

The Future of EU Health Strategy reflection process – comments from the National Farmers' Union of England and Wales

Introduction

The health of the population is dependent on and influenced by a highly complex combination of factors. It is almost impossible to separate out cause and effect when linking health drivers and health status within a population. However, susceptibility to disease can be influenced by controllable behavioural factors, one of which is diet. For example, a recent WHO review estimated that diet is second only to smoking as a preventable cause of cancer, and is responsible for about 30% of cancer incidence in the Western world.

Access to a balanced and healthy diet and the nutritional benefits this provides are very important to physiological and psychological well-being. A healthy population corresponds to a more efficient workforce and a smaller burden on national health services and welfare systems. The food produced by the European farming industry forms a significant part of the population's diet. Farmers therefore have a responsibility and an interest in being part of the nutrition and health debate. The industry's responsibilities lie in its ability to produce high quality, good value nutritious and safe food, to demonstrate these qualities to consumers and to provide fresh produce for all section of the population.

• Primary production and nutrition

The key role of farmers and growers in contributing to population health is to **ensure access, availability and diversity of high quality food that meets appropriate safety standards**. While food processing is an important market for agricultural products from the EU, the availability of high quality fresh produce is particularly important to help consumers achieve a balanced diet. Developing local markets and fulfilling public procurement requirements should be encouraged. The ability to promote and supply local produce to the community is a positive step, helping farmers access more customers and helping consumers receive the freshest foods.

It is now generally accepted that eating plenty (at least five portions a day) of **fresh fruit and vegetables** every day can provide health benefits, although the specific mechanisms have not been confirmed. Toxicological tests in vivo have shown links between certain compounds found in foods and various protective health effects. Unfortunately, fruit and vegetables tend to be at the centre of concerns over **pesticide residues in foods**. It is critical that the actual risks are communicated convincingly and that these worries do not result in reduced consumption. Concentrations and dietary exposures are extremely low and the benefits of consuming plenty of fresh fruits and vegetables far outweigh any potential health risks from the residues they may contain (Dr Ian Brown, UK Pesticide Residues Committee Chair).

Milk is an important part of the diet, especially for certain sections of the population such as children and the elderly. Dairy products are the richest source of calcium in the diet, essential for building and maintaining bone mass and healthy teeth. There are many easily available low fat versions of these products, and a portion of even whole milk contains less fat than many snacks, for example crisps (The Dairy Council).

Progress has been made in the meat and livestock industry towards **reducing the fat content of meat**. In terms of dietary advice, the difference between the fat and salt content of meat and processed meat products should be highlighted.

- **Obesity and a balanced diet**

The strongest message to consumers about avoiding obesity-related disease and achieving good health through good nutrition should be to **eat a balanced diet**. The NFU is concerned that the tendency to focus on reducing intake of salt, fat and sugar is interpreted by many people as advice to avoid these ingredients completely. This is not only unnecessary but also unhealthy. Fat is an essential nutrient and should not be excluded from the diet, especially for certain subpopulations. **Fat, sugar and salt are not 'bad' when eaten as part of a balanced diet**. We do recognise the importance of reducing fat, salt, sugar and calorific intake in order to improve the health of many individuals. However, the realities of what constitutes a balanced diet, and the benefits of this to health, must be particularly emphasised.

It is important to avoid the 'good/bad' food approach to dietary policy and advice. Instead, meaningful and easily understandable information is required on 'good/bad/balanced' diets (which will include appropriate intakes of salt, fat and sugar). This must be part of an **overall healthy lifestyle approach**, based on individual informed responsibility. It is also important that proper account is taken of the particular dietary requirements of specific groups in society, and the possibility of deficiencies in micronutrients for some. Focusing on specific food concerns must not obscure other factors that bear on health, including exercise, lifestyle, cooking techniques, consumer education etc.

- **Obesity and exercise**

Exercise should be part of the solution when tackling obesity, not just diet. Achieving a **balance between calorie intake and energy output** should be the goal for individuals when trying to maintain a healthy weight. This link must be promoted as part of diet and health campaigns in order to make health-eating tips relevant to individual consumers' circumstances. It is much easier to lose weight with a combination of exercise and changes in diet than through diet alone, and the health benefits of exercise go beyond simple weight loss. Opportunities, schemes and information to encourage people to maintain an active lifestyle should be developed, particularly in disadvantaged areas.

- **Choice, availability and information**

Promoting a better diet to people should be based on informed choice and understanding, not on prescription or a focus on specific 'bad' foods.

The EU agriculture industry plays a vital role in ensuring **access to good quality, affordable and appetising food** for the population. This must be available to all sections of the community in order to improve the health status of the whole population. Inequalities in availability of some constituents of a balanced diet, e.g. fresh fruit and vegetables, is a problem for those at a health disadvantage for other reasons. Information about diet and health should be easy to understand but not simplistic. **Promoting understanding of where food comes from and how it is produced is an essential element in developing a sustainable strategy for health**. Again, this must include all sections of the community in terms of age, socio-

economic status, ethnicity and region. The existence of ‘food deserts’ is unacceptable (i.e. areas with poor access to an adequate range of reasonably priced food provision). This aspect of social exclusion also includes access to dietary knowledge.

Clearer and more meaningful **nutritional labelling** is also very important. However, we have serious reservations about a “traffic lights” approach. In our view, this would lead to over-simplistic assessments of foods, and risk that some consumers would interpret such traffic lights as blanket “dos” and “don’ts”. Consumers, including children, must be able to decide what to eat based on an understanding of their individual needs and the link between calorific intake and energy expenditure. No food need be avoided if it is eaten as part of a balanced diet. Labels should give factual information, **encourage and endorse a balanced diet and take portion into account**. The NFU proposes the highlighting of a product’s key nutritional components (energy, protein, carbohydrate, fibre, sugar, salt and fat) and listing these components as a percentage of a recommended daily amount (RDA) or dietary reference value (DRV) for certain population sub-groups.

Great care must be taken when categorising foods in order to provide simple nutritional information to consumers. Several observers have noted, for example, the possibility of cheese becoming regarded as ‘less healthy’ or even ‘unhealthy’ because of its fat and salt content, with a consequent failure to recognise its valuable content of calcium, protein and vitamins. Policy should not become overly focussed on one nutrient or ingredient and consumer choice must be maintained. Information on labels is limited by the size of the pack and in most cases only very short statements can be made. It is important that these are supported by education campaigns, which give consumers the details to explain and reinforce the messages. **Messages must also be consistent**, with a clear standardised format.

Consumer confidence is an important aspect in improving attitudes towards, and maintaining, healthy diet and lifestyle. This includes increasing confidence in the safety of food, particularly in the wake of food-related health scares. Confidence in their ability to achieve a healthy and enjoyable diet, including cooking skills, may help people to feel more connection with their food and to recognise its influence on their health.

- **Research and sound science**

Research and development must be the key driver in understanding the link between nutrition and health. This should include developing ways to improve the nutritional value of both processed foods and their raw ingredients, and understanding the link between production processes and inputs and nutritional quality. All policy-making, regulatory decisions and information campaigns must be **based on the best available science**. Responses to food related health scares must always focus on scientific and risk-based considerations, and not on emotion or perceived consumer concern.

- **Summary of responsibilities**

Farmers - The EU agriculture industry plays a vital role in ensuring access to good quality, affordable and appetising food for the population. The industry must redouble its efforts to maintain consumer confidence in the safety and quality of its produce.

Information programmes and education – Due to significant cultural differences related to food and health across the EU, education and information activities are best carried out at member state level. However, some assistance and resources from the Commission for sharing best practice and case studies across Europe would be helpful. Consumer, social and health worker groups should be involved here to engage all sections of the community. The food industry itself should also harness its own expertise in influencing consumer behaviour to achieve positive health outcomes.

Labelling – The legislation currently in preparation is the responsibility of the Commission and must be effective, workable, flexible and appropriate. In relation to health, safety is a key requirement in labelling, while informed choice must be facilitated to enable individual dietary decisions. Voluntary labelling initiatives are the responsibility of Member States, and best practice should be shared.

Agricultural policy – The Commission's responsibilities through the CAP (i.e. ensuring farmers can make the most of market opportunities while providing a guaranteed diverse supply of food, maintaining rural communities, promoting and supporting profitable farming, and delivering public goods such as environmental management, animal welfare) should also aim to provide opportunities for promoting positive health in the general population while meeting these objectives. For example, the Commission is currently considering improvements to the fruit and vegetable regime. We support the idea of setting up a EU 'fruit for schools' scheme (in addition to current charitable organisations). Experience in the UK has shown the success of such measures in establishing good 'snacking' habits and increasing consumption of fruit from an early age.

Research - Improving and maintaining health must be a key component of Commission-funded research programme, recognising the important role that both social and natural sciences can play in understanding how to achieve these objectives.

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