our country, the new composition of the Department of One health of the MoH, merging food safety, animal health and healthy lifestyles, highlights that we are going in the right direction.
- We are working together: healthy diets for healthy ageing are a multifactorial process and need a multisectorial approach involving Institution, scientific world, food industry stakeholders and academia to develop and implement comprehensive strategies for promoting healthy aging through nutritional policies.







So our goals are:

- structural interventions and eating habits strategies considered priorities to make traditional diets (such as MD) accessible;
- a multisectoral approach involving institutions, the scientific world, food industry stakeholders and academia to develop and implement global strategies to promote healthy aging through nutritional policies;
- monitoring systems of actions and policies, based on specific indicators that can guide policy making.







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