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Partnership for a healthier diet

Final report 2016–2021



Fafo-report
2022:33

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Fafo report 2022:33

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ISBN 978-82-324-0668-5

ISSN 2387-6859

Contents

Preface	4
1 The Partnership for a healthier diet 2016–2021	5
1.1 Organisation of the letter of intent.....	6
1.2 Methodology	7
2 The participants' measures	11
2.1 Priority area 1: Reduction of the salt content in foods and the reduction of the population's salt intake through the Salt partnership 2015–2021.	11
2.2 Priority area 2: Reduction of added sugar in foods and reduction in the population's intake of added sugar	13
2.3 Priority area 3: Reduction of saturated fat in foods and reduction of the population's intake of saturated fat	14
2.4 Priority area 4: Increase the population's intake of fruit and berries, vegetables, wholegrain products and seafood by 20 percent by 2021	16
The participants measures are summarised	19
2.5 Keyhole symbol.....	20
3 The participants assessment of the agreement	22
3.1 Assessment of the agreement	22
3.2 Assessment by the health authorities	24
4 The letter of intent as a tool	26
4.1 “We are a big responsible company that many people have expectations of”	26
4.2 “The industry would rather play on the same team as the authorities than have something forced upon them”	27
4.3 “Everyone knows they should eat more fish and vegetables, but they still don’t” ..	28
4.4 The dietary recommendations	29
4.5 Cooperation through a letter of intent.....	30
4.6 The pandemic has had an impact on the work.....	32
4.7 Why is the letter of intent for a healthier diet in the population important – a summary of the interviews	33
Appendix 1 Participants and priority areas	34
Appendix 2 Questionnaire.....	37
Appendix 3 Interview guide for the in-depth study.....	47
Appendix 4 Differences in measures	48

Preface

Fafo has been commissioned by the Norwegian Directorate of Health to conduct a follow-up evaluation of the Partnership for a healthier diet, from 2017 to 2021. The partnership is between the health authorities and the food industry. The evaluation has included an annual self-report from the participants who have signed the agreement. This report summarises the 4 previous memorandums that have been published after each self-report, including the mid-term report.

We thank the coordination group of the letter of intent for the valuable input in the process.

Oslo, December 2022

Anne Hatløy, Ketil Bråthen, Svein Erik Stave and Anne Inga Hilsen

1 The Partnership for a healthier diet 2016–2021

In December 2016, the food industry and the Norwegian health authorities (The Ministry of Health and Care Services) signed *the letter of intent for facilitating a healthier diet*. The agreement period ended in December 2021.

At the end of the agreement period in 2021, a total of 97 actors in the food industry had signed the agreement (see Appendix 1 and table 1). First to join were the big food retailers, wholesalers, food and beverage manufacturers and industry organisations. Then in 2018, companies in the catering industry, such as canteens, petrol stations and restaurants also joined. An overview over all the participants can be found in Appendix 1. The Minister of Health and Care Services signed the agreement on behalf on the Norwegian authorities.

The primary aim of this coordinated effort has been to reduce the population's intake of salt, added sugar and saturated fat, and increase the intake of fruit, berries, vegetables, whole grains and seafood. The purpose of the collaboration has been to make it easier for consumers to make healthier choices, and to increase the proportion of the population eating a balanced diet in line with the health authorities' recommendations.

Priority areas Partnership for a healthier diet 2016–2021

- 1 Reducing the salt content in foods and the population's intake of salt through the Salt Partnership.
- 2 Reducing added sugar in foods and the population's intake of added sugar.
- 3 Reducing saturated fat in foods and the population's intake of saturated fat.
- 4 Increasing the population's intake of fruit and berries, vegetables, wholegrain products and seafood.
- 5 Influencing consumer behaviour to help raise awareness on the topic of health and diet.
- 6 Monitoring the achievement of objectives as stated in the agreement.

Fafo has monitored the Partnership for a healthier diet from 2017 to 2021 through a follow-up evaluation of the priority areas 1–4. The follow-up evaluation has focused on the specific measures that were implemented. The most significant has been to assess the methods used and to determine if the agreement was an effective process for the companies and the health authorities to achieve the objectives of the agreement. This report is not meant to determine if the quantitative targets of the agreement have been achieved. The focus of this follow-up evaluation is centred on 3 questions.

- 1 What measures have the participants implemented in conjunction with the agreement?
- 2 How effective do the participants feel the agreement has been as a working method?
- 3 Have the participants regarded the agreement as a good tool to promote a healthy diet?

During the evaluation period, Fafo has published 4 reports based on the participants' annual self-reports. One of the reports was a mid-term evaluation which covered the same topic areas as the annual self-reports and included in-depth interviews with some of the participants.¹ All publications are available in English and Norwegian, and can be downloaded from the project home page:

<https://www.fafo.no/prosjekter/intensjonsavtalen-om-sunnere-kosthold>

During the agreement period, there were external factors that impacted on the agreement. One such factor was an excise duty increase in the National Budget for 2018 that particularly affected Priority area 2, the reduction of added sugar. As a response of the sudden increase of excise taxes on non-alcoholic beverages and chocolate and confectionaries, the food industry paused all cooperation on this Priority area from June 2018 to December 2020. The Coronavirus pandemic, with the closure of large parts of business and industry in Norway, also had an impact on the participants in different ways, both directly and indirectly. An example is the food retail sector which saw an upturn in business, as for periods, they were among the very few shops that were allowed to stay open. The option of cross border shopping was also removed, and people had most of their meals at home. On the other hand, the catering industry was severely affected when most eateries were closed for long periods of time, including canteens, cafés and restaurants. The Directorate of Health was one of the main actors in the handling of the pandemic, and their communication to the population during this period was to a large extent focused on the pandemic, and not many resources were left to promote the work of this partnership. While this report will call attention to some aspects of the pandemic in the presentation of the results, it is not meant to be an evaluation of how the pandemic situation has affected the work of the letter of intent.

1.1 Organisation of the letter of intent

The letter of intent is organised under the Ministry of Health and Care Services. FoodDrinkNorway (NHO Mat og Drikke) made the initial initiative of establishing the partnership for a healthier diet. In the period from January 2018 to January 2020, it was the Minister for the Elderly and Public Health who chaired this work, as there were 2 ministers in the Ministry of Health and Care Services in this period, whereas in the periods before and after, it was the Minister for Health and Care Services who chaired this work. The Ministers have been representatives of Høyre (the Conservative Party), Fremskrittspartiet (the Progressive Party) and Arbeiderpartiet (the Labour Party), the last-mentioned, however, only for a few months after they formed a new government at the general elections in 2021. The responsibility for driving the work of the agreement has been delegated to the Directorate of Health.

The coordination group has had the overall responsibility for coordinating the work on the letter of intent. The parties to the agreement have been represented in the coordination group as follows:

- Virke (the Enterprise Federation of Norway)/NorgesGruppen - 2 representatives
- NHO Service og Handel (Norwegian Federation of Service Industries and Retail Trade)/Rema - 2 representatives

¹ Partnership for a healthier diet. Annual report 2017. Fafo-paper 2019:12.
Partnership for a healthier diet. Annual report 2018. Fafo Paper 2019:29.
Partnership for a healthier diet, mid-term report 2019. Fafopaper 2020:16.
Partnership for a healthier diet. Annual report 2020. Fafopaper 2021:21

- Coop - 2 representatives
- Sjømat Norge (Norwegian Seafood Federation) - 1 representative
- Norges Frukt- og Grønnsaksgrossisters Forbund (Norwegian Fruit and Vegetable Wholesalers' Association) - 1 representative
- NHO Mat og Drikke (FoodDrinkNorway)/food and beverage manufacturers - 4 representatives
- NHO reiseliv (The Norwegian Hospitality Association) - 1 representative
- Virke KBS (kiosk, petrol and service trade industry) - 1 representative
- The health authorities – 2 representatives

The Directorate of Health, division *Public Health and Prevention*, has represented the Ministry of Health and Care Services in the coordination group, and has been the secretariat for the letter of intent. The chair of the secretariat has attended meetings with the coordination group. The representatives from the food industry have been nominated by the business organisations or businesses that have signed the letter of intent.

1.2 Methodology

Every year an *online questionnaire* (Appendix 2) has been sent to all the participants. In this questionnaire, one part discusses which measures have been employed within each priority area, one part is a more general evaluation of the agreement, and then some questions concerning the companies' Keyhole-labelled products. The questionnaire has been approved by the coordination group for the letter of intent. The number of participants who have been sent the questionnaire has ranged from 80 to 97. There are several reasons for this variation. One reason is that the service industry and hotel, restaurant and catering industry joined the agreement in 2018. Other reasons are that some of the participants have merged, or that some respond on behalf of others, and that some businesses have been discontinued.²

Response rate

The response rate for the self-reporting has ranged between 61 and 79 percent (table 1). For the 2 first self-reports, there was a response rate of approximately 60 percent: 43 out of 71 participants in 2017, and 49 out of 84 participants in 2018. In relation to the mid-term evaluation and self-reporting for 2019, extra efforts were made to increase the number of responses. Anyone who had not responded, would receive up to 6 reminders spread over 4 e-mails, 3 from Fafo and 1 from the Directorate of Health, 2 SMS, and eventually would receive a telephone call³. This increased the response rate to about 80 percent. The results of the 2019 report did not differ significantly from the results of the 2 previous reports. The coordination group thus

² The Norwegian Directorate of Health's website states that there are 99 participants affiliated with the agreement. With regard to self-reporting, the participants are calculated on the basis of who responds. Some participants responded on behalf of others, *Cernova* also responded for *Mesterbakeren* and *Nærbakst AS* and *Kavli* is responded for *O. Kavli* and *Q-meieriene* – the five participants are therefore only considered as two participants in the self-reporting. In addition, one of the participants that is still on the Norwegian Directorate of Health's list, *Ingebrigtsen Kjøtt AS* went bankrupt during the agreement periode, and has therefore left the agreement.

³ One reminder from Fafo and one from the Directorate of Health were originally scheduled, but the first reminder from Fafo was sent 12th March 2020, the same day that Norway went into lockdown due to the pandemic, and the reminders that were scheduled to be sent by the beginning of April, were not sent until July 2020.

decided not to allocate a lot of extra resources to chase responses from those who did not respond to the self-evaluations for 2020 and 2021.

Table 1 Overview of the number of participants who have signed each priority area, and the full agreement for each year, the annual number of completed questionnaires and response rate for each priority area and the full agreement

	Number of participants who have signed the agreement					Number of self-reports answered					Response rate for the self-report				
	2017	2018	2019 ⁷	2020	2021	2017	2018	2019	2020	2021	2017	2018	2019	2020	2021
Salt ¹	46	60	56	58	57	29	37	45	40	39	63%	62%	80%	69%	68%
Added sugar ²				46	47				31	31				67%	66%
Saturated fat ³	40	50	48	46	48	21	28	29	27	24	55%	56%	60%	59%	50%
#MerAv (MoreOf) ⁴	58	72	69	72	71	33	33	53	50	39	57%	46%	77%	69%	55%
Total ⁵				96	97				67	59				70%	61%
Total without sugar ⁶	71	84	85			43	49	67			61%	58%	79%		

¹Priority area 1: Reduction of salt content in foods and the reduction of salt intake in the population through the Salt partnership.

²Priority area 2: Reduction of added sugar in foods and reduction of the population's intake of added sugar. As a result of the increase in excise duty on chocolate and confectionery and non-alcoholic beverages in Norway's National Budget for 2018, the work on the reduction of added sugar was suspended from July 2018 to December 2020, and this priority area has not been included in the reports from 2017 to 2019.

³Priority area 3: Reduction of saturated fat in foods and reduction of the population's intake of saturated fat

⁴Priority area 4: An increase of 20 percent in the intake of fruit and berries, vegetables, wholegrain products and seafood in the population by 2021

⁵The totals in 2020 and 2021 deviate from what was reported in 2017, 2018 and 2019, as several participants who had signed the agreement chose to submit a joint report. In this overview they are counted as one participant. Details are shown in Appendix 2

⁶As a result of the excise duty increase on chocolate and confectionery and non-alcoholic beverages in Norway's National Budget for 2018, the work on reducing added sugar was suspended from July 2018 to December 2019. The 9 participants who only signed the agreement under Priority area 2 were therefore removed from the totals for the 2017–2019 period.

⁷For 2019–2021, submissions by one participant on behalf of others are included as a single mailing - this explains the fall in the number of mailings from 2018, despite an increase in the total number of participants.

Weighting and analysis

In the self-reports for 2017 and 2018, the results of the measures implemented by the participants were weighted based on the turnover of the participants. These weightings were regarded as very inaccurate both because approximately a third of the participants gave no response to the question about turnover, and because in many cases, one participant responded on behalf of others, so it was unclear what figures should be used in the weighting calculations. The results calculated with and without weighting indicated only minor differences. For this reason, the reports from 2019–2021 did not use weighted figures. All the data provided in this report is unweighted. This study is not a sample study, but a survey among all the participants in the letter of intent. There are few respondents in each of the categories. Responses from a single participant will therefore be given great weight, and the confidence levels for the individual responses are so large that it is no longer possible to make any conclusions with significant differences. To compare the responses from 2017 to 2021, we have

nevertheless decided to use percentages rather than absolute values, because the number of participants who have signed each priority area will vary from year to year. As the sample is tracked over a 5-year period, it is still possible to see some trends in the responses. Student t-tests have been performed between the responses from each year, and between measures in 2021 (Appendix 4).

Reporting form

In the self-report, the participants have been asked to report on which measures they have implemented in the previous year (Appendix 1). These are the same measures that they have been asked about in each report. For each priority area of they have signed, they are asked to report on:

- *Development of new product(s)* – completely new products that the participant has developed or used in the past year to achieve the objective of the letter of intent;
- *Optimisation of existing product(s)* – changes to existing products that the participant has implemented in the past year to achieve the objectives of the letter of intent, for example reducing salt and/or saturated fat content in an existing product, or increase the proportion of wholemeal flour;
- *Changes to packaging or portion size with the intention of influencing healthier choices* – facilitating a greater consumption of foods that satisfy the objectives of the letter of intent through targeted packaging sizes, for example fruit and vegetables in smaller packaging;
- *Changes to packaging design with the intention of influencing healthier choices* – designing the packaging so that healthier choices are more appealing;
- *Marketing measures* – various marketing measures designed to help achieve the objectives of the letter of intent;
- *Changes to product placement with the intention of influencing healthier choices* – this applies especially to outlets and catering establishments where e.g. placement of fruit and vegetables early in the buffet, or by the shop entrance, has been shown to influence customer choice;
- *Change in food/beverages on offer* – this option was added to the self-report in 2018, after actors in the hotel, restaurant and catering industry also signed the agreement;
- And finally, an open-ended question about other measures, and the option of specifying.

For each individual priority area, the participants are asked to assess which measure was most effective and state the reasons for this. All participants are then asked to evaluate the agreement and explain what they benefit most from and what they think is particularly demanding. They are also asked to score the health authorities' efforts in the letter of intent. Within each question category, there are also open-ended questions about what measures have been the most effective, and an overall assessment of the agreement.

In-depth study

Additionally, *in-depth studies* with a smaller participant sample have been carried out on two occasions. The first round was in 2020, in connection with the mid-term evaluation, and the last was in 2022 for this final report. The methodological approach has been an open-ended, qualitative study in which we were interested in the

agreement partners' perceptions and experiences with the agreement. The interview guides that were used for these interviews can be found in Appendix 3a and 3b.

In the in-depth studies, participants from different categories were selected, small and large manufacturers, retailers, industry organisations, authorities, as well as some participants close to the agreement, but not part of it (table 2).

Table 1 Overview of participants that were interviewed for the mid-term report in 2020 and the final report in 2022

	2020	2022	Function
Bryggeri- og drikkevareforeningen	x		Actor close to the agreement, but not part of it
Coop		x	Big actor, retail
Findus Norge AS		x	Manufacturer
Forbrukerrådet	x		Actor close to the agreement, but not part of it
Ministry of Health and Care Services	x	x	Authority
Lerøy Seafood Group ASA	x		Big actor, manufacturer
NHO Mat og Drikke (FoodDrinkNorway)	x	x	Industry organisation
NorgesGruppen ASA	x		Big actor, retail
Orkla ASA,	x		Big actor, manufacturer
REMA 1000 AS	x		Big actor, retail
Scandic Hotels AS		x	Big actor, the hotel, restaurant and catering industry
Svanøy Røykeri AS	x		Small actor, manufacturer
Tine SA		x	Big actor, manufacturer
Virke (the Enterprise Federation of Norway)	x		Industry organisation
Virke Servicehandel		x	Industry organisation

The research question for the mid-term evaluation was: Do the parties regard the letter of intent as a sensible tool to promote a healthy diet? The interview guide provided a structure for the interviews but was not followed closely. Interviews took approximately 1 hour. The last round of interviews followed the same template. We were interested in a retrospective assessment of the agreement period and focus on the new agreement, which had been signed at that point.

In both interview surveys, the interviewees consented to publishing the names of the businesses participating in the survey, but informants are all anonymised, and no quotes can be traced back to any individual.

Privacy Policy

NSD Norwegian Centre for Research Data was in 2017 notified about the project regarding the processing of personal data. NSD's evaluation 57861 1(8.12.2017): On reviewing the data in the notification form and appendices, it is our assessment that the project is covered by section 31 of the Personal Information Act. The personal data collected is not sensitive, the project is consent-based and the potential for harm is low. This project has therefore undergone a simplified assessment.

2 The participants' measures

This chapter presents the measures participants have reported to have implemented as part of the agreement over the period 2017–2021. Each sub-chapter presents the measures in each priority area. Priority area 4 “Increasing the population's intake of fruit and berries, vegetables, wholegrain products and seafood” has been split into three sub-chapters, one for fruit, berries and vegetables, one for wholegrain products and one for fish and seafood.

2.1 Priority area 1: Reduction of the salt content in foods and the reduction of the population's salt intake through the Salt partnership 2015–2021.

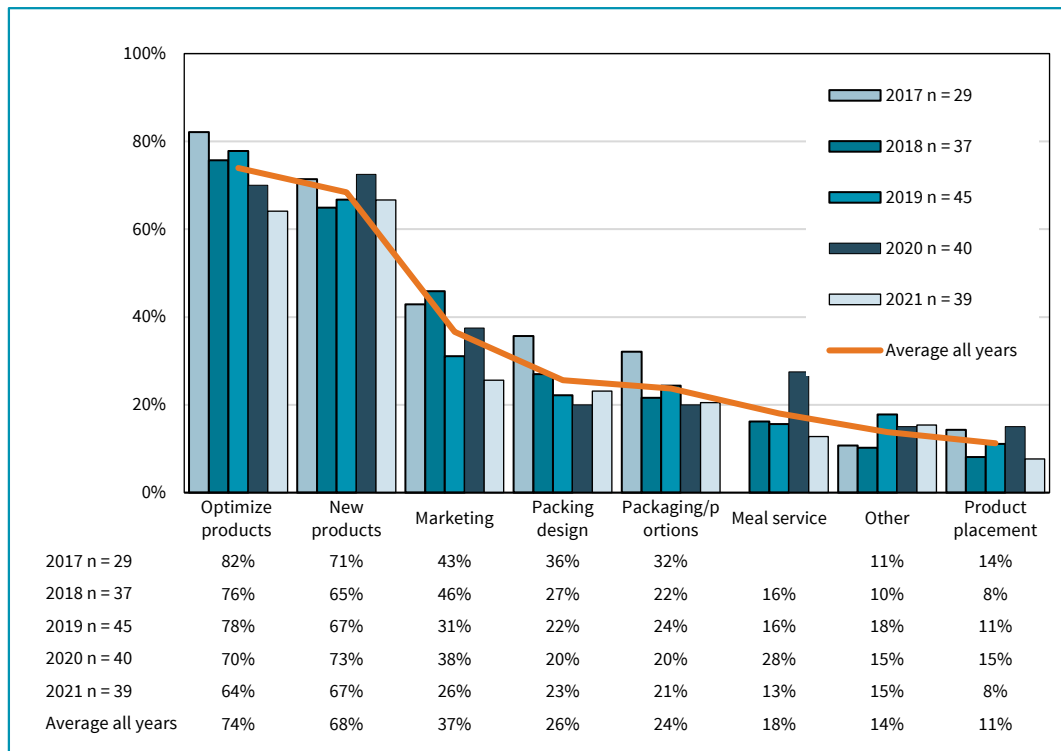
About two thirds of the participants in Priority area 1 have completed the self-report each year (table 3). Over half of the participants who submit their responses, say the companies have set their own targets in the work to reduce salt. On the question of attendance of meetings, seminars or workshops in connection with the work, the lowest figure is for 2021, when 15 out of 39 respondents say that they had attended an event – this is most likely connected with the pandemic.

Table 2 Overview of respondents in Priority area 1: Reduction in salt

	2017	2018	2019	2020	2021
Number of actors who have signed the letter of intent under Priority area 1	46	60	56	58	57
Number of actors who have completed the self-report under Priority area 1	29	37	45	40	39
Respondents with their own targets for reduction of salt	24	26	29	23	23
Respondents who have attended meetings, seminars or workshops during the reporting year	21	24	31	24	15

There are two measures that have been used the most throughout the letter of intent: to gradually reduce the salt content in existing food products, and to develop new low-salt food products (figure 1).

Figure 1 Measures within Priority area 1: Reduction in salt, implemented over the period 2017 to 2021



Most of the participants who have signed the letter of intent under Priority area 1 were already part of the Salt Partnership 2015–2021 when the letter of intent was signed in 2017. One of the most significant tools in the Salt Partnership has been to develop recommended targets for maximum salt content in different food groups, through the so-called Salt lists⁴. The participants emphasise that these lists are important tools both in reducing the salt content in existing food products, and in developing new products. Every year it is pointed out that there is a pain threshold for how much the salt content can be reduced without affecting the other characteristics of the product, such as consistency, shelf-life, colour and food safety, as well as flavour.

This may probably explain the small reduction in the number of participants who optimise existing products over the period 2017–2021. However, optimisation of existing products and development of new products with a salt content in line with the salt targets, were still the most significant measures that were carried out in the 5 years of self-reporting, followed by marketing (figure 1). An analysis of the measures implemented in 2021 show that optimisation and development of new products were significantly more employed than any of the other measures, while marketing was significantly more employed than change in food/beverages on offer, change in product placement and other measures (Appendix 4). An equivalent analysis of the use of individual measures from 2017 to 2021 show that there was a significant decline in the employment of two measures, optimisation and change of packaging and portion size (Appendix 4).

⁴ [https://www.helsedirektoratet.no/tema/kosthold-og-ernaering/matbransje-serveringsmarked-og-arbeidsliv/intensjonsavtalen-for-et-sunnere-kosthold/Vedlegg_2_Veiledende_mål_salt_\(salt-listene\).pdf](https://www.helsedirektoratet.no/tema/kosthold-og-ernaering/matbransje-serveringsmarked-og-arbeidsliv/intensjonsavtalen-for-et-sunnere-kosthold/Vedlegg_2_Veiledende_mål_salt_(salt-listene).pdf)

Product placement and change, as well as food/beverages on offer seem not to be very important measures. Product placement can be done in shops or catering establishments, and food/beverages on offer can only be changed in catering establishments. It is important to note that not many participants can use these tools – there are only 3 participants responding on behalf of trade and an equivalent small number of participants responding on behalf of the hotel, restaurant and catering industry.

Many place importance on the fact that it is the small changes in the high-volume products that may be of great significance for public health.

2.2 Priority area 2: Reduction of added sugar in foods and reduction in the population's intake of added sugar

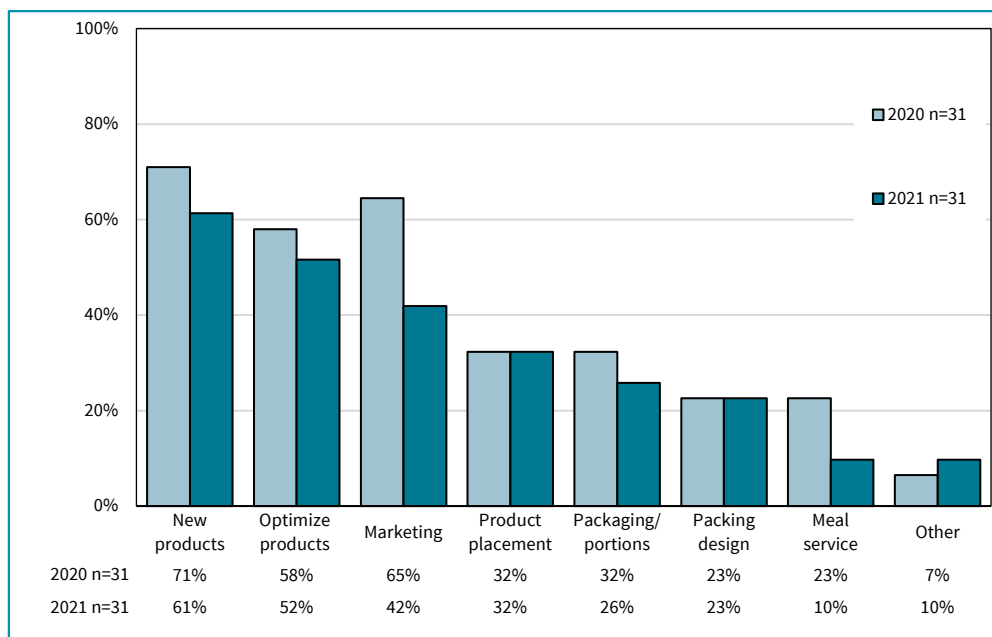
The industry suspended all activities within Priority area 2: Reduction of added sugar from July 2018 to December 2020, because of the increase in excise duties for chocolate and confectionery and non-alcoholic beverages in Norway's National Budget for 2018. The collaboration on reducing added sugar was officially resumed as a result of a meeting in The Minister of Health and Care Services food industry group on 8 December 2020. In 2020, there was a close dialogue between the parties, and over the course of the year, they agreed to resume the work in Priority area 2. This priority area has therefore only been included in the self-reports for 2020 and 2021. As for Priority area 1, approximately two thirds of participants who had signed the agreement under Priority area 2, completed the self-report (table 4). Out of the companies who completed the survey, approximately half had set their own targets for reduction of sugar, and a third had attended events on reduction of sugar during 2020 and 2021.

Table 3 Overview over respondents in Priority area 2: Reduction of added sugar

	2020	2021
Number of participants who have signed the letter of intent under Priority area 2	46	47
Number of participants who completed the self-report under Priority area 2	31	31
Respondents with their own targets for reduction of added sugar	17	15
Respondents who have attended meetings, seminars or workshops during the reporting year	12	11

The three most frequent measures for Priority area 2 in 2020 and 2021 have been the development of new products, marketing and optimisation of existing products (figure). In 2021, optimisation and development of new products was significantly more employed than any of the other measures, including marketing (Appendix 4). Marketing measures were, however, significantly more employed than any of the other measures reported in 2021, and shows a significant decrease since 2020, with no obvious reason for this (Appendix 4). The same note as for Priority area 1 applies to food/beverages on offer and product placement, i.e. that there are few participants from trade organisations and catering establishments that can employ such measures.

Figure 2 Measures within Priority area 2: Reduction of sugar implemented in 2020–2021



The participants point out that employing a wide range of measures is what seems to have an effect. In addition to the fact that the selection of sugar-free and sugar-reduced products has become much larger in recent years, marketing has to a larger extent concentrated their efforts on promoting sugar-free options more than products containing sugar. Another significant measure has been giving sugar-free products a more prominent placement than in the past.

The proportion of mineral water with no sugar is now greater than varieties with sugar. Consumers want products without any added sugar to a larger extent than in the past. At the same time, the imperceptible sugar reduction has been important. A gradual reduction of sugar content has helped consumers’ palates adjust to products with a less sweet flavour.

2.3 Priority area 3: Reduction of saturated fat in foods and reduction of the population's intake of saturated fat

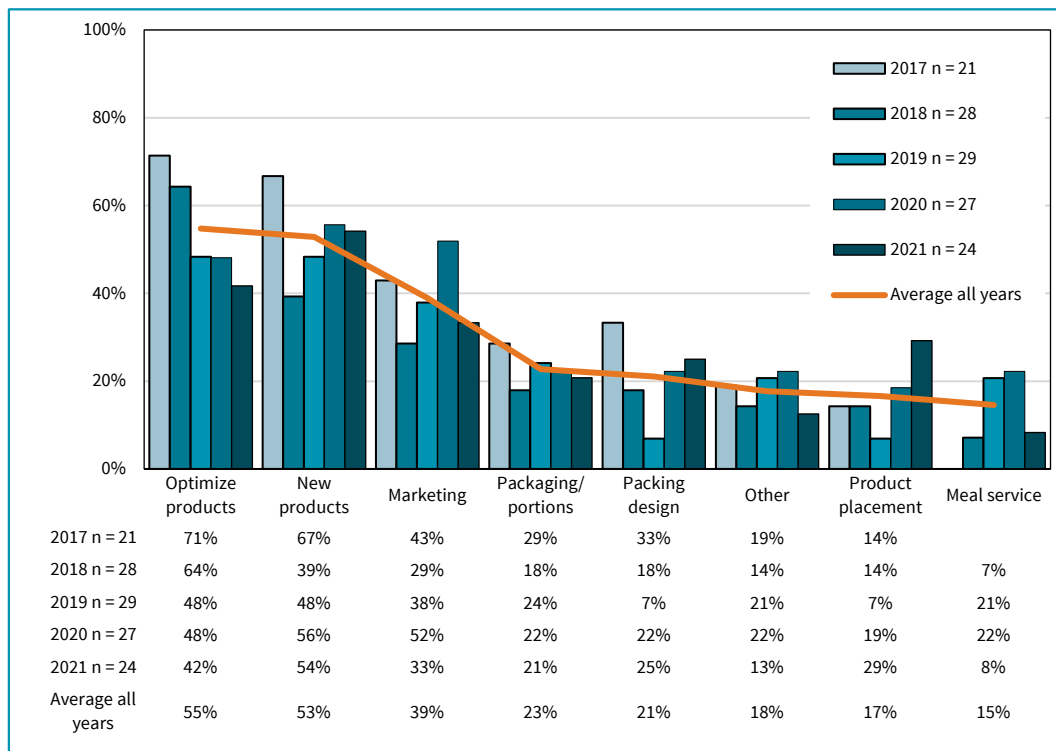
A little less than 50 participants have signed the letter of intent under Priority area 3 on saturated fat. As shown in table 5, approximately half of those who have signed the agreement complete the self-report each year. Among the participants who completed the self-report, under half report that the business has their own targets for reduction of saturated fat. In 2021, only a few respondents had attended meetings, seminars or workshops on this priority area compared to previous years. This is linked to the lower number of such events during the pandemic.

Table 4 Overview of respondents in Priority area 3: Reduction in saturated fat

	2017	2018	2019	2020	2021
Number of participants who have signed the letter of intent under Priority area 3	40	50	48	46	48
Number of participants who completed the self-report under Priority area 3	21	28	29	27	24
Respondents with their own targets for reduction of saturated fat	11	12	12	10	7
Respondents who have attended meetings, seminars or workshops during the reporting year	16	18	18	16	5

For Priority area 3, the reduction of saturated fat, the same 3 types of measures as for Priority area 1 and 2 are mentioned: Reduction of saturated fat in existing products, introduction of new products with reduced saturated fat content and active marketing (figure 3).

Figure 3 Measures within Priority area 3: Reduction in saturated fat implemented in the period 2017–2021



While optimisation was the most significant measure in the first few years, this has somewhat decreased in recent years compared with other measures. Many of the participants point out that there are several challenges associated with the reformulation of products to reduce saturated fat content. Whereas the issue for Priority 1 and 2 is the *addition* of salt and sugar, the issue for saturated fat is how to reduce the composition of a naturally occurring nutrient in the raw ingredient, such as in milk and meat. The fat also gives product characteristics that make it hard to reduce the content without affecting the consistency and flavour of the product.

Many of the participants have demonstrated during the agreement period that small changes to saturated fat content on high-volume products yield a significant

reduction in the overall amount of saturated fat that these products account for. What we are talking about here is both a reduction of the fat content of the products, and a shift from animal to vegetable fats, and therefore shift from saturated to unsaturated fatty acids. While it is possible to reduce the fat content in some product groups, or change fat source, it is a longer-term challenge to reduce the proportion of saturated fat in milk and meat. This is a long-term commitment which, amongst other things, call for changes to animal farming and feeding practices.

Many of the participants employ both the development of new products and marketing measures, for example by launching new individual products and product lines with less fat.

Both participants in the food retail and the hotel, restaurant and catering industry mention that product placement and food/beverages on offer are measures that seem to be effective in making consumers buy products with a lower saturated fat content.

2.4 Priority area 4: Increase the population's intake of fruit and berries, vegetables, wholegrain products and seafood by 20 percent by 2021

Priority areas 1, 2 and 3 all relate to a *nutrients* the health authorities want the population to eat *less of*. In Priority area 4, also called #MerAv (MoreOf), the aim is for the population to eat *more of* certain *food groups*, i.e. 1) fruit, berries and vegetables, 2) wholegrain products and 3) fish and seafood. These 3 food groups have been reported individually. Respondents within the priority area have provided responses for their activities in one or more of these 3 groups (see table 6).

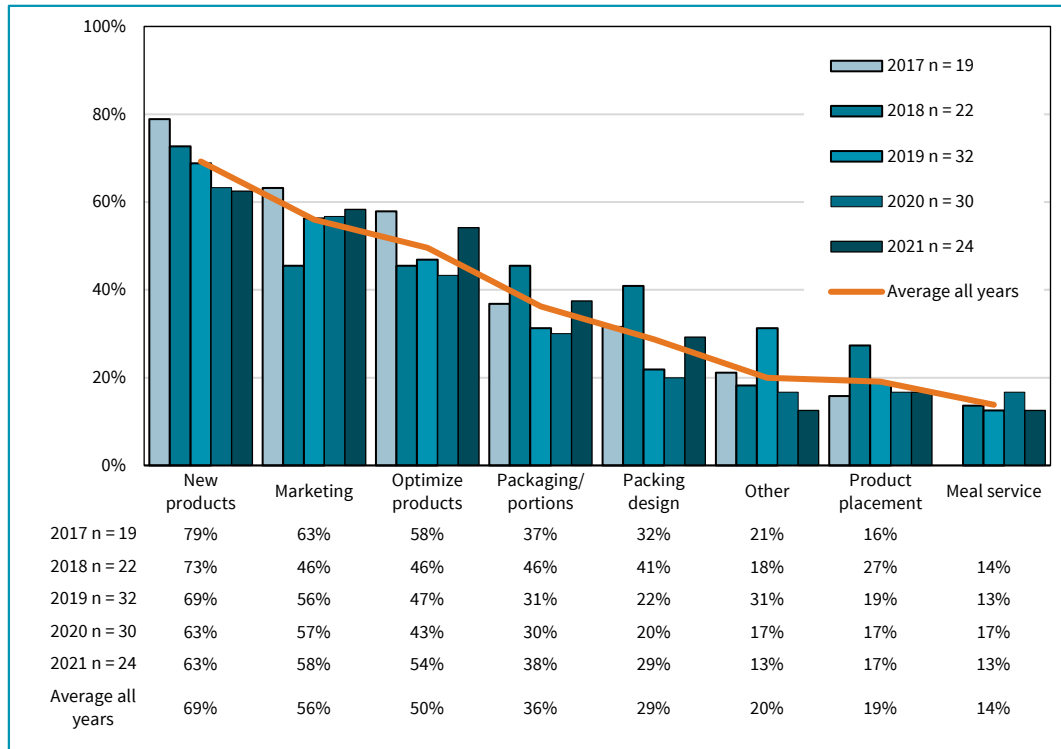
Table 5 Respondents Priority area 4: Increase the population's intake of fruit and berries.

	2017	2018	2019	2020	2021
Number of participants who have signed the letter of intent under Priority area 4	58	72	69	72	71
Participants who submitted responses under Priority area 4	33	33	53	50	39
Respondents Fruit, berries and vegetables	19	22	32	30	24
Respondents Wholegrain products	16	20	26	27	20
Respondents Seafood	14	15	21	20	15

Fruits, berries and vegetables

In the 5 years of reporting, launching new products, marketing and optimisation of existing products have been the most frequent measures (figure 4).

Figure 4 Measures within Priority area 4: Increased intake of fruit, berries and vegetables implemented in the period 2017–2021



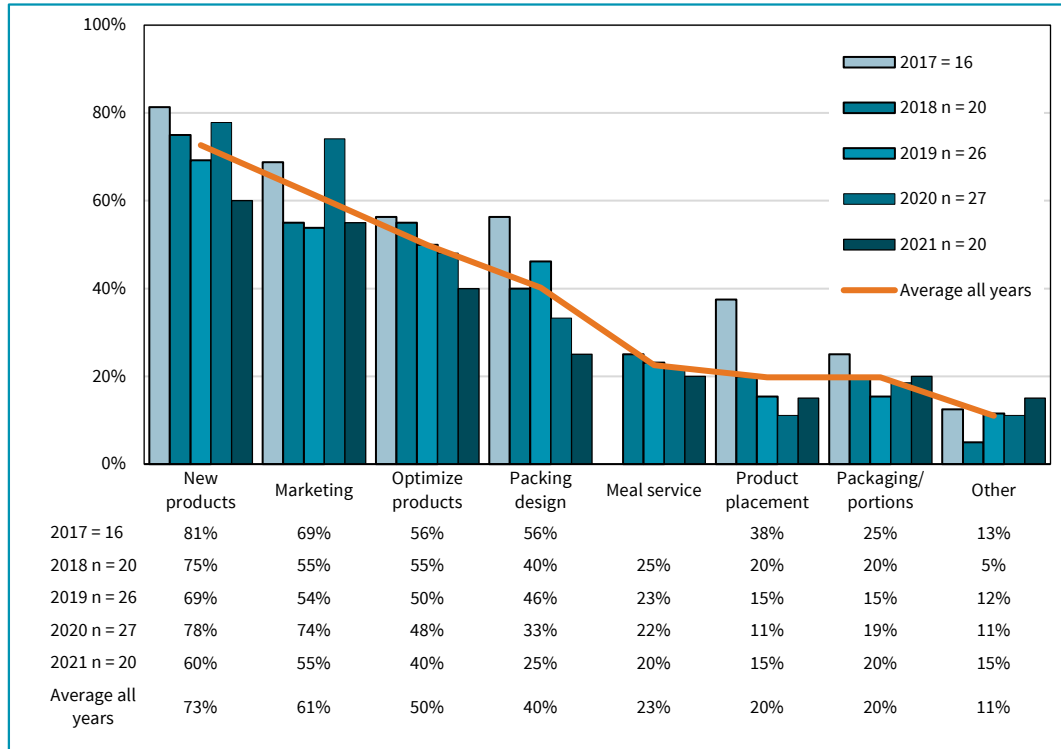
For the food retail sector, product placement has been important. All chains have reported that they have placed fruit and vegetables at the entrance of shops to make it easier for customers to choose these products.

Several participants mention that they emphasise making products and dishes with more vegetables. They also emphasise the improved quality of fruit and vegetables, and that packaging size must be adapted to provide a larger range of products that are easy to grab on the go. Many of the participants state that a range of measures appear to have a larger effect on consumers than individual measures.

Wholegrain products

As for the other priority areas, the measures connected with launching new products, marketing and optimisation of existing products that are also the most employed measures for wholegrain products over the 5 reporting years (see figure 5).

Figure 5 Measures within Priority area 4: Increased intake of wholegrain products implemented in the period 2017–2021

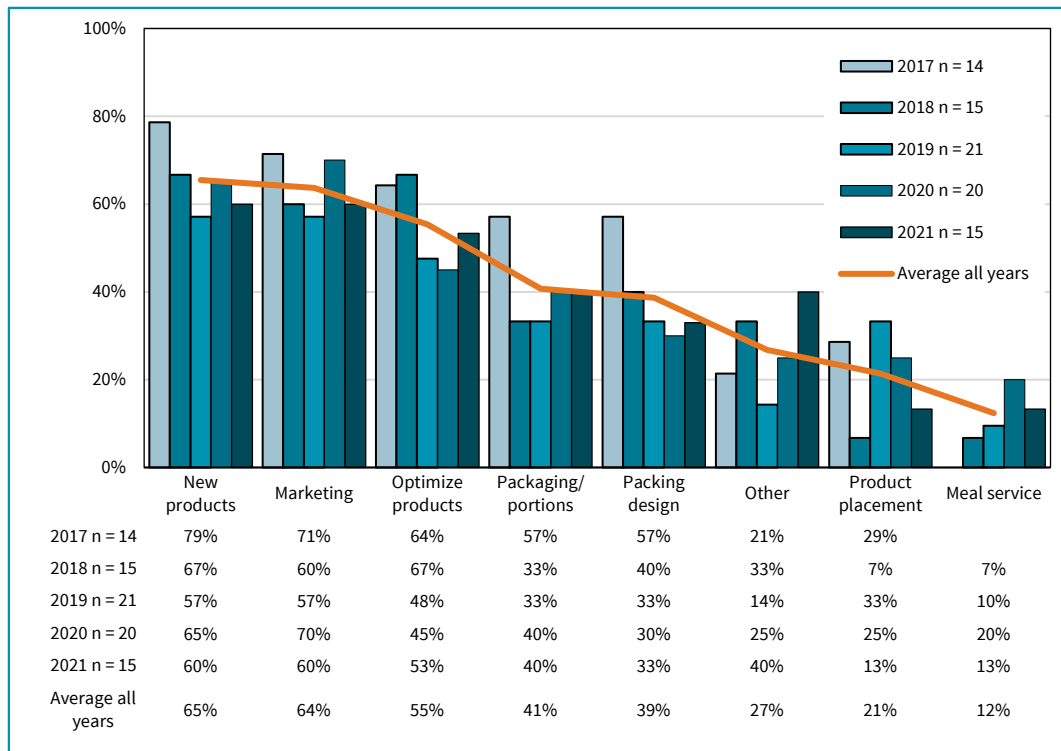


Over the years, participants have pointed out measures that are particularly effective. They point out that better visibility and accessibility is important. Moreover, by asking customer to choose between refined and wholegrain products when ordering food, the demand for wholegrain products increases noticeably. In all 5 reports, the use of the labelling scheme “Brødskala’n” (the Bread scale) has been highlighted as an importance marketing initiative. Several participants claim that it is the sum of the measures which produces an effect, and they point to sales increases in products with a higher proportion of whole grains.

Fish and seafood

Marketing and launching new products have over the years in the letter of intent, been the most significant measures in trying to increase the intake of fish and seafood in the Norwegian population (figure 6). The few participants within this area have implemented a range of different measures to try to get new groups of consumers to eat more fish more often.

Figure 6 Measures within Priority area 4: Increased intake of fish and seafood in 2017, 2018, 2019 and 2020



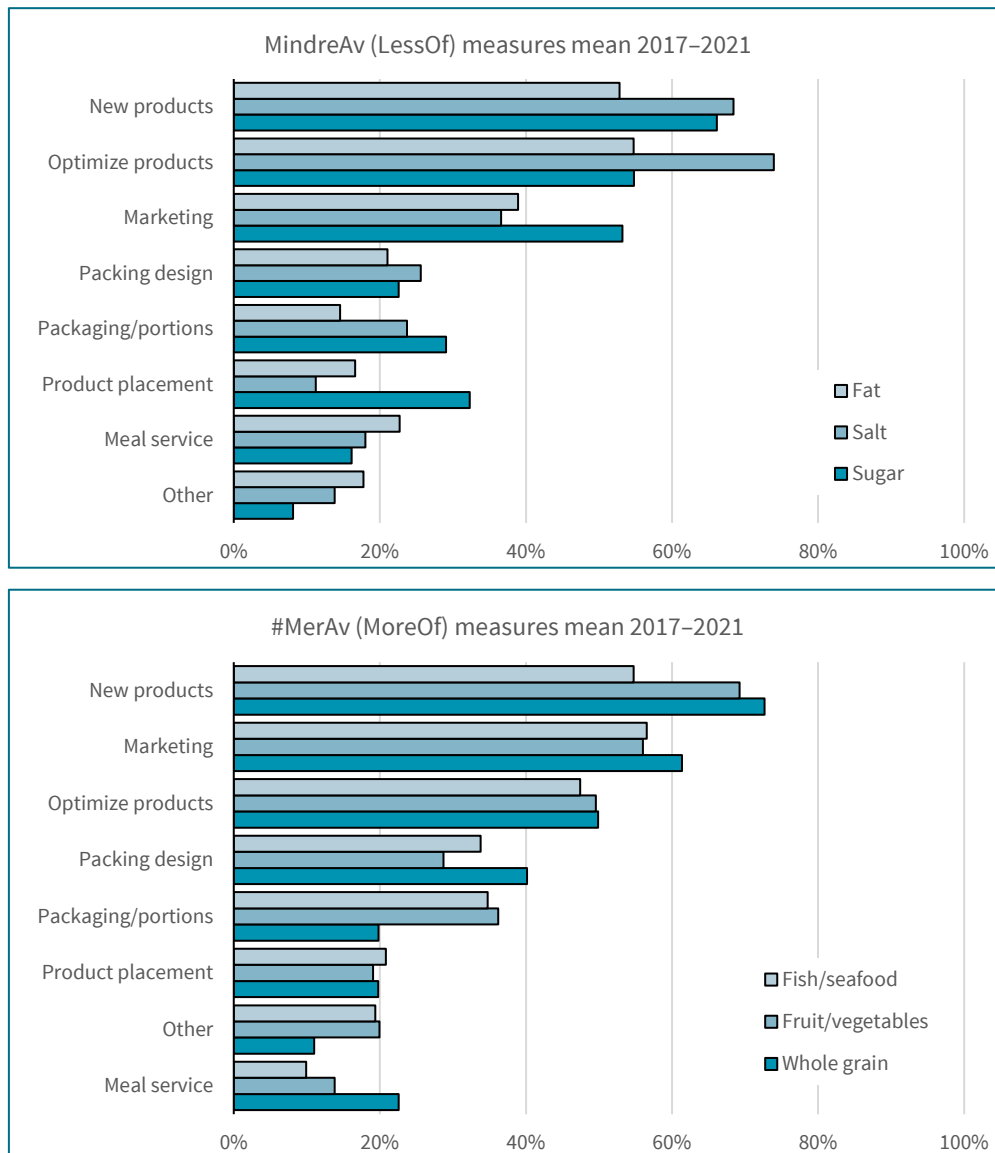
Various campaigns using for example discounts are mentioned as particularly effective measures. Moreover, they emphasise making fish and seafood products more available through a wider selection of ready meals.

The participants measures are summarised

For Priority areas 1, 2 and 3, the so-called *#MindreAv (LessOf)* areas, and for Priority area 4, *#MerAv (MoreOf)*, developing new products, optimisation of existing products and marketing have been the most significant measures in the period 2017–2021.

Few report employing measures such as product placement and change in food/beverages offer. This is not necessarily due to the measures being less important, as these measures are primarily employed by the food retail chains and the hotel, restaurant and catering industry. Only 3 participants from the food retail industry respond on behalf of all the physical food retail shops in Norway, so even a small number of responses can constitute a comprehensive measure.

Figure 7 Overall mean for all measures 2017–2021



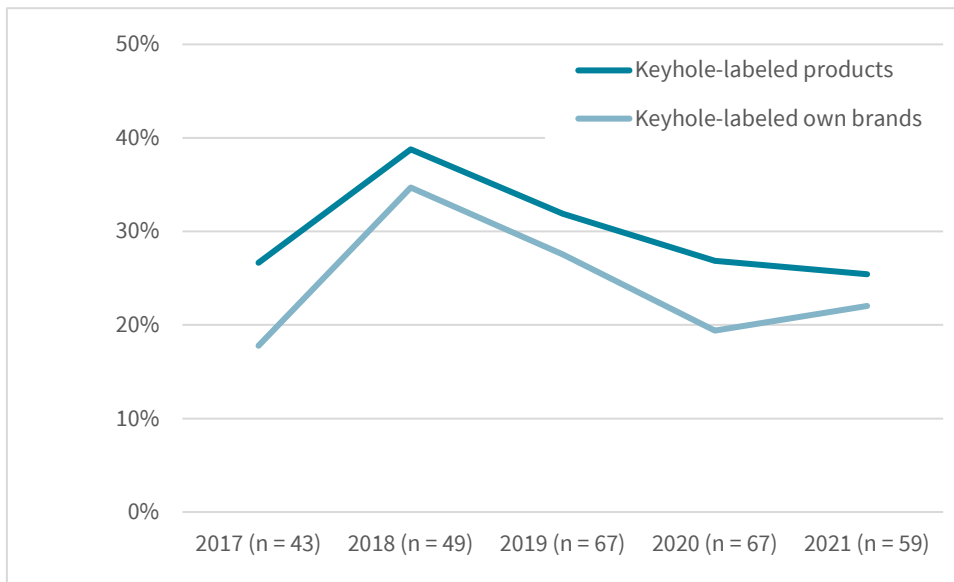
2.5 Keyhole symbol

The Keyhole scheme is a voluntary labelling scheme to help consumers make healthier food choices within different food groups. There are set requirements for fat, saturated fat, sugar, salt and fibre content. Over the years, about a third of respondents have reported that they have Keyhole-labelled products in their product line. There is a wide range in the number of Keyhole-labelled products reported by each participant. A very rough calculation shows that about a third of the participants have less than 10 different products, another third has between 10 and 25 products, and amongst participants with the most products, there have been 1 or 2 every year who report having around 1000 different Keyhole-labelled products.

Figure 8 indicates a slight decrease in the proportion of participants who report such products from 2018 to 2021. The decrease in Keyhole-labelled products from 2019 to 2020 corresponds to the decrease reported to the Directorate of Health by AC Nielsen. 1,650 Keyhole-labelled products have been reported in the food retail

industry in Norway in 2020, a somewhat lower figure than in 2019. It is worth noting that AC Nielsen count the number of Keyhole-labelled product lines, not turnover, whereas our survey asks for the number of products. Our survey cannot provide an explanation for this decrease.

Figure 8 Proportion of participants reporting Keyhole-labelled products



3 The participants assessment of the agreement

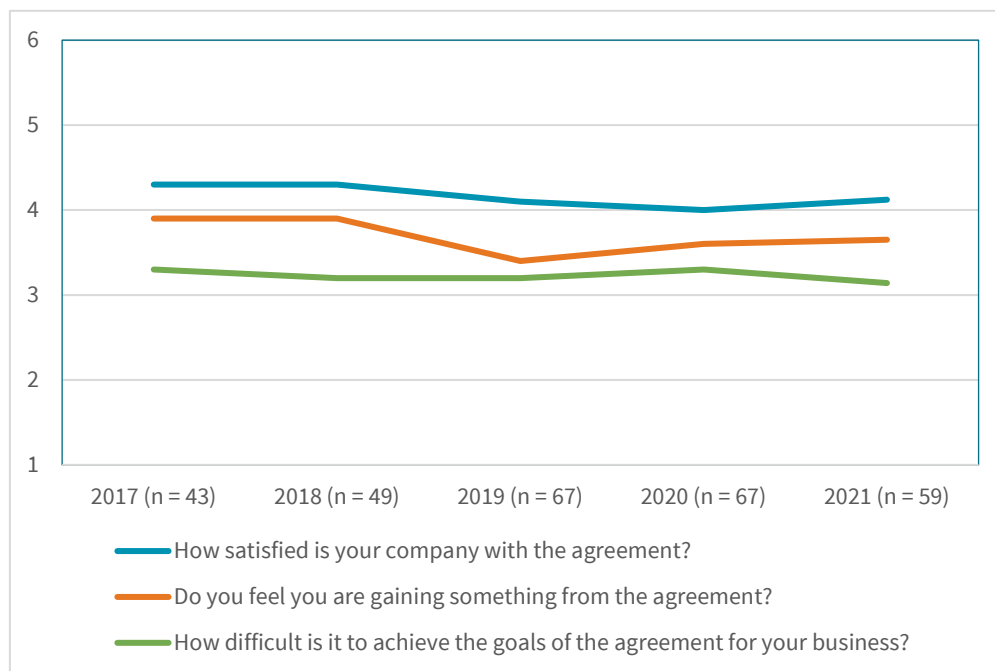
In the annual self-reports, the participants have reported on the measures they have implemented, as described in the last chapter. This chapter looks at how the participants view the agreement in relation to their own business, and what their views are on how the health authorities have fulfilled their responsibilities under the agreement.

3.1 Assessment of the agreement

Every year, the agreement partners have been asked to report on 3 aspects:

- How satisfied the company has been with the agreement in the last year,
- Whether they feel they have gained anything from the agreement, and
- How difficult it has been for the company to achieve the objectives of the agreement.

Figure 9 Mean assessment of the agreement. Response on a scale from 1 to 6, where 6 = Very satisfied with the agreement, Have gained a lot from the agreement, and Very easy to achieve the goals of the agreement)



The assessment results over the 5 reporting years have been very stable (figure 9). The participants are quite satisfied with the agreement (mean, all years: 4.2). They feel they have gained quite a lot from it (3.7). But they feel it has been somewhat more difficult to achieve the objectives of agreement (3.2).

Motivation:

Every year, the self-reports include an open-ended question about the participants' main motivation for joining the agreement. The main motivation over the period cover 3 area:

- Wanting to contribute to improved public health. The letter of intent is regarded as part of the social responsibility that all companies have, and it is an opportunity to show this responsibility.
- Wanting to develop and comply with set targets, developed in a dialogue between the industry and the authorities, so that the entire food and beverage industry has the same responsibilities and regulatory framework.
- Wanting to increase commercial visibility and boost sales of their products, in other words, sell more of what is good for the consumer.

Benefits

The participants report the biggest benefit from the letter of intent over the period as being:

- More cooperation across the industry. The fact that many work towards the same goal, is regarded as a good starting point for a dialogue.
- Raising awareness both internally within the business, and externally in customers/consumers
- A shared responsibility that all who are affiliated with the agreement have said that they will fulfil.

Effect

It has proven difficult to point out any single measure that the businesses believe has the greatest effect in achieving the objectives of the agreement. It has been suggested that there is no "quick fix" to achieve good results, that optimisation of existing products require careful and thorough work to achieve results that are acceptable to the consumers. It has also been mentioned that tools such pricing, for example in the marketing of #MerAv (MoreOf) products, have a positive effect. Pricing can also be relevant in other contexts, such as in promoting well-formulated products. Most feel that a collective effort with a number of measures across the industry is what has the best long-term effect.

Challenges

The participants refer to several challenging factors in connection with the implementation of the agreement.

Changes in consumer behaviour. It is crucial that consumers buy the food products, whether they are new products, or existing products that have been made healthier. It makes no difference that the industry, including catering establishments, offer healthier products, if ultimately, they do not sell.

Optimisation, a gradual change in salt, added sugar and saturated fat, can only be made to a certain limit until it affects shelf-life, flavour, consistency and other characteristics. Several industry actors point out that the improved products compete with imported products, and that this could lead to consumers taking longer to adjust to products with less salt, sugar and saturated fat. It is also suggested that it is a

challenge that there is little room in the regulation to communicate the product improvements that the industry makes.

Cross-border trade, taxes and import is an area that many of the participants have regarded as very challenging over the entire agreement periods. The exception was during the pandemic 2020–2021, when the border was closed. The businesses have also suggested that there is a lack of political understanding of the issues around cross-border trade and the big differences in taxation between Norway and Sweden. The increase in excise duty on chocolate and confectionery caused work on Priority area 2 to be paused for several years and demonstrates the tension between a voluntary letter of intent and fiscal policies.

Monitoring of the effect of changes to the diet consumers eat is requested by the industry. This was an area that has been worked on during the agreement period, but when the letter of intent ended, it was not in place. Lack of good data to assess whether the authorities' have achieved their objectives is regarded as an issue.

3.2 Assessment by the health authorities

The Ministry of Health and Care Services have made a commitment to 6 points in the letter of intent:

- a) Reporting to the coordination group on activities and overall goal achievement
- b) Monitoring the population's diet
- c) Working with systematic measures that promote public health in general and increase the proportion of the population who have a diet that is in line with the national dietary guidelines.
- d) Influencing consumers through communication and implementing other systematic measures to make it easier to make healthy choices.
- e) Engaging in dialogue and interacting with other relevant authorities and the Research Council of Norway related to the objectives of the letter of intent.
- f) Collecting data to evaluate whether the objectives of the agreement were achieved and work to ensure that regular representative dietary surveys are conducted.

Table 6 The participants' scores for how well the health authorities are fulfilling their responsibilities in 2017 and 2021. Mean score for each point (1 = very poor, 6 = very good)

The health authorities fulfil their responsibilities in:	2017 (n = 44)	2018 (n = 49)	2019 (n = 68)	2020 (n = 67)	2021 (n = 59)	Mean
Reporting to the coordination group	4.4	4.5	4.5	4.5	4.5	4.5
Monitoring the population's diet	4.3	4.2	4.2	4.2	4.3	4.2
Working on measures in line with the dietary recommendations	4.1	4.2	4.1	4.0	4.0	4.1
Having a dialogue with the authorities and the Research Council of Norway	3.8	4.1	4.1	4.1	4.1	4.1
Influencing consumers to more easily make healthy choices	4.0	4.2	4.2	3.8	3.7	4.0
Evaluating whether the objectives of the agreement have been achieved, conducting diet surveys (not asked correctly in 2017 and 2018)			3.7	3.8	4.1	3.9

The participants have rated the authorities' fulfilment of these responsibilities on a scale where 1 represents the poorest score and 6 represents the best score. As shown in table 10, the scores are fairly stable from year to year – and all areas have a mean score from 3.9 to 4.5.

In the open-ended comment fields, several mention that the secretariat function, held by the Directorate of Health, has been important. They did well in organising the work. Also, the campaigns run by the authorities, such as #MerAv (MoreOf) and on Nøkkelhullet (Regulation on voluntary labelling of foods with the Keyhole) are regarded as very positive measures. The participants emphasise that the role of the government led by Jonas Gahr Støre in signalling the importance of continuing the work with the letter of intent, is important. The authorities have been an important driver in preparing the new letter of intent for the period 2022-2025, and getting it signed.

4 The letter of intent as a tool

4.1 “We are a big responsible company that many people have expectations of.”

In the in-depth studies, we asked the participants questions about what they thought were the advantages of a partnership for a healthier diet, in its present form and compared with other forms of regulation, such as taxation policy. We asked the following question: Why and how did you join the agreement? What do you get out of the agreement? What is the advantage of a letter of intent compared with other forms of regulation?

Already in the mid-term survey, the informants emphasised that the letter of intent was not the first time the industry had worked together with the authorities. They referred to several areas of cooperation in the past, such as vegetables, seafood and salt. The challenge was that it started with cooperation on single topics or food groups, and the work did not cover the entire area of diet. In the interviews, they emphasised that the letter of intent has brought together individual initiatives in the past and that this makes the work for better public health more coordinated and transparent.

Both in the mid-term survey and in the final survey, the participants made it clear that the agreement was important for the industry, and that the objectives of the agreement supported the work they had already put on the agenda internally and included in their strategies and company value documents. The big participants had put public health and social responsibility on the agenda already before the agreement was signed. They stated that social responsibility and reputation motivated them to join the agreement. In the final survey, there was still great support for the objectives and purpose of the agreement. A healthier diet has value in itself and it is a matter of reputation for them to show that they are responsible social actors, and the agreement therefore supported an objective they already shared and still share with the government. The food industry does not act only for the good of public health, but they make it clear that consumers want healthier options. It was therefore also important to be able to meet the wishes of the consumers. One participant felt that eating a healthy diet has become a status marker and is therefore of commercial importance to the industry.

The participants emphasised that it was positive that all the different participants, both from the industry and the authorities, pull in the same direction. The agreement allows for the coordination of efforts, a shared focus and stimulus to move in the same direction. It was also suggested that the agreement forces the participants to set concrete target, even though it is somewhat variable how concrete the targets in fact are. Even though they had worked towards providing healthier options in the past, they had not necessarily set concrete targets to achieve. The letter of intent therefore helps to make their end objectives more concrete and set a period in which to achieve them. The fact that an agreement has been signed and objectives have been set, also helps with internal anchoring and support. Several emphasise, for example, that signing an agreement creates a stronger commitment across the business

and being a party to the agreement resulted in a greater effort and involvement. When the top manager had signed up for it, it was perceived to be a strong signal to the rest of the business that this was something that had to be achieved. It was therefore easier to get the support and priority the work needed in the business.

Another important aspect of the letter of intent is that it provides a forum for the food industry and the authorities to meet. The fact that participants can meet regularly to discuss and keep each other updated on what is happening, makes them feel that it is easier to work together and that it was of greater value.

4.2 “The industry would rather play on the same team as the authorities than have something forced upon them.”

An important issue is whether a voluntary letter of intent is the best way to achieve the objectives of a healthier diet in the population, and what the potential alternatives are. This was a central topic of discussion in both the mid-term survey and the final survey.

The informants very much agreed that the letter of intent was the best voluntary measure they could think of, given all the positive aspects they describe in the coordination of the efforts of the industries and the authorities. The most relevant alternative to voluntary initiatives, is taxation. This has been a topic of discussion since before the agreement was signed, and has come up as a topic since then, most recently in connection with the increase in the excise duty on chocolate and confectionery and non-alcoholic beverages in Norway’s National Budget for 2018. Even though the letter of intent required cooperation on the reduction of added sugar through voluntary initiatives, an increase in the excise duty was still introduced. The increases were significant and came at short notice, without consulting the industry or informing the companies or organisations about it. Parts of the industry therefore felt that this challenged the collaboration and their willingness to cooperate on the targets. It led to work on the sub-target of reduction in sugar not being followed up, and that the Bryggeri- og drikkevareforeningen (Brewery and beverage association) paused the activities initiated under the agreement in November 2017. The food and beverages manufacturers in NHO Mat og Drikke (FoodDrinkNorway) followed up in June 2018.

Both the authorities and the participants within Priority area 2 on the reduction of sugar made it clear that the agreement was not cancelled but suspended. When the excise duty was changed in Norway’s National Budget for 2021, the industry resumed the work on this sub-target area as well, and the activities went ahead as planned for the rest of the agreement period. At the same time, this incident left a mark and was still indicated to be a challenge for the collaboration in the final interviews. For the industry, predictability by the authorities is an important factor in the willingness to cooperate with them. Predictability was emphasised as one of the most significant conditions for a successful cooperation both in the mid-term and final interviews.

In the final interviews, it was pointed out that taxation is a problematic tool in targeting specific products without also affecting other products, and again the sugar tax was mentioned, which applied equally to water both with and without sugar, in addition to several other products such as marzipan sweets, while it was not applicable to marzipan for baking. An interesting aspect of the sugar tax is discussed in the mid-term evaluation:

“Whether the tax increase in fact led to a reduced sugar intake is difficult to say, since the excise duty is imposed on water, both with and without sugar. In

addition, taxes could lead to increased cross-border trade, which is already perceived today as a threat to the industry according to both the organisations and some of the manufacturers/retailers. The industry knows its own turnover figures, but there is a lack of consumer surveys or research on the scope and content of cross-border trade. Figures from the industry show that the turnover of water without sugar has increased, but this is obviously not a clear result of the increase in excise duty since these products are also covered by the excise duty.”⁵

In retrospect, it is evident that the agreement area with the best results is the reduction of sugar, despite a period when cooperation under the letter of intent ceased. This could support the industry’s claims that they are working to increase the sale of healthier products regardless, even though the agreement provides support and a boost to the overall progress.

The advantage is also that the collaboration represents a commitment, both within the business and to the other participants in the industry. The participants also emphasised that it felt like a more positive experience to work together than to have changes forced upon them from above. It also builds broader support for the reasons for the changes than an unequivocal instruction from the authorities. In addition, several participants mentioned that raising excise duty can encourage the search for loopholes and means of evasion, whereas a mutual agreement fosters support for the objectives.

Another type of measure that was referred to in the interviews, was a reduction in VAT on healthier products. As price is perceived as one of the biggest obstacles to increase the intake of fish and seafood and fruit and vegetables, it was mentioned that a reduction in VAT may encourage more customer to buy these products. Some of the participants have implemented measures of their own, such as “VAT cut” offers on selected product groups. An example of this is the KIWI campaign on fish, where they cut the price of fresh and frozen fish equivalent to the VAT amount over a six-week period from 7th January to 17th January 2019. According to KIWI’s homepage, this resulted in a 42 percent increase in fish sales⁶.

This is just one example, but it demonstrates the willingness of the industry to try out measures, and it emphasises the point that for consumers price is an important factor in the decision to purchase.

4.3 “Everyone knows they should eat more fish and vegetables, but they still don’t.”

Both in the mid-term survey and in the final interviews, participants emphasised that it is limited what can be done to influence customer choices. The consumers’ freedom of choice is also about being able to make unhealthy choices, and participants do not want measures that force consumers to only make healthy choices. Therefore, participants are concerned about what measures can be employed to influence consumers to make healthier choices more often. Branding, product development, product placement and campaigns, are all measures designed to influence these choices.

It was suggested that what the industry itself can control, i.e. the #MindreAv (Les-Of) area, is simpler, even though you also get to a point where it is difficult to make

⁵ Hatløy et al. (2019). p. 22.

⁶ <https://kiwi.no/tema/samfunnsansvar/slik-gar-miljo-sunnhet-og-lave-priser-hand-i-hand-hos-kiwi/>

any further reductions without affecting the quality of the product. This can also be found in the annual reports, where the occurrence of optimisation of existing products has somewhat decreased.

The #MerAv (MoreOf) area depends on being able to influence the consumers, and several informants pointed out that the consumers did not lack information/knowledge: “Everyone knows what food is healthy”, but there is not enough knowledge about the raw ingredients or knowledge about how to prepare these raw ingredients. Price is a challenge, as fish and seafood is generally more expensive than meat products. The exception in the #MerAv (MoreOf) area are wholegrain products, where manufacturers and retailers can provide a wide selection of wholegrain products or increase the amount of whole grains in existing bread products and thereby influence consumers to buy products with more whole grains than they usually buy.

Several also felt that the eating habits of younger people was important and thought this was the hardest group to reach with #MerAv (MoreOf) The participants felt that this customer group both cannot or will not eat more of these raw ingredients. In the experience of the industry, new products in fruit and vegetables and fish and seafood must seemingly be “oven ready” to reach these consumers. Product development is therefore important, and an area manufacturers concentrate on.

At the same time, several informants pointed out the need for more knowledge about what influences consumers and in what way. It was suggested that we do not know enough about what in fact influences the choices different groups of consumers make, to be able to make interventions.

4.4 The dietary recommendations

Several discussed the significance of the government dietary recommendations. It was emphasised that the targets in the letter of intent must match the dietary recommendations, which they felt was the case at the moment. It is therefore important that the industry can identify with the dietary recommendations and work toward them.

Keyhole-labelling was also brought up as an effective tool in helping consumers make healthier choices. Keyhole-labelling is widely recognised and easy to relate to, at the same time, it does not stigmatise those who do not buy Keyhole-labelled products in the way that other types of labelling may.

Some took on the challenge with other different types of labelling to the Keyhole-labelling, and felt it was particularly important what labelling schemes in other European countries, such as Nutri-Score, could do with regard to consumers. Nutri-Score is a labelling scheme on the front of the packaging, as is the case for the Keyhole symbol. Nutri-Score is based on a colour scale of 5 levels from dark green to dark red, with corresponding letters from A to E, where A is intended to represent the healthiest option in terms of the overall nutritional value of the products. Nutri-Score has been developed by the French health authorities and is recommended by the health authorities in seven European countries – Belgium, France, Germany, Luxembourg, Portugal, Spain and Switzerland. The participants warning against Nutri-Score questioned what labelling some foods as “red”, with a visible red label on the packaging, could do to people’s relationship with food and to healthy eating habits. They pointed to issues such as eating disorders and difficult relationships with food, and that this was not something they wanted to contribute to. It was also suggested that a shopping cart with products with visible red labels could be experienced as stigmatising both in front of other customers and employees at the till. Even though they want

people to buy healthy products, they did not want to make unhealthy choices so overt.

There are also other types of labelling measures, such as placement of the nutritional content on the packaging, even though no one mentioned this. This is part of a larger discussion among health authorities, both nationally and internationally, and several participants in the industry felt it was important to emphasise that Key-hole-labelling is the preferred option as it is widely recognised in Norway and the Nordic countries.

A topic that was raised in the final interviews was the relationship between naturally occurring nutrients such as sugar, fat and salt, and the additives that replace them. Do we know enough about what health effects alternative ingredients can cause over time? For example, it was pointed out that articles expressing scepticism to such things as artificial sweeteners and salt substitutes are spread on social media. How does this affect customers, and what does it mean for the industry? In this context, the growing discussion about “ultra-processed foods” was also mentioned. On this subject, it was emphasised how important the health authorities’ dietary recommendations were, as these are perceived as balanced and moderate, and less exposed to “fashion fluctuations” and special interest pressure groups.

4.5 Cooperation through a letter of intent

The letter of intent for a healthier diet in the population is an interesting form of collaboration. A close comparison that can shed light on both the strengths and the weakness of the agreement is the letter of intent regarding a more inclusive working life (the IA agreement).

In the same way as the letter of intent on diet, the IA agreement involves a voluntary collaboration on shared objectives, whereas the alternative could be changes in legislation. In the case of the IA agreement, the alternative could be changes to the sick pay scheme, which has already been suggested. The alternative to the letter of intent for a healthier diet could be an increase in excise duty. Here the parties are the authorities and the food industry, whereas the IA agreement is a three-party agreement between the employers’ organisations and the authorities.

A letter of intent rests on certain assumptions: that the relevant parties are included, that the objectives are perceived as equally relevant to all the participants and that all the participants perceive that the benefit of joining is important enough to make the commitment.

The letter of intent for a healthier diet covers large parts of the food industry, both manufacturers and retailers. The grocery trade in Norway is dominated by three large chains: NorgesGruppen ASA, Coop Norge SA and REMA 1000 AS, in addition to the somewhat smaller Bunnpris. Bunnpris buy most of their products from NorgesGruppen’s wholesaler ASKO. NorgesGruppen has a market share of 44.1 percent and is the biggest of the actors⁷. All the three big chains have signed the agreement. The big actors on the manufacturer side, such as Orkla ASA, TINE SA and Nortura SA, have also signed. The agreement also includes several medium size and small businesses. This should make it easier to get the message across, and for the work to gain traction, while the IA agreement up to 2019, when the agreement was amended, illustrates the challenges in reaching the small and unorganised businesses, where the parties cannot be supporters in the work.

⁷ NHOHS 2021, retrieved from [Data and Trends 2021: Trade \(nhosh.no\)](#) 10.11.2022

In the mid-term evaluation, we also asked whether the participants were familiar with the IA agreement and if so, whether they saw any parallels between the two letters of intent. The two agreements, it turned out, was normally anchored in different parts of the businesses. The responsibility for the IA agreement lay with the HR/personnel department or the negotiations department, while the responsibility for the letter of intent for a healthier diet more frequently lay with a quality department, industry department or similar, more outward facing parts of the business. There was therefore not much internal coordination around the work, and not much knowledge about the other agreement.

The agreements also have different anchoring. The IA agreement has broad party-based ownership, all the major employers and employee organisations and authorities have signed it, and it has party-political anchoring that has enabled it to survive several government constellations. The political parties are well familiar with the IA agreement, and proposals on amendments on the area covered by the agreement would be met with reactions from the parties and the authorities alike, such as in the specific case of the political proposal to consider amendments to the sick pay scheme.

The Letter of Intent for a healthier diet is more defined with regard to both political and departmental anchoring. It is firmly anchored in the Ministry of Health and Care Services, while other relevant government department areas, such as farming, fishing, industry and education are not actors in the agreement. This means that amendments introduced by other departments are not necessarily in line with the letter of intent's work for a healthier diet in the population. At the same time, the letter of intent for a healthier diet is not shrouded in political controversy, and nothing suggests that the agreement will be met with resistance regardless of the government of the day, which indeed has not happened in the agreement period. This helps to distinguish the Norwegian agreement from similar agreements on diet in countries such as Australia and the UK, where the agreements did not survive a change of government, due to the lack of cross-party political support.

A final area that distinguishes the two letters of intent on a more inclusive working life and a healthier diet in the population, is how they show and market their efforts. Idébanken (The idea bank) – For a working life that is inclusive (idebanken.org), is the official communication channel for activities and results from the work on a more inclusive working life. This provides information, good advice and examples on how to work towards an inclusive working life, such as specific measures or businesses that do something they feel contributes to the objectives.

The letter of intent for a healthier diet, on the other hand, has strong restrictions on what the agreement partners can provide information on or how they can market healthier products. The competition act restricts cooperation, even where there is great consensus around the measures being collaborated on. The EU claims regulations also represent a restriction on how products can be labelled. It is, for example, not permitted to label a product as reduced in salt if the salt reduction for the product is less than 30 percent. This means that small changes with the aim of reducing the amount of salt (and sugar and saturated fat) gradually over time so that the consumer barely notices it, so-called *nudging*, cannot be marketed. Large reductions, on the other hand, can represent such a big change that the flavour and consistency of the product is affected, and thereby contributing to consumers deciding not to buy it.

To help with this situation, the government has introduced an annual award for successful work in line with the letter of intent on the facilitation of a healthier diet in 2 categories: healthier products and healthier marketing. The awards are intended to honour participants who are affiliated with the letter of intent and whose efforts

to develop healthier products are exceptional and encourage the consumers to build healthier dietary habits. The introduction of the awards has been well received within the industry and it is referred to as something that helps them show how much work they put in for a healthier diet in the population.

In the final interviews, we asked the participants what they felt needed a greater focus on in the upcoming agreement period. Most of the interviewees had already signed the new agreement, and all were positive with regard to the new agreement period.

The majority agreed that it was important that the agreement put more emphasis on area 5, influencing the consumers towards healthier behaviour. The objective concerns influencing consumer behaviour in the direction of a healthier diet through the consumers' conscious and unconscious choices. The methods can be branding, activities and measures taken as part of the #MerAv (MoreOf) work. The efforts in this area are organised by the Directorate of Health.

In the final interviews, it was suggested that influence campaigns and product placement are tools that have not been used enough in the past, but they are challenging because there is little knowledge about what would be effective. As one participant put it: "And we don't know what we actually can do to influence behaviour". It was stated that it is easier to influence the conscious and well thought out choices, but you also want less conscious choices to be healthier. *Nudging*⁸ is a tool to influence consumers to make healthier choices without consumers necessarily being aware that the choice is healthier. This applies to a large extent to the #MindreAv (LessOf) area, where a reduced saturated fat, salt and added sugar content in the products not necessarily involves an active decision by the consumers, as this is controlled by the manufacturers. In the #MerAv (MoreOf) area, this is more challenging, and the industry employ a range of measures and hope they work. It was suggested that we don't know enough about or have control over what ultimately is important to the customer in the shop. The industry also calls for major influence campaigns with a greater involvement by the health authorities, now that the pandemic no longer overshadows other health information. This is consequently perceived as important in the upcoming agreement period.

Product placement is more challenging as it requires the retailers to agree on how to do it, otherwise the risk is that one chain is alone in placing for example frozen fish before frozen pizza in the frozen food section, and thus lose customers because they cannot find the products in their usual place. At the same time, participants talk about initiatives such as keeping healthy small items closer to the till, water without sugar more placed in a more visible location than those with sugar etc. So, even though the initiatives are not coordinated or identical, product placement is a tool used by retailers even today.

4.6 The pandemic has had an impact on the work

In the final interviews, several felt it was important to note that the pandemic has had a huge impact on the work and the possibilities to work for a healthier diet in the population. The situation of the companies has been impacted, both in terms of the place of work and the customer contact. This has of course had an impact on the hotel, restaurant and catering industry, as parts of the working life and society was

⁸ Nudging is the promotion of the better choices without limiting the freedom of choice. For example, placing products such as soft drinks without sugar at eye level, and soft drinks with sugar so that you are required to bend down to see it.

locked down. Long periods of working from home and isolation has also affected the food retail sector, but in a more positive direction, in addition to cross-border trade not being possible in periods. As a result, people shopped, prepared and had their meals at home, and shopping patterns were affected, although it is difficult to get an overview of how and to what extent this affected people's diet.

Several also mentioned that the Directorate of Health focused on COVID-19 information during the pandemic, and therefore did not have the resources for other types of campaigns and consumer-influencing initiatives. Although there is an appreciation of the reasons for this, it has made it more difficult to get other types of efforts and messages across, partly because there has been no opportunity to coordinate information campaigns.

Despite the impact the pandemic has had on the industry, the impression is that most of the participants have worked on the targets of the letter of intent throughout the agreement period, and the perception is that a healthy diet has been a topic also in the period of the pandemic.

4.7 Why is the letter of intent for a healthier diet in the population important – a summary of the interviews

To summarise, we can highlight 3 benefits with the letter of intent from the qualitative data collected:

- 1 A meeting forum. The agreement partners make it clear that they see value in having one forum where the industry and authorities can meet to share knowledge and experiences and coordinate the work. In the past, there have been many different forums with different actors, and different sub-topics. The letter of intent for a healthier diet is not the first time industry and authorities work together, but it is the first time all the priority areas and most of the actors meet on a single platform in a shared forum.
- 2 Trust in the collaboration based on the Norwegian model for cooperation between the authorities and the actors in the working world. Norway has a long tradition for such three-party collaborations in the life of work both on a national and business level, and this trust is an important foundation for cooperation through a letter of intent. At the same time, it is an important benefit for the companies that the use of political instruments is predictable. It provides the necessary security to be able to prioritise the work.
- 3 Shared objectives of good population health, reputation and social responsibility. The participants have defined population health as one of their strategic objectives in one form or another, and the letter of intent gives a push in the direction for this work. For the industry, a good reputation represents a competitive advantage, and participation is therefore a benefit for them. In addition to this, the industry wants social responsibility to be a part of their profile and they want to communicate this to consumers.

Appendix 1 Participants and priority areas

The overview below lists all participants who have been sent the self-report for the years 2017, 2018, 2019 and 2020. It is also indicated which part of the agreement each participant has signed:

Salt – Priority area 1: Reduction of salt content in foods and the reduction of salt intake in the population through the Salt partnership.

Sugar – Priority area 2: Reduction of added sugar in foods and reduction in the population's intake of added sugar

Fat – Priority area 3: Reduction of saturated fat in foods and reduction of the population's intake of saturated fat

#MerAv (MoreOf) – Priority area 4: Increase the population's intake of fruit and berries, vegetables, wholegrain products and seafood by 20 percent by 2021

Participant	2017	2018	2019	2020	2021	Salt	Sugar	Fat	#MerAv (MoreOf)
A. Nilsson & Co AS	✓	✓	✓	✓	✓				✓
Nestlé	✓	✓	✓	✓	✓	✓	✓	✓	✓
AS Pals	✓	✓	✓	✓	✓	✓	✓	✓	
Bakehuset AS	✓	✓	✓	✓	✓	✓			✓
Baker Brun AS	✓	✓	✓	✓	✓	✓	✓		✓
Bama	✓	✓	✓	✓	✓				✓
Barilla Norge AS	✓	✓	✓	✓	✓				✓
Baxt AS ¹	✓	✓	✓	✓	✓		✓		
Berentsen Brygghus AS ¹	✓	✓	✓	✓	✓		✓		
Best Stasjon AS		✓	✓	✓	✓	✓	✓	✓	✓
BKLF AS	✓	✓	✓	✓	✓	✓	✓	✓	✓
Brynhild Gruppen	✓	✓	✓	✓	✓	✓	✓		
Brødrene Karlsen AS		✓	✓	✓	✓				✓
Brødrene Raastad	✓	✓	✓	✓	✓				✓
CarePacks					✓	✓	✓	✓	
Cater Mysen AS	✓	✓	✓	✓	✓				✓
Cernova/Mesterbakeren AS/ Norgessmøllene/Nærbakst ²	✓	✓	✓	✓	✓	✓	✓	✓	✓
Circle K Norge AS		✓	✓	✓	✓	✓	✓	✓	✓
Coca Cola ¹	✓	✓	✓	✓	✓		✓		
Coop	✓	✓	✓	✓	✓	✓	✓	✓	✓
COOR Service Management AS			✓	✓	✓	✓	✓	✓	✓
Den Stolte Hane AS	✓	✓	✓	✓	✓	✓			
Det Glutenfrie Verksted v/Nordic Refreshment Company AS		✓	✓	✓	✓		✓		✓
Diplom-Is AS	✓	✓	✓	✓	✓		✓	✓	
Domstein Sjømat AS	✓	✓	✓	✓	✓	✓			✓
Duga AS	✓	✓	✓	✓	✓	✓			✓
Engrosfrukt AS		✓	✓	✓	✓				✓

Participant	2017	2018	2019	2020	2021	Salt	Sugar	Fat	#MerAv (MoreOf)
Eugen Johansen AS	✓	✓	✓	✓	✓				✓
Fatland Jæren AS	✓	✓	✓	✓	✓	✓		✓	
Findus Norge AS	✓	✓	✓	✓	✓	✓		✓	✓
Finstad Gård Engros AS	✓	✓	✓	✓	✓				✓
Fjordland AS	✓	✓	✓	✓	✓	✓	✓	✓	✓
Gartnerhallen AS	✓	✓	✓	✓	✓				✓
Germann Vervik efit AS	✓	✓	✓	✓	✓				✓
GO2Grill Patricias Gatekjøkken				✓	✓	✓	✓		✓
Grans Bryggeri AS	✓	✓	✓	✓	✓		✓		
Grilstad	✓	✓	✓	✓	✓	✓		✓	
GroGro					✓				✓
H. A. Brun AS	✓	✓	✓	✓	✓	✓	✓	✓	✓
Hansa Borg Bryggerier AS ¹	✓	✓	✓	✓	✓		✓		
Ministry of Health and Care Services ³	✓	✓	✓	✓	✓				
Hennig Olsen Is	✓	✓	✓	✓	✓		✓	✓	
Hoff SA	✓	✓	✓	✓	✓	✓		✓	✓
Holmens AS	✓	✓	✓	✓	✓	✓		✓	✓
Huseby Gård	✓	✓	✓	✓	✓				✓
Ingebrigtsen kjøtt AS ⁴	✓	✓				x ⁷		x	
Insula AS	✓	✓	✓	✓	✓	✓			✓
Interfrukt AS	✓	✓	✓	✓	✓				✓
ISS Facility Services AS		✓	✓	✓	✓	✓	✓	✓	✓
JÆDER Ådne Espeland AS	✓	✓	✓	✓	✓	✓		✓	✓
Kavli Norge AS: O. Kavli AS & Q-meieriene ²	✓	✓	✓	✓	✓	✓	✓	✓	✓
King Oscar AS/Thai Union	✓	✓	✓	✓	✓		✓		✓
Kolonial.no	✓	✓	✓	✓	✓	✓	✓	✓	✓
Lantmännen Unibake	✓	✓	✓	✓	✓	✓	✓		✓
LERUM AS ¹	✓	✓	✓	✓	✓		✓		
Lerøy Seafood	✓	✓	✓	✓	✓	✓			✓
Lunde Gård engros AS	✓	✓	✓	✓	✓				✓
MAARUD AS	✓	✓	✓	✓	✓	✓		✓	
Macks Ølbryggeri AS ¹	✓	✓	✓	✓	✓		✓		
Matbørsen AS	✓	✓	✓	✓	✓	✓		✓	✓
Meum Frukt & Grønt AS	✓	✓	✓	✓	✓				✓
Mills	✓	✓	✓	✓	✓	✓		✓	
Mondelez Norge AS	✓	✓	✓	✓	✓	✓		✓	
NHO Mat og Drikke (FoodDrinkNorway)	✓	✓	✓	✓	✓	✓	✓	✓	✓
NHO Reiseliv (The Norwegian Hospitality Association)		✓	✓	✓	✓	✓	✓	✓	✓
NHO Service og Handel (Norwegian Federation of Service Industries and Retail Trade)	✓	✓	✓	✓	✓	✓	✓	✓	✓
Norfesh AS	✓	✓	✓	✓	✓				✓
Norges frukt- og grønnsaks-grossisters Forbund (Norwegian Fruit and Vegetable Wholesalers' Association)	✓	✓	✓	✓	✓	✓	✓	✓	✓
NorgesGruppen	✓	✓	✓	✓	✓	✓	✓	✓	✓
NorgesGruppen Servicehandel AS		✓	✓	✓	✓	✓	✓	✓	✓

Participant	2017	2018	2019	2020	2021	Salt	Sugar	Fat	#MerAv (MoreOf)
Norrek Dypfrys AS	✓	✓	✓	✓	✓			✓	✓
Nortura	✓	✓	✓	✓	✓	✓		✓	
Odd Langdalen frukt og engros AS	✓	✓	✓	✓	✓				✓
Orkla	✓	✓	✓	✓	✓	✓	✓	✓	✓
Pelagia AS	✓	✓	✓	✓	✓				✓
Red Bull ¹	✓	✓	✓	✓	✓		✓		
Rema	✓	✓	✓	✓	✓	✓	✓	✓	✓
Ringnes AS ¹	✓	✓	✓	✓	✓		✓		
Rolf Olsen Engros AS	✓	✓	✓	✓	✓				✓
Salatmestern AS	✓	✓	✓	✓	✓	✓			
Salmon Brands AS	✓	✓	✓	✓	✓				✓
Scandic Hotels AS		✓	✓	✓	✓	✓		✓	✓
Scandza: Synnøve Finden AS/Finsbråten AS/Leiv Vidar AS	✓	✓	✓	✓	✓	✓	✓	✓	✓
Servicegrossistene AS		✓	✓	✓	✓				✓
Sjømat Norge	✓	✓	✓	✓	✓	✓			✓
Slåtto Marketing AS				✓	✓	✓	✓	✓	✓
ST1 Norge AS		✓	✓	✓	✓	✓	✓	✓	✓
Svanøy Røykeri AS	✓	✓	✓	✓	✓				✓
T.L. Måkestad AS	✓	✓	✓	✓	✓				✓
Tine	✓	✓	✓	✓	✓	✓	✓	✓	
Toma Facility Services AS			✓	✓	✓	✓	✓	✓	✓
Toma Mat AS	✓	✓	✓	✓	✓	✓		✓	
Tor Sevaldsen Produksjon AS ⁴	✓					x ⁷	x	x	x
Umoe Restaurants AS/Dely AS		✓	✓	✓	✓	✓	✓	✓	✓
United Bakeries	✓	✓	✓	✓	✓	✓		✓	✓
Virke (the Enterprise Federation of Norway)	✓	✓	✓	✓	✓	✓	✓	✓	✓
Virke KBS		✓	✓	✓	✓	✓	✓	✓	✓
YX Norge AS		✓	✓	✓	✓	✓	✓	✓	✓
Økern Engros AS	✓	✓	✓	✓	✓				✓
Total	80 (85⁵)	93 (97⁵)	94	96	97	62⁶	48⁶	51⁶	74⁶

¹Participants who have only signed Priority area 2: Reduction of added sugar. These are not included in any of the analyses in the annual reports 2017–2019.

²Participants who have chosen to respond jointly: **Cernova** also responds for Mesterbakeren, Norgesmøllene and Nærbakst AS; **Kavli** respond for O. Kavli og Q-meieriene, **Scandza** respond on behalf of Synnøve Finden, Leiv Vidar and AS and Finsbråten AS

³The Ministry of Health and Care Services has signed all priority areas, but for them it is not relevant to respond to the self-report as their role differs from that of the other participants. This is not captured by the questionnaire. They are therefore excluded from the total.

⁴No longer in the agreement - went bankrupt in October 2019

⁵The totals deviate somewhat from previous years' reporting, primarily because three participants have chosen to respond as one in 2019. In addition, the Ministry of Health and Care Services (HOD) has been excluded from the total. In 2020, another participant responded on behalf of three who have previously been counted as one.

⁶The figures for each individual priority area apply for 2020.

⁷x indicates which priority areas the participant had signed when they took part, but is not part of the 2021 reporting.

Appendix 2 Questionnaire



The letter of intent for a healthier diet

Annual reporting 2021

Reporting is voluntary.

The form is assessed according to competition regulations by the Norwegian Directorate of Health.

Business background

B1	Business name	.....
B2	Location of head office	.....
B3	Is your business nationwide or local?	1. Nationwide 2. Local	<input type="checkbox"/> <input type="checkbox"/>
B6	Type of business <i>Select all that apply</i>	a. Manufacturer b. Wholesaler c. Retailer/trade d. Hotel, restaurant and catering industry e. Industry organization/health authority	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
B7	Link to the agreement <i>Select all that apply</i>	a. Priority area 1: Reduction of salt b. Priority area 2: Reduction of sugar c. Priority area 3: Reduction of saturated fat d. Priority area 4: More fruit, berries, vegetables e. Priority area 4: Wholegrain products f. Priority area 4: More fish and seafood	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Priority area 1: Reduction of salt

[Only to be answered by those who have checked B7a on page 1]

SA1	Have you set your own targets for salt reduction?	1: Yes 2: No→SA4
SA2	Do you monitor the development of the salt reduction targets yourself?	1: Yes 2: No→SA4
SA3	How often is it measured?	1: Monthly or more often 2: Quarterly 3: Biannually 4: Annually 5: Other.....
SA4	Has your company implemented any of the following measures in relation to <i>Priority area 1: Reduction of salt</i> within the 2021 agreement?	
a	Development and launch of new products/dishes	1: Yes 2: No 3: Not applicable
b	Optimisation of existing products/dishes	1: Yes 2: No 3: Not applicable
c	Changed packaging or portion size (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
d	Change of packaging design, retail packaging (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
e	Marketing initiatives	1: Yes 2: No 3: Not applicable
f	Changed product placement in retail outlets (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
g	Change in food/beverages on offer	1: Yes 2: No 3: Not applicable
h	Other measures implemented	1: Yes 2: No
	<i>If yes, please describe</i>	.....
SA5	What was the most effective measure implemented in 2021?	.....
SA6	Why was this measure effective?	.....
SA7	Has anyone from your company attended meetings/seminars/workshops for Priority area 1: Salt during 2021?	1: Yes 2: No 3: Not applicable

Priority area 2: Reduction of added sugar

[Only to be answered by those who have ticked B7b on page 1]

SU1	Have you set your own targets for reducing added sugar?	1: Yes 2: No → SU4
SU2	Do you monitor progress in relation to the targets of reducing added sugar?	1: Yes 2: No → SU4
SU3	How often are they measured?	1: Monthly or more often 2: Quarterly 3: Biannually 4: Annually 5: Other
SU4	Has your company taken any of the following measures in connection with <i>Priority area 2</i> within the 2021 agreement?	
a	Development and launch of new products/dishes	1: Yes 2: No 3: Not applicable
b	Optimisation of existing products/dishes	1: Yes 2: No 3: Not applicable
c	Changed packaging or portion size (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
d	Change of packaging design, retail packaging (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
e	Marketing initiatives	1: Yes 2: No 3: Not applicable
f	Changed product placement in retail outlets (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
g	Change in food/beverages on offer	1: Yes 2: No 3: Not applicable
h	Other measures implemented within "Priority area 2: Reduction of added sugar" last year?	1: Yes 2: No
	<i>If yes, please describe</i>	.....
SU5	What was the most effective measure implemented in 2021?	.....
SU6	Why was this measure effective?	.....
SU7	Has anyone from your company participated in meetings/seminars/workshops for Priority area 2: Reduction of added sugar during 2021?	1: Yes 2: No 3: Not applicable

Priority area 3: Reduction of saturated fat

[Only to be answered by those who have ticked B7c on page 1]

FE1	Have you set your own targets for reducing saturated fat?	1: Yes 2: No → FE4
FE2	Do you monitor the development in relation to the targets for reducing saturated fat yourself?	1: Yes 2: No → FE4
FE3	How often is it measured?	1: Monthly or more often 2: Quarterly 3: Biannually 4: Annually 5: Other
FE4	Has your company taken any of the following measures in connection with Priority area 3 within the 2021 agreement?	
a	Development and launch of new products/dishes	1: Yes 2: No 3: Not applicable
b	Optimisation of existing products/dishes	1: Yes 2: No 3: Not applicable
c	Changed packaging or portion size (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
d	Change of packaging design, retail packaging (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
e	Marketing initiatives	1: Yes 2: No 3: Not applicable
f	Changed product placement in retail outlets (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
g	Change in food/beverages on offer	1: Yes 2: No 3: Not applicable
h	Other measures implemented within "Priority area 3: Saturated fat" last year? <i>If yes, please describe</i>	1: Yes 2: No
FE5	What was the most effective measure implemented in 2021?	.....
FE6	Why was this measure effective?	.....
FE7	Has anyone from your company participated in meetings/seminars/workshops within Priority area 3: Reduction of saturated fat during 2021?	1: Yes 2: No 3: Not applicable

Priority area 4: Increased intake of fruits, berries, vegetables

[Only to be answered by those who have ticked B7d on page 1]

FG1	Have you set your own targets for increased intake of fruit, berries and vegetables?	1: Yes 2: No→FG4
FG2	Do you monitor your progress in relation to the targets for increased intake of fruits, berries and vegetables?	1: Yes 2: No→FG4
FG3	How often is it measured?	1: Monthly or more often 2: Quarterly 3: Biannually 4: Annually 5: Other
FG4	Has your company implemented any of the following measures in relation to Priority area 4: Increased intake of fruits, berries, vegetables within the 2021 agreement?	
a	Development and launch of new products/dishes	1: Yes 2: No 3: Not applicable
b	Optimisation of existing products/dishes	1: Yes 2: No 3: Not applicable
c	Changed packaging or portion size (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
d	Change of packaging design, retail packaging (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
e	Marketing initiatives	1: Yes 2: No 3: Not applicable
f	Changed product placement in retail outlets (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
g	Change in food/beverages on offer	1: Yes 2: No 3: Not applicable
h	Other measures implemented within "Priority area 4: Increased intake of fruit, berries, vegetables" last year? <i>If yes, please describe</i>	1: Yes 2: No
FG5	What was the most effective measure implemented in 2021?	.....
FG6	Why was this measure effective?	.....
FG7	Has anyone from your company attended meetings/seminars/workshops for Priority area 4: Increased intake of fruits, berries, vegetables during 2021?	1: Yes 2: No 3: Not applicable

Priority area 4: Increased intake of wholegrain products

[Only to be answered by those who have ticked B7e on page 1]

KO1	Have you set your own targets for increased intake of wholegrain products?	1: Yes 2: No→KO4
KO2	Do you monitor developments in relation to the targets for increased intake of wholegrain products?	1: Yes 2: No→KO4
KO3	How often is it measured?	1: Monthly or more often 2: Quarterly 3: Biannually 4: Annually 5: Other
KO4	Has your company taken any of the following measures in relation to Priority area 4: Increased intake of wholegrain products within the 2021 agreement?	
a	Development and launch of new products/dishes	1: Yes 2: No 3: Not applicable
b	Optimisation of existing products/dishes	1: Yes 2: No 3: Not applicable
c	Changed packaging or portion size (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
d	Change of packaging design, retail packaging (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
e	Marketing initiatives	1: Yes 2: No 3: Not applicable
f	Changed product placement in retail outlets (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
g	Change in food/beverages on offer	1: Yes 2: No 3: Not applicable
h	Other measures implemented within "Priority area 4: Increased intake of wholegrain products" last year? <i>If yes, please describe</i>	1: Yes 2: No
KO5	What was the most effective measure implemented in 2021?	.....
KO6	Why was this measure effective?	.....
KO7	Has anyone from your company attended meetings/seminars/workshops for Priority area 4: Increased intake of wholegrain products during 2021?	1: Yes 2: No 3: Not applicable

Priority area 4: Increased intake of fish and seafood

[Only to be answered by those who have ticked B7e on page 1]

F11	Have you set your own targets for increased intake of fish and seafood?	1: Yes 2: No→F14
F12	Do you monitor your own progress in relation to the targets for increased intake of fish and seafood?	1: Yes 2: No→F14
F13	How often is it measured?	1: Monthly or more often 2: Quarterly 3: Biannually 4: Annually 5: Other
F14	Has your company taken any of the following measures in relation to Priority area 4: Increased intake of fish and seafood within the 2021 agreement?	
a	Development and launch of new products/dishes	1: Yes 2: No 3: Not applicable
b	Optimisation of existing products/dishes	1: Yes 2: No 3: Not applicable
c	Changed packaging or portion size (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
d	Change of packaging design, retail packaging (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
e	Marketing initiatives	1: Yes 2: No 3: Not applicable
f	Changed product placement in retail outlets (intentionally influencing healthier choices)	1: Yes 2: No 3: Not applicable
g	Change in food/beverages on offer	1: Yes 2: No 3: Not applicable
h	Other measures implemented within "Priority area 4: Increased intake of fish and seafood" last year? If yes, please describe	1: Yes 2: No
F15	What was the most effective measure implemented in 2021?	.....
F16	Why was this measure effective?	.....
F17	Has anyone from your company attended meetings/seminars/workshops for Priority area 4: Increased intake of fish and seafood during 2021?	1: Yes 2: No 3: Not applicable

The keyhole symbol

NO1	Total number of products with the keyhole symbol in 2021	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		Don't know; Not applicable
NO1b	How many products in the entire range are the company's own brands? (use numbers)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		Don't know; Not applicable
NO2	Number of new products with the keyhole symbol in 2021	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		Don't know; Not applicable
NO2b	How many of the new products in 2021 were the company's own brands? (use numbers)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		Don't know; Not applicable

The participants' assessment of the agreement

AV1	How satisfied is your company with the agreement? <i>1 = Not satisfied at all</i> <i>6 = Very satisfied</i>	1 2 3 4 5 6
AV2	Do you feel you are gaining something from the agreement? <i>1 = Haven't gained anything from the agreement</i> <i>6 = Have gained a lot from the agreement</i>	1 2 3 4 5 6
AV3	What do you think you have gained the most from?	.....
AV4	How difficult is it for your company to achieve the objectives of the agreement? <i>1 = Very difficult</i> <i>6 = Very easy</i>	1 2 3 4 5 6
AV5	What is particularly challenging	.....
AV6	What kind of measures give the best result?	.....
AV7	What is your main motivation for joining the agreement?	.....

The participants' assessment of the health authorities

AV9	What measures significant to your business do you feel that <i>the health authorities</i> have taken in relation to the agreement during 2021?	..... None; Not applicable
AV10	What measures significant to the entire agreement do you feel that <i>the health authorities</i> have taken during 2021?	..... None; Not applicable
AV11	How well do you think <i>the health authorities</i> fulfil their responsibilities within the following fields? 1= <i>Very badly</i> 6= <i>Very well</i> 9= <i>Don't know</i>	
	a. Monitoring the population's diet	1 2 3 4 5 6 9
	b. Collecting data to evaluate this agreement's achievement of objectives and work to ensure that regular representative dietary surveys are conducted.	1 2 3 4 5 6 9
	c. Working with systematic measures that promote public health in general and increase the proportion of the population who have a diet that is in line with the national dietary guidelines. Having a special focus on children and young people	1 2 3 4 5 6 9
	d. Reporting to the coordination group on activities and overall achievement of objectives	1 2 3 4 5 6 9
	e. Influencing consumers through communication and implementing other systematic measures to make healthy choices easier	1 2 3 4 5 6 9
	f. Participating in dialogue and interaction with other relevant authorities and the Research Council related to the objectives of the letter of intent.	1 2 3 4 5 6 9
AV12	From your business perspective, what is the most important commitment for the <i>health authorities</i> (of those mentioned above) <i>Tick only one</i>	a b c d e f g
AV31	Do you have any further comments on the implementation of the letter of intent in 2021?	..... None
AV32	This is the last self-evaluation for this letter of intent. Do you have any further comments on the implementation of the letter of intent during the full period between 2017 and 2021 (or for as long as you have been a party to the agreement)?	..... None
AV33	Will you join the new the letter of intent agreement for the period 2022–2025?	1: Yes 2: No 3: Not applicable/Don't know
AV34	If yes AV33: Are there any measures you want more focus on in a new agreement period?	<input type="checkbox"/> Workshop/sharing of experiences nationally <input type="checkbox"/> Workshop/sharing of experiences internationally <input type="checkbox"/> Expertise on how to reduce salt in products <input type="checkbox"/> Continue with industry-specific working groups <input type="checkbox"/> Consumer behaviour <input type="checkbox"/> Participate in research projects <input type="checkbox"/> Other.....

[If B7= a. Priority area 1: Reduction of salt]:
 You have stated that you are affiliated with Priority area 1: Reduction of added salt. Now we have a few questions about the Salt Partnership over the period 2019–2021.

Appendix A:

Think about the last 3 years (2019–2021) and your participation in the Salt Partnership. We now want to get an overview of your work you've done and the experiences you've had with the Salt Partnership, as well as get your input on future work on reducing salt in the period 2019–2021. The Salt Partnership was discontinued in 2021. The work on salt reduction continues in the Letter of Intent for a healthier diet for the period 2022–2025.

B1	Name of the business	.....
B6	Type of business	a. Manufacturer b. Wholesaler c. Retailer/trade d. Hotel, restaurant and catering industry e. Industry organisation/health authority f. R&D g. Other organisation	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	Select all that are relevant		
SP4	What was your primary motivation in joining the Salt Partnership?	.....
SP5	Have you developed new products and dishes in connection with the Salt Partnership 2019–2021?	1: Yes 2: No 3: Not applicable	
	a. If yes: Did you use the recommended salt targets (the Salt list) in connection with measure?	1: Yes 2: No 3: Don't know	
	b. If yes: How useful did you feel the Salt list were in this measure 1= Not at all useful; 6=Very useful	1 2 3 4 5 6	
SP6	Have you worked on optimisation of existing products and dishes in connection with the Salt Partnership from 2019 to 2021?	1: Yes 2: No 3: Not applicable	
	a. If yes: Did you use the Salt list in connection with this measure?	1: Yes 2: No 3: Don't know	
	b. If yes: How useful did you find the Salt list 1= Not at all useful; 6=Very useful	1 2 3 4 5 6	
SP7	Have you implemented marketing/communication initiatives on salt reduction in connection with the Salt Partnership from 2019 to 2021?	1: Yes 2: No 3: Not applicable	
SP8	Have you implemented other measures on salt reduction in connection with the Salt Partnership from 2019 to 2021?	1: Yes 2: No 3: Not applicable	
	a. If yes: Briefly describe this/these measure(s).	.....
	b. Did you use the Salt list in connection with this/these measure(s)?	1: Yes 2: No 3: Don't know	
	c. If yes: How useful did you find the Salt list 1= Not at all useful; 6=Very useful	1 2 3 4 5 6	
SP9	What type of measure/work in the Salt Partnership has been the most useful for your company?	.....
		Don't know → Q11	
SP10	Why was this useful?	.....
		Don't know	
SP11	Have you taken part in research on salt reduction in the period from 2019 to 2021?	1: Yes 2: No 3: Don't know	
SP12	What type of measure/work in the Salt Partnership has been the most challenging for your company?	.....
		Don't know → SP13	
SP13	Why was this the most challenging?	.....
		Don't know	
SP14	What do you want the focus of the continued work on salt to be?	<input type="checkbox"/> Workshop/sharing of experiences nationally <input type="checkbox"/> Workshop/sharing of experiences internationally <input type="checkbox"/> Expertise on how to reduce salt in products <input type="checkbox"/> Continue with industry-specific working groups <input type="checkbox"/> Consumer behaviour <input type="checkbox"/> Participate in research projects <input type="checkbox"/> Other.....	

The Salt lists: <https://www.helkedirektoratet.no/tema/koesthold-og-ernaering/matbransje-servernesmarked-og-arbeidsliv/salt-og-saltharmerkapet>

Appendix 3 Interview guide for the in-depth study

3a Mid-term evaluation

- How satisfied is your company with the agreement?
- Do you feel you are gaining something from the agreement?
- What do you think you have gained the most from?
- How difficult is it for your company to achieve the objectives of the agreement? What is particularly challenging?
- What types of measure do you feel give the best result?

3b Final report

- Why and how did you join the agreement? What do you get out of the agreement?
- What targets have you set and how is it going? Has the agreement been helpful in achieving these targets?
- What has been most useful in joined the agreement?
- What is the advantage of a letter of intent compared to other forms of regulation? What would the alternatives be?
- The agreement expired in 2021. What is important for you in the new agreement? Does anything have to be changed or can it simply be continued as is? What are your expectations for the new period?

Appendix 4 Differences in measures

Differences in the same measures between years and between different measures in 2021 for each priority area, measured with a student's t test. The proportions of participants who have implemented the different measures are shown in figures 1 to 6.

	t-values between years				t-values between measure 2021		
	2017/ 2018	2017/ 2019	2017/ 2020	2017/ 2021	Optimisation	New products	Marketing
Priority area 1: Salt (figure 1, p 12)							
Optimising existing product(s)	0.91	0.69	1.86	2.69*	-	0.49	6.38*
Development of new products	0.79	0.88	0.28	0.54	0.49	-	6.96*
Marketing initiatives	0.37	1.65	0.64	2.22*	6.38*	6.96*	-
Changed packaging/portion size	1.36	1.47	1.7	1.53	7.45*	8.07*	0.91
Changed packaging design	1.17	2.02	2.22*	1.76	7.01*	7.61*	0.54
Other measures	0.2	1.42	0.77	0.76	8.94*	9.61*	2.12*
Change in food/beverages on offer	x	x	x	x	9.49*	10.19*	2.57*
Changed product placement	1.13	0.59	0.18	1.16	11.08*	11.86*	3.81*
Priority area 2: Added sugar (figure 2, p 14)				2020/ 2021			
Optimising existing product(s)	x	x	x	0.77	-	1.09	1.20
Development of new products	x	x	x	1.35	1.09	-	2.32*
Marketing initiatives	x	x	x	3.02*	1.20	2.32*	-
Changed packaging/portion size	x	x	x	0.85	3.31*	4.51*	2.05*
Other measures	x	x	x	0.68	6.10*	7.53*	4.69*
Change in food/beverages on offer	x	x	x	x	6.10*	7.53*	4.69*
Changed packaging design	x	x	x	0.00	3.76*	4.99*	2.48*
Changed product placement	x	x	x	0.00	2.48*	3.63*	1.25
Priority area 3: Added saturated fat (figure 3, p 15)	2017/ 2018	2017/ 2019	2017/ 2020	2017/ 2021			
Optimising existing product(s)	0.73	2.41*	2.33*	2.79*	-	1.17	0.91
Development of new products	2.85**	1.95	1.09	1.22	1.17	-	2.10*
Marketing initiatives	1.41	0.5	0.87	0.94	0.91	2.10*	-
Changed packaging/portion size	1.24	0.56	0.76	0.84	2.25*	3.52*	1.32
Other measures	0.64	0.25	0.36	0.74	3.33*	4.68*	2.37*
Change in food/beverages on offer	X	X	X	X	4.14*	5.56*	3.16*
Changed packaging design	1.65	3.12*	1.17	0.80	1.78	3.01*	0.86
Changed product placement	0	1.08	0.65	1.71	1.33	2.54*	0.42

*Significant p<0.05

x=non-existent number

	t-values between years				t-values between measures 2021		
	2017/ 2018	2017/ 2019	2017/ 2020	2017/ 2021	Optimisation	New products	Marketing
Priority area 4: Fruit/vegetables/berries (figure 4, p 17)							
Development of new products	0.53	1.00	1.53	1.41	-	0.44	0.78
Marketing initiatives	1.31	0.61	0.51	0.40	0.44	-	0.34
Optimising existing product(s)	0.92	0.94	1.26	0.31	0.78	0.34	-
Other measures	0.29	1.00	0.42	0.82	5.12*	4.54*	4.11*
Changed packaging/portion size	0.69	0.53	0.61	0.08	2.20*	1.74	1.38
Changed packaging design	0.71	0.94	1.12	0.25	3.09*	2.60*	2.23*
Changed product placement	1.03	0.34	0.11	0.10	4.53*	3.98*	3.57*
Change in food/beverages on offer	x	x	x	x	5.12*	4.54*	4.11*
Priority area 4: Wholegrain products (figure 5, p 18)							
Development of new products	0.5	1.07	0.28	1.66	-	0.38	1.52
Marketing initiatives	1.01	1.17	0.41	1.01	0.38	-	1.13
Optimising existing product(s)	0.07	0.45	0.6	1.12	1.52	1.13	-
Changed packaging design	1.12	0.75	1.76	2.27*	2.82*	2.40*	1.21
Change in food/beverages on offer	x	x	x	x	3.34*	2.89*	1.67
Changed packaging/portion size	1.37	1.91	2.31*	1.82	3.92*	3.45*	2.18*
Changed product placement	0.41	0.91	0.53	0.41	3.34*	2.89*	1.67
Other measures	0.94	0.11	0.23	0.20	3.92*	3.45*	2.18*
Priority area 4: Fish and seafood (figure 6, p 19)							
Development of new products	0.7	0.99	0.07	0.70	-	0.00	0.44
Marketing initiatives	0.83	1.65	1.05	1.28	0.00	-	0.44
Optimising existing product(s)	0.19	1.09	1.28	0.68	0.44	0.44	-
Other measures	1.78	0.29	0.29	1.20	3.45*	3.45*	2.90*
Changed packaging design	1.04	1.00	1.84	1.50	1.73	1.73	1.27
Changed packaging/portion size	1.50	1.64	1.13	1.04	1.26	1.26	0.81
Changed product placement	0.83	0.60	0.31	1.28	1.26	1.26	0.81
Change in food/beverages on offer	x	x	x	x	3.45*	3.45*	2.90*

*Significant p<0.05

x=non-existent number

Partnership for a healthier diet

In December 2016, the food industry and the health authorities in Norway signed the Letter of Intent on facilitating a healthier diet. The agreement period lasted until December 2021. At the end of the agreement period in 2021, there were 97 players in the food industry who had signed the agreement. The overall aim of the agreement was to reduce the intake of salt, added sugar and saturated fat in the population, and to increase the intake of fruit, berries, vegetables, coarse grain products, fish and seafood.

The purpose of the collaboration has been to make it easier for consumers to make healthier choices, and to increase the proportion of the population that has a balanced diet in line with the authorities' dietary advice. The evaluation Fafo has carried out shows that the actors have defined population health as one of their strategic goals in one form or another, and the letter of intent provides support and direction for this work.



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Fafo-report 2022:33
ID-nr.: 20836