



EuroHealthNet Response to “Towards a reform of the common market organisation for the fresh and processed fruit and vegetable sectors –Consultation document for impact assessment.

July 2006

About us

EuroHealthNet is the organization that networks national and regional agencies responsible for policy and practice in health promotion, public health and disease prevention in the EU and associated states. Its mission is to contribute to a healthier Europe with greater equity in health between and within countries.

Overview

EuroHealthNet is pleased that the European Commission recognises the need for new synergies between the common market organisation (CMO) in the fruit and vegetable sector and other EU policy areas, particularly those affecting public health.

It is surprising that public health considerations have not featured more prominently as a key component of Common Agricultural Policy (CAP) development and reform, since this policy was initially established to promote health by stimulating the production of food. The CAP is in many respects currently undermining, rather than protecting and improving the health of EU citizens (Liselotte Schafer Elinder, 2003)¹. With regard to fruit and vegetables, it keeps their prices artificially high, leading to an under-consumption of these products, particularly amongst low-income households, who are most sensitive to price and availability. The CAP therefore fails to take forward the obligations defined under EC Treaty Article 152.

Reforming the fruit and vegetable regime in a way that would reduce prices while increasing availability, and ensuring that produce which is currently withdrawn finds its way into the back into the human food chain, represent important ways to improve population health and to reduce health inequalities in the EU. Enabling more small scale horticulture producers to enter the market would stimulate rural development while boosting the quantity as well as the variety of fruit and vegetables available. Such measures take forward the Lisbon objectives of stimulating economic development and employment in a way that promotes social cohesion and sustainable development. It is in this spirit that the fruit and vegetable CMO should be reformed.

Response

EuroHealthNet works in partnership with the European Heart Network (EHN), and supports their recommendations. The points below reinforce some of the recommendations that the EHN response elaborates in more detail.

¹ Liselotte Schafer Elinder, Public health aspects of the EU Common Agricultural Policy. Developments and recommendations for change in four sectors: Fruit and vegetables, dairy, wine and tobacco, Swedish National Institute of Public Health, 2003

Increasing consumption

The Commission is right to be concerned about the decline in the consumption of fruit and vegetables in Europe, particularly in light of growing levels of obesity and cardiovascular disease. Low fruit and vegetable intake in the EU is a major cause of disability and death due to coronary heart disease and stroke.

Stimulating the greater consumption of fruit and vegetables is not simply a matter of changing individual behaviour, since this is often influenced by social, economic, political and cultural factors. It also involves addressing socio-economic determinants, by e.g. improving availability and reducing prices, thereby removing the obstacles to enhance people's ability to eat healthy diets.

Availability and pricing

Through its use of withdrawal compensation, the current fruit and vegetable CMO is limiting the amounts of fruit and vegetables available on the market. Evidence from England as well as from a Health Impact Assessment (HIA) of the CAP in Slovenia², indicates if there were 100% take up of the minimum recommended levels of 400g of fruits and vegetables per person per day, there would be insufficient production to meet this demand.

The fact that horticulture producers do not benefit from direct income support and are excluded from the current CMO regime is one of the factors contributing to this underproduction. This measure, initially designed to protect those farmers who did benefit, has in reality generated a disincentive to produce fruits and vegetables. Farmers in the EU-15 (and those in EU-10 after 2008) wishing to switch their land use to growing fruit and vegetables have been penalised (compared to farmers of other crops) since they are not entitled to receive the single payment. This policy disincentive should be changed to encourage and not discourage horticulture production.

The withdrawal of fruits and vegetables, as well as the import tariffs imposed on countries outside of the EU means that prices are being maintained at artificially high levels. This also discourages consumption. The CMO regime should reduce and eventually phase out of withdrawal compensation, which could stimulate the purchase and consumption of fruits and vegetables.

Health promotion

Health promotion to stimulate behavioural change is important to increasing consumption, but concerted efforts must be made if these activities are to have any impact. Currently a small budget inside the EU and the CAP is allocated for health education and promotion of fruit and vegetables. For every dollar the WHO spends on non-communicable disease programmes, however, food companies spend \$500 on marketing their products that are high in fats sugar and/or salts (Lobstein 2004)³. This calls for more resources, as well as greater synergies between the agriculture and health promotion sectors to maximise and reinforce existing efforts to promote fruit and vegetable consumption.

²Gabrijeljic-Blenkus, M., Zakotnik, J., Lock, K., "Health Impact Assessment: Implementing CAP in Slovenia." EuroHealth, Vol 10, No 1, 2004. pgs. 17-20

<http://www.lse.ac.uk/collections/LSEHealthAndSocialCare/pdf/eurohealth/vol10No1.pdf>.

³ Lobstein, T. "Suppose we all ate a healthy diet" EuroHealth, Vol 10, No 1, 2004. pgs. 8-12

Although the ultimate aim of the CMO should be to reduce quantities withdrawn from the market even further, support measures should be put in place to ensure that products that are currently being withdrawn find their way back into the human consumption chain, in accordance with EU regulations. Withdrawals should e.g. become part of subsidized school fruit and vegetable schemes, while governments should also encourage the uptake of fruit and vegetables in public bodies such as hospitals, nursing homes and prisons. This can play an important role in stimulating supplies and increasing consumption. Withdrawn produce should, in particular, find its way to low income or deprived groups that are unlikely to meet recommended daily requirements. Currently, the EU appears to provide very little support for such schemes.

EuroHealthNet is an active member of the European Platform on Nutrition, Physical Activity and Health and believes that the CMO should be informed by and build on the relevant key outcomes of this process.

Redressing the imbalance in the supply and distribution chain and promoting rural development

The Commission also rightly recognises the threat that is being posed by the dominance of a small number of large food companies in the retail sector. By gaining monopolies, these companies are able to buy huge quantities of fruits and vegetables at competitive rates. Producers have no choice but to comply with these established prices. This often puts small scale horticulture producers out of business, and encourages production methods that lead to environmental degradation and that undermines sustainable development and livelihoods. Retail monopolies may also damage public health, since they limit the variety of produce available, while the production and manufacturing processes employed may reduce the nutritional value and quality of the available foods. Reducing concentration in the agri-food industry, especially with respect to large-scale retailing, therefore calls for greater synergies amongst policy sectors to curtail the negative effects of their power.

The CAP can in this respect contribute to reducing the dominance of a few large supermarkets across Europe by establishing mechanisms to ensure that small farmers and the rural poor benefit to the same extent as large scale producers, by e.g. establishing local food chain distribution systems with the aim of working with growers, processors and small retailers to get products to consumers. This would increase choice locally, help the unemployment situation in rural communities and create a source of income diversification for smaller-scale farmers. This would also benefit public health in the EU, since there are for example clear links between mental health status and unemployment, and low socio-economic status and cardio-vascular risk. (European Heart Network 1998)⁴

⁴ European Heart Network. "Fruit and vegetable policy in the European Union: its effect on the burden of cardiovascular disease." 2005