Strengths of the Nordic monitoring system

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Strengths of the Nordic monitoring system

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DTU Food
National Food Institute
Background

• Development of a common monitoring system in the Nordic countries (SE, DK, FI, NO, IS) was an important part of *The Nordic Plan of Action on Better Health and Quality of Life through Diet and Physical Activity* (Nordic Council of Ministers, 2006)
  - Aim: Reduce overweight and unhealthy lifestyles in the Nordic countries

• A joint Nordic method to assess diet and physical activity was developed and validated in 2008-2010

• Data on health behaviour and weight status have been collected in 2011 and 2014 among 18,000 adults and 5,000 children in the five Nordic countries
The study design

- A simple, low cost monitoring system obtaining self-reported data on health behaviour and weight status in adults (18-65 y) and children (7-12 y)
  - 350,000 Euro per data collection (35 Euro per participant)
  - First systematic monitoring of both adults and children

- Nationally representative population samples

- Data collection within same survey year and same time a year in all the Nordic countries
  - Data collection every third to sixth year

- Invitation letter and telephone interview lasting 15-20 min.
The assessment of behaviours I

• The Monitoring System measures risk factors for chronic disease and mortality
  – Smoking, physical activity, alcohol, diet and overweight

• Questionnaire relatively short and easy to comprehend
  – Adults: 42 items and Children: 32 items

• Diet and physical activity questionnaires have been validated in adults, adolescents and children (n>500) in several Nordic countries (DK, FI, NO, IS)
  – Validity appears to be at least as good as other self-report instruments. Diet questionnaire showed best validity in adults and children

• Possible to evaluate the goals and visions in the Nordic Plan of Action with the questionnaire
The assessment of behaviours II

• Diet (FFQ): Intake frequencies of fruits, vegetables, wholegrain bread, fish, sugar-rich foods and beverages, fat quality (fats used as spread and for cooking, sausages, cheese)

• Physical activity: MVPA, screen-time and level of occupational and leisure-time physical activity

• Weight status (BMI): Height and weight

• Smoking/snuff (adults)

• Alcohol: Frequency of alcohol consumed (beer, wine, spirits) and binge drinking (adults)

• Easy to add new indicator questions on behaviour (smoking and alcohol included in 2014)

• Easy to implement indicator questions in other population studies – including a new pan-European surveillance system
The assessment of determinants

Key determinants of health behaviour and weight status in the Nordic countries

- Sex
- Age
- Education
- Urbanisation
- Household composition
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- Senior researcher Katja Borodulin, National Institute for Health and Welfare, Finland
- Professor Lene Frost Andersen, University of Oslo, Norway
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