Nutrition, Physical Activity and Obesity **Denmark**

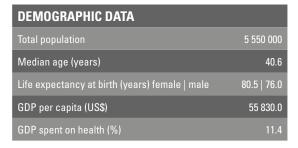




This is one of the 53 country profiles covering developments in nutrition, physical activity and obesity in the WHO European Region. The full set of individual profiles and an overview report including methodology and summary can be downloaded from the WHO Regional Office for Europe

website: http://www.euro.who.int/en/nutrition-country-profiles.

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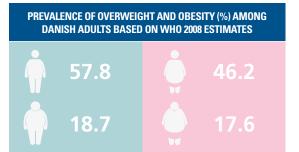


Monitoring and surveillance

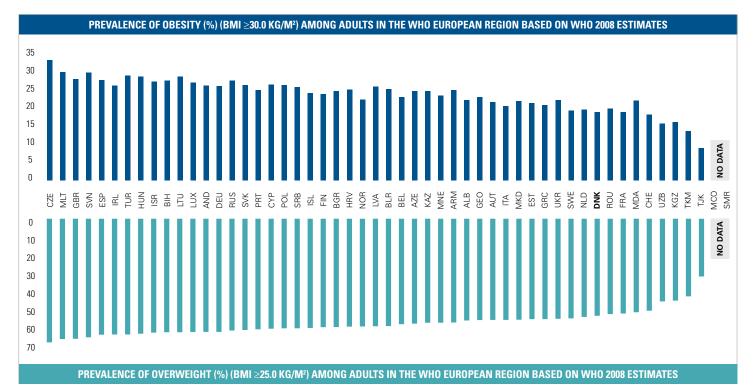
Overweight and obesity in three age groups

Adults (20 years and over)

Intercountry comparable overweight and obesity estimates from 2008 (1) show that 51.9% of the adult population (\geq 20 years old) in Denmark were overweight and 18.2% were obese. The prevalence of overweight was higher among men (57.8%) than women (46.2%). The proportion of men and women that were obese was 18.7% and 17.6%, respectively. Adulthood obesity prevalence forecasts (2010–2030) predict that in 2020, 20% of men and 19% of women will be obese. By 2030, the model predicts that 27% of men and 26% of women will be obese.



Source: WHO Global Health Observatory Data Repository (1).



Notes. The country codes refer to the ISO 3166-1 Alpha-3 country codes. Data ranking for obesity is intentionally the same as for the overweight data. BMI: body mass index. Source: WHO Global Health Observatory Data Repository (1).

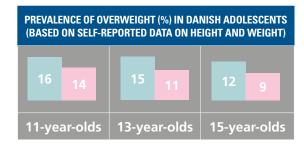
¹ Report on modelling adulthood obesity across the WHO European Region, prepared by consultants (led by T. Marsh and colleagues) for the WHO Regional Office for Europe in 2013

Adolescents (10–19 years)

In terms of prevalence of overweight and obesity in adolescents, up to 16% of boys and 14% of girls among 11-year-olds were overweight, according to data from the Health Behaviour in School-aged Children (HBSC) survey (2009/2010).² Among 13-year-olds, the corresponding figures were 15% for boys and 11% for girls, and among 15-year-olds, 12% and 9%, respectively (2).

Children (0–9 years)

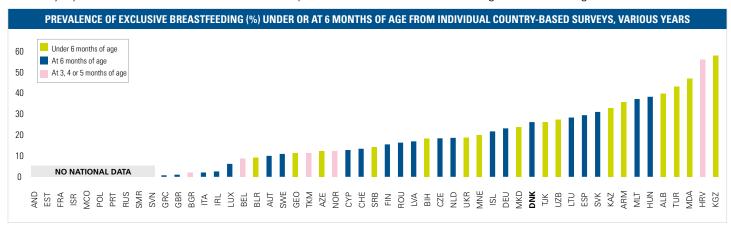
No prevalence figures are available for overweight and obesity in schoolchildren based on measured intercountry comparable data. Denmark is not yet participating in the WHO European Childhood Obesity Surveillance Initiative (COSI).



Source: Currie et al. (2).

Exclusive breastfeeding until 6 months of age

Nationally representative data from 2005 show that the prevalence of exclusive breastfeeding at 6 months of age was 25.3% in Denmark.3

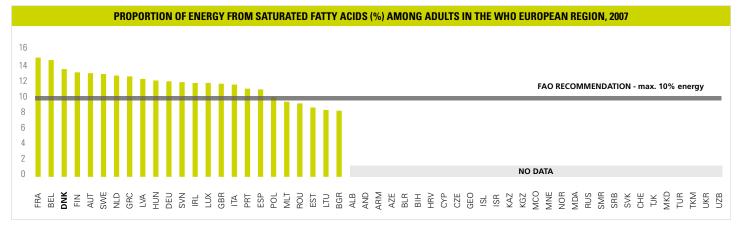


Notes. The country codes refer to the ISO 3166-1 Alpha-3 country codes. Data were derived from country-specific publications on surveys carried out in this field, not as part of a European-wide survey. Due to different data collection methods of the country-specific surveys, any comparisons between countries must be made with caution.

Source: WHO Regional Office for Europe grey literature from 2012 on breastfeeding.

Saturated fat intake

According to 2007 estimates, the adult population in Denmark consumed 13.2% of their total calorie intake from saturated fatty acids (3).



Notes. The country codes refer to the ISO 3166-1 Alpha-3 country codes. Ranking of data was carried out so that country data at the right-hand side of the graph — with values below the FAO recommendation — fall within the positive frame of the indicator. FAO: Food and Agriculture Organization of the United Nations.

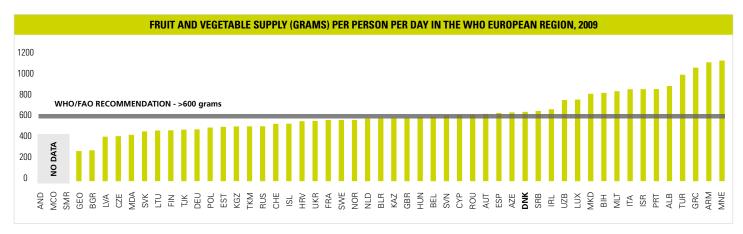
Source: FAOSTAT (3).

² Based on 2007 WHO growth reference.

 $^{^{\}rm 3}$ WHO Regional Office for Europe grey literature from 2012 on breastfeeding

Fruit and vegetable supply

Denmark had a fruit and vegetable supply of 645 grams per capita per day, according to 2009 estimates (3).

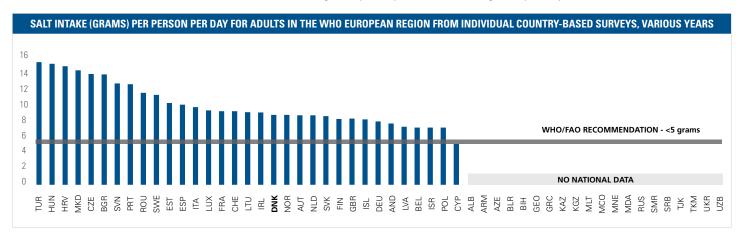


Notes. The country codes refer to the ISO 3166-1 Alpha-3 country codes. Ranking of data was carried out so that country data at the right-hand side of the graph — with values above the WHO/FAO recommendation — fall within the positive frame of the indicator.

Source: FAOSTAT (3).

Salt intake

Data from 2008 show that salt intake in Denmark was 9.8 grams per day for men and 7.3 grams per day for women (4).



Notes. The country codes refer to the ISO 3166-1 Alpha-3 country codes. Data were derived from country-specific publications on surveys carried out in this field, not as part of a European-wide survey. Due to different data collection methods of the country-specific surveys, any comparisons between countries must be made with caution. Ranking of data was carried out so that country data at the right-hand side of the graph – with values below the WHO/FAO recommendation – fall within the positive frame of the indicator.

Source: WHO Regional Office for Europe (4).

lodine status

According to the most recent estimates on iodine status, published in 2012, the proportion of the population with an iodine level lower than 100 μ g/L was 48.1% (5, 6).

Physical inactivity

In Denmark, 36.6% of the population aged 15 years and over were insufficiently active (men 35.8% and women 37.3%) according to estimates generated for 2008 by WHO (1).

Policies and actions

The table below displays (a) monitoring and evaluation methods of salt intake in Denmark; (b) the stakeholder approach toward salt reduction; and (c) the population approach in terms of labelling and consumer awareness initiatives (4).

Salt reduction initiatives

Monitoring & evaluation		Stakeholder approach		Population approach							
					Labelling			Consumer	awareness i	nitiatives	
Industry self-reporting		Industry involvement	Food reformulation	Specific food category		Brochure Print		Website Software	Education	Conference	Reporting
Salt content in food	xxx								Schools Health care facilities		
Salt intake	xxx										
Consumer awareness		xx		16% salt reduction by 2012							
Behavioural change									identies		
Urinary salt excretion (24 hrs)	XX (spot urine)				xxx	XXX	xxx	XXX	xxx		

Trans fatty acids (TFA) policies

Legislation	Type of legislation	Measure
2003	Mandatory restriction	No mandatory declaration of TFA in food levels but mandatory compositional restrictions of TFA in fats and oils to <2% of the total fatty acids

Source: WHO Regional Office for Europe grey literature from 2012 on TFA and health, TFA policy and food industry approaches.

Price policies (food taxation and subsidies)

Taxes	School fruit schemes
✓ Tax on sugar content✓ Tax on fat content✓ Tax on sugar-sweetened beverages by volume	V

Sources: WHO Regional Office for Europe grey literature from 2012 on diet and the use of fiscal policy in the control and prevention of noncommunicable diseases; EC School Fruit Scheme website (7).

Marketing of food and non-alcoholic beverages to children (8)

The Danish Government considers that unhealthy food advertising to children should be eliminated through self-regulation, with possible further action if this does not work, in which case it would be in favour of the European Union (EU) (9). The private self-regulating Forum of Responsible Food Marketing Communication (10) – launched in December 2007 – has developed a "Code of responsible food marketing communication to children" addressing food advertising targeted at children (11). The partners in this initiative are the Danish Food and Drink Federation within the Confederation of Danish Industries, the Danish Chamber of Commerce, the Federation of Retail Grocers in Denmark, TV2 | DANMARK, the Danish Brewers' Association, the Danish Newspaper Publishers' Association, the Danish Association of Internet Media, the Danish Association of Advertising and Relationship Agencies, and the Danish Magazine Publishers' Association.

Physical activity (PA), national policy documents and action plans

Sport	Target groups	Health	Educ	ation	Transp	ortation
Existence of national "sport for all" policy and/or national "sport for all" implementation programme	Existence of specific scheme or programme for community interventions to promote PA in the elderly	Counselling on PA as part of primary health care activities	Mandatory physical education in primary and secondary schools	Inclusion of PA in general teaching training	National or subnational schemes promoting active travel to school	Existence of an incentive scheme for companies or employees to promote active travel to work
✓			✓ b		✓a	✓a

^a Clearly stated in a policy document, partially implemented or enforced. ^b Clearly stated in a policy document, entirely implemented and enforced. Source: country reporting template on Denmark from 2009 developed in the context of a WHO/EC project on monitoring progress on improving nutrition and PA and preventing obesity in the EU.

Leadership, partnerships and professional networks on health-enhancing physical activity (HEPA)

Existence of national coordination mechanism on HEPA promotion	Leading institution	Participating bodies

Source: country reporting template on Denmark from 2009 developed in the context of a WHO/EC project on monitoring progress on improving nutrition and PA and preventing obesity in the EU.

PA recommendations, goals and surveillance

Existence of national recommendation on HEPA	Target groups adressed by national HEPA policy	PA included in the national health monitoring system
2006 Nordic Plan of Action on better health and quality of life through diet and physical activity	General population	√

Source: country reporting template on Denmark from 2009 developed in the context of a WHO/EC project on monitoring progress on improving nutrition and PA and preventing obesity in the EU.

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