

# Public initiatives to promote fruit and vegetable consumption:

How to counter barriers to dietary change

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Fruit and vegetables and the prevention of obesity and its associated diseases.  
EGEA International Conference, 17-19 April 2007, Brussels, Belgium

## The importance of *local* data for public policy

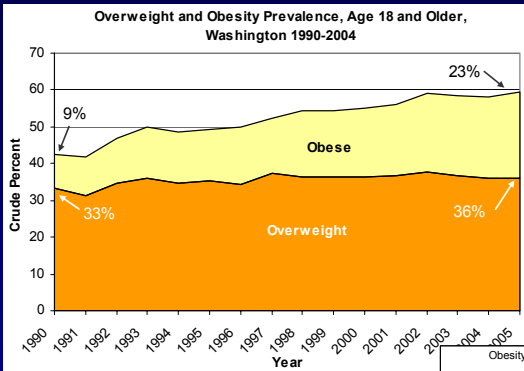
“Passion is great but data open the door”

Charlie Royer, Former Mayor, Seattle, WA

Policymakers respond to local data on:

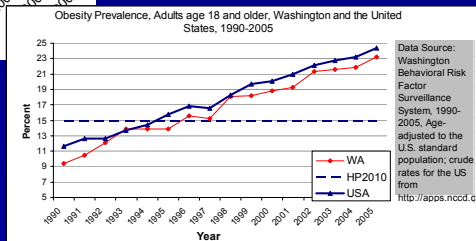
- Obesity rates
- F+V consumption patterns
- F+V access
- F+V price
- Impact of labeling and health claims

# WA State data track US trends

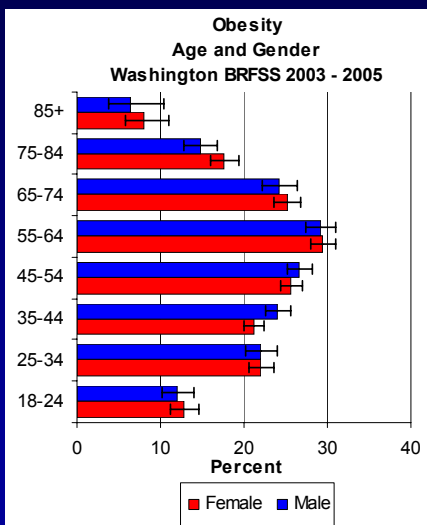


Source: Washington Behavioral Risk Factor Surveillance Data

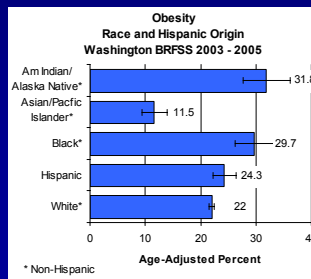
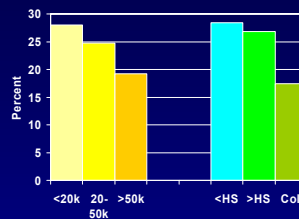
Data from WA State BRFSS supplied by the Department of Health



# Obesity rates by age and SES



## Obesity rates by SES



\* Non-Hispanic

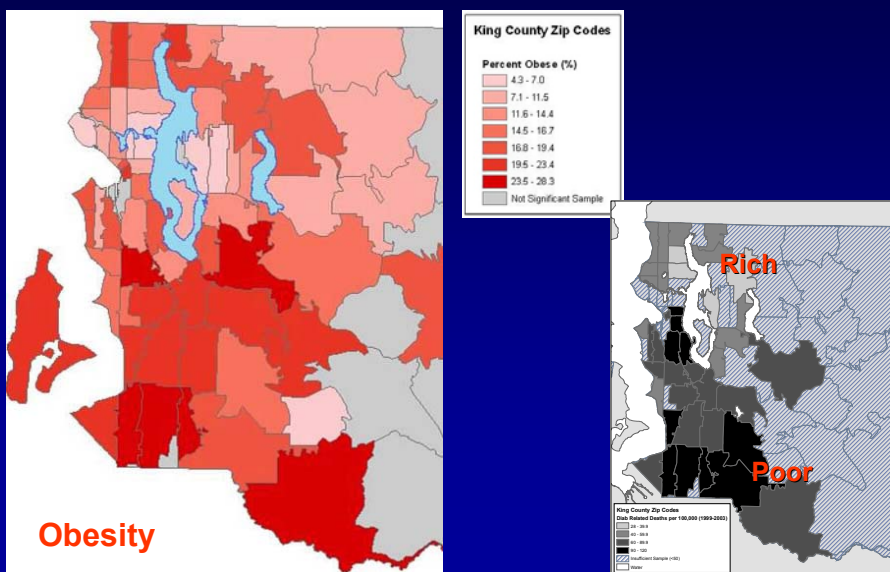
Source: WA State DOH: Behavioral Risk Factor Surveillance System (BRFSS)



# We can get obesity rates at even finer geographic scale

Analyses at Zip Code and census tract level

## Obesity and diabetes by zip code (BRFSS data – multiple years)



# What about SES influences of fruit and vegetable consumption?

Data from WA State BRFSS

## WA State BRFSS

The nutrition module asks how often certain foods are eaten: fruit juice, fruit, green salad & potatoes (other than french fries, fried potatoes or chips) and carrots.

A summary index measure is derived from these questions

Note: *how often* an item is eaten is not the same as *number of servings*

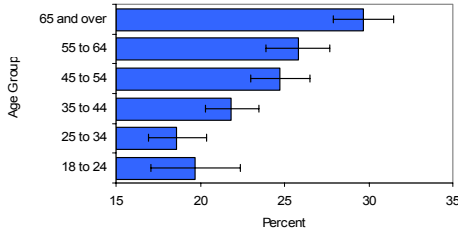
### Fruits and Vegetables (BRFSS, 2003)

These next questions are about the foods you usually eat or drink. Please tell me how often you eat or drink each one, for example, twice a week, three times a month, and so forth. Remember, I am only interested in the foods you eat. Include all foods you eat, both at home and away from home.

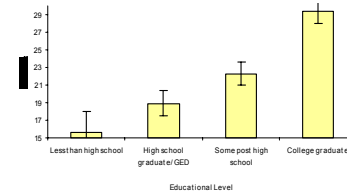
- 7.1 How often do you drink fruit juices such as orange, grapefruit, or tomato?
- 7.2 Not counting juice, how often do you eat fruit?
- 7.3 How often do you eat green salad?
- 7.4 How often do you eat potatoes not including French fries, fried potatoes, or potato chips?
- 7.5 How often do you eat carrots?
- 7.6 Not counting carrots, potatoes, or salad, how many servings of vegetables do you usually eat?

# BRFSS 2003: F+V intakes by age and SES

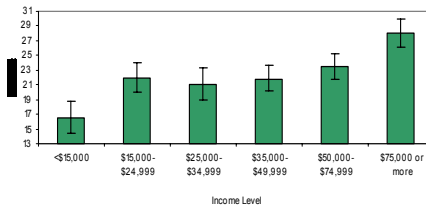
Eat Fruit and Vegetables 5 Times a Day Washington Adults by Age Group, 2003



Eat Fruit and Vegetables 5 Times a Day Among Washington Adults by Education, 2003

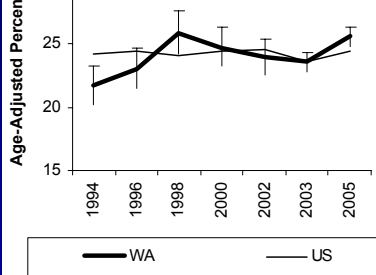


Eat Fruit and Vegetable 5 Times a Day Among Washington Adults by Income, 2003

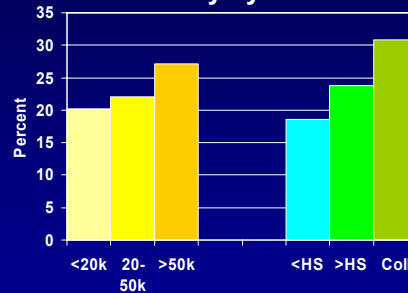


# F+V patterns track US trends

Prevalence of eating fruits and vegetables 5+ times per day WA State and US, BRFSS 1994 - 2005



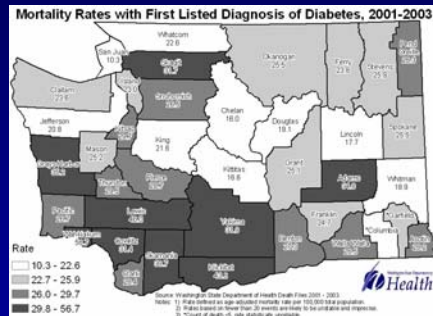
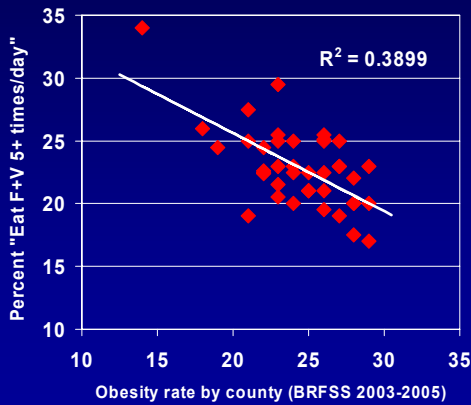
5 A Day by SES



Data from WA State BRFSS supplied by the Department of Health



# F+V consumption, obesity, and diabetes by WA county

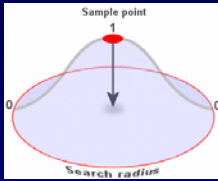


## Is it a question of access?

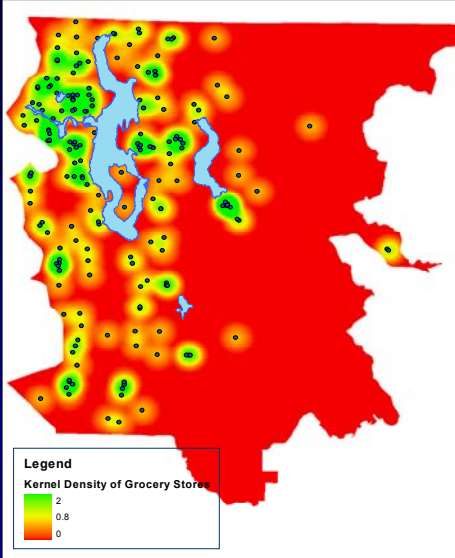
We have mapped the location of all food stores in King County:

- Grocery stores and supermarkets
- Convenience stores
- Fast food restaurants
- Starbucks
- Seattle does not have food deserts

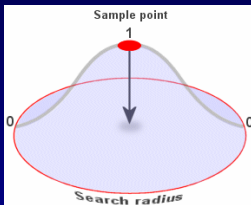
# Density of grocery stores in Seattle-King County, WA



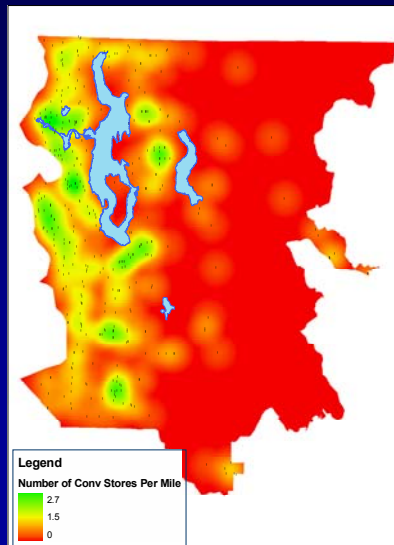
Data source: Washington State Geospatial Archive, Corporate Websites and United States Census Bureau



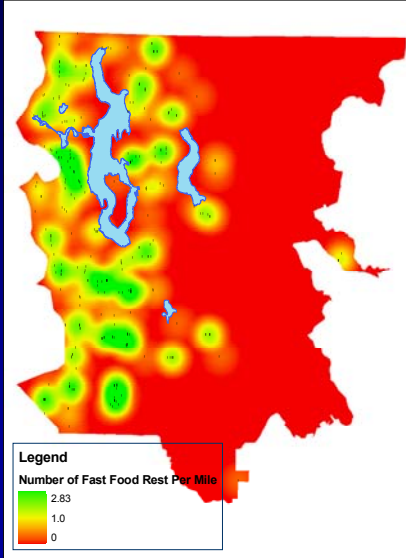
# Density of convenience stores in Seattle-King County, WA



Data source: Washington State Geospatial Archive



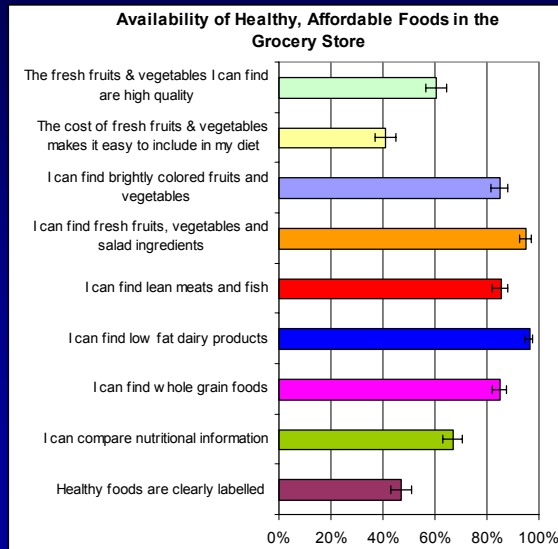
# Density of fast food outlets in Seattle-King County, WA



Data source:  
Washington State  
Geospatial Archive,  
Corporate Websites  
and United States  
Census Bureau

## Is it a question of cost?

# Access to healthy affordable foods: WA State Community consumer survey



## Nutrition objective #1

- Increase the consumption of vegetables and fruits
- Improve access to health promoting foods
- This means physical and *economic* access
- This requires public policy initiatives at local, state, or regional level
- In other words, a state plan

# The WA State plan

- Developed by WA State Department of Health to address the obesity epidemic
- Input from researchers and health professionals
- Implemented in selected communities
- Funded by CDC
- Subject to regular evaluation at local and state level

## NUTRITION AND PHYSICAL ACTIVITY ADVISORY GROUP

The *Nutrition & Physical Activity Plan* is one outcome of a year of strategic planning by the Nutrition & Physical Activity Advisory Group. The 35-person group includes officials from state and local agencies, and representatives from advocacy organizations from across the state. The group brings together expertise from education, transportation, planning, nutrition, physical activity, agriculture, parks and recreation, economic development, and health care.

<p>Brian Bonstein, MS National Park Service</p> <p>Sue Balkan, PhD, RD Washington State University</p> <p>Charlotte Claybrooke, MS Washington State Department of Health</p> <p>Cheryl Collier, PhD, MPH, MSW Public Health - Seattle &amp; King County</p> <p>Liz McNeil Crowl, BA Northwest Physical Activity Coalition</p> <p>Barbara Culp, BA Regional Alliance of Washington</p> <p>Shelley Curtis, MPH, RD Children's Alliance</p> <p>Adam Drenowski, PhD University of Washington</p> <p>Amanda Ed Bastawala, MChD, PhD Washington State Department of Health</p> <p>Hanne M. Engle, MS Western Regional Health District</p> <p>Becky Fineman Washington State Department of Health</p> <p>Mary Finn Washington State Department of Health</p> <p>Ed Gage, PhD, ACP Office of Community Development</p> <p>Chris Hawkins, BA Climate Solutions</p> <p>Doreen B. Johnson, PhD, RD University of Washington</p> <p>Jim Lach, MD, LM Washington State Department of Health</p>	<p>Julie Alvarez Matlack, BA Washington State Department of Transportation</p> <p>Jan Norman, RD, CDE Washington State Department of Health</p> <p>Doreen Cheng, MPH, RD, CD Public Health - Seattle &amp; King County</p> <p>Debra O'Brien, MS, RD Nutrition Consultant</p> <p>Elaine Piel, RD, CD, CDE Group Health Cooperative of Puget Sound</p> <p>Mary Probsting, RD Senior Nutritionist of Seattle/King County</p> <p>Wendy Repewich, PhD, FACSM Eastern Washington University</p> <p>Jennifer Sabat, PhD, RD Washington State Department of Health</p> <p>Anne Schwartz, MS, CD Spokane Regional Health District</p> <p>Linda Schwartz, BA, MBA Regional Alliance of Washington</p> <p>Caroline McNaughton Thiel, MPH, RD University of Washington</p> <p>Patricia Tollefson, RN, MEd Office of Superintendent of Public Instruction</p> <p>Kyle Ueland, MS, RD, CD Washington State Department of Health</p> <p>Julia Vandeweyer, PhD Washington State Department of Health</p> <p>Bob Weathers, EdD Seattle Pacific University</p>
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### FOR MORE INFORMATION

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Nutrition and Physical  
Activity Program  
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360-224-5775

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## A STATEWIDE PLAN FOR CREATING HEALTHY, ACTIVE COMMUNITIES

"Obesity and overweight conditions are reaching nearly epidemic levels across the nation and in Washington State. This plan takes a bold step in addressing this crisis and related health conditions."  
—Maxine Hayes, MD, MPH, Washington State Health Officer

The underlying theme of the *Washington State Nutrition & Physical Activity Plan* is the need to promote nutrition and physical activity *simultaneously* at several levels – for individuals, for families, within institutions and organizations, in communities, and through public policy.

### THE VISION

The vision for the *Washington State Nutrition & Physical Activity Plan* is that Washington residents will enjoy good nutrition, have active lives, and live in healthy communities.

The plan emphasizes building a strong foundation at the institutional, community, and policy levels so that it will be easier for individuals to choose healthy lifestyles.

It establishes nutrition and physical activity objectives to meet the overarching goals, and priority recommendations to achieve the objectives. These recommendations will serve as a guide for groups and institutions across the state as they join the effort to build health-promoting communities.

Good nutrition and physical activity are part of the solution to the nearly epidemic public health challenges facing the nation and Washington State. The active support of state and community leaders is critical to creating environments in which individual residents may improve their quality of life by living in healthy, active communities.

### INDICATORS OF AN EPIDEMIC

- Obesity rates have doubled over the last decade.
- More than half of all Washington State residents are obese or overweight.
- Rates of chronic disease and disabling conditions that are associated with poor diet and lack of exercise continue to escalate year after year.
- Rocketing medical costs for obesity-related diseases are crippling Washington State's ability to provide affordable health care coverage.
- The population over 65-years-old in Washington is increasing faster than in many other states.



## Objectives of the State Plan

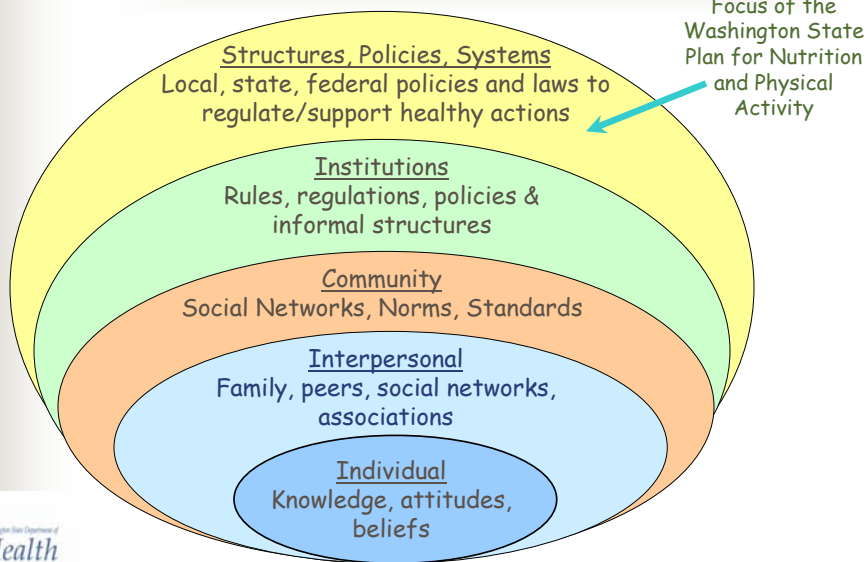
### Nutrition Objectives:

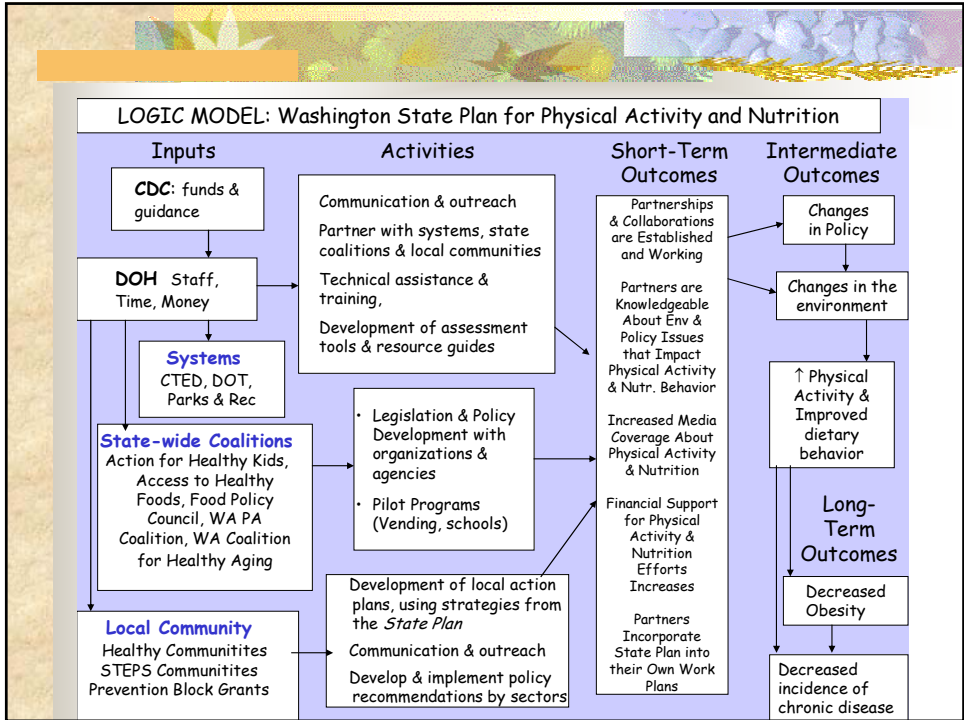
1. Increase access to health promoting foods
2. Reduce hunger and food insecurity
3. Increase the proportion of mothers who breastfeed their infants and toddlers

### Physical Activity Objectives:

1. Increase the number of people who have access to free or low cost recreational opportunities for physical activity
2. Increase the number of physical activity opportunities available to children
3. Increase the number of active community environments

## Levels of Influence in the Social-Ecological Model






## NUTRITION OBJECTIVES & PRIORITY RECOMMENDATIONS

### ACCESS TO HEALTH-PROMOTING FOODS

- Increase the consumption of vegetables and fruits
- Ensure that worksites provide healthful foods and beverages
- Ensure that schools kindergarten through grade 12 provide healthful foods and beverages




### REDUCE HUNGER AND FOOD INSECURITY

- Provide adequate support for nutrition and food programs
- Improve access to nutrition programs

### ONGOING COLLABORATION


The activities proposed in the *Nutrition & Physical Activity Plan* will take place within a context that includes working with partners, communication, cultural competence, and surveillance, assessment and evaluation. The plan will be presented to policy makers in communities and agencies across Washington State.

The goals and objectives of the plan will be achieved through ongoing collaboration between agencies, organizations, and communities. The Department of Health and its partners will evaluate progress toward each of the objectives and monitor the dissemination and impact of the plan itself.



### INCREASE THE PROPORTION OF MOTHERS WHO BREASTFEED THEIR INFANTS AND TODDLERS

- Ensure that health care settings, childcare facilities, and worksite environments are breastfeeding friendly



## Improve access to health promoting foods

<b>Sector:</b> Community	<b>Access to healthy foods</b>	<b>Free or reduced-cost opportunities for physical activity</b>
<b>Data Collection Tool:</b> Community Poll	<ul style="list-style-type: none"> <li>★ Healthier food choices are clearly labeled in the store, such that nutritional information, such as the fat and calorie content, can be evaluated.</li> <li>★ Whole grain foods available in store. 1% or non-fat milk and milk products available in store.</li> <li>★ Lean meats and fish available in store.</li> <li>★ Fresh fruits and vegetables available in store.</li> <li>★ Brightly-colored fresh fruits and vegetables, available in store.</li> <li>★ Affordable fresh fruits and vegetables are available in store.</li> <li>★ High-quality fresh fruits and vegetables are available in store.</li> <li>★ Healthy choices available on restaurant menus, such as main dish salads, low-fat or low-calorie options</li> <li>★ Healthier food choices on menus clearly labeled as "healthy".</li> <li>★ Menu substitutions to get healthier items are permissible.</li> <li>★ It is possible to get nutritional information, such as the fat and calorie content of menu items from information listed on the menu or posted in the restaurant.</li> </ul>	<ul style="list-style-type: none"> <li>★ Places available to engage in physical activity, including local schools, community recreational centers or gyms, parks, parks with playgrounds, and trails for walking and biking: (Is the destination there &amp; what is the distance)</li> <li>★ Availability of places to walk or bike to in the community</li> <li>★ How long it would take to walk to the nearest grocery or supermarket; convenience store or small grocery store; school; restaurant; parks; playgrounds; trails;</li> </ul>



## Improve access to healthy foods in workplaces

<b>Sector:</b> Worksite	<b>Access to Healthy Foods</b>	<b>Breastfeeding</b>	<b>Free or Reduced cost opportunities for physical activity</b>	<b>Increase Active Community Environments</b>
<b>Data Collection Tool:</b> Worksite Survey	<ul style="list-style-type: none"> <li>★ Low-fat milk, fresh fruits &amp; vegetables, water, 100% juice, and low fat snacks are available in cafeteria.</li> <li>★ Low-fat milk, fresh fruits &amp; vegetables, water, 100% juice, and low fat snacks are available in vending.</li> <li>★ "Healthy food" labeling used in cafeteria</li> <li>★ "Healthy food" labeling used in vending</li> <li>★ Has a written policy for healthy foods at meetings.</li> <li>★ Has a place for employees to sit &amp; eat meals</li> <li>★ Has microwaves employees can use to cook their food</li> <li>★ Has refrigerators for employees to store their food</li> </ul>	<ul style="list-style-type: none"> <li>★ Has a written breastfeeding policy.</li> <li>★ Allows flexible schedule with time to pump or breastfeed.</li> <li>★ Has a designated breastfeeding room or area.</li> <li>★ Breastfeeding room has electrical outlet, locking door, sink with soap &amp; water, refrigerator to store milk.</li> </ul>	<ul style="list-style-type: none"> <li>★ Has a policy for employees to use paid time or flex time for exercise</li> <li>★ Provides subsidy to fitness clubs or gyms</li> <li>★ Has a policy to encourage employees to take stairs (in buildings with elevators present)</li> <li>★ Has signs to promote stair use (in buildings with elevators present)</li> <li>★ Has policies to encourage alternative transportation to work</li> </ul>	<ul style="list-style-type: none"> <li>★ Has policies to encourage alternative transportation to Work (walk/bike/ public transportation)</li> </ul>



## Promote healthful foods and beverages in schools

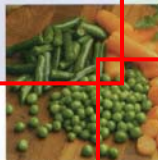
Sector: Schools	Access to Healthy Foods	More opportunities for physical activity	Policy measures
Data Collection Tool: Youth Survey	<ul style="list-style-type: none"> <li>★ Low-fat milk, fresh fruits &amp; vegetables, water, 100% juice, and low fat snacks are available in cafeteria.</li> <li>★ Adopt policies that ensure that all foods and beverages available on school campuses and school events are consistent with dietary guidelines</li> <li>★ This includes foods available from vending machines, school stores, at sports events, and parent meetings and staff meetings</li> <li>★ Increase the number of children who participate in school meals</li> <li>★ Improve the quality of school meals</li> <li>★ Minimize the sale of competitive foods and beverages</li> </ul>	<ul style="list-style-type: none"> <li>★ Make it easier to be active in schools</li> <li>★ Provide daily good quality physical education for all students</li> <li>★ Teach skills that promote lifelong physical activity</li> <li>★ Train teachers in physical education and enhance training of PE teachers</li> <li>★ Support Safe and Active Routes to School</li> </ul>	<ul style="list-style-type: none"> <li>★ Support the WA School Food Service Association (WSFA) long range legislative plan</li> <li>★ Support the use of community agriculture programs in local schools (farm to school programs)</li> </ul>



### NUTRITION OBJECTIVES & PRIORITY RECOMMENDATIONS

#### ACCESS TO HEALTH-PROMOTING FOODS

- Increase the consumption of vegetables and fruits
- Ensure that worksites provide healthful foods and beverages
- Ensure that schools kindergarten through grade 12 provide healthful foods and beverages



#### REDUCE HUNGER AND FOOD INSECURITY

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#### INCREASE THE PROPORTION OF MOTHERS WHO BREASTFEED THEIR INFANTS AND TODDLERS

- Ensure that health care settings, childcare facilities, and worksite environments are breastfeeding friendly



## NUTRITION OBJECTIVES & PRIORITY RECOMMENDATIONS

- Rendre atteignable le repère de consommation de fruits et légumes pour tous
- Améliorer l'offre alimentaire dans les établissements scolaires
- Actions spécifiques destinées aux populations défavorisées au niveau des structures d'aide alimentaire
- Renforcer les actions locales et la complémentarité entre niveau national, régional et local
- Promouvoir l'allaitement

## NUTRITION OBJECTIVES & PRIORITY RECOMMENDATIONS

1. **Plan d'actions 1 :** « Prévention nutritionnelle globale : offrir à tous les conditions d'une alimentation et d'une activité physique favorable à la santé. Rendre réellement réalisables les repères de consommation du PNNS ».
2. **Plan d'actions 2 :** « Prendre en charge l'obésité de l'enfant et de l'adulte »
- 4) de créer un véritable élan national mobilisant l'ensemble des acteurs concernés pour atteindre les objectifs fixés (professionnels de santé, monde de l'éducation, travailleurs sociaux, associations, villes et autres collectivités locales et territoriales, entreprises, ...).

**Plan d'actions 3 :** « Améliorer la prise en charge transversale de la dénutrition ou de son risque, notamment chez le sujet âgé (en ville et dans les établissements de santé et médico-social) »

**4.1.3.1. Actions directes pour permettre une réelle augmentation de la consommation de fruits et légumes par les populations économiquement défavorisées**



**4.1.3.2. actions au niveau des structures d'aide alimentaire**

**REDUCE HUNGER AND FOOD INSECURITY**


**MOTHERS WHO BREASTFEED THEIR INFANTS AND TODDLERS**

- Ensure that health care settings, childcare facilities, and worksite environments are breastfeeding friendly



## NUTRITION OBJECTIVE & PRIORITY RECOMMENDATIONS



ACCESS TO HEALTH-PROMOTING

- Increase the consumption of vegetables and
- Ensure that worksites provide healthful foods and beverages
- Ensure that schools/kindergartens through grade 12 provide healthful foods and beverages

REDUCE HUNGER AND FOOD INSECURITY

- Provide adequate support for nutrition and food programs
- Improve access to nutrition programs

INCREASE THE PROPORTION OF MOTHERS WHO BREASTFEED THEIR INFANTS AND TODDLERS

- Ensure that health care settings, childcare facilities, and worksite environments are breastfeeding friendly

EXTRAITS du RAPPORT

Eléments de bilan du PNNS (2001-2005)  
et  
Propositions de nouvelles stratégies pour le PNNS2 (2006-2008)

POUR UNE GRANDE MOBILISATION  
NATIONALE DE TOUS LES ACTEURS POUR LA  
PROMOTION DE LA NUTRITION  
EN FRANCE

Résumé des propositions de stratégies  
(actions et mesures)  
pour le PNNS2 (2006-2008)

Pr Serge Hercberg

Professeur de Nutrition  
Faculté de Médecine Paris 13/Hôpital Avicenne  
Dijon  
U557 Inserm/Inra/Cnam  
et  
Unité de Surveillance et d'Epidémiologie Nutritionnelle (USEN), InVS/Cnam/Paris 13  
Centre de Recherche en Nutrition Humaine d'Île-de-France

Janvier 2006

**4.1.1.1. Rendre atteignable le repère de consommation des fruits et légumes pour tous : au moins 5 fruits et légumes par jour, frais, en conserves ou surgelés, natures ou préparés**

**Improve a**

**Plan d'Actions « Prévention nutritionnelle globale : offrir à tous les conditions d'une alimentation plus favorable à la santé. Rendre réellement réalisables les repères de consommation du PNNS »**

N°	ACTION	MESURE	Partenaire institutionnel impliqué dans la maîtrise l'activité de la mesure	Partenaire engagé dans la Charte d'Engagement signée avec le(s) Ministère(s) pour la mise en œuvre de la mesure
<b>Actions pour la population générale</b>				
1.	<b>Abaisser le prix des fruits et légumes</b> (4.1.1.1.1)	Baisse l'VA pour les fruits et légumes (FL) Baisse charge sociale pour les producteurs Réduction des coûts Engagement des acteurs (baisse des prix, promotion)	Ministère(s) concerné(s) Ministère(s) concerné(s) Ministère(s) concerné(s)	Interprofession FL / Distributeurs
2.	<b>Améliorer la disponibilité et l'accessibilité des fruits et légumes</b> (4.1.1.1.2)	Billet restaurant pour achats fruits et légumes (FL) Distributeurs automatiques de fruits et légumes Améliorer la distribution de proximité (marchés du soir, 4 saisons,...) Affichage des prix des fruits et légumes à l'unité Faïlle des rayons fruits et légumes dans les GMS et signalétique Animation fruits et légumes dans les commerces de proximité Boîtes de fruits et légumes dans les entreprises. Chèques FL Diminuer les prix FL en restauration collective (modulation patronale) Valoriser les fruits et légumes en restauration commerciale	Ministère(s) concerné(s) Ministère(s) concerné(s)	Collectivités territoriales/ Entreprises Villes Grands distributeurs Commerçants Entreprises Entreprises/ Restauration collective Restaurants
3.	<b>Démontrer la facilité et le plaisir de consommer des fruits et légumes et valoriser l'image des fruits et légumes</b> (4.1.1.1.3)	Campagnes de communication institutionnelles Formats cours TV Caractère Intéret général pour les publicités FL Exonération achat d'espace pour communication INPES Communication actions pédagogiques régionales (PRSP) Valoriser expertise des cuisiniers de légumes	NPES NPES Ministère(s) concerné(s) Ministère(s) concerné(s)	Collectivités locales et territoriales Syndicats professionnels
4.	<b>Améliorer la qualité gustative des fruits et légumes</b> (4.1.1.1.4)	En restauration scolaire et collective. Clause de qualité FL dans les marchés Soutenir l'innovation	Ministère(s) concerné(s) Ministère(s) concerné(s)	Collectivités locales et territoriales

## Promote healthful foods and beverages in schools

Se Sc	Actions spécifiques destinées aux enfants en milieu scolaire		les vity	Policy measures
Da Co To Yo Su	11	<p><b>Améliorer l'offre alimentaire dans les établissements scolaires</b> (4.1.2.1)</p> <ul style="list-style-type: none"> <li>- inscrire dans un texte réglementaire ayant force d'obligation des normes en termes de composition des repas servis en restauration scolaire</li> <li>- augmenter la présence des fruits et des légumes (répondant à une charte de qualité) dans les repas servis en restauration scolaire et universitaire</li> <li>- subventionner les services de restauration qui s'engageraient dans le développement de la consommation des aliments identifiés comme favorables à la santé</li> <li>- généraliser l'installation de fontaines d'eau (sans gobelet) dans toutes les enceintes scolaires,</li> <li>- autoriser exclusivement, dans les foyers des établissements scolaires la vente des fruits, petits légumes, produits laitiers, pain farine 80 et aliments porteurs du logo clé nutrition-santé PNNS</li> <li>- distribuer des fruits (ou des petits légumes), 1 fois/ semaine en petite section maternelle (avec actions pédagogiques) prolongée pendant toutes les années de maternelle et de primaire dans les structures scolaires des ZEP</li> <li>- affichage obligatoire des repères de consommation du PNNS dans les structures de restauration scolaires, sur panneaux d'affichage de menus et dans structures de médecine scolaire,</li> <li>- apporter de la « compétence nutritionnelle » dans les établissements, en mutualisant un poste de diététicien par type d'établissements</li> <li>- pour les étudiants boursiers distribution des coupons exclusifs (et non échangeables) de fruits et légumes frais correspondant à 10 euros par mois, délivrés par le CROUS et permettant d'acheter tout type de fruits et légumes dans les lieux de vente.</li> </ul>	r to be s of good	<p>★ Support the WA School Food Service Association (WSFA) long range legislative plan</p> <p>★ Support the use of community agriculture programs in local schools (farm to school programs)</p>
	12	<p><b>Augmenter l'activité physique à l'école</b> (4.1.2.2)</p> <ul style="list-style-type: none"> <li>- aménager les cours de récréations pour favoriser le jeu et la pratique de l'activité physique (paniers de basket, buts multisports...)</li> <li>- partager les temps de permanence entre les activités physiques et le travail de classe.</li> <li>- augmenter le temps alloué à l'éducation physique avec une augmentation de la proportion de ce temps où les enfants sont réellement actifs, Sensibiliser les enseignants à une approche spécifique et adaptée aux capacités des enfants obèses,</li> <li>- former les surveillants ou recruter des surveillants titulaires d'un brevet</li> </ul>	hat j s in ion and g of PE and o School	



## A point of controversy: money

**Se donner les moyens de faire fonctionner le PNNS de façon pérenne pour atteindre les objectifs fixés en 2008 et mettre en place une réelle politique nutritionnelle de santé publique pour l'avenir**

<p>1.</p> <p><b>Créer un Fond National de la Promotion de la Nutrition (FNPN) qui permettra de financer préférentiellement des actions d'intérêt nutritionnel visant les populations défavorisées</b></p>	<p>Ce fond alimenté par une cotisation annuelle obligatoire des industries agro-alimentaires, des grands distributeurs, des sociétés de restauration collective, des interprofessions et des sociétés d'édition de consoles et de jeux vidéo devrait servir :</p> <ul style="list-style-type: none"> <li>• à 90 % à financer les subventions pour les chèques fruits et légumes distribués gratuitement aux populations défavorisées</li> <li>• à 3 % à financer des opérations supplémentaires de communications de l'INPES (qui viendront s'ajouter à celles déjà prévues et financées sur le budget propre de l'INPES)</li> <li>• à 2 % à financer des actions de terrain</li> <li>• à 2 % à financer les dispositifs relais au niveau de chaque région</li> <li>• à 1 % à financer l'Observatoire économique de l'offre et de la qualité nutritionnelle des aliments (OEQN)</li> <li>• à 1 % à financer les opérations de soutien à la consommation des pains type farine 80</li> <li>• à 1 % à financer des programmes de recherche en Nutrition de Santé Publique, via l'Agence Nationale de la Recherche (ANR), dans le cadre d'un appel d'offre spécifique dans le Programme National de recherche en Alimentation et Nutrition Humaine.</li> </ul> <p>Les sociétés agro-alimentaires et de restauration collective et les distributeurs concernés pourraient être exonérés partiellement (50 à 75 %) et temporairement de cette cotisation s'ils signent une charte d'engagement avec le PNNS et atteignent (en partie ou totalement) les objectifs fixés dans un délai pouvant aller jusqu'à 3 ans, voire 5 ans.</p>
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## **Conclusions**

- **There are barriers – social and economic to the adoption of healthier diets by all members of the community**
- **These barriers are beyond individual control**
- **Public initiatives to counter these barriers need to involve policy change**
- **This will require community organization and support for policy and political action**
- **As always – budget questions will be crucial**