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19. Encourages EU companies to be more proactive, by making further investments, and to take the lead in new technology know-how and engineering skills in order to remain key partners with the main oil producing countries; notes that investments are particularly needed to develop the refining and exploration capabilities in order to cope with increasing demand;
20. Notes that Corporate Social Responsibility should be improved within the major energy companies in order to channel more private investment in the energy industry into energy-saving programmes and alternative energy technologies and related R&D;
21. Invites the Member States to coordinate policy interventions in tackling the increase in energy prices; calls on the Commission to prepare an analysis based on Member States' best practice policy measures in their response to high energy price challenges;
22. Calls on the Council to reach an agreement as soon as possible on the next key steps towards achieving a fully liberalised internal energy market, as this will contribute to reducing EU vulnerability to energy prices and enhance security of supply; reaffirms in this respect its strong support for the completion of the EU internal energy market;
23. Instructs its President to forward this resolution to the Council, the Commission, and the governments and parliaments of the Member States.
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White Paper on Nutrition, Overweight and Obesity-related health issues

P6_TA(2008)0461

European Parliament resolution of 25 September 2008 on the White Paper on nutrition, overweight and obesity-related health issues (2007/2285(INI))

(2010/C 8 E/18)

The European Parliament,

- having regard to the Commission's White Paper of 30 May 2007 entitled 'A Strategy for Europe on Nutrition, Overweight and Obesity related health issues' (COM(2007)0279),
- having regard to its resolution of 1 February 2007 on promoting healthy diets and physical activity ⁽¹⁾,
- having regard to the Second World Health Organisation (WHO) European Action Plan for Food and Nutrition Policy 2007-2012, adopted by the WHO Regional Committee for Europe in Belgrade, 17-20 September 2007, and the European Charter on Counteracting Obesity, adopted by the WHO Regional Office in 2006,
- having regard to the objectives set by the WHO European Ministerial Conference held in Istanbul on 15-17 November 2006, with the European Charter on Counteracting Obesity,
- having regard to the Global Strategy on Diet, Physical Activity and Health, adopted by the 57th World Health Assembly on 22 May 2004,
- having regard to the conclusions of the Employment, Social Policy, Health and Consumer Affairs Council of 2 and 3 June 2005 concerning obesity, nutrition and physical activity,

⁽¹⁾ OJ C 250 E, 25.10.2007, p. 93.

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- having regard to the conclusions of the Employment, Social Policy, Health and Consumer Affairs Council of 5 and 6 December 2007 entitled 'Putting an EU strategy on Nutrition, Overweight and Obesity related Health Issues into operation',
 - having regard to the WHO Regional Office for Europe publication of 2006 entitled 'Physical activity and health in Europe: evidence for action',
 - having regard to the Commission's White Paper on sport of 11 July 2007 (COM(2007)0391),
 - having regard to the Commission's Green Paper of 25 September 2007 entitled 'Towards a new culture for urban mobility' (COM(2007)0551),
 - having regard to Rule 45 of its Rules of Procedure,
 - having regard to the report of the Committee on the Environment, Public Health and Food Safety and the opinions of the Committee on the Internal Market and Consumer Protection, the Committee on Agriculture and Rural Development and the Committee on Women's Rights and Gender Equality (A6-0256/2008),
- A. whereas overweight and obesity and diet-related disease are becoming growing epidemics and are major contributors to the leading causes of mortality and morbidity in Europe,
- B. whereas it is scientifically proven that the incidence rate and the gravity of nutrition-related diseases affect men and women differently,
- C. whereas, according to the WHO, more than 50 % of the European adult population are overweight or obese,
- D. whereas more than 5 million children are obese and almost 22 million are overweight and these figures are rising rapidly, so that by 2010 a further 1,3 million children per year are predicted to become overweight or obese,
- E. whereas obesity and overweight-related diseases are thought to take up 6 % of government health care expenditure in some Member States; whereas the indirect costs of those conditions, through reduced productivity and sick leave for example, are considerably higher,
- F. whereas abdominal obesity is scientifically recognised as one of the main predictors of several weight-related diseases, such as cardiovascular disease and type 2 diabetes,
- G. whereas eating habits established in childhood often endure into adulthood and research has shown that obese children are more likely to become obese adults,
- H. whereas European citizens are living in an 'obesogenic' environment in which sedentary lifestyles have raised the risk of obesity,
- I. whereas poor diet is a major risk factor for other diet-related diseases that are the major killers across the EU including coronary heart-disease, cancers, diabetes and stroke,

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- J. whereas the WHO's 2005 report on health in Europe analytically demonstrates that a large number of deaths and illnesses are caused by seven major risk factors, six of which (hypertension, cholesterol, the body mass index, inadequate fruit and vegetable consumption, lack of physical activity and excessive alcohol consumption) are related to diet and physical exercise, and whereas those health determinants must be acted upon simultaneously with a view to preventing a significant number of deaths and illnesses,
- K. whereas physical activity, coupled with a healthy balanced diet, is the primary method of prevention against overweight; whereas an alarming one in three Europeans do not exercise at all in their free time, while the average European spends over five hours a day sitting down; whereas many Europeans do not consume a balanced diet,
- L. whereas the number of lessons devoted to sport has decreased in the past decade at both primary and secondary school level, and there are major disparities among Member States with regard to facilities and equipment,
- M. whereas with the European Charter on Counteracting Obesity the WHO has set the target of achieving visible progress in fighting child obesity over the next four or five years, with the objective of reversing the current trend by 2015 at the latest,
- N. whereas a healthy diet must have certain quantitative and qualitative properties and be geared to individual needs and always in strict adherence to dietetic principles,
- O. whereas a diet must include the following categories of criteria to be considered as having 'health value': (1) nutrient and energy content (nutritional value), (2) health and toxicological criteria (food safety), (3) natural food properties ('aesthetic/gustatory' and 'digestive' qualities), (4) ecological nature of food production (sustainable agriculture),
- P. whereas overweight and obesity should be tackled by means of a holistic approach acting across government policy areas and at different levels of government, especially at national, regional and local level, with all due regard for subsidiarity,
- Q. whereas the significance of alcohol, with its high calorie intake, and of smoking, both of which distort the appetite for food and drink and carry many established hazards to health, should not be overlooked,
- R. whereas account must be taken of the social dimension of the problem, and in particular the fact that the highest incidence rates of overweight and obesity are registered in lower socio-economic groups; whereas this situation could lead to greater health and socio-economic inequalities, particularly for the most vulnerable groups of the population, such as the disabled,
- S. whereas socio-economic inequalities are taking on another dimension with the rise in raw material prices (such as cereals, butter and milk) which is unprecedented both in terms of the number of products concerned and the extent of the increases,
- T. whereas the conjunction of higher raw material prices and the opacity of the rules governing large-scale distribution in some Member States has led to an escalation in the prices of basic food products of high nutritional value, such as fruit and vegetables and sugar-free dairy products, which is eroding the budgets of the majority of households in the EU, and whereas the EU needs to rise to this challenge,
- U. whereas the disabled make up 15 % of the active population of the EU; whereas, moreover, studies show that the disabled are at greater risk of obesity owing, inter alia, to pathophysiological changes in the metabolism of energy and the composition of the body, and to muscle atrophy and physical inertia,

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- V. whereas all multi-stakeholders' initiatives should be facilitated in order to improve dialogue, the exchange of best practice and self-regulation, for example through the EU Platform for Action on Diet, Physical Activity and Health as well as the Working Group on Sport and Health and the EU network Health-Enhancing Physical Activity (HEPA),
- W. whereas different traditional cuisines should be promoted as part of our cultural heritage, but at the same time action should be taken to ensure that consumers are aware of their actual impact on health in order to facilitate informed decisions,
- X. whereas consumers in Europe should have access to the information necessary to enable them to select the best sources of nutrition for an optimal diet in the light of their individual life-style and state of health,
- Y. whereas recent industry initiatives on advertising self-regulation will address the balance and nature of food and beverage advertising; whereas self-regulatory measures need to cover all forms of marketing on the Internet and other new media; whereas food advertising accounts for around half of all advertising broadcast during children's TV viewing times and whereas there is clear evidence that TV advertising influences short-term consumption patterns of children aged between 2 and 11 years; whereas the use of new forms of marketing using all technological means and in particular the so-called 'advergames' involving cell phones, instant messaging, video games and interactive games on the Internet are a source of concern; whereas numerous food producers, advertising and marketing firms and health and consumer protection associations are now displaying considerable commitment in the EU Platform for Action on Diet, Physical Activity and Health and can already point to successful studies and projects,
- Z. whereas malnutrition, which particularly affects older people, costs European healthcare systems similar amounts as obesity and overweight,
1. Welcomes the abovementioned White Paper on Nutrition as an important step in an overall strategy to stem the rise in obesity and overweight and address diet-related chronic diseases, such as cardiovascular disease including heart disease and stroke, cancer and diabetes, in Europe;
 2. Reiterates its call to Member States to recognise obesity as a chronic disease; believes that care should be taken to avoid stigmatising individuals or groups of people who are vulnerable to nutrition, overweight and obesity-related health problems due to cultural factors, diseases such as diabetes or pathological consumption such as anorexia or bulimia, and advises Member States to ensure that these people have access to appropriate treatment under their national systems;
 3. Considers a multilevel and comprehensive approach to be the best way to fight obesity among the EU population and points out that there are many European programmes (on research, health, education, life-long learning) that can help us to tackle this real scourge;
 4. Considers that policy geared to food quality can make an important contribution to promoting health and reducing obesity and that comprehensible information on labels is the key to enabling consumers to choose between good, better and less good nutrition;
 5. Approves the setting up of the High-Level Group on Nutrition and Physical Activity and European health survey systems collecting physical and biological measurements such as the Health Examination Survey (HES) and the European Health Interview Survey (EHIS) monitoring system, as effective tools for policy-makers and all actors involved in improving knowledge and the exchange of best practice in the fight against obesity;
 6. Calls on the Commission to ensure balanced representation of women and men in the future High-Level Group on Nutrition and Physical Activity, so as to target the problems more closely and propose the best solutions in keeping with the gender dimension, i.e. for men on the one hand and for women on the other;
 7. Recognises the substantial role of self-regulation in fighting obesity, and stresses the need for clear and concrete targets for all parties concerned and independent monitoring of these targets; notes that regulation is sometimes necessary to deliver substantive and meaningful change across all sectors of industry,

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particularly when concerning children, in order to ensure consumer protection and high standards of public health; notes with interest 203 commitments undertaken in the context of the EU Platform for Action on Diet, Physical Activity and Health aiming at product reformulation, reduction in advertising to children and labelling for the promotion of a balanced diet; considers that membership of the platform should be extended to include manufacturers of computer games and consoles as well as Internet providers;

8. Calls, however, for more tangible measures especially targeted at children and at-risk groups;
9. Urges the Commission to take a more holistic approach to nutrition and make malnutrition, alongside obesity, a key priority in the fields of nutrition and health, incorporating it wherever possible into EU-funded research initiatives and EU-level partnerships;
10. Considers that European consumers should have access to the information necessary to allow them to choose the best sources of nutrients needed to achieve and maintain the optimal nutrition intake best suited to their individual lifestyle and health; believes that greater attention should be paid to improving the health literacy of citizens to empower them to make effective decisions about their own and their children's diets; considers that informing and educating parents on nutritional issues should be carried out via the relevant professionals (teachers, cultural events organisers and health professionals) at the appropriate locations; is convinced that consumer information, nutritional education and food labelling should be based on consumer research;
11. Draws attention, in this context, to the importance of linking a future school fruit programme to a broader educational strategy, for example by means of lessons on diet and health in primary schools;
12. Draws attention to the fundamental role played by parents in nutrition education in the family and the decisive contribution they can make to combating obesity;
13. Calls on Member States, regions and local entities to be more proactive in developing 'activity-friendly communities', especially in the context of urban planning to make municipalities conducive to physical exercise as a daily routine and by creating opportunities in the local environment that motivate people to engage in leisure time physical activity; this can be achieved by introducing local measures to reduce reliance on cars and promoting walking and by mixing in a sensible way commercial and residential development, by promoting public means of transport, parks and accessible sports facilities, biking trails and pedestrian crossings; invites municipalities to promote a network of 'towns for a healthy lifestyle' providing common actions to fight obesity;
14. Encourages Member States to adopt the notion of active commuting both by schoolchildren and workers; encourages local authorities to consider this notion as a priority when assessing urban transport and planning;
15. Notes that the provision of areas where children and young people can experience nature gives them an alternative to traditional leisure activities and at the same time enhances the faculties of imagination and creativity and the urge to explore;
16. Calls on sports organisations to bear in mind in particular that girls in their later teenage years often cease to participate actively in sporting activities; considers that sports organisations have a large role to play in maintaining the interest of girls and women in participating in various sports activities;
17. Stresses that the private sector has a role to play in reducing obesity by developing new and healthier products, but that it should also be further encouraged to develop clear information systems and improve labelling to enable consumers to make an informed choice;
18. Stresses that the European Union should take a leading role in formulating a common approach and promoting coordination and best practice between Member States; is convinced that an important European added value can be provided in fields such as consumer information, nutritional education, media advertising, agricultural production and food labelling in particular with indication of trans-fat content; calls for the development of European indicators such as waist size and any other risk factor relating to obesity (especially abdominal obesity);

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Our priority: children

19. Invites the Commission and all actors to set as a priority the fight against obesity from the early stages of life, bearing in mind that eating habits established in childhood often endure after many years;

20. Calls for information campaigns to raise awareness among pregnant women about the importance of a balanced and healthy diet, with an optimal provision of some nutrients during pregnancy, and for women and their partners to be made aware about the importance of breastfeeding; recalls that breastfeeding, delaying weaning until babies are six months old, introducing children to healthy foods and controlling portion sizes can all help to prevent children becoming overweight or obese; stresses, however, that breastfeeding is not the sole means of fighting obesity, and that balanced eating habits are acquired over a long period; emphasises that awareness campaigns should bear in mind that breastfeeding is a private matter and should respect women's free will and choice;

21. Calls on Member States to ensure that national health services promote specific nutritional advice for pregnant women and menopausal women, since pregnancy and the menopause are two important stages in women's lives when there is an increased risk of storing fat;

22. Urges Member States to propose guidelines drawn up by experts on how to improve physical activity as early as the pre-school period and to promote nutritional education already at this early stage;

23. Considers that it is primarily at school level that steps have to be taken to ensure that physical activity and balanced eating become part of the behaviour of a child; calls on the High Level Group on Nutrition and Physical Activity to develop guidelines on nutrition policies at school and for the promotion of nutritional education as well as the continuation of such education in the post-school period; calls on Member States to include the benefits of a balanced diet and physical exercise in school curricula;

24. Further, asks Member States, local entities and school authorities to monitor and to improve the quality and nutritional standards of school and kindergarten meals including by means of specific training and guidelines for catering staff, quality control of caterers and guidelines for healthy food in canteens; underlines the importance of adapting portion sizes to needs and including fruit and vegetables in these meals; asks for more nutrition education on a balanced diet and encourages a move away from the sale of foods and beverages high in fat, salt or sugar and of poor nutritional value in schools; advocates instead making fresh fruit and vegetables more available at points of sale; invites competent authorities to ensure that at least three hours a week of the school curriculum are devoted to physical activities, in accordance with the objectives of the abovementioned White Paper on sport, and asks those authorities to provide plans for the construction of new public sports facilities, accessible also to disabled persons, and for the safeguarding of existing sports facilities in schools; welcomes a possible 'fruit at school' project to be financially supported by the EU similar to the current school milk programme; calls for solutions to be found to continue the free distribution of fruit and vegetables to schools and charitable institutions during 2008 as requested by some Member States, pending the entry into application of the school fruit scheme on 1 January 2009;

25. Calls on Member States' local authorities to promote the availability and affordability of leisure facilities and to promote the creation of opportunities in the local environment that motivate people to engage in leisure time physical activity;

26. Asks Member States, local entities and school authorities to ensure that healthy options are provided in school vending machines; considers that sponsorship and advertising for so-called HSSF products (those high in sugar, salt, fat) of poor nutritional value in school buildings should be subject to the request or with the express permission of school authorities, and should be monitored by pupil-parent associations; considers that sport organisations and teams should set an example with regard to exercise and healthy diet, and calls for a voluntary commitment by all sports organisations and teams to promote balanced nutrition and physical activity especially among children; assumes that all sports organisations and teams promote balanced nutrition and physical activity; stresses, moreover, that the European sports movement should not be blamed for overweight and obesity in Europe;

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27. Welcomes the reform of the Common Market Organisation of the Common Agricultural Policy (CAP) allowing more fruit and vegetables to be served in schools, provided that the quality and chemical safety of these products is monitored;

28. Urges the EU, and in particular the Ecofin Council, to be more flexible over Member States' application of lower VAT rates for necessities of a social, economic, environmental or health-oriented nature; in this respect, calls on those Member States which have not yet done so to cut VAT on fruit and vegetables, recalling that Community law authorises them to do so; calls, in addition, for current Community legislation to be amended to allow fruit and vegetables to benefit from a very low rate of VAT (under 5 %);

29. Welcomes EU initiatives such as the setting-up of the 'EU mini-chefs' website and the European Day for Healthy Food and Cooking held on 8 November 2007; recommends the organisation of information campaigns to improve awareness about the relationship between energy-dense products and the equivalent in time of physical activity needed to burn off their calories;

Informed choices and availability of healthy products

30. Believes that product reformulation is a powerful tool for reducing the intake of fat, sugar and salt in our diets and encourages food producers to further engage in reformulation of energy-dense, nutrient-poor foods in order to reduce fat, sugar and salt and enrich their fibre, fruit and vegetable content; welcomes commitments undertaken on a voluntary basis by producers to implement nutrition criteria for the formulation of foods;

31. Stresses that nutrition labelling must be mandatory and clear to help consumers make a healthy choice of food;

32. Calls for an EU-wide ban on artificial trans-fatty acids; urges Member States to follow good practice in controlling the content of substances (e.g. salt) in food and calls on the Commission to draw up a programme for exchanging best practice across Member States; points out that special exemptions should be provided for PDO (protected designation of origin), PGI (protected geographical indication), TSG (traditional speciality guaranteed) and other types of traditional products in order to preserve original recipes; to this end, has high expectations of the future Green Paper on quality policy in agriculture in terms of better quality and PGI schemes;

33. Stresses that the present state of scientific knowledge shows us that an excessive consumption of trans-fatty acids (over 2 % of total energy intake) is linked to significantly higher cardiovascular risks; deeply regrets, therefore, that only a few European governments to date have acted to reduce European consumers' cumulative exposure to the artificial trans-fatty acids and saturated fatty acids that are present in numerous processed products of low nutritional value;

34. Underlines the fact that industrially processed trans-fatty acids pose a serious, well documented and unnecessary threat to the health of Europeans and should be addressed with an appropriate legislative initiative seeking to eliminate effectively industrially processed trans-fatty acids from food products;

35. Calls for an analysis of the role played by artificial flavour enhancers such as glutamates, guanylates and inosinates, particularly in ready meals and industrially produced foodstuffs, in order to determine their influence on consumption patterns;

36. Calls on industry to review single-serving portion sizes, providing a broader range of smaller portion options;

37. Welcomes the Commission's new proposal for the revision of Council Directive 90/496/EEC of 24 September 1990 on nutrition labelling for foodstuffs ⁽¹⁾; urges it to ensure that labelling is visible, clear and easily understandable to the consumer;

⁽¹⁾ OJ L 276, 6.10.1990, p. 40.

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38. Further asks the Commission to undertake a comprehensive review of the health impact of the CAP to assess whether policy changes could be made which would facilitate an improvement in diets across Europe;

Media and advertising

39. Calls on all operators in the media sector, in cooperation with the Member States and sports organisations, to create additional incentives for more physical exercise and taking up a sport in all media;

40. Is aware of the importance of the media in informing, educating and persuading in relation to promoting a healthy and balanced diet as well as their role in the creation of stereotypes and body image; considers the voluntary approach adopted in the Audiovisual Media Services Directive ⁽¹⁾ on the advertising of food of poor nutritional value directed at children to be a step in the right direction, to be specifically monitored, and asks the Commission to bring forward stricter proposals if the 2011 review of the Directive declares the voluntary approach to have failed in this field; calls on Member States and the Commission to encourage media service providers to develop codes of conduct regarding inappropriate audiovisual commercial communication relating to food and beverage products and urges operators to come forward with concrete actions at national level to implement or to strengthen this directive;

41. Calls for the industry to exercise particular care when advertising food products specifically targeted at children; asks for protected times and for restrictions on commercials for unhealthy food specifically targeted at children; any such restrictions should also cover new forms of media such as online games, pop-ups and text messaging;

Health care and research

42. Acknowledges that health professionals, especially paediatricians and pharmacists, should be made aware of their essential role in the early identification of patients at risk of overweight and cardiovascular disease and considers that they should be major actors in the fight against the obesity epidemic and non-communicable diseases; calls, therefore, on the Commission to develop European anthropometric indicators and guidelines on cardiometabolic risk factors associated with obesity; emphasises the importance of carrying out systematic routine measurements in association with screening for other cardiometabolic risk factors, in order to evaluate overweight/obesity co-morbidities at primary care level;

43. Draws attention to the problem of malnutrition, a state in which a deficiency, excess or imbalance in the diet has a measurable adverse impact on tissue, body shape and body function; notes also that malnutrition is a heavy burden both for individual wellbeing and for society, particularly the health care system, and that it results in increased mortality, longer hospital stays, greater complications and reduced quality of life for patients; recalls that extra days in hospital and treatment of complications due to malnutrition cost billions of euros in public funding every year;

44. Highlights estimates that show that 40 % of patients in hospitals and between 40 and 80 % of people in elderly care homes are malnourished; calls on Member States to improve the quantity and quality of food in hospitals and elderly care homes which will lead to a reduction in the time spent in hospitals;

45. Is convinced of the need for full regulation of the qualification of medical professionals as 'clinical dietitians' as well as 'nutritionists';

46. Calls on the Commission to promote best medical practices, for example through the EU Health Forum, as well as information campaigns on obesity-related risks and abdominal obesity in particular drawing attention to the cardiovascular risks; urges the Commission to provide information about the dangers of 'home diets', especially if they involve the use of anti-obesity drugs taken without medical prescription; calls on the Commission to devote greater attention to the problems of malnutrition, inadequate nutrition and dehydration;

⁽¹⁾ Directive 2007/65/EC of the European Parliament and of the Council of 11 December 2007 (OJ L 332, 18.12.2007, p. 27).

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47. Calls on Member States to implement Directive 2002/46/EC of the European Parliament and of the Council of 10 June 2002 on the approximation of the laws of the Member States relating to food supplements ⁽¹⁾;

48. Calls on the Commission and Member States to fund research into the links between obesity and chronic diseases such as cancer and diabetes as epidemiological research needs to identify the factors which are most associated with the increase in obesity prevalence, such as identification and evaluation of multi-variate biomarkers in subgroups of subjects, to elucidate the biological mechanism leading to obesity; also calls for studies comparing and evaluating the effectiveness of different interventions, including psychological research; calls on Member States to set up a system to ensure access to and quality delivery of services for the prevention, screening and managing of overweight, obesity and associated chronic diseases;

49. Welcomes the inclusion of 'diabetes and obesity' as a priority in the context of the theme within the Seventh Framework Programme for Research and Technological Development (FP7) dedicated to health;

50. Encourages further scientific research into and monitoring of abdominal obesity in the context of FP7;

51. Calls on the Commission to promote Europe-wide information campaigns aimed at the general public and, in particular, at the medical profession, to raise awareness of the risks of abdominal obesity;

52. Calls for serious account to be taken of nutrition in all European policies and options;

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53. Instructs its President to forward this resolution to the Council and Commission and to the governments and parliaments of the Member States and candidate countries and to the World Health Organisation.

⁽¹⁾ OJ L 183, 12.7.2002, p. 51.

Cross-border collective copyright management

P6_TA(2008)0462

European Parliament resolution of 25 September 2008 on collective cross-border management of copyright and related rights for legitimate online music services

(2010/C 8 E/19)

The European Parliament,

- having regard to Commission Recommendation 2005/737/EC of 18 October 2005 on collective cross-border management of copyright and related rights for legitimate online music services ⁽¹⁾ (hereinafter 'the 2005 Recommendation'),
- having regard to the Treaty establishing the European Community, in particular Articles 95 and 151 thereof,
- having regard to Articles II-77 and II-82 of the Charter of Fundamental Rights of the European Union,
- having regard to Article 97a of the Lisbon Treaty,

⁽¹⁾ OJ L 276, 21.10.2005, p. 54.