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FOOD, NUTRITION AND HEALTH POLICY IN THE RUSSIAN FEDERATION

Report on a WHO Workshop

Moscow, Russian Federation
14–17 October 1997

SCHERFIGSVEJ 8
DK-2100 COPENHAGEN Ø
DENMARK

TEL.: +45 39 17 17 17
TELEFAX: +45 39 17 18 18
TELEX: 12000

E-MAIL: POSTMASTER@WHO.DK
WEB SITE: [HTTP://WWW.WHO.DK](http://WWW.WHO.DK)

TARGET 16

HEALTHY LIVING

By the year 2000, there should be continuous efforts in all Member States to actively promote and support healthy patterns of living through balanced nutrition, appropriate physical activity, healthy sexuality, good stress management and other aspects of positive health behaviour.

ABSTRACT

Jointly with the Institute of Nutrition of the National Academy of Medical Sciences in Moscow and the Centre for Food Policy at Thames Valley University, United Kingdom, the WHO Regional Office for Europe organized a workshop on nutrition and food policy in the Russian Federation. The workshop addressed issues related to the agriculture sector, the food industry and consumers, illustrated the impact of nutrient recommendations on agriculture and consumer food intake and convinced the health professionals present of the need to work with other sectors when developing nutrition and health policy. The participants gained the insight into diverse perspectives of food and nutrition policy necessary to help them tackle the food and nutrition challenges of the Russian Federation. In addition, the workshop provided useful feedback that will enable the nutrition programmes at the Regional Office and WHO headquarters to finalize a training module on food and nutrition policy.

Keywords

FOOD INDUSTRY
NUTRITION POLICY
HEALTH POLICY
RUSSIAN FEDERATION

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Dr M. Saveliev, Director of the External Relations Board at the Ministry of Health, is also thanked for the importance attached to this initiative. Finally, the enthusiastic participation in the workshop of the health professionals who attended was much appreciated.

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Foreword

This report summarizes a pilot workshop, designed to test workshop materials on both nutrition and food policy, held in October 1997 at the Education and Methodical Centre, Golitsino (a conference centre outside Moscow) in the Russian Federation. It was jointly organized by the Institute of Nutrition of the National Academy of Medical Sciences in Moscow, the Centre for Food Policy at Thames Valley University, London, and the Programme for Nutrition Policy, Infant Feeding and Food Security at the WHO Regional Office for Europe, Copenhagen. Arrangements in Moscow were coordinated by the Ministry of Health, which also supplied additional support and coordination.

The purpose of the workshop was to enable participants to look at the relationship between nutrition policy and food policy. It drew together lecturers from within and outside the Russian Federation and was intended to help participants gain insights into the diverse perspectives on food and nutrition policy. Lectures were accompanied by working groups at which participants were set tasks to help them draw together perspectives and data which could help the Russian Federation tackle its food and nutrition challenges.

The five public health priorities presented at the workshop by the Russian Institute of Nutrition were:

1. Protein deficiency
2. Elimination of micronutrient deficiency, especially selenium, and need to restore the vitamin manufacturing industry
3. Children's food industry and at same time to promote breastfeeding
4. Raise awareness within the public of the importance of nutrition
5. Food safety.

The Workshop facilitated an intense discussion on why the Russian Federation has set nutrient, especially protein, recommendations much higher than those adopted by the international community. Recent evidence shows that excess protein, especially from meat consumption exacerbates the incidence of cardiovascular diseases, cancer and obesity which are prevalent in the Russian Federation. The current nutrition policy in the Russian Federation promotes agriculture policies that advocate increasing meat production in preference to increased vegetable production. Discussions also touched on the relative merits of nutrition-based and food-based guidelines.

This workshop incorporated issues related to the agriculture sector, the food industry and consumers. This helped to illustrate the impact nutrient recommendations have on agriculture production and consumers intake and convinced health professionals about the need to work with other sectors when developing nutrition and health policy.

The overall feedback from participants, both informally and formally, was very positive. The content was well received and judged to have had a high applicability to participants' work. Participants enjoyed the opportunity to gain new ideas and ways of working with other professionals from across the Russian Federation. They agreed that follow-up workshops should include participants both from other public services and from consumers and food suppliers in the effort to produce a health promoting food and nutrition health policy for the Russian Federation.

Dr Aileen Robertson
Acting Regional Adviser for Nutrition
WHO Regional Office for Europe, Copenhagen

Professor Tim Lang
Thames Valley University, London
United Kingdom

Background information

The Russian Federation presents a number of interesting challenges for health and social policy developments as the 20th century draws to a close. While the major policy developments in the rest of Europe are concerned with adding “life to years”, “health to life” and “years to life”, the major concern in the newly independent Russian Federation is the lowering of the life expectancy figures. It is the first time such a trend has occurred in a major industrial nation. The concern in the Russian Federation is thus with regaining “life years lost”.

There is some argument about the reasons for the shortening of life expectancy. Reasons are complex and have been related to factors such as inequalities, increased alcohol consumption levels and food consumption/dietary intake (Leon et al 1997). Although there are health problems from acute diseases such as tuberculosis (TB) and other infectious diseases, the major health problems are still those related to chronic diseases which are lifestyle related.

The Russian Federation comprises over one half of the former USSR’s population. Its health policy in recent years has been the subject of considerable review and policy appraisal (e.g. WHO 1992, State Research Centre of Preventive Medicine 1994, International Conference on Healthy Nutrition Policies in Russia 1997). Its food availability is estimated to be more than adequate; the FAO, for instance, estimates an average availability of 2990 Kcal per person per day in the period 1993–1995 (FAO 1997).

Fresh meats and dairy products were consumed in vast quantities at affordable prices in the old USSR, aided by a central planning system which coordinated and assured distribution to the population. In a free market economy, such safeguards with reference to food supply and cost no longer exist. Despite this realignment of economic priorities, the fact remains that the average Russian citizen is suffering from an intake of excess protein and fat, rather than a deficiency. The 55% obesity rate is an indication of this worrying trend (Premature Death in the New Independent States, 1997). The high protein and fat intake may be partially explained by reference to the old standards established by the former Soviet Union’s Ministry of Health.

The recommended daily intake (RDI) for protein was set at almost twice that of Europe and North America (Ministry of Health Protection USSR 1991). The over-consumption of protein and fat in the form of meat products remains, despite the high price of these products, as relative to fresh fruit and vegetables the cost per kilo is comparative. There is also a legacy from the original high RDI in perpetuating a belief that such high intakes of fat and protein are necessary for maintenance of health. This has resulted in many health professions believing that populations are suffering from under nutrition rather than over nutrition (Bobak and

Marmot 1996). This excess intake combined with low levels of physical activity contribute to the high obesity levels (Matilainen et al 1994). With the ending of central planning in favour of a market approach, there is evidence of growing inequalities.

The purpose of this Workshop was to bring together participants to explore current policy on health and supply; develop an intersectoral action plan; and evaluate current work in the light of new objectives and changing circumstances. Health promotion based on the provision of education is unlikely to be effective unless individuals have access to healthy and affordable food. On the other hand, an approach based on non-scientific and out-of-date thinking is unlikely to succeed.

The argument for a food policy approach is that it incorporates broader social issues such as access to food as well as nutrition education. Other issues include debates about food security and the impact of trade regulations and international food safety rules. In particular, food and nutrition policy have to take account of the social and economic changes which the Russian Federation is going through. These are characterized by the opening of financial and economic markets and the move from a controlled economy to a more open market one. Nutrition education needs to acknowledge and work with these issues accepting them as part of the influences on a healthy diet.

Introduction to the Workshop

The Workshop was requested by the Ministry of Health, Russian Federation. The brief was to carry out a workshop on food and nutrition policy. The purpose was to:

- bring together personnel from across the Russian Federation to address problems of food and nutrition;
- pilot materials that help achieve a better understanding of both nutrition and food policy;
- help participants gain knowledge, skills and confidence about latest developments in food and nutrition policy; and apply these to a Russian situation;
- clarify directions for the future both for participants and the policy process.

The structure of the Workshop included many group work sessions and was highly participative. The style of the workshop was to have a mix of styles, not just “top-down” lectures by experts. Engagement and dialogue was sought in all the sessions. Although lectures and formal sessions were a strong feature of the Workshop, the idea was to bring people together to discuss and not just listen. The Workshop was organized on a teamwork basis, in conjunction with existing networks developed by the WHO Nutrition programme. It drew upon working relationships

developed across the Russian Federation by partner organizations and elsewhere in Europe.

Initially, the intention had been to draw together participants from a wide variety of sectors, but in the event, Workshop participants were drawn mainly from diverse institutions within the public health sector. This feature was remarked on in final course evaluations (Annex 4).

Workshop description

This Workshop was organized as part of WHO's commitment to improving health and nutrition standards in line with the recommendations of the Ottawa Charter, the Jakarta Declaration and the European Health for All initiatives (WHO 1987 and 1997). It represents an attempt to tackle issues related to food and nutrition within the broader framework of food as opposed to nutrition and dietary policy (WHO 1994), recognizing that food choice is influenced by many factors. The Workshop was intended for those who have some part to play in food and nutrition policy making at a regional or national level as opposed to a local or community level.

This document is a report of a pilot project to test out materials on food policy and nutrition in the Russian Federation. The purpose was to develop materials and test them in a Workshop situation. The Centre for Food Policy at Thames Valley University in London was commissioned jointly by WHO headquarters and the WHO Regional Office for Europe to develop the materials. The Workshop was organized by Dr Robertson in conjunction with the Institute of Nutrition in Moscow. Another aim was to begin to develop a teaching pack on food and nutrition policy for use in various regions and countries, similar to those developed by WHO with regards to local community food initiatives (Oshaug 1994, WHO 1991). Materials were developed to test out the usefulness of ideas and practices in the following areas:

- the nutritional thinking behind dietary guidelines
- food and nutrition policy in public policy
- nutrition surveillance programmes
- food education and awareness
- food law in an international context
- policy development at local, national, regional and international level.

The Workshop was run over a four-day period in October 1997 in the Moscow area. There were 24 participants representing a wide range of disciplines within the health sector from medically qualified practitioners through food engineers to a sanitary doctor working in a polyclinic (Annex 3). The needs and experiences of participants from the regions were at times distinct and specific from those from the Moscow area.

The Workshop was developed around a core team consisting of:

Dr Aileen Robertson, Acting Regional Adviser for Nutrition, WHO
Regional Office for Europe, Copenhagen
Chizuru Nishida, Nutrition Programme, WHO headquarters, Geneva
Professor Tim Lang, Professor of Food Policy, London, United Kingdom
Dr Martin Caraher, Thames Valley University, London, United Kingdom
Dr Alexander Baturin, Deputy Director, Institute of Nutrition, Moscow
Dr Olga Netrobenko, Institute of Nutrition, Moscow
Dr Natalia Vartapetova, Centre for Preventive Medicine, Moscow
Professor Anna Ferro Luzzi, WHO collaborating centre, Rome, Italy
Ciaran Lane, Consultant, Food Law and Food Safety, Dublin, Ireland
Tom McCarthy, Consultant, WHO Regional Office for Europe,
Copenhagen

Workshop content

Workshop outline

The final programme of the Workshop is in Annex 1.

Day one

The Workshop was formally opened by the Irish Ambassador, Mr Ronan Murphy, who informed the group that the Irish had brought the first supermarket to the Russian Federation, in Moscow. He told of the close relations between Ireland and the Russian Federation, in particular over meat and meat products. He demonstrated that there were similarities between the two countries, especially with regard to their high premature mortality. Ireland too is having to change its food policy and is setting up a new Food Authority.

The Workshop then opened with formal addresses from Dr Tulupov and Dr Robertson. An introduction to the Russian nutrition situation was given by Professor Volgarev, Dr Tulupov and Professor Tutelyan. All agreed that this was an important time for policy and practice in the areas of nutrition, food surveillance and food safety. The Russian Federation's considerable tradition of monitoring food problems now faces new challenges with the transition to a market economy. These range from specific issues of supply, such as training needs, to wider issues such as public education and the role of the mass media.

Dr Robertson summarized thinking on nutrition within WHO and international scientific nutrition bodies. The major health challenges in the Russian Federation are diet-related and require shifts in both professional and public thinking.

Day two

Professor Ferro Luzzi outlined the steps for assessing national nutrition. These include ascertaining health problems, choosing areas for priority

work, formulating hypotheses, setting indicators, establishing goals, identifying data collection centres and organizing the flow of information. Drs Baturin and Martinchik outlined surveillance approaches and methods in the Russian Federation, and suggested changes in dietary sources of nutrients. They outlined the results from food balance enquiries and sales figures, giving estimates of energy derived from fats, for instance.

Dr Vartapetova reported on studies she had conducted on public attitudes to food and health in the Russian Federation. These were a combination of random sample surveys and focus groups. They showed a great interest on health and suggested that public understanding was good in that the people realize that the greatest causes of premature death are non-infectious diseases such as heart disease and cancers more than issues such as AIDS; not that this is an either/or health issue.

Ciaran Lane outlined his experiences from working with the meat industry in the Russian Federation and offered an assessment of how health and food industry personnel can work together to improve standards of supply. Professor Lang outlined the official definitions of food policy from bodies such as WHO, OECD and the World Bank. He suggested that the Russian Federation illustrates the complexity of the food policy context. Many approaches to food are “top down” planning when the food economy may not be amenable to such a control model. Tom McCarthy outlined current European Union (EU) food law and the implications of the new General Agreement on Tariffs and Trade for national food regulations. Even though the Russian Federation is outside the EU, it is already being influenced by EU legislation. Worldwide, the trends are away from prescriptive law and product testing and towards risk assessment, codes of practice and the primary responsibility of producers. This change of philosophy requires new cooperation between public health specialists and food producers.

In the working groups, participants addressed what the current “drivers” of the Russian Federation’s food and health policy are and asked what the impact on health is and what the challenges are.

Day three

In the working group, participants began to outline what they consider the main health experiences have been in the transition from a planned to a market economy. They were asked to assess these as negative and positive, with a view to setting priorities for action. For instance, one group suggested that a negative result of the transition had been a decline in the importance accorded to food production, but the inverse of this was that there was a more positive emphasis on variety of foods being made available. Dr Robertson argued for a shift from nutritional to food-based dietary guidelines.

Professor Perevalov gave an account of how his city, Perm, has assessed its food and nutritional needs and of the resources available to tackle them. He outlined his action plan for Perm. Professor Lang and Dr Caraher gave an account of international experiences, such as those in Wales and Finland, of policy development, highlighting the different levels at which policy development can occur. They gave case study illustrations of projects coordinated by a variety of organizations. These included: nongovernmental organizations, companies, local authorities, national and regional bodies, such as Health Promotion Wales.

The day concluded with working groups discussing what to do in a situation where there was a food-related health problem. In one case this concerned a school meals service and in the other a wider-scale problem of heart disease. Groups had to analyse what data and support they would need to develop an evidence-based action plan.

The group then came together to work on a Statement from the Workshop. This is in Annex 7.

Day four

In working groups, participants were asked to produce a memorandum which in theory they could send to their superior (in whatever context) to argue the case for a nutrition and food policy action. This exercise was designed to bring together all the thinking and input from the whole Workshop. Some excerpts are included in Annex 8.

There was then a round table feedback session in which all participants and lecturers took turns to say what they had gained from the Workshop. Everyone was asked to state both positive and negative features they had experienced.

Closing the Workshop, Professor Tutelyan thanked the Workshop participants and lecturers, emphasizing that public health professionals need to work closer and better together. Dr Robertson thanked everyone. Chizuru Nishida from WHO Geneva gave a summary of WHO's vision of how such Workshops can help public health education. Professor Tutelyan then gave everyone their certificates of attendance.

The Workshop closed at midday to allow people to return the sometimes long distances they had to go.

Workshop organization

The Workshop was intensive, working through long hours, but broken up by sessions in different formats. Two different formats were used: information sessions through lectures and working groups. In lectures, data and arguments were presented by specialists; in working groups, participants were split into small groups to produce answers to set problems. Lecturers were in the various working groups to be resources,

but groups were run by and recorded by participants. Invaluable assistance was provided to participants and lecturers by Dr Natalia Vartapetova of the Research Centre for Preventive Medicine in Moscow. Reports were given on working groups. Throughout the Workshop, there was a good atmosphere of sharing of people's experiences, skills and knowledge. Case studies were presented in the lecture/information sessions from both the Russian Federation and elsewhere in the developed world.

The services at Golitsino were good, with large and well equipped rooms. Reading materials were provided. There was excellent simultaneous Russian-English translation.

Each evening, the organizers and lecturers met to review the day's work and to anticipate the next day's work. Full and frank feedback was essential to the Workshop's success. Extensive discussions were held to anticipate what would be most appropriate for the next day's work. Due to changes early in the programme, some sections planned were moved and altered, and variations were made to the working groups' tasks. Particular effort was made to ensure the best use was made of the skills of present and guest lecturers and participants.

Throughout the Workshop simultaneous translation of a very high quality was provided. When heated discussions occurred within the Workshop, the translators as well as all participants and lecturers exhibited great patience and good humour. This ensured both a lively atmosphere and good intellectual stimulation.

Course evaluations

Course evaluations

Two approaches to evaluation were adopted. The first was the constant monitoring and ongoing evaluation undertaken by the planning team; this occurred each evening after the evening meal. The second was the end-of-course evaluations, which were approached in two ways: round-table feedback and written evaluation forms. Both were overwhelmingly positive.

Continuous evaluation

Each evening after the formal sessions were over, the core planning team (course coordinators, guest lecturers and facilitators) met to review progress and plan for the next day. This regular evaluation enabled immediate changes to be made to ensure that the participants were receiving what was appropriate. For example, in the original plan, it had been intended to run a working group in which participants would be asked to plan a food and nutrition policy for the Russian Federation. On the day before this was to run, the evening review session agreed that this exercise would be too broad a task and that participants would benefit more from a more specific task. The exercise was accordingly changed to

a case study where the provision of school meals was in some difficulty and the participants were asked to solve the problems. End of the day monitoring was crucial to how the Workshop was run and enabled adaptation to occur.

End-of-course evaluations

On the last morning, a session was held in which all participants, facilitators, lecturers and course coordinators were invited to describe their experiences of the course. They were asked to give both positive and negative experiences. In addition, participants were asked to complete a written questionnaire. The results of this are given in Annex 4. The results from both forms of evaluation were positive.

Feedback from the organizers

In the nightly discussions by the core planning team, a number of common themes emerged which should be borne in mind in developing the teaching pack on nutrition and food policy. Firstly, it is essential to adapt such materials for local situations. If a lecture was being given on European Food Law, for instance, the work after it should have an exercise tailored to the local situation. Secondly, case studies benefit from being translated in advance. Thirdly, course design should allow for considerable flexibility in order to meet the needs of participants and local organizers. At the same time, the Workshop's overall aims and objectives need to be kept in sight. Fourthly, the success of a Workshop is highly dependent upon having good representation on the planning and implementation team from the host site.

Round-table feedback

The value of this feedback was that it allowed people to express their feelings immediately and to hear what others had thought and experienced. It also allows participants to hear both the views of other participants and those of the course facilitators and organizers. The argument against such a method is that leads to conformity and a fear of expressing an opinion counter to the dominant one in the group. While recognizing the disadvantages it does provide another perspective to the evaluation process.

On the negative side, feedback included:

- the method of working in groups, workshops and providing feedback were at first unfamiliar to some of the participants;
- more time was needed in small groups to complete the large tasks set;
- participants were drawn too narrowly from public health and nutrition and much would have been gained from having other sectors represented as well.

On the positive side, feedback included:

- there was a general feeling that the mixture of lectures and working groups and tasks was a good way to work. This was particularly felt and expressed by many of the women in the group;
- outside lectures were felt to be particularly interesting and of a high standard;
- the case studies were especially interesting and the contrast between Moscow and the regions was illuminating;
- people's energy, enthusiasm and optimism grew as the Workshop progressed.

Written evaluations

In all, nine evaluation sheets were returned. Five of the participants were female and four male. Their births ranged from 1951 to 1973. Six were medically qualified, one was a sanitary doctor, one a food engineer and one an engineer-technologist. One worked with health care, four within research and development, one in an out-patient's polyclinic and two in food and nutrition science. Of the nine who returned questionnaires, five were in supervisory positions.

Most found the course relevant. There were requests for more information on specific issues and that more time should be devoted to specific actions and implementation. There were also specific requests for information about new technologies and more about food and nutrient production. There was a recommendation that more information concerning more information about health promotion which presumably relates to information on local, national and international initiatives.

Respondents considered the course content very interesting. Specific mention was made of the examples of food policy development from other countries (Wales, Norway) and regions (North Karelia) in improving food and nutrition. Balancing this, the same issue identified by many participants as being the most enjoyable was identified by another as the least enjoyable.

Another aspect of the course that was liked by participants was the opportunity to draw up plans, projects and recommendations on nutrition and to have the opportunity to identify partners and sectors involved in implementation of food and nutrition policy.

The way of working was mentioned by a number of participants as being particularly enjoyable, especially the tasks in the working groups, discussions and illustrative materials. The presentations by Dr Aileen Robertson and Professor Volgarev on the state of legislation were also singled out for positive attention.

Issues identified that participants would like to see more of in future courses included:

- intersectoral cooperation
- international cooperation
- partnerships in implementing the food and nutrition policy
- long-term projects
- new technologies in agriculture capable of intensifying the production of basic foods.

Respondents had a high opinion of the lecturers and the course materials. The round table feedback session on the last day (see above) produced many positive comments also reflected in the written evaluation forms. The course was identified as useful and necessary. Participants pointed to the importance of broadening experiences and being exposed to new ideas and concepts.

The overall opinion of the Workshop was that it was very good and that it had a high level of applicability to their work. Participants enjoyed the opportunity to share ideas and thoughts, to be exposed to new concepts and ways of working.

Interestingly, no mention was made in either written or verbal evaluation of language barriers. The quality of the translators was extraordinarily high. In addition, as many of the resource documents as possible were made available in Russian. Others were in English.

The possibility of a follow-up Workshop was identified as a priority by many of the participants. The inclusion of other organizations in such a Workshop was also identified as a high priority. This would include those from other public bodies, the voluntary sector and the food industry.

Recommendations

1. A health promoting food and nutrition policy for the Russian Federation should be produced.
2. A follow-up Workshop should be held in the Russian Federation in 1998, building on the experiences and suggestions from this Workshop, particularly the issue of widening the representation from other sectors.
3. There should be a Workshop in the Russian Federation to help understanding of the specific issue of risk assessment and the application of Hazards Analysis Critical Control Point systems of food control.
4. The teaching materials and lectures presented at this Workshop should be developed into a coherent training pack for wider use in WHO and other bodies to promote the better integration of food and nutrition policies.

5. The recommendations made in the Statement from course participants (Annex 7) should be pursued.

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Annex 1

Programme

Tuesday, 14 October

- Opening and welcome: Dr Aileen Robertson and Dr Vasili Tulupov
- Outline of the Workshop: Dr Aileen Robertson and Professor Tim Lang
- *Address by the Irish Ambassador*: Ronan Murphy
- The Russian situation: historical background, current status of policy and personnel, the history and development of monitoring and standards: Professor Michail Volgarev, Dr Vasili Tulupov, Professor Viktor Tutelyan
- The nutritional challenge: Dr Aileen Robertson

Wednesday, 15 October

- Dietary requirements and the establishment of a monitoring programme: Professor Anna Ferro Luzzi
- Surveys in Russia and food balance research: Dr Alexander Baturin
- Studies of children and infants: Dr Arseny Martinchik
- A study of public attitudes to health: Dr Natalia Vartapetova
- What is food policy?: Professor Tim Lang
- Experience of altering food supply in Russia: Ciaran Lane
- Food Law in Europe and world trends – WTO and USA: Tom McCarthy
- Working Groups: what currently drives the food system? What is the impact of transition of Russia's economy on health? Who are the key change agents?

Thursday, 16 October

- Working Group: Building a new food and nutrition policy for Russia. What are the main problems to be addressed? What action can be taken and by whom?
- Case study: the City of Perm, its nutritional problems and action plan: Professor Alexander Perevalov
- 2 Working Groups: problem-solving scenario (a) reduction of school meals standards (b) heart disease rates are rising. Both groups discussed what data would be needed to develop an action plan.
- Examples of policy development – local, national, regional, nongovernmental organizations and industry: Professor Tim Lang and Dr Martin Caraher
- Debate on the role and value of food norms

Friday, 17 October

- Working Groups: developing a plan and writing a memorandum
- Review of the Russian process of nutritional plan formulation: Professor Viktor Tutelyan
- Feedback from all participants
- Future plans: Dr Aileen Robertson, Chizuru Nishida, Dr Martin Caraher and Professor Tim Lang
- Workshop closed

Annex 2**Lecturers, Facilitators and Interpreters****Lecturers**

Dr Martin Caraher (*Course Coordinator*)
Centre for Food Policy
Wolfson Institute of Health Sciences
Thames Valley University
32–38 Uxbridge Road, Ealing
GB-London W5 2BS
United Kingdom
Tel: +44 181 280 5060
Fax: +44 181 280 5125
E-mail: martin.caraher@tvu.ac.uk

Professor Anna Ferro-Luzzi
Director, WHO collaborating centre for nutrition
Istituto Nazionale della Nutrizione
Unit of Human Nutrition
Via Ardeatina 546
I-00179 Rome
Italy
Fax: +3965031592
Tel: +3965042677
E-mail: afl@inn.inn.it

Mr John Ciaran Lane
Consultant, Food Law and Food Safety
31 Barnhill Avenue, Dalkey
Dublin
Ireland
Fax/phone: +35312858974
E-mail: 106151.1740@compuserve.com

Professor Tim Lang (*Course Coordinator*)
Centre for Food Policy
Thames Valley University
Wolfson School of Health Sciences
32-38 Uxbridge Road, Ealing
GB-London W5 2BS
United Kingdom
Fax: +44 1812805137
Office: +44 1812805070
E-mail: Tim.Lang@tvu.ac.uk

Ronan Murphy
Ambassador
Embassy of Ireland
Moscow
Russian Federation

Professor Alexander Perevalov
Head of the Chair of Hygiene
Perm Medical University
Perm
Russian Federation
Fax: 3422 33 88 70
E-mail: med@pgma.perm.su

Dr Vasili Tulupov
Chief Doctor of the San-epid
of the Government of the
Russian Federation

Professor Viktor Tutelyan
Deputy Director, Institute of Nutrition
Academy of Medical Sciences
Utinsky Proezd 2/14
109240 Moscow
Russian Federation
Tel: +7 095 298 1864
Fax: +7 095 298 1872

Professor Michail Volgarev
Director, Institute of Nutrition
Academy of Medical Sciences
Utinsky Proezd 2/14
109240 Moscow
Russian Federation
Tel: +7 095 298 1864
Fax: +7 095 298 1872

Facilitators

Dr Alexander K. Baturin
Deputy Director
Institute of Nutrition
Academy of Medical Sciences
Utinsky Proezd 2/14
109240 Moscow
Russian Federation
Tel: +7 095 298 1864
Fax: +7 095 298 1872

Dr Olga Netrebenko
Institute of Nutrition
Academy of Medical Sciences
Utinsky Proezd 2/14
109240 Moscow
Russian Federation
Tel: +7 095 298 1864
Fax: +7 095 298 1872

Dr Natalia Vartapetova
Research Centre for Preventive Medicine
Petroverigskij Per 10
101953 Moscow
Russian Federation
Fax/phone: +7 095 9248988
Tel: +7 095 928 21 37

World Health Organization

Tom McCarthy
Consultant
WHO Regional Office for Europe
Scherfigsvej 8
2100 Copenhagen
Denmark
Tel: +45 39 17 17 17
Fax: +45 39 17 18 18

Chizuru Nishida
Nutrition Programme
WHO Headquarters
20 Avenue Appia
CH-1211 Geneva 27
Switzerland
Tel:+41 22 791 21 11
Fax:+41 22 791 4156

Dr Aileen Robertson
Acting Regional Adviser for Nutrition
WHO Regional Office for Europe
Scherfigsvej 8
2100 Copenhagen
Denmark
Tel: +45 39 17 17 17
Fax: +45 39 17 18 18

Interpreters

Mr Alexander Reshetov
ul. Parnikovaya 5, kv.72
220112 Minsk
Belarus
Fax: +375 172 23 33 86
E-mail: reshetov@minsk.sovam.com

Mr Edouard Prokopovich
ul. N. Marska, 26, kv.11
220050 Minsk
Belarus
Fax: +375 172 23 33 86
Tel: +375 172 27 83 15

Annex 3**Participants**

Name	Organization
Juriy A. Arutunov	Chair of Family Medicine Moscow Medical Academy Coordinator Tel: 2485522
Alexander K. Baturin	Deputy Director, Institute of Nutrition Tel/fax: (095) 298-18-72
Elena V. Elizarova	Chair of the Hygiene of Nutrition Institute of Nutrition Moscow Medical Academy Tel: (095) 298-18-59
Natalia Ivanova	Leader Specialist, Department Sanepid Centre R.F. Tel: (095) 978-68-04 Fax: (095) 973-13-98
Tatiana A. Khatskevitch	Doctor, Medcentre Golitsino Tel: 594-16-65
Alexey A. Korolev	Moscow Medical Academy
Ludmila I. Kudrya	Chair of Hygiene, Arkhangelsk Medical Academy Troickiy pr. 51 163061 Archangelsk Tel: (8182) 43-83-78 Fax: (8182) 26-32-26/(8182) 49-21-53
Valeriy D. Kuzhnetsov	Professor, Chair of Human Ecology Moscow Medical Academy Bolshaiy Pirogovskay st. 2/6 Moscow Tel: (095) 248-67-56
Alexey N. Lavrentiev	Head, Department of Food Safety Sanepid Centre Otdelnyy pereulok 3 620219 Ekaterinburg, Tel: (3432) 74-33-30 Fax: (3432) 74-43-03 E-mail: Alex1@mplik.ru
Arseny N. Martinchik	Institute of Nutrition Ustinsky proezd 2/14 Moscow 109240 Tel: (095) 2981868 Fax: (095) 2981872
Sergey I. Mataev	Director, Centre for Nutrition Tumen, SD RAMS Tel: (3452) 330233 Fax: (3452) 330116

-
- Larisa A. Maurnikova Chair of Technology
University of Food Industry Technology
Kemerovo
Tel: (3842) 25-69-67
Fax: (3842) 51-09-56
- Gulnara F. Mazitova Senior Scientific Researcher
Institute of Medicine of Labour and Human Ecology
Ufa
Tel: (3472) 28-47-00
Fax: (3472) 28-49-16
- Olga K. Netrebenko Institute of Nutrition
Department of Children's Nutrition
Tel: (095) 298-18-54, ad.39
- Tatiana V. Pavlova Centre of Sanepid of the Government of R.F.
Alexander Perevalov Head of the Chair of the Hygiene
Perm Medical University, Perm
Fax: (3422)33-88-70
E-mail: med@pgma.perm.su
- Alina G. Platonova Head of the Department of Federal Sanepid Centre
Varshavskoye shosse, 19a; 215
R.F.113105 Moscow
Tel: (095) 954-74-66
Fax: (095) 954-03-10
- Tatiana A. Platonova Centre for Preventive and Clinical Nutrition
Permiakova st., 54A
Tumen
Tel: (3452) 33-02-34
Fax: (3452) 33-02-14
- Julia B. Radionova Centre of Health Care for Children and Adolescents
Maliy Kazenniy pereulok 5
Moscow
Tel: (095) 917-48-31
- Vasiliy P. Tulupov Chief Doctor, Sanepid of the Government of R.F.
- Natalia N. Turushkina Doctor, Federal Sanepid Centre
Varshavskoye shosse,19a
R.F.113105, Moscow
Tel: (095) 954-73-56
Fax: (095) 954-03-10
- Viktor A. Tutelyan Deputy Director, Institute of Nutrition
Tel: (095) 298-18-64
Fax: (095) 298-18-72
- Natalia Vartapetova Research Centre for Preventive Medicine
Moscow
- Michail N. Volgarev Director, Institute of Nutrition
Tel: (095) 298-18-59
Fax: (095) 298-18-72

Annex 4**Course Evaluation by Participants**

General details of participants who submitted form (9)	
Gender	5 females and 4 males
Year of birth	1951 to 1973
University degree	6 medical 1 sanitary doctor (hygienist) 1 food production engineer 1 engineer-technologist
Work within	1 health care 4 R and D 2 education 1 outpatient's polyclinic 2 food and nutrition science
Number in supervising position	5

1) Relevance of course for present work situation**Mean score = 8.2****N=9**

Not at all relevant									Very relevant
1	2	3	4	5	6	7	8	9	
						1	5	3	

Comments:

- more information on specific issues
- more time should be devoted to specific actions and implementation
- more about new technologies and food and nutrient production
- more information about health promotion recommendations
- no comments = 5

2) Do you think that this course has given you better possibilities to work within the area of Public health?**Means score = 7.4****N=8**

Not at all									Definitely
1	2	3	4	5	6	7	8	9	
				1		4	2	2	

Comments:

- regional planning and the methods used to conduct such planning not quite clear
- lack of a software to process data on food intake and anthropometry in the population
- no comments = 7

3) What do you think about the scientific level of this course?

Mean score = 6.1

N=8

Far too low							Far too difficult	
1	2	3	4	5	6	7	8	9
				4	2			1

Examples of parts that have been to elementary include:

- formulation of a food and nutrition policy
- drawing up an action plan to implement the national food and nutrition policy
- food laws in the EC
- no comments = 6

4) How interesting as a whole do you think that the content of this course has been?

Mean score = 8.2

N=9

Very uninteresting							Very interesting	
1	2	3	4	5	6	7	8	9
						2	3	4

Examples of parts that have been especially interesting include:

- examples from other countries and regions (North Karelia, Norway, Canada, Wales) = 3
- experience of European countries in improving food and nutrition quality
- drawing up plans, projects and recommendations on nutrition
- partners and sectors involved in implementation of food and nutrition policy
- work in the working groups, discussions and illustrative materials
- presentations by Aileen Robertson and Academician Volgarev
- data on the state of legislation

Examples of parts that have been less interesting include:

- aims and roles of nutrition policy in society today

5) Is there some part that you would like to see more in the course?

- legislation issues, food laws = 3
- HACCP-method
- intersectoral cooperation
- international cooperation
- partnerships in implementing the food and nutrition policy
- long-term projects
- new technologies in agriculture capable of intensifying the production of basic foods
- no comments = 4

6) Which part(s) would you like to have less of in the course?

- technological aspects of food production
- data on health and nutrition in Russia
- no comments = 7

7) Do you have any other considerations on the content of the course?

- offer courses dealing with more specific problems
- no comments = 8

8) What is your general opinion regarding the lecturers at the course

- good/excellent = 2
- highly qualified = 3
- professional = 2
- easy and pleasant to communicate with
- very considerate
- flexible in presenting material
- optimistic
- no comments = 2

9) What is your general opinion of the course leaders?

- good/excellent = 3
- pleasant
- rational with an absence of ideology
- no comments = 4

10) What do you think about the course materials?**Mean score = 8.1****N=7**

Gave nothing								Gave a lot	
1	2	3	4	5	6	7	8	9	
						2	2	3	

Comments:

- Russian experts and scholars need information and materials, new publications are needed in the field of nutrition and health
- practical recommendations to people

11) Have the group discussions been meaningful?**Mean score = 8.5****N=9**

No, not at all								Yes, very	
1	2	3	4	5	6	7	8	9	
						1	2	6	

Comments:

- discussion topics should be of less global nature
- ideal and real health exercise was non-informative
- all action plans should be worked out in greater detail
- no comments = 7

12) What is your overall opinion about the course?

Mean score = 8.4

N=9

Very bad									Very good
1	2	3	4	5	6	7	8	9	
						1	3	5	

- handouts very useful

13) Have you had the possibility to discuss your own professional situation?

Mean score = 7.3

N=8

No, not at all								Yes, very much
1	2	3	4	5	6	7	8	9
		1			1	2	1	3

Comments:

- participants should be selected more carefully so as to make the work more efficient

14) What has been the main obstacle for you to come to this course

- too much work
- financial constraints = 2

15) Further comments:

- more attention to more specific problems
- praise for high professionals and enthusiasm of organizers

16) As a follow-up course participants would like to have:

	Yes	No	No comment
Same kind of course again next year	6	1	2
Local workshops in your own region (facilitators both from your own region and, for example, from WHO)	9		

Additional suggestions:

Training in the following areas is badly needed:

- data collection on food intake and nutritional status
- software used to process food and nutrition data and questionnaires
- national nutrition data bases
- teaching aids in Russian
- role of functional foods and their effects on health
- workshops in sanitary and epidemiology centres at Ministry of Health and Ministry of Agriculture

Annex 5

Documentation for Participants

Title	Author	Language
Reversibility of rise in Russian mortality rates	D. Kromhout, B. Bloemberg, G. Doornbos, National Institute of Public Health and Environment, Bilthoven, Netherlands	Russian English
Hygiene in food-service and mass catering establishments	WHO headquarters	Russian English
Eating for health: a diet action plan (draft in Russian)	The Scottish Office	Russian English
Scotland's health: a challenge to us all: The Scottish Diet	The Scottish Office	English
Health Catalyst No. 2	WHO Regional Office for Europe	Russian English
Dietary reference values Lactation guide Nutrition in pregnancy	WHO/EURO CARAK training module	Russian English
Russian mortality crisis	Martin McKee	Russian
Ljubljana summary	WHO/EURO Health Care	Russian English
Diet, nutrition and the prevention of chronic diseases. Geneva 1990. WHO Technical Report Series No. 797	WHO headquarters	Russian English
Health promotion challenges for countries of the former Soviet Union: results from collaboration between Estonia, Russian Karelia and Finland	Pekka Puska, Division of Health and Chronic Diseases, National Public Health Institute, Helsinki, Finland	Russian English
Social marketing and public health intervention	R. Craig Lefebvre and June A. Flora, USA	Russian English
Nutrition policy experiences in northern Europe, Report on WHO Consultation, Copenhagen, 18–22 January 1988	WHO	Russian English
Healthy nutrition, European Series, No. 24	WHO	Russian English
Food and health data, European Series, No. 34	WHO (Russian draft unfinished)	Russian English
Measuring obesity – classification and description of anthropometric data. Report on WHO Consultation, Warsaw, October 1987	WHO	Russian English
Opportunities for better nutrition through mass catering. Report on WHO Consultation, Denmark, December 1987	WHO	Russian English
Planning and managing community nutrition work	Arne Oshaug, WHO	Russian English
Regional conference on elimination of IDD in CCEE, CIS, and the Baltic states, Munich, September 1997 Priorities for eliminating IDD in CCEE and NIS	Aileen Robertson, WHO	Russian English
BMI Charts		English
Protein reference values in the Russian Federation, 1992	Popkin, Mozhina, Baturin	Russian English
ICN 1992: The global challenge	FAO/WHO	Russian
Healthy eating leaflets in colour	Israel	Russian
Training module: diet in pregnancy and lactation	WHO	Russian English
Food safety issues: ICN. A challenge to the food safety community	WHO headquarters	English
Towards a healthy Russia. Policy for health promotion and disease prevention: focus on major noncommunicable diseases	Moscow	Russian English
Food Pyramids (Russian photocopies and English originals)		Russian English
WHO Nutrition Programme presentation leaflets	WHO	English
List of Nutrition documents and publications	WHO	English
WHO headquarters information pack	WHO	English
Participants folders		

Annex 6

Reading List

Abstracts of papers from Conference on Health Nutrition Policies in Russia. Moscow. April 3–4, 1997.

BOBADILLA, J.L. ET AL. ED. *Premature death in the new independent states*. National Research Council. National Academy Press, 1997

CARLISLE, D. *The Russian mortality crisis: new evidence on the role of alcohol*. Cambridgeshire, FSG Communications, 1997.

EGGER, G. & SWINBURN, B. An “ecological” approach to the obesity pandemic. *British medical journal*, **315**: 477–480 (1997).

FERRO LUZZI, A. & LECLERCQ, C. Nutrition policy in Italy: state of the art. In: Wheelock, V., ed. *Implementing dietary guidelines for healthy eating*. Blackie Academic and Professional, 1997.

FERRO LUZZI, A. & MARTINO, L. Nutritional surveillance systems: theoretical framework and management of secondary data. In: Wheelock, V. ed. *Implementing dietary guidelines for healthy eating*. Blackie Academic and Professional, 1997.

FERRO LUZZI, A. & LECLERCQ, C. The decision making process in nutritional surveillance in Europe. *Proceedings of the Nutrition Society*. **50**: 661–672 (1995).

HAGLUND, B.J.A. ET AL. ED. *Creating supportive environments for health*. Geneva, World Health Organization, 1996 (Public Health in Action Series, No. 3. ‘Food and Nutrition’. Chapter 7).

KROMHOUT, D. ET AL. Reversibility of rise in Russian mortality rates. *Lancet*, **350**: 379 (1997).

LANG, T. The public health impact of globalization of food trade. In: Shetty, P.S. & McPherson, K., ed. *Diet, nutrition and chronic disease: lessons from contrasting worlds*. Chichester, John Wiley and Son, 1997, pp. 173–193.

LEON, D.A. ET AL. Huge variation in Russian mortality rates 1984–94: artefact, alcohol or what? *Lancet*, **350**: 383–388 (1997).

MCKEE, M. ET AL. Deregulating health: policy lessons from the BSE affair. *Journal of the Royal Society of Medicine*, **89**: 424–426 (1996).

TANSEY, G. & WORSLEY, T. Norway’s food policy. (Summary). *The food system*. London, Earthscan, 1995.

OECD. *Food policy*. Paris, Organization for Economic Co-operation & Development, 1981.

PUSKA, P. Health promotion challenges for countries of the former Soviet Union: results from collaboration between Estonia, Russian Karelia and Finland. *Health promotion international*, **10**(3): 219–228 (1995).

REILLY, A. *Principles of food safety programmes: the WHO experience*. Paper to International Conference on Health Nutrition Policies in Russia, Moscow 3–4 April 1997.

Resolution (draft) of the International Conference on Health Nutrition Policies in Russia, April 3–4, 1997

United States Department of Agriculture. *Newly independent states & Baltics update. Agriculture and trade report*, 1997.

VARTIAINEN, E. ET AL. Twenty-year trends in coronary risk factors in North Karelia and in other areas of Finland in Pan American Health Organization. *Health promotion: an anthology*. Washington, Pan American Sanitary Bureau, Regional Office of the World Health Organization, 1996, pp. 126–137.

WICHERN, R. *The agricultural situation in Russia – an overview*. Paper prepared for the Commission of the European Communities. Kiel, Institute of Agricultural Economics, 1997.

Annex 7

Statement and Suggestions for Action Plan

The following is the statement worked on by participants and agreed upon after extensive discussion. It is in two parts: the general statement and suggestions for further action.

Workshop on Food and Nutrition Policy in the Russian Federation Moscow, 14–17 October 1997

STATEMENT

From the participants of the intersectional workshop, organized by the Ministry of Health Care of the Russian Federation, the Ministry of Science and Technology, Russian Federation, Institute of Nutrition of Russian Academy of Medical Sciences with support from WHO Programme for Nutrition Policy, Infant Feeding and Food Security.

We, the participants of this workshop, convened in Golitsino 14–17 October 1997, acknowledge the health impact of food and nutrition on the health of the population. We recognize that there is considerable scope for helping people, through individual, organizational, professional and policy actions.

We pledge ourselves to:

- to take action to promote and adapt healthier food consumption for ourselves, our families and all the population of our country;
- to coordinate this action with all interested institutions and organizations to maximize the impact;
- to organize the monitoring of nutritional status and food consumption for the population of the Russian Federation, especially for the risk groups of the population, prone to develop nutrition-related diseases;
- to advocate the necessity for development and implementation of nutritional policy, and modern recommendations for food consumption;
- to take action to improve food and food products' accessibility and safety, to increase the effectiveness of food control by improving Russian laws on food safety;
- to recommend the Government of the Russian Federation and regional administrations to set up at the federal and regional levels, respectively, interdepartmental committees charged with developing and implementing a nutrition policy.

We support the decision of the International Conference on Policy on Health Nutrition in Russia (Moscow, 3–4 April 1997) concerning the mechanisms of the realization of this policy.

As well as the above statement, the Action Plan could suggest initiatives such as:

- establishing the surveillance system of the health, nutrition and nutritional status of the population; the results of the analysis give allowance for elaborate recommendations to the Government and local authorities;
- promoting the modern recommendation on healthy nutrition through the mass media;
- considering the regional and local recommendations on nutrition policy;

- training of specialists in nutrition and improving their qualifications in central universities and abroad;
- establishing and improving communication systems, including e-mail;
- carrying out special actions in nutrition in cooperation with nongovernmental organizations and the mass media;
- inviting Russian and foreign specialists with the highest qualifications, in the process of revision and improvement of food and nutrition policies;
- revision and modern adaptation according to international laws of Russian legislation on food and nutrition;
- creating in the Institute of Nutrition (RAMS), a special centre for coordinating all actions on food and nutrition policy with WHO;
- organizing special conferences on nutrition once every two years.

The next conference on nutrition should take place in 1999.

Annex 8

Example of the Output from Two Working Groups

The Workshop was characterized by strong interplay between formal lectures and working groups. Below is an example taken from the final exercise of the whole Workshop where groups were asked to produce a plan to sell their report and to write a memorandum outlining to their immediate superior giving the salient points of their plan. The purpose of this exercise was to draw together the lessons of the entire Workshop.

The instructions are given below along with one example of a plan and one of a memorandum produced by the groups.

Instructions: developing and selling your own plan – a plan and a memorandum

Working Groups: Selling your own plan (1 hour)

Participants will be asked to split into small groups. Each group will appoint a rapporteur, a note-taker and a chairperson/arbitrator. Each group will be asked to do the following: produce a simple memorandum of maximum two pages, to communicate their ideas in a simple and convincing way as though to someone who has never thought of such an idea.

The memorandum should:

- (i) convey the idea in one paragraph at the start
- (ii) identify who is going to carry out the process – the leaders, the team, etc.
- (iii) set a time schedule of possible dates for delivery
- (iv) identify the outcomes, and by when.

At the end of the session, each group's rapporteur will summarize for the whole group what their conclusions to each question were.

Two examples of work produced from the above exercise**PLAN drawn up by a group of participants in the
Workshop on Food and Nutrition Policy in the Russian Federation,
Moscow, 14–17 October 1997****1. Improvement of the Russian legislation:**

- set up an interdepartmental coordination council that will deal with the problem under discussion and have the status of an interstate organization;
- amend the legislative acts on food quality control, home food production promotion;
- revise and amend the normative base of home-produced food;
- work out regional food and nutrition programmes.

Time frame: 1998–2000

Objective: elaboration of a legislative and material base to solve the problem.

Actors: Duma, Government, Ministry of Health, Ministry of Agriculture, science, public organizations.

2. Establishment of a system of morbidity and nutrition monitoring:

- draw up methodological documents and design software
- improve the system of State statistics
- implement pilot projects in the regions
- create a national database
- study the world's experience.

Time frame: 1998–1999 and on.

Objective: Obtain an objective norm and evaluate the efficiency of the measures taken.

Actors: Ministry of Health, research institutes, regional State sanitary and epidemiological centres.

3. Production of food products

Time frame: 1998–2000.

Actors: Government, Ministry of Health, science.

Objective: solve the problem of food production and provision.

4. Personnel training

Time frame: 1998–2003

Actors: Ministry of Health, science, Ministry of Education, WHO.

5. Public awareness building

MEMORANDUM

**Drawn up by one group of participants in the
Workshop on Food and Nutrition Policy in the Russian Federation,
Moscow, 14–17 October 1997**

Esteemed Head of Administration,

We would like to attract your attention and, together with you, contribute to the improvement of the health of the people by decreasing the rate of morbidity and mortality caused by cardiovascular diseases.

In our region, the mortality caused by cardiovascular diseases ranks first, which takes heavy losses, since predominantly able-bodied people fall ill and die, that is, the people who might have lived longer and still be active.

To solve this problem, we suggest that an interdepartmental coordination council be set up with a view to drawing up a regional programme aimed to combat cardiovascular diseases. A list of the Council members (estimated) is annexed. The Council should draw up a programme some time before 1 September 1998 and have it approved by the oblast Duma. The followings funds (cost estimates are annexed) are need to ensure the functioning of the Council.

The deteriorating demographic situation, the increased incidence of various diseases, the poor health of the children, have been caused, as we know, by our unbalanced diet. All this leads to heavy economic and social losses in the country. To this end, urgent measures need to be taken by the Government and regional administrations. In order to coordinate their actions, now that we are aware of the role of healthy nutrition in improving the health of the people, it will be necessary to elaborate and implement national policies in the field of healthy nutrition. The main objective should be an analysis of the people's diet and interrelationship between the latter and the incidence of cardiovascular diseases. Another objective is to work out nutrition recommendations for the population, to promote the introduction of novel food processing technologies and the production of health foods for the people, to improve the relevant legislative basis, and to ensure the required quality of home-produced foods

With a view to improving the health of the people in the country we suggest that a new food and nutrition policy be elaborated and pursued in the country. The following negative aspects could be noted today in the nutrition of the population: insufficient consumption of the basic nutrients, vitamins, minerals and fibre. As a result, we see an increase in the rate of mortality, a lower population growth, higher mortality owing to coronary heart diseases and cancers.

The new food and nutrition policy will decrease the rate of infant mortality and that of able-bodied people as a result of cardiovascular diseases.

The Government should set up a committee to exercise control over the implementation of the food and nutrition policy. Scientific organizations and research institutes should draw up appropriate programmes, and introduce modern know-how in agriculture.