



REPUBLIC OF SLOVENIA
MINISTRY OF HEALTH

DÖBER TEK Slovenija

National Programme on Nutrition and Health
Enhancing Physical Activity 2015–2025

TABLE OF CONTENTS

3	DEAR READER
4	INTRODUCTION
6	PURPOSE, VISION, KEY CHALLENGES
8	STRATEGIC OBJECTIVES
10	HEALTHIER FOOD HABITS
14	LET US BE MORE AND MORE FREQUENTLY ACTIVE
16	BE HEALTHY THROUGH ALL LIFE
20	PRIORITY AREAS AND MEASURES
21	Nutrition in accordance with guidelines and recommendations
24	Increasing healthy food offers in hospitality industry and tourism
25	Healthy choices for socially disadvantaged and vulnerable groups of population
26	Ensuring safe and healthy food from local and sustainable production
28	Labelling, presentation and marketing of food
29	Promoting physical activity for health in various stages of life
31	Creating environments to promote physical activity
33	Role of health care for maintaining health and for preventing chronic diseases and obesity
37	Education and training and research
39	Information and raising of awareness of population
40	IMPLEMENTATION AND MONITORING



DEAR READER,

You have in front of you the National Programme on Nutrition and Physical Activity for Health 2015-2020 which is the result of joint work carried out by several ministries and represents the continuation and the improvement of the first action plan, that is, the National Programme of Food and Nutrition Policy 2005–2010.

A constant increase in the incidence of chronic non-communicable diseases, particularly obesity, not only in Europe and around the world but also in Slovenia, has led to the expert decision that for the management of increasing obesity, in addition to healthy nutrition, sufficient daily physical activity is necessary throughout life.

Although neither all diseases nor obesity can be attributed only to unhealthy nutrition and irregular physical activity, we are certain that the interaction of risk factors, such as inadequate food, insufficient physical activity, risky consumption of alcohol and tobacco often leads to an outbreak of a disease which could have been prevented.

In formulating the National Programme 2015–2025, we have been guided by our concern for particularly vulnerable groups, such as children and the elderly, and our desire to successfully reduce inequality in health which is shown up as differences in health outcomes between social groups of various social and economic status.

The National Programme 2015–2025 has been created on the basis of consultations with numerous expert groups which is why we thank all Slovene and foreign experts who have partaken in its preparation with eagerness and dedication.

Aiming at the successful implementation of the National Programme and for the attainment of all goals set, let us invite all the identified partners to actively participate in establishing conditions in which an individual will want to and will be able to have an effect on obesity, cardiovascular diseases, cancer and other diseases associated with nutrition and irregular physical activity which have a significant influence on the quality of life of each of us.

Milojka Kolar Celarc
Minister of Health



INTRODUCTION



Healthy diet and regular physical activity contribute to better health, higher quality of life and the sustainability of health-care systems. They both ensure optimum growth and development for children when growing up, while for adults, they improve their well-being and productivity and, in the long-term, they foster health and contribute to active and healthy ageing.

The preparation of the National Programme on Nutrition and Physical Activity for Health 2015–2025 (hereinafter referred to as: "the National Programme 2015–2025") has been guided by a **life course approach** with an aim to **empower the individual** and create conditions which will ensure the individual to pursue a healthy diet and regular physical activity.

The possibility to create and maintain a healthy life style must be given to each person regardless of their social and economic status, or their gender or age. This can be achieved by a multi-sectoral approach and through coordinated and integrated action in all relevant sectors: healthcare, agriculture, education, sports, economy, environment and in cooperation with expert public groups, non-governmental and private sectors and local communities.





The National Programme 2015–2025 defines the following priority areas:

- ensuring **safe and healthy food** focused on **local sustainable supply** and **self-sufficiency in food production**;
- promoting **physical activity** of citizens during all life periods;
- ensuring **healthy nutrition in accordance with guidelines and recommendations for various age groups** (particularly within the systems of organised nutrition providing regular scheduled meals in kindergartens, schools and dormitories for students, hospitals and homes for the elderly);
- providing **accessibility to healthy nutrition choices for socially and economically disadvantaged groups**;
- **ensuring healthier food products** in cooperation with stakeholders in the food industry (for example, by reducing sugar, salt and fat contents in food products);
- increasing **healthy food choices in hospitality industry and tourism**;
- raising the awareness of consumers via **adequate labelling, presentation and marketing** of healthy food and restricting the marketing of foods that do not sustain children's health;
- **better information** and **raising awareness** of all stakeholders, including media campaigns;
- **strengthening the role of the health sector** in the management of obesity, the prevention of undernourishment and the promotion of physical activity with the goal of reducing chronic diseases;
- **education, training and research** regarding healthy food and physical activity.

PURPOSE, VISION, KEY CHALLENGES

Purpose

The purpose of the National Programme 2015–2025 is to improve eating habits and physical activity habits from the early life to the old age. The aim is to halt and reverse the trend of having body mass levels increase in the population of the Republic of Slovenia and to have an impact on a decrease in the incidence of chronic diseases and, consequently, on the sustainability of the health-care system. The planned measures aim to establish equal opportunities for health of the entire population, including the socially and economically disadvantaged groups, and to have a favourable impact upon the biological, psychological and social development of an individual.

Vision

In the Republic of Slovenia, the whole population has good eating habits and pursues regular physical activity, has access to healthy food choices and to infrastructure for health promoting physical activity as the result of which the quality of life and the health of an individual is higher.

Key Challenges

Key challenges are: achieving a decrease in the incidence of chronic diseases and obesity; achieving the energy and nutritional balance between metabolic needs and food intake and having an influence on sedentary lifestyle.

Chronic diseases which include cardiovascular diseases, type 2 diabetes, respiratory diseases, gastrointestinal diseases, cancer and obesity represent the leading causes of morbidity and mortality in the Republic of Slovenia since more than 70% of deaths are caused by the most frequent chronic diseases. Slovenia belongs to a group of countries where the rate of obesity has doubled over the last thirty years. More than two thirds of men and about half of women have higher body mass than recommended. The high prevalence and rise of overweight and obesity in children and young people is of particular concern, especially since Slovenia has recorded a higher trend of obesity than other EU Member States. Although it is encouraging that, since 2011, the number of overweight children and young people has slightly decreased and has reached the European average, however, the situation is far from satisfying. As much as one fifth of girls and a quarter of boys have higher than the recommended body mass, which calls for a resolute action.

Elevated body mass and obesity are connected with the increase in the number of patients suffering from diabetes. Type 2 diabetes which not long ago used to be typical for the elderly is today present in children with higher body mass and in their case higher blood pressure and increased cholesterol blood levels and fatty liver have been detected at the same time.



A fifth of girls and a quarter of boys have body mass higher than recommended.

More than two thirds of men and about half of women have higher body mass than recommended.

Excessive sugar intake is particularly problematic in children and young people as the sugar consumption exceeds the recommended level by 60%. Most sugars come from sugar-sweetened beverages, sweet bakery products and sweets all of which are highly advertised to children and young people. The intake of sweet drinks and sweetened beverages instead of physiologically the most appropriate fresh drinking water represents not only a source of energy but also the risk of developing metabolism disorders. Similarly, by eating sweet and salty snacks, which are very frequently advertised products, the acceptable intake of salt, sugar and trans fats is high in Slovenia, significantly exceeding the recommended levels. In spite of a favourable general trend in reducing fat in nutrition, the fat intake is still too high as regards the population of Slovenia.

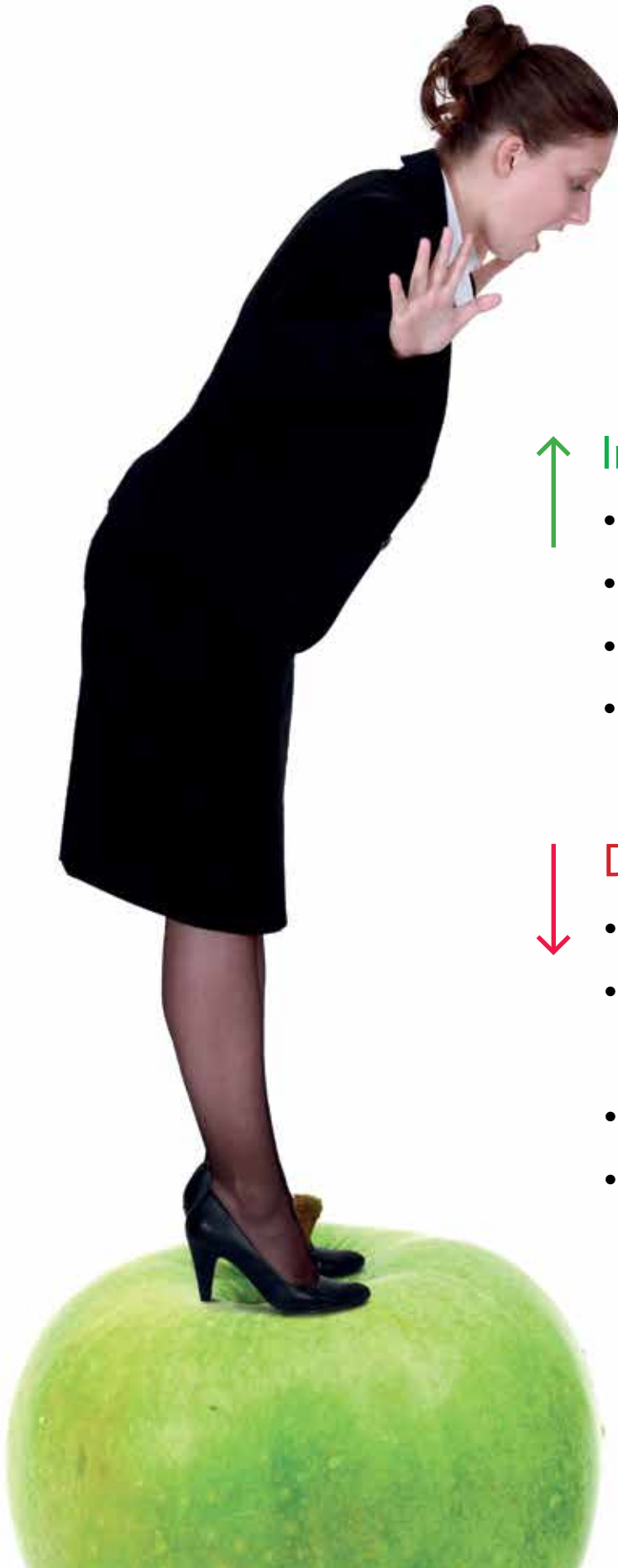
On the other hand, preventing undernourishment is another serious challenge, together with the aim to attain the nutrition recommendations regarding good quality protein intake and to achieve the energy requirements for chronically ill patients and for elderly adults.

The nutritional and energy balance of a diet and physical activity pursued throughout one's life may be ensured (in all stages of life) through the recommended intake of various food groups. On average, the intake of vegetables, fruits, whole-grain products and fish is too low.

At least 30 minutes of moderate physical activity per day is recommended for adults for maintaining their health. However, in order to achieve better health-related results and to manage risk factors (high body mass, high blood pressure, high fat blood levels and similar), the quantity of time dedicated for physical activity must be doubled. Although, on average, the level of the total physical activity in adult Slovenes is increasing and 60% of the population meets the recommended levels, a significant inequality has been detected between groups of different socio-economic backgrounds. An even greater social gap has been noted in regard to achieving levels recommended for the recreational physical activity as only 20% of adults achieve these recommendations.

A challenge also lies in ensuring the accessibility of organised recreational areas for physical activity and good quality food which is tailored for physical activity. Particular caution should be dedicated to involving disadvantaged groups of the population in the improved programmes for health promotion throughout the entire life, preferably at the time of the healthy start of life (for pregnant women, breast-feeding mothers, babies, infants and young children) and in the autumn of life (for the elderly population).

STRATEGIC OBJECTIVES



↑ Increasing:

- the prevalence of breast-fed children;
- number of those having breakfast every day;
- the intake of vegetables and fruit;
- physically active population.

↓ Decreasing/reducing:

- overweight and obese population;
- undernourished and functionally less capable elderly and patients;
- the intake of saturated fats, sugars and salt;
- the content of trans fats in food.

BREAST-FEEDING

Increase the prevalence of children that are **exclusively breast-fed** at the age of **6 months** to **20%**.

Increase the **prevalence of breast-feed** children with adequate complementary food at the age of **12 months** to **40%**.

BREAKFAST

Increase the prevalence of population having breakfast every day by **10%**.

VEGETABLES

Increase the prevalence of population consuming **vegetables** at least once a day by **10%** and reduce the gap between the sexes.

FRUIT

Increase the prevalence of population consuming fruit at least once a day by **5%** and reduce the gap between sexes.

PHYSICAL ACTIVITY

Increase the prevalence of **physically active** population by **10%**.

BODY MASS

Reduce the prevalence of overweight and obese **children** and **young people** by **10%**.

Reduce the prevalence of overweight and obese **adults** by **5%**.

SWEETENED BEVERAGES AND SWEETS

Reduce the prevalence of population with frequent intake of sweetened beverages, sweets and candies by **15%**.

SALT

Reduce the intake of salt by **15%**.

HEALTHIER FOOD HABITS

The taste of breast milk is variable. This helps in introducing new food tastes to the baby.

The change in eating habits may be achieved by actively including various partners who contribute to ensuring a healthier environment.

Breast-feeding

Breast-feeding is the normal and an optimal way of providing young infants with the nutrients they need for healthy growth and development. Breast-feeding is also closely connected to taste development and subsequent openness for diversity of flavours provided by fruit, vegetables and other food products. The acceptance of diversity of flavours is a good starting point for the development of healthier food habits.

Healthy choices of an individual should be encouraged by healthy environments which, by means of national measures, fall under the responsibility of the state. In addition to breast-feeding friendly legislation regulating maternity leave, childcare leave and employment relations, initiatives such as Baby-Friendly Hospital and Breastfeeding Welcome Centre have had a favourable impact on breastfeeding. In 2010, 97.2% of mothers were exclusively or partially breastfeeding upon their discharge from maternity hospitals, however, the breastfeeding rate drops relatively soon after the discharge, and up to three months, there are slightly more than 2/3 of infants breast-fed. The proportion of babies breastfed up to six months slightly drops (2/3 of babies), however, the share of exclusively breast-fed children* is absolutely too low. Only one quarter of children are breast-fed after 12 months of age.

* An exclusively breast-fed infant receives only breast milk and no other liquids or solids are given – not even water or tea – with the exception of prescribed vitamins, minerals or medicines.



Figure 1:
Decreasing of breast-fed children
in percents

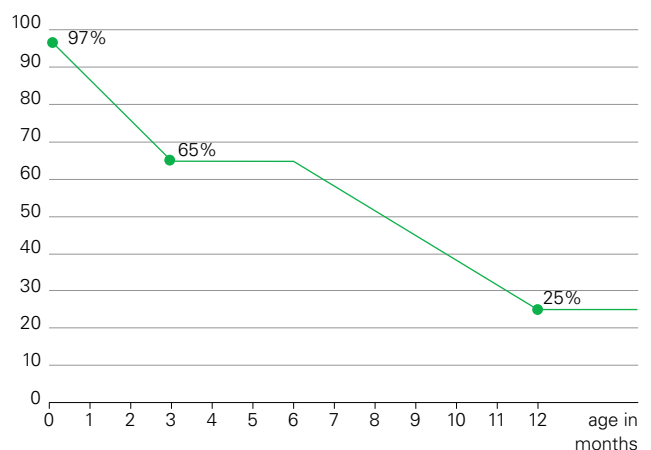
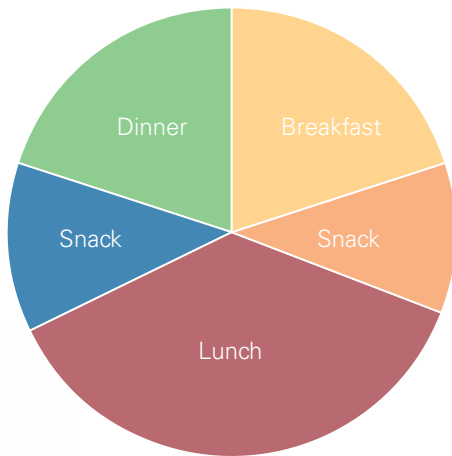


Figure 2:

Daily energy distribution should be spread in five meals.



Breakfast gives us energy for a good start to the day.

Meal frequency

It is recommended that three to five meals should be eaten per day, however, only 40% of adults eat at least three meals and approximately one fifth of the population eats only one meal per day. The proportion of population eating three meals daily is even lower in the employed population. Since increasingly more people provide for their meals during working hours outside their home, more attention will have to be dedicated to the quality of such meals.

Breakfast plays an important role as it provides the energy for the start of the day. Although the habit of eating breakfast has improved in the last decade, adults continue to omit breakfast most frequently (one quarter of men and one fifth of women). The habit of eating breakfast has slightly improved in young people as slightly less than one half of them eats breakfast every day.



Sugar

Owing to the inherent tendency to eating sweet foods, the abundance of sugar in many food products nowadays makes the selection of food rather difficult. **Simple sugars should not exceed 50g with the nutrition intake of 2000 kcal** (up to 10% of daily energy requirements, however, less is better). In case of more intense physical activity, such strict restrictions regarding sugar intake do not apply.

The excessive sugar intake is particularly problematic in children and in young people as the intake exceeds the recommended levels and thus significantly contributes to the development of obesity, type 2 diabetes, caries and cardiovascular diseases. Young people consume sugar mostly with sweetened beverages, sweet bakery products and candies. At the same time, food products with high sugar contents belong to the group of food which are highly advertised to children and young people. It is necessary to raise the awareness of population in this regard while gradually reducing the sugar content in food products.

Salt

The requirement of an individual for salt intake depends on the physical activity intensity levels, the temperature of the environment and the intake of liquids. The average salt consumption is too high, and instead of the acceptable 5g of salt (3g in case of children), adults consume 12g of salt on average per day. Too high salt intake poises the risk of raised blood pressure which leads to stroke and to other cardiovascular diseases. According to estimates, almost one third of salt comes from prepared and processed foods. **It is important to gradually reduce the content of salt in foods as humans can become accustomed to the less salty taste in approximately 8 weeks.** In this regard, on one hand, the key role is played by the food industry and providers of food, and on the other hand, it is important to raise the awareness of an individual to use less salt when preparing food and not to add salt out of habit. Iodized salt is an important source of iodine in the nutrition which is necessary for proper functioning of the thyroid. The use of iodized salt must be encouraged.



Fats and fatty foods

The basic recommendation suggests moderate fat intake, with unsaturated fats that prevail among fats consumed. The highest unsaturated fat content is found in vegetable oils, for example, olive oil, rapeseed oil, sunflower oil, linseed oil, walnut oil, and in some other foods, such as various nuts, avocado and pelagic fish. Food products of animal origin contain higher saturated fat levels which is why lean pieces of meat are advised, together with semi-skimmed milk and dairy products, curd, low-fat cheese. In certain foods, fat cannot be visible which is why people are less aware of its intake. Such food products are, for example, little Frankfurter sausages, sausages, pâtés, minced meat and similar products. An even higher saturated fat content than in foods of animal origin is found in vegetable fats, for example, in coconut, palm and cacao butter which is why their consumption should be limited as much as possible. In food preparation, frying and the use of solid margarine should be avoided since both cooking techniques increase the intake of harmful trans fats.

Fish are an important source of protein and omega-3 fats, which protect against cardiovascular disease.



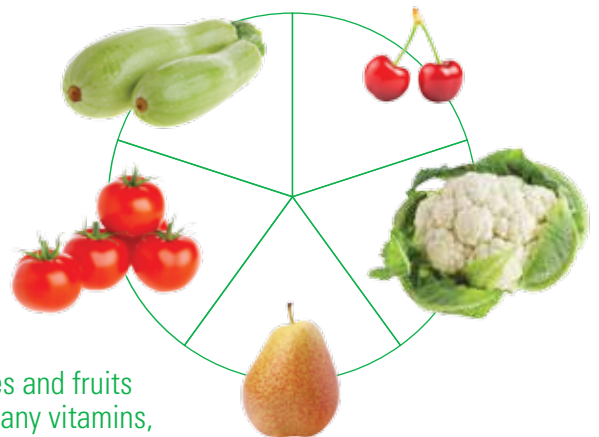
Proteins and protein food products

The sufficient intake of good quality protein sources is important in all population groups, especially for the development and maintenance of the musculoskeletal system. The intake of recommended quantities of proteins is particularly important in population groups of pregnant women, children and young people and elderly adults. The raised needs for protein intake are also characteristic of individuals who are more physically active. The recommended values of protein intake in the nutrition of patients and elderly adults are higher than for the general, otherwise healthy population.

Fish is an important source of nutrients, such as proteins, vitamin B12, vitamin D, selenium and iodine, and beneficial fats which is why fish is considered an important protective factor against cardiovascular diseases. People do not eat enough fish, on average only 70g per week as compared to the recommendation which advises 300g of fish per week, consumed in two portions. The replacement of meat with fish (for example, sardines and mackerel) twice a week has a double positive effect as it reduces the quantity of saturated fat and increases the quantity of omega-3 fatty acids.

Fruit and vegetables

On average, only 1/3 of the recommended quantities of vegetables and only 2/3 of the recommended quantities of fruit are consumed; their intake should amount to approximately 500g per day. Fruit and vegetables contain high amounts of fibre, vitamins and antioxidants, and when properly combined, better effects for health can be achieved. The inclusion of vegetables in at least three daily meals and the inclusion of fruit in at least to daily meals are recommended. The organised provision of meals and other schemes of subsidised food and the promotion of household food production may significantly contribute to higher fruit and vegetable intake. Due to the vicinity of the production and shorter storage time, the possibility for harvesting fruit and vegetables at their optimum maturity which ensures higher biological values, the priority should be given to seasonal fruit and vegetables from the local environment.



Vegetables and fruits contain many vitamins, minerals and protective substances.

Whole grain products have three times more fibre than white bread products.



Whole-grain food products

Whole-grain bread, whole-grain cereal products and porridge and purée are higher in fibre and nutrients than white-flour foods (for example, white bread and pastry). Whole-grain bread is occasionally consumed by 27% of the population and as many as 31% do not eat whole-grain bread at all. This percentage must be significantly increased in the future as **sufficient fibre intake (at least 30g daily) is a protective factor against chronic diseases, particularly against the colorectal cancer.**

FREQUENT PHYSICAL ACTIVITY

Physical activity is beneficial for health in all age groups

More physical activity means better quality of life, better health and better opportunities for work in adulthood which affects general efficiency and the developmental potentials of a society.

In general, the World Health Organisation recommends at least 30 minutes of moderate-intensity physical activity per day to healthy adults in order to maintain their health, and at least one hour of moderate to intensive physical activity to children. For achieving additional and better health-related results and for managing risk factors (high body mass, high blood pressure, high fat blood levels and similar), it is advised to double the quantity of time dedicated for physical activity.

Free-of charge and low-cost possibilities for physical activity in nature (walking, running, cycling, hiking, etc.), active transportation and activities provided by sports clubs, patient associations, pensioner associations and other societies and local communities have an important contribution to general health.

Physical activity does not only contribute to healthy weight, proper body mass and better physical fitness but it also improves the balance of blood sugar and blood fats and regulates abdominal obesity and blood pressure while also preventing metabolic syndrome*, it slows down the development of osteoporosis** and prevents the decline in muscle mass (*the main signals of metabolic syndrome are lipid disorders, increased blood sugar on an empty stomach and abdominal obesity) (**reduction in bone density and increase in fragility of bones).

Both strength-building exercises and anaerobic exercises are important for maintaining physical fitness. Physically demanding household chores, such as shovelling snow, mowing grass, splitting wood and other chores are beneficial for health and contribute to reducing the risk of the occurrence of a disease but they are, unfortunately, associated with a lower quality of life.

Reduce sedentary time

For maintaining health, it is also important to reduce the sedentary time to the lowest possible extent and to interrupt it as often as possible. Sitting also has negative implications on health of those who meet the recommendations related to the physical activity.

Let us increase the prevalence of physically active children and young people

In spite of the fact that our **children achieve WHO recommendations associated with physical activity to a great extent**, due to the changes in a lifestyle, significant negative changes in physical fitness have been recorded. Everyday activities include less and less physical effort which significantly reduces the total energy expenditure as compared to previous generations. In addition to an active lifestyle, it is necessary to take regular sleep.

The proportion of physically active young people (being active for at least one hour a day) is low in Slovenia, and it is decreasing with age, particularly after adolescence. Providing justification for children's absence from physical education classes by way of which physical activity is introduced in school environments on a systemic level, represents a challenge. According to data obtained by self-evaluation surveys regarding young people, 25.5% boys and only 14.9% of girls are sufficiently physically active on a daily basis. **Data regarding girls who are less physically active than boys is particularly concerning.** Students of secondary vocational schools are particularly disadvantaged in this regard. Data shows that they are less physically fit although, in their profession, they will be required to perform monotonous body movements which, owing to shortcomings in movements, results in various injuries and other issues (for example, lower back pain).



At least 30 minutes of moderate physical activity per day is recommended for adults.

A healthy lifestyle is also important in adulthood and in mature age.

In general, it can be stated that the proportion of sufficiently active Slovenes is increasing, however, changes are closely related to social and economic factors and a geographical influence. The proportion of adults who achieve the WHO requirements regarding physical activity increased significantly from 2001 to 2012. Although, according to research including data on total physical activity, i.e., the job, transportation to work, household chores and recreational activities, a large

proportion of adult Slovenes are sufficiently physically active, a significantly smaller proportion of population is sufficiently physically active when recreation and moderate and intensive physical activity is taken into consideration.

Physically demanding work (household chores, professions for which significant body movement is required, active transportation) is beneficial for health and contributes to reducing the risk of the occurrence of a disease but it is, unfortunately, not perceived as beneficial.

As many as two thirds of adults are physically inactive.

The proportion of physically inactive people is the highest (a solid half of adults) among those adults with lower qualification levels while this proportion is the lowest in the group of high educated adults (a solid one fifth of adults). Physical activity drops particularly after 65 years of age.

Suitable physical activity and healthy diet must be encouraged in disadvantaged population groups, such as the **elderly adults and patients**. For patients, it represents an integral part of successful treatment.

BE HEALTHY THROUGH THE ENTIRE LIFE



Future parents

A balanced diet and physical activity of pregnant women contribute to better psycho-physical fitness for delivery and faster recovery during post-partum period. Physical activity increases the probability of a continued active lifestyle of a young family since the pattern of a healthy life style leading by example, particularly by a mother, is transferred to children. From the very beginning, the natural need for movement must be encouraged in children and they must be able to move safely both at home and within the scope of activities organised for babies and toddlers.

Diet during the very beginning of one's life, i.e., before birth, during pregnancy and particularly during the first year of life contributes to the metabolism programming of an individual and therefore has a long-term effect on our metabolism. Breast-feeding is the normal and an optimal way of feeding a baby, providing all the nutrients needed for healthy growth and development which is why it is so important **to promote exclusive breastfeeding.** Breast-feeding must be encouraged in the period from four to six months of age, when a baby is the most receptive for various flavours, and when mixed food is gradually introduced, a baby must be provided with as little industry-

Breastfeeding is beneficial for physical and emotional development of the child.

processed food as possible. Breast-feeding is important for the health of mothers and babies in the long-term. In a baby, it has an important influence on the child's emotional and physical development, on the suitable gaining of body mass and on the openness for various flavours when ordinary food is introduced. As regards mothers, in addition to economic and practical advantages, breastfeeding ensures better contracting and shrinking of the uterus after birth, faster weight loss, reduces the risk of breast and ovarian cancer, there are less incidences of metabolism syndrome and type 2 diabetes. "Schools for New Parents" and regular health checks with unified expert instructions have an important contribution to empowering young families and promoting breast-feeding.

Breast-milk substitutes are welcome and necessary when a baby cannot be breast-fed due to various reasons, but as their flavour remains the same all the time, they often lead to babies refusing various flavours when mixed food is introduced. In babies and small children who have not been breast-fed there is an increased risk of infection, the development of high body mass and obesity, metabolism disorder and an early occurrence of allergies and asthma.

Children and young people

Children and young people **consume too little vegetables and fish, and they resort to energy-rich but nutrient-poor food too often**. Sweets are consumed daily or more often by 25% of young people, and sweetened-beverages by almost 25% of them. In spite of a high intake of sweet drinks, young people do not drink enough fluids, particularly physiologically the most appropriate drinking water. Salt intake is two times higher than the recommended level which, according to recommendations, should amount to from 3g to 5g. Children and young people eat a smaller number of daily meals than recommended and they do not eat regularly. On the other hand, the unbalanced diet and poor eating habits of children and eating disorders may also be the main reason for undernourishment. In a case of inappropriate nutritional status identified in children, good cooperation is important between a child's family doctor and the entire family which has a significant impact on the child's habits. It is also important to bring together school physicians and educational institutions that, by means of their mission, and by way of the actual provision of meals in schools, have a significant influence on healthy eating habits at the level of population. There are many opportunities for promoting drinking of water and eating healthy food in kindergartens and schools. However, schools and kindergartens are institutions where marketing of foods, particularly foods of less favourable nutritional content is unacceptable.

Habits of parents related to physical activity (active leisure time, sports activities, active transportation, and similar) have an influence on the development of such habits in children. Children visiting kindergarten are engaged in structured

physical activity practices to a certain extent but this is not sufficient for the child's healthy development which is why it is the task of parents to promote physical activity of their children. This is even more important for children who are not included in kindergartens since the development of their habits in relation to physical activity depends entirely on initiatives from the domestic environment.

Physical activity provided only within the scope of kindergartens and schools is not sufficient for healthy development and for maintaining health. Children have many possibilities to participate in sports programmes organised on the premises of schools but, due to their costs, children from socially disadvantaged families are deprived of attending them. This is why programmes, such as "Healthy Lifestyle" that are free-of charge, are so important. It is the task of the society, particularly local communities, schools and sports associations to **provide for the physical activity programmes that are free of charge or affordable** in order to contribute to the accessibility of programmes irrespective of the social and economic environment of children. The significance of physical activity which is not provided within sports structures and recreational programmes needs to be stressed. It is particularly worth emphasizing **active transportation** (cycling, walking, a combination of these activities with public transportation) in which regard, the cooperation of public policies from various sectors is crucial as they may have an impact on their promotion.

Parent's physical activity influences children's health in this domain.



Students and adults

Active adults and students have similar eating habits. According to last assessments made, half of the adult population does not eat healthy food. **Risk factors for the occurrence of diseases associated with unhealthy lifestyle have been detected in the two thirds of the adult population.** Today, adults choose foods of more appropriate composition than in the past but they mainly come from higher social and economic classes. The trend of eating fruit and vegetables has moved upward in the last decade, which is particularly the case of fruit, while the eating of vegetables still remains too low. **The number of daily meals and the eating regime in adults is not appropriate, and it is breakfast that is most commonly skipped.** Special attention needs to be dedicated to men, younger adults and persons of lower educational levels and lower social and economic status since in these groups, the worst eating habits have been identified: the energy intake in their daily meal is the highest and so is the consumption of fat, while the intake of vegetables is the lowest. Either they do not dedicate enough attention to healthy food choices or they fail to follow them due to economic reasons, lack of access or poor knowledge of healthy diet.

Most frequently, adults state lack of time as the main reason for insufficient physical activity. In fact, contemporary lifestyle dictates a faster pace of life and coordinating work-related and free time activities poses more and more challenges. Active transportation should also be promoted in adults and students, highlighting it as a method of physical activity for health promotion, as for the greatest proportion of population (considering the distance from home to job), it represents a favourable solution in terms of time and money.

Active mobility
and physical work
maintain health.

In order to encourage people to be physically active regularly, good accessibility of green areas, sports facilities and organised sports and recreational activities is important; the responsibility for the last two mentioned is, to a great extent, with local communities, sports associations and other providers of organised physical activity. The affordability of sports programmes financed by public funds is also important, together with the accessibility of schemes promoting physical activity as they have a positive influence on reducing inequality.



Older than 65 years of age

A healthy lifestyle of the population older than 65 years of age is becoming an increasingly important aspect of an integrated approach to solving economic, health-care related and social issues. The proportion of elderly adults will increase to 20% of the entire population by 2020, and in the decades to come, the number of people older than 65 years of age will increase significantly. Less than half of the population in the group of elderly adults achieves recommendations regarding physical activity. By pursuing regular and appropriate physical activity, with appropriate diet, the degeneration processes of the organism of an elderly adult may be slowed down, and an individual may maintain good physical fitness for a longer time, and in the occurrence of a disease and its treatment, treatment is more successful.

The issue in regard to elderly adults is not only high body mass but also the loosening of muscle and bone mass. Older adults who do not eat properly are particularly at risk when decreasing their physical activity. Daily chores may become difficult, such as standing up from a chair, raising things or walking on stairs, there is a greater risk of falls and injuries which result in an increased number of hospitalizations and visits to other institutions for senior citizens. **There are usually a very small number of undernourished people in the group of healthy, home-living older adults, however, a high level of protein and energy undernourishment is often detected in the group of older people living in social care settings and in those who are hospitalized.**

Patients

Due to changes in metabolism on account of chronic diseases, **appropriate energy and protein intake combined with proper physical activity are of key importance.** Protein needs are increased in chronic patients (1.2g/kg of body mass) which is why proper protein intake with good quality sources (fish, lean meat, milk and dairy products, eggs, legumes, nuts) must be provided for.



Healthy eating and physical activity slow down the aging process and help maintain vitality.



**PRIORITY
AREAS AND
MEASURES**



1

NUTRITION IN ACCORDANCE WITH GUIDELINES AND RECOMMENDATIONS



Improving the quality of food for children in kindergartens, for pupils and secondary-school students

The Republic of Slovenia is one of the countries which dedicates special attention to school meals for children since well systemically-organised food in schools is the most efficient and the most deliberate method for ensuring the accessibility of healthy meals to all pupils and students. Food provided by schools has an impact on a healthy life style and healthy eating habits. It is regulated by the School Meals Act, together with the Guidelines on Healthy Nutrition in Educational Institutions.

GOAL Improved quality of food in educational institutions on the basis of the implementation of the Guidelines on Healthy Nutrition in Educational Institutions.

MEASURES

- Regular monitoring of food offers and reporting on their adequacy in accordance with the guidelines and adapting food offers on the basis of reports,
- education and training and capacity building for the provision of food in educational institutions,
- examining the adequacy of the school meals organisation and relevant action taking,
- implementing schemes for better access to healthy foods (the School Fruit and Vegetables Scheme and the School Milk Scheme) and to other foods in accordance with the guidelines and increasing the proportion of foods of higher quality,
- promoting the consumption of drinking water, by installing water fountains in facilities and on playgrounds,
- implementing the Traditional Slovene Breakfast Project and similar projects with the selection of recommended foods produced locally and increasing the proportion of ecologically produced food,
- establishing the public procurement system for food by taking into account short supply chains and the principles of green public procurement adapted to educational institutions in the sense of ensuring its simplification and better efficiency,
- limiting the marketing of food and beverages in school environments,
- establishing the system for the exchange of cases of good practice and efficient educational approaches in implementing nutrition education programmes in kindergartens and schools.

MINISTRIES

- Ministry of Education, Science and Sports
- Ministry of Health
- Ministry of Agriculture, Forestry and Food
- Ministry of Public Administration
- Ministry of Finance.

→ Improved quality of food for students

With the aim to contribute to the better quality of the academic term of students, subsidized student meals are provided by the state. More attention must be dedicated to the quality of subsidized student meals in the future and expert support in providing such meals must be enabled to providers of student meals.

GOAL **Improve the quality of subsidized student meals and healthy nutrition of students.**

MEASURES

- Providing expert support to providers of student meals, to students, inspectors and Food Committee with the aim of adapting food offers to applicable guidelines,
- implementing the criteria regarding healthy nutrition within the scope of public tender for providers of subsidized student meals by increasing the proportion of good quality locally and ecologically produced foods,
- raising the awareness of students on healthy diet and promoting skills for independent preparation of balanced meals with particular focus on men,
- examining other options for healthy diet of students and adopting the necessary measures,
- ensuring the provision of healthy foods (vending machines in educational institutions and on events organised for students).

MINISTRIES

- Ministry of Health, Ministry of Labour
- Family, Social Affairs and Equal Opportunities
- Ministry of Education, Science and Sports.

→ Improving the quality of food for employees

Programmes regarding health promotion at work which, in accordance with Occupational Health and Safety Act (Official Gazette of the Republic of Slovenia, No 43/11), are planned by employers, among other matters also include healthy nutrition and physical activity and are dedicated to maintaining and enhancing physical and mental health and well-being of employees. Nutrition for employees must be of as good quality as possible and adapted to specific types of work carried out by employees.

GOAL **Improve the quality of nutrition and enhance the awareness of healthy diet of employees, with a particular focus on men.**

MEASURES

- Implementing the Guidelines for Healthy Nutrition of Employees within the scope of programmes promoting health at work,
- providing support to social partners for the implementation of the promotion of healthy nutrition and physical activity at the work place and in the exchange of cases of good practice,
- implementing the provision of healthy meals in canteens and restaurants where meals are organised for employed people by increasing the proportion of good quality locally and ecologically produced foods,
- training and education of kitchen staff in accordance with the Guidelines on Healthy Nutrition of Employees.

MINISTRIES

- Ministry of Health
- Ministry of Labour, Family, Social Affairs and Equal Opportunities
- Ministry of Economic Development and Technology.



Improving the quality of food for patients and care recipients

Nutrition of patients in hospitals is an important and integral part of treatment. Food for patients must be adapted to their specific needs and of good quality and well balanced.

GOAL **Improve the quality of nutrition for patients and older adults in hospitals and in social care settings, with particular focus on local and sustainable supply.**

MEASURE • Establishing the public procurement system for food by taking into account short supply chains and increasing the proportion of locally and ecologically produced food and the principles of green public procurement adapted to hospitals and social care settings in the sense of ensuring its simplification and better efficiency.

MINISTRIES • Ministry of Agriculture, Forestry and Food
• Ministry of Finance, Ministry of Public Administration
• Ministry of Health
• Ministry of Labour, Family, Social Affairs and Equal Opportunities.



2 INCREASING HEALTHY FOODS IN HOSPITALITY INDUSTRY

→ Increasing healthy foods in hospitality industry and active tourism

Increasingly more Slovenes eat outside their homes which is why the interest for healthy food must be increased in users and providers of services in hospitality industries in accordance with the criteria established in regard to meals which may serve for the implementation of certification of healthy food offers. These criteria refer to the energy density and composition of fruit, vegetables and other individual nutrients of meals and they include the quantities of salt and sugars and the quality and quantity of fats. Providers in tourism industry should be encouraged to enrich their offers with healthy meals in accordance with established criteria, and the providers of tourist services should be encouraged to improve their offers with physical activity.

GOALS **Increase and improve healthy meals offers and healthy food offers by the providers of services in hospitality industry and tourism.**
Increase the provision of physical activities within the scope of tourist services.

MEASURES

- Promoting healthy meals and healthy foods in hospitality industry (spa tourism, locally and ecologically produced foods), promoting and establishing the system for designing healthy offers in hospitality industry,
- tailoring food size portions offered by providers in hospitality industry, promoting collaboration between local sports associations and tourism-information centres, spas, and other providers of tourism services.

MINISTRIES

- Ministry of Economic Development and Technology
- Ministry of Health
- Ministry of Education, Science and Sports,

→ Increasing the provision of healthy foods and meals

The composition of foods (sugar, salt, fats) must be adapted to the needs of a contemporary lifestyle and consumers must be informed of the nutrient content by way of appropriate labelling. In addition to the composition of food and the meal as a whole, the attitudes of people in regard to portion sizes and packaging size should be affected.

GOAL **Increasing the provision of healthier and reformulated food products.**

MEASURES

- changing the composition of foods by decreasing the content of sugar, sweets, trans fats, saturated fats and salt while providing for sufficient supply of iodine and increasing the share of ingredients of ecological origin,
- adjusting packaging sizes of food products,
- examining the statutory measures for changing the content of nutrients in food products (trans fats).

MINISTRIES

- Ministry of Agriculture, Forestry and Food
- Ministry of Finance
- Ministry of Economic Development and Technology
- Ministry of Health.

3

HEALTHY CHOICES FOR SOCIALLY DISADVANTAGED AND VULNERABLE GROUPS OF POPULATION

→ Promoting healthy diets

Systemic measures will enable better access to fruit and vegetables and other healthy food groups to socially disadvantaged groups and other vulnerable groups of population.

GOALS **Improve the accessibility to healthy food choices.**
Maintain valid subsidized food schemes.

MEASURES

- Promoting mechanisms and schemes for increasing the accessibility of fruit and vegetables and other healthy choices for socially disadvantaged and vulnerable groups of population (social entrepreneurship, co-operatives, urban gardens, providing for conditions for food production in urban environments, and similar activities),
- reducing the quantity of food waste,
- promoting short supply chains from food producers to final consumers (local markets, alternative distribution channels which make the distribution chain shorter by increasing the proportion of good quality ecologically produced food (for example, partnership farming),
- promoting short supply chains in the system of public procurement of food and food products in public institutions with focus on good quality foods of ecologically origin,
- providing support to socially disadvantaged and vulnerable groups for better financial, health-related and environmental literacy in connection with the purchasing and preparing food,
- examining additional measures for the promotion of the consumption of recommended food groups and reducing the intake of not recommended food.

MINISTRIES

- Ministry of Labour, Family, Social Affairs and Equal Opportunities
- Ministry of Agriculture, Forestry and Food
- Ministry of Education, Science and Sports
- Ministry of Health
- Ministry of Economic Development and Technology
- Ministry of Finance
- Ministry of the Environment and Spatial Planning.

4

ENSURING SAFE AND HEALTHY FOOD FROM LOCAL AND SUSTAINABLE PRODUCTION

→ Ensuring food safety

The attainment of high level of safety of human life and health is one of the fundamental objectives of the food legislation. Rules and procedures which are based on risk analysis are the main baseline for ensuring safe food, from the microbiological, physical and chemical aspects. The increasing proportion of chemicals in the environment and materials in contact with food, new technological processes for food preparation and new food ingredients and increased incidences of allergies which may be triggered by food ingredients are areas which have to receive greater attention in the future.

GOALS

Ensuring food safety.

Reduce the incidence of infections, food poisoning and diseases caused by food.

MEASURES

- Implementing constant official supervision over food; such supervision must be transparent, efficient and dynamic, and based on risk analysis,
- improving regularly food safety monitoring programmes, establishing mutual relations (networking), coordinated planning and reporting and the use of data bases for the evaluation of the intake and the exposure to risk factors,
- implementing the Commission's Action Plan 2011 for managing the increasing threat resulting from antimicrobial resistance,
- implementing the Republic of Slovenia's Risk Communication and Information Protocol for Safe Food and Safe Feed,
- establishing the national data base used by responsible institutions in the process of risk assessment regarding food safety in order to have fast access to data and information resulting from monitoring,
- regular information to expert and general public groups on results of monitoring and from official supervision of food,
- information, education and training of all stakeholders in the food industry for ensuring good quality and safe food.

MINISTRIES

- Ministry of Agriculture, Forestry and Food
- Ministry of Health.



Promoting self-sufficient supply and local production of food

Given the outreach of the global trade, locally produced food is particularly important for the development and preservation of agriculture and for ensuring the sustainable supply of food. In regard to domestic food production, the Republic of Slovenia does not suffice for its need regarding agricultural products and food which is why providing for food safety is an important strategic and political issue. Self-sufficient supply with basic agricultural products varies in the Republic of Slovenia: it is low for plant products but high for animal products.

GOALS By way of sustainably produced food, increase the local supply of households, public institutions and other budget users providing organised meals in accordance with the guidelines.

MEASURES

- Increasing the volume (where self-sufficient supply is low) and the competitiveness with focus on productivity and efficiency and sustainable use of resources,
- providing for conditions and increasing ecological production schemes and other quality schemes,
- integrating agricultural holdings into production and marketing organisation structures
- promoting partnerships and cooperation of stakeholders in the local food supply chain,
- increasing the market share of local food and food products,
- promoting short supply chains and local markets,
- promoting agricultural products and food (common general promotion, promotion of quality schemes, and similar activities),
- establishing food procurement systems in public institutions, with focus on local and sustainable supply,
- education and training of management and expert staff in public institutions on the significance of local sustainable supply and on regulatory solutions for implementing the principle of short supply chains in the food public procurement system,
- education and training of local food producers on regulatory solutions for implementing the principle of short supply chains in the food public procurement system,
- promotion of locally and ecologically produced food in protected areas.

MINISTRIES

- Ministry of Agriculture, Forestry and Food
- Ministry of Finance
- Ministry of Education, Science and Sports
- Ministry of Health
- Ministry of Labour, Family, Social Affairs and Equal Opportunities
- Ministry of Defence
- Ministry of the Environment and Spatial Planning.



5

LABELLING, PRESENTATION AND MARKETING OF FOOD



→ **Transparent and responsible marketing of food**

Research show that the environment which promotes frequent consumption of greater quantities of energy-dense foods is one of the main reasons for increasing obesity in children. Intensive marketing of energy-dense and nutritionally poor foods influences food choices.

GOALS

- **Enable consumers to easily recognise healthy choices.**
- **Limit the marketing of unhealthy food for children (energy dense and nutritionally poor foods and sweet drinks).**
- **Reduce food falsification and misleading of consumers.**

MEASURES

- Examining approaches for easier and better understanding of food-related information and food labelling information, together with the examination in regard to the establishment of the national scheme for easier recognition and healthy choices,
- providing support to consumer organisations in raising awareness and organising trainings on nutrition (comparative consumer testing for enhancing the trust of consumers in the food chain),
- preparing guidelines for limiting marketing of unhealthy food choices to children,
- establishing the system for recognising those factors, circumstances and information which may mislead consumers in regard to the composition, quality, origin and special features of food products,
- measures for reducing the intake of unhealthy foods in terms of composition and energy density, in accordance with the proposals by OECD.

MINISTRIES

- Ministry of Health
- Ministry of Agriculture, Forestry and Food
- Ministry of Culture
- Ministry of Education, Science and Sports
- Ministry of Economic Development and Technology
- Ministry of Finance.

6

PROMOTING PHYSICAL ACTIVITY FOR HEALTH ACROSS THE LIFE SPAN

→ Free-of-charge physical activity programmes for children and young people

The financing of school physical education falls under the area of education covered by the ministry responsible for education. It makes sense that due to substantial changes in lifestyles, at least 180 minutes of good quality school physical education per week is provided for everybody who is included in educational programmes, from kindergartens to the completion of schooling, in accordance with the Resolution of European Parliament on Role of Sport in Education.

GOALS

Ensure appropriate quantity of regular physical education for all children and young people and improve its quality.

Promote physical activity in target groups of population.

Improve movement abilities and physical fitness of children and young people.

MEASURES

- Establishing good quality and closer inter-disciplinary cooperation of health care services (paediatricians, school doctors, physiotherapists and other health care professionals) with schools when certain adjustments are needed or physical activity should be limited due to some short-term or long-term characteristics or health-related limitations of an individual, instead of providing justification for the absence from all forms of physical activity,
- promoting physical activity in kindergartens and schools ("a minute for physical activity", recreational breaks),
- examining the possibilities to reintroduce additional lessons for those children who need additional forms of physical activity for their healthy development,
- raising awareness of children and parents on appropriate food during physical activity and giving special care to children who are actively engaged in sports,
- adopting and implementing national guidelines, harmonised on an inter-sectoral level, for healthy physical activity for various target population groups,
- adopting and implementing national guidelines, harmonised on an inter-sectoral level, for the prevention of sedentary lifestyle for various target population groups,
- providing support to programmes, such as "Healthy Lifestyle in Primary Schools" and "Young People for Young People" in secondary vocational and technical schools and other similar programmes in order to improve movement abilities and to manage obesity in children and young people,
- providing support to reintroduce mandatory physical education in the first grades of higher-education study programmes,
- better integration between responsible services (health-care, schools, social services) and sports organisations, associations and local community in promoting physical activity of children, particularly those from socially disadvantaged families,
- implementing extra-curricular sports activities.

MINISTRIES

- Ministry of Education, Science and Sports
- Ministry of Health
- Ministry of Labour, Family, Social Affairs and Equal Opportunities
- Ministry of Public Administration.

→ Increase the proportion of physically active adults

The goal is to achieve at least 30 minutes of physical activity per day. Physical activity must also be encouraged at work environments and the relevant culture of physical activity must be established for the promotion of health at work and outside working hours.

GOAL **Increase the proportion of physically active adults.**

- MEASURES
- Raising the awareness of population on benefits of regular physical activity for enhancing health and on dangers of sedentary lifestyle; raising the awareness of physically active adults on healthy diet when physical activity is pursued,
 - organisation of and implementation of free-of-charge annual good quality programmes of recreational physical activity of various contents, pursued at publicly accessible areas from which an important impact on health of participants is expected (for example, municipal recreational schools),
 - providing support to social partners in implementing recommendations on physical activity and reducing sitting within the scope of programmes for health promotion at work and the exchange of cases of good practice (support for implementing "minutes for health" in working environments and exercises at workplaces),
 - better integration of activities in the health-care system with programmes provided by sports organisations and associations and local communities in promoting physical activity in the active population.

- MINISTRIES
- Ministry of Education, Science and Sports
 - Ministry of Health
 - Ministry of Labour, Family, Social Affairs and Equal Opportunities
 - Ministry of Public Administration.

→ Increase the proportion of physically active elderly adults

Since the benefits of physical activity for maintaining health and functional abilities of elderly adults are particularly high, the goal has been set to increase the proportion of physically active elderly adults who live at home or in social care settings.

GOALS **Increase the proportion of physically active elderly adults.**
Promote intra-generational cooperation with physical activity.

- MEASURES
- good quality physical activity for elderly adults in various environments (for example, in social care institutions, health centres, pensioner's associations, sports clubs) by integrating senior, health-care and sports organisations,
 - free-of-charge good quality physical activity for elderly adults in publicly accessible areas,
 - targeted implementation of balance and coordination exercises for fall prevention and injury prevention,
 - ensuring the accessibility of physical activity programmes for everybody with the focus on socially disadvantaged and functionally less capable and incapable elderly adults,
 - identifying persons with poor physical fitness and providing counselling on their inclusion in good quality physical activity programmes with inter-sectoral counselling centres for physical and movement development in medical centres (cooperation of doctors, kinesiologists, physiotherapists, nurses, nutritionists, sport teachers).

- MINISTRIES
- Ministry of Education, Science and Sports
 - Ministry of Labour, Family, Social Affairs and Equal Opportunities
 - Ministry of Health
 - Ministry of Public Administration.

7

CREATING INFRASTRUCTURE TO PROMOTE PHYSICAL ACTIVITY



Promoting active transportation to work and to school

Active transportation to workplace or to school and other daily urgent and planned activities of an individual (errands, shopping, visits and other tasks) give an opportunity for every day movement.

GOALS

Include active transportation in daily activities and contribute to sustainable mobility (for example, arrivals to workplaces, kindergartens and schools and departures home). Ensuring conditions for safe, efficient and pleasurable active transportation.

MEASURES

- promoting safe and active transportation (for example, walking and cycling) and integrating active transportation with public transport (sustainable mobility),
- including conditions for active transportation in kindergartens, schools and work posts (cycling, walking) in spatial plans,
- improving the quality of park-and-ride facilities and rent-a-bike systems, particularly in urban and suburban environments,
- directing the preparation of municipal spatial plans towards ensuring sustainable mobility,
- ensuring suitable facilities and infrastructure (for example, the organisation of bicycle sheds, cycling connections - trails, paths, lines - in smaller towns and between municipalities),
- promoting sustainable mobility for the visit of protected areas.

MINISTRIES

- Ministry of Infrastructure
- Ministry of Science and Sports
- Ministry of the Environment and Spatial Planning
- Ministry of Health
- Ministry of Public Administration.



Promoting the organisation of municipal recreational areas and inter-generational cooperation

The organisation of the wider environment of residential areas encourages occasional daily movement of people. There are many areas for pursuing physical activity which are not used, are poorly kept or even unkept and are not recognised as areas suitable for physical activity. The most important role in this regard is played by local communities. The integration of local sports clubs and educational institutions in this regard is also reasonable.

GOALS

The orientation of municipal spatial plans towards good quality residential environments and providing accessible areas for physical activity in local environment to everyone.
Promoting intra-generational cooperation with physical activity.

MEASURES

- Maintaining and establishing structures and infrastructure in the local environment which encourage physical activity for health (for example, cycling paths, parks, sports islands for everybody, jogging paths, external school and kindergarten playgrounds),
- increasing the quality and the number of publicly accessible sports areas in natural environments by taking into account the nature preservation goals, primarily by restoring and organising existing paths and areas (for example, hiking trails, jogging trails, cycling paths, natural bathing areas), and promoting them,
- establishing the quality assessment system for organised physical activity programmes, structures and infrastructures for physical activity and for persons and providers rendering and implementing such physical activity programmes,
- establishing free-of-charge physical activity programmes,
- establishing conditions for the implementation of a good quality not-organised physical activity in natural environments by taking into account nature protection aspects,
- increasing the accessibility of drinking water at public spaces and in public institutions by taking into account environmental aspects (for example, the use of water fountains instead of water dispensers wherever possible).

MINISTRIES

- Ministry of Education, Science and Sports
- Ministry of Labour, Family, Social Affairs and Equal Opportunities
- Ministry of Health
- Ministry of the Environment and Spatial Planning
- Ministry of Infrastructure
- Ministry of Public Administration.



8

ROLE OF HEALTH CARE FOR MAINTAINING HEALTH AND FOR PREVENTING CHRONIC DISEASES AND OBESITY

→ The importance of breast-feeding and healthy diet of babies, toddlers and pregnant women

Suitable empowerment and raising awareness of new parents on healthy diet and physical activity is beneficial for a healthy life style of young families. When expecting a baby, parents-to-be are very open to advice which is why support activities must be focused on families, mothers-to-be who are planning to conceive a baby, who are breastfeeding, introducing mixed food, and promoting healthy diet and physical activity during the entire life of a family.

GOALS

- Improve information for parents-to-be and empower them.
- Increase the proportion of exclusively breast-fed children at the age of 6 months.
- Increase the proportion of breast-feed children with adequate complementary food at the age of 12 months.
- Special focus on healthy diet of pregnant women, breast-feeding mothers and babies.

MEASURES

- Including contents on healthy diet and physical activity in programmes of New Parents Schools,
- developing and implementing recommendations for physical activity of pregnant women,
- increasing the proportion of adequately educated and trained health-care staff,
- preparing healthy diet guidelines for pregnant women and breast-feeding mothers,
- providing support for the implementation of guidelines on healthy diet for babies,
- promoting and assisting to maintain exclusive breast-feeding until the age of 6 months,
- establishing breast-feeding monitoring mechanisms,
- expanding the network of Breast-feeding Friendly Health Care Institutions,
- establishing breast-feeding friendly environments in public spaces,
- providing support to promotion programmes, and raising awareness on the importance of breast-feeding by taking into account the needs of socially disadvantaged and vulnerable groups,
- within the scope of the renewal of prevention programmes, ensuring expert support (information, counselling and skill training on breast-feeding and complementary feeding of infants, babies and toddlers) to all health-care providers who are in contact with parents-to-be and young families,
- regulating the marketing of breast milk substitutes in accordance with the International Code of Marketing of Breast-Milk Substitutes.

MINISTRY

- Ministry of Health.



Detecting unhealthy life style in children and young people and empowerment programmes

Health-care programmes must detect individuals at risk due to unhealthy diet and sedentary life style early enough and develop an efficient system of treatment, referral and follow-up on the health condition of a person at risk during pregnancy, childhood and adolescence. It is important that valid prevention programmes are improved so that, in addition to early detection in cases of poor eating habits and insufficient physical activity and counselling provided in such cases to children, young people and their families, suitable programmes are provided which support changes in eating habits and changes in habits regarding physical activity, whereby these programmes are connected with the local environment.

- GOALS **Decrease the proportion of overweight children and young people and the proportion of obese children and young people with a special focus on boys.**
- MEASURES
- early detection and treatment of children and young people with risk factors for developing diseases and conditions associated with unhealthy diet, overweight and obesity and unhealthy life style and eating disorders and their inclusion in individualised intervention programmes for improving health and physical fitness through the operation of inter-disciplinary counselling centres in medical centres (cooperation of doctors, kinesiologists, physiotherapists, nurses, dieticians, sport teachers
 - upgraded prevention and health education programmes, community nursing service, for children and young people at risk and for their parents within the scope of primary health care.
- MINISTRY
- Ministry of Health.



Promotion of oral health for the entire population

Prevention in regard to oral health belongs to more important prevention programmes. In order to promote oral health for all population groups, experts of dental care must be empowered to provide an integrated treatment of patients and population groups, that is, that their diagnostic and therapeutic practices are connected with the implementation of prevention and promotion activities in regard to a healthy diet.

- GOAL **Improve oral health of the citizens of the Republic of Slovenia by way of a coordinated support (information, counselling and teaching of skills in oral health maintenance by way of a suitable diet) for all population groups and by all providers of health care activities.**
- MEASURES
- establishing a uniform education and training system on oral health for all health-care staff and introduce the contents in the implementation of health and nursing education at all levels and for all population groups.
- MINISTRY
- Ministry of Health.



Detecting unhealthy life style in elderly adults and empowerment programmes

The strengthening and improving of primary health care are needed by way of expanding reference outpatient clinics to all general and family medicine outpatient clinics, taking into account special characteristics of ageing population in terms of screening nutritional status and functional abilities of seniors. Researches have shown that poor health, debilitation and dependency are not inevitable consequences of ageing. Adults who try to live healthy and apply preventive measures provided by health care system and who are included in family and social lives are likely to remain healthy, live independently for longer periods of time and they pose a lower financial burden on health-care and social systems.

GOAL **Within the scope of health-care, ensure early detection and efficient treatment of inappropriate eating habits and insufficient physical activity of adults, in addition to lower functional abilities and inabilities of elderly adults with a special focus on specific needs of women and men, socially disadvantaged and other vulnerable groups.**

MEASURES

- expanding the network of reference clinics to all general and family medicine outpatient clinics with the goal of providing good quality treatment of chronic patients and early detection of risk factors and persons at risk due to inappropriate eating and physical activity related habits, obesity and undernourishment, lack of physical activity in adults and lower functional abilities and inabilities in elderly adults,
- improving valid prevention and health education programmes for health promotion for adults and elderly adults which refer to diet (diet counselling) and physical activity for health (counselling) and functional ability,
- strengthening the network of staff in health-care educational centres (centres for health promotion, community nursing services) with standard teams for implementing health promotion programmes and providing support for empowerment in regard to healthy diet (dietitians) and regular physical activity and functional ability for all population groups (kinesiologists, physiotherapists), implementation of pilot projects and testing of programmes for the operation of inter-disciplinary counselling centres in medical centres in extended multi-disciplinary teams (cooperation of doctors, kinesiologists, physiotherapists, nurses, dietitians, sports teachers) prior to their inclusion in the health-care system,
- enhancing and improving programmes and the network of providers to support health promotion programmes for socially disadvantaged or otherwise disadvantaged population groups who, in terms of health, are most at risk, and establishing connections with the social care system and suitable programmes in local environment in connection with inter-generation or community centres,
- preparing recommendations for physical activity of chronic patients,
- providing support for the implementation of recommendations for physical activity of chronic patients.

MINISTRIES

- Ministry of Health
- Ministry of Labour, Family, Social Affairs and Equal Opportunities
- Ministry of Education, Science and Sports.



Suitable diet and physically activity – conditions for successful treatment

In regard to some diseases which have already occurred, nutrition therapy is an integral part of treatment which has a direct influence on the progress of the disease (the severity of disease, the occurrence of incidents, the speed of recovery) and, consequently, on the costs of treatment. The conditions for efficient nutrition therapy mainly include procedures for its management and evaluation and well educated, trained and experienced staff, together with the implementation of Recommendations for nutritional treatment of patients in hospitals and elderly persons in hospitals and social care settings. Approximately 40% of hospitalized patients are undernourished and for the majority of such patients, this condition is made worse during their hospitalization. The situation is even worse in case of social care settings since as many as 60% of persons older than 65 years of age are not nourished properly. This is why it is so important to introduce suitable procedures and measures which will reduce undernourishment and lower functional ability of patients.

GOALS

Provide healthy diet choices for patients, staff and visitors in the health care system and social care settings.

Improve the quality of nutrition in hospitals and in social care settings on the basis of the implementation of Recommendations for nutritional treatment of patients in hospitals and elderly persons in hospitals and social care settings.

Enable physical activity to hospitalised patient that supports their therapy. The establishment of the system for regular monitoring of nutrition status and the functional ability of elderly adults and patients and diet counselling and support treatment regarding functional ability within medical treatment.

MEASURES

- introducing systematic screening, treatment and relevant support for functional ability of patients and elderly adults with risk factors regarding lower functional ability in clinical practice and ensuring monitoring of the impact of support programmes for functional ability of patients and care recipients in social care institutions,
- introducing diet experts (dietitians, diet counsellor, clinical dietitians) to all three levels of health care and social care systems,
- introducing diet experts (dietitians, diet counsellor, clinical dietitians) to all three levels of health care and social care systems,
- ensuring conditions for physical activity for health in medical centres and social care settings as a part of regular daily activities and encouraging patients and care recipients to pursue physical and intellectual activities,
- ensuring adequate furnishing and equipment in public environments for carrying out physical and intellectual activities of care recipients.

MINISTRIES

- Ministry of Health
- Ministry of Labour, Family, Social Affairs and Equal Opportunities.

9

EDUCATION AND TRAINING AND RESEARCH

→ **Renewal of programmes and constant professional training**

It is essential that both, educational institutions, hospitals, social care settings, and wider in hospitality industry have at their disposal contents on healthy diet and physical activity for health, together with the knowledge on preparation of healthy and protective meals for target population groups. New findings must be systematically introduced in the entire education system, either in regard to the significance of healthy and balanced diet, preparation of food, advantages of locally and ecologically produced food or in regard to the significance of physical activity, and in regard to nutritional support and counselling.

GOALS **Obtaining contemporary knowledge and awareness of concepts regarding healthy diet and physical activity and healthy life style during undergraduate study (for example, pedagogic, medical studies).**

Supplementing education and training of professionals in the area of hospitality with contents on healthy composition and preparation of food.

Improving the competences of teachers and childcare workers in regard to promotion of health, physical activity, diet and promotion of physical fitness of children by way of constant professional training programmes.

MEASURES

- ensuring integrated systemically included contents of a balanced diet and physical activity for health in education system following the principle of transversal teaching,
- reviewing valid programmes and preparing the proposal for suitable supplements in order to ensure adequate knowledge on health promotion and skills on healthy composition of food and its preparation for professionals working in hospitality industry and tourism,
- constant education and training in regard to food, diet and physical activity and encouraging physical fitness of children in educational institutions.

MINISTRIES

- Ministry of Education, Science and Sports
- Ministry of Health.



Improving research activities in regard to healthy food and physical activity habits of various target groups

For successful work and the development of areas which are covered by the National Programme 2015–2025, research activity which is suitably adapted and coordinated on an inter-sectoral level must be provided for.

The rationalization and the development of research capacities are possible by systematic unification of research programme and by integrating research teams in case of larger research projects.

On the basis of priorities identified, the routine capture and collection of data on eating habits and physical activity related habits in various population groups must be improved and upgraded, and where necessary, the purpose of the use of data must be redefined, and regular reporting and exchange of data on target population groups should be ensured. It is important that data is captured by using an internationally comparable method.

GOALS

Increase the scope and the financing of basic and applied research in regard to food, diet, physical activity and physical fitness.

Ensure regularly updated recommendations and reference values for the intake of nutrients and recommendations on physical activity of various target population groups.

MEASURES

- implementing periodic cross-sectional research studies of quality and quantity nature by way of which the situation and trends are monitored as regards eating habits and physical activity habits, physical fitness, food intake and energy expenditure and safety and quality of food consumed by individual population groups in the Republic of Slovenia and its regions, and preparing proposals regarding priorities and measures within the scope of target research projects,
- improving the system of annual monitoring of physical and movement development of school-age children and young people (within the scope of the Sports Record system) for the preparation of individual and differential physical activity programmes and regular reporting on changes and ensuring feedback information, while also providing for systemic financing of analysis of this data,
- improving the diagnostic and evaluation systems for physical and movement development of school-age children and young people within the scope of the Sports Education Record for life-long monitoring of physical and movement development, the development of predictive models for health risks and ensuring that doctors have the access to data which is needed for counselling and giving referrals to suitable programmes for improving physical fitness and eating habits through health education centres,
- including all key stakeholders in the process of planning and implementing inter-sectoral and interdisciplinary research programmes in regard to diet and physical activity, integration of research institutions and their inclusion in monitoring processes,
- regular updating of guidelines and recommendations for healthy diet on the basis of reference values for the intake of nutrients for various target groups on the basis on new international and national findings,
- regular updating of recommendations for physical activity for various target groups of population on the basis on new international and national findings,
- regular improving and updating of the open platform for clinical food and the established national tool for food research, monitoring and evaluation of activities,
- examining the performance of the introduction of new profiles of experts (kinesiologists, dietitians) from the aspect of physical fitness and nutritional status at all three levels of health care and social care systems, in health-care institutions and social care settings.

MINISTRIES

- Ministry of Education, Science and Sports
- Ministry of Agriculture, Forestry and Food
- Ministry of Health.

 **Information and raising of awareness of population**

In the extensive provision of information, access to reliable, expert and understandable information by public institutions and qualified experts must be enabled to people, together with the acquisition of practical skills related to healthy nutrition and physical activity, either by information in the programme of regular and optional education and training, at events organised for experts in the health care system, or, wider, at the world wide web and from various information and other media.

GOALS **Enhance values and improve information and knowledge of people on benefits of healthy diet and physical activity for health by taking into account the aspect of gender.**
Provide reliable, expert and understandable information on diet and physical activity in all stages of life.

MEASURES

- regular and systematic communication, including the implementation of campaigns for raising awareness and promoting healthy diet, preparation of healthy meals and regular physical activity and for reducing sedentary life style,
- setting up an internet site for ensuring expert and understandable information in regard to healthy diet and physical activity,
- ensuring constant raising of awareness of consumers on proper hygienic habits and safe treatment of food and adequate information in case of health risks associated with the safety of food and food products,
- promotion of organised physical activity programmes that are free-of charge,
- implementing institutionalised promotion activities designed in an integrated manner which will include parents, children, school system, health care system and local environment (for example, active transportation to school, Slovene Food Day, Traditional Slovene Breakfast, and similar projects),
- cooperating with the media in order to ensure advertising space for the presentation of integrated contents on diet and physical activity for health for various population groups,
- presenting the content of the National Programme 2015–2025 at regular national conferences.

MINISTRIES

- Ministry of Education, Science and Sports
- Ministry of Health
- Ministry of Agriculture, Forestry and Food
- Ministry of Culture.

IMPLEMENTATION AND MONITORING

* The publication has been prepared on the basis of the Resolution on the National Programme on Nutrition and Physical Activity for Health 2015-2020 was adopted by the National Assembly of the Republic of Slovenia in July 2015 (Official Gazette of the Republic of Slovenia, No. 58/15).

Numerous measures of the National Programme 2015–2025 are outside the reach of the health-care sector and fall under the responsibility of other sectors, such as agriculture, education and sports, economy, finance, culture and labour, family, social affairs and equal opportunities. It is essential that coordinated operation between sectors and all key stakeholders is achieved. All-important stakeholders from governmental, non-governmental and private sectors, from the industry, civil society, social partners and representatives of local self-governments were included in the preparation, planning and implementation of measures.

A relevant structure must be established for the implementation and monitoring of the programme in which all important stakeholders will be included and which will provide for timely, open and efficient exchange of data and information.

The operational part of measures will be defined in periodic action plans to be adopted by the Government of the Republic of Slovenia, and in which activities and responsible institutions and the necessary financial funds will be determined in detail. These action plans will focus both on long-term and short-term effects (indicators) which will form the basis for the process monitoring of the implementation of the National Programme 2015-2020. Working groups will be formed for the preparation of implementation activities by individual priority areas and their work will be monitored by an umbrella inter-sectoral working group. All activities mentioned above will be coordinated by the ministry responsible for health, in cooperation with other responsible ministries.



Recommendations for healthy diet and physical activity

1. Enjoy your food and eat regularly. Choose a variety of foods, mainly of vegetable origin.
2. Choose whole grains and cereal products.
3. Eat a variety of fresh fruit and vegetables from local production several times a day.
4. Control the quantity of fat intake and replace saturated (animal) fats with unsaturated and unrefined oils.
5. Replace fatty meat and fatty meat products with legumes, fish, poultry and lean meat.
6. Consume daily the recommended quantities of lower-fat milk and dairy products.
7. Eat low-salt foods.
8. Limit the intake of sweet foods and soft drinks.
9. Drink enough fluids.
10. Limit alcohol intake.
11. Prepare and cook food safely and hygienically.
12. Be physically active so that energy intake is in balance with energy expenditure and you will maintain a healthy weight.