

PARALLEL SESSION 5

Friday 27 November, 15:00–16:30

5.1. Workshop: Building public support for health promoting agriculture policy

Chairs: Enni Mertanen, Finland and Christopher Birt, United Kingdom

Organizer: EUPHA section on food and nutrition

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Purpose

The purpose of the workshop is to discuss current EU food and agriculture policy, identify strategic opportunities for building public and political support for health promoting agriculture policy.

Objectives

- Providing participants with basic understanding of the Common Agriculture Policy (CAP) and how it affects nutrition.
- Providing participants with a brief overview of food and nutrition policy in Europe.
- Providing participants with practical examples of CAP policies that explicitly address public health nutrition and social goals.
- Providing participants with an overview of what direction CAP is taking towards 2013.
- Discussing strategic opportunities for public health advocates to engage with decision-makers.
- Defining concrete actions that can be taken and what resources are needed?

Background

EU CAP is one of the EU's largest policy areas measured in budgetary terms, accounting for approx. 40% of the budget in 2007. The policy was successful, perhaps too successful bringing about food surpluses in the 80s and 90s that were disposed of, many times at the expense of public health. Despite reform processes, change has been slow. However, recent changes and proposals have ventured into areas with explicit health or social goals. Currently, the budget review and CAP post 2013 debate are major opportunities for change and to advocate for public health as one of the public goods delivered by the CAP.

Discussion

- What are the current drivers for agriculture and food policy in Europe?
- What are the legislative vehicles for reform of the CAP?
- How can the European public health community build support for a more sustainable agriculture policy?
- How can the European public health community engage and mobilize policy makers?
- How do we form strategic alliances, i.e. one united voice to mobilize change in European agriculture policy?

Is the Common Agricultural Policy wholly health damaging? Or could it become health promoting?

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Outline of problem

The EU Common Agricultural Policy (CAP) was originally established to ensure food security in Europe. This was a worthy public health objective. However, the CAP soon had an increasingly serious negative impact on health. Recent reforms (e.g. decoupling of subsidies associated with flat rate farm payments) may have begun to mitigate some of these negative impacts on health. It now urgently needs reform so as to become health promoting.

Description of the problem

The history of how and in which ways the CAP became health damaging, and the mechanisms underlying this, will be summarized. Work estimating the extent of CAP-associated health damage will be reported. Drawing on evidence from other countries, inferences will be drawn on what a healthy CAP might look like.

Application of lessons learned

Current arrangements for CAP will expire in 2013. CAP reforms are inevitable, if only for budgetary reasons. This provides an opportunity to put health on the CAP reform agenda. Priority targets for the 'health lobby' in the pre-2013 period will be discussed.

Integrating health into the CAP—the EU School Fruit Scheme

Stella-Maria Xiraki, European Commission

A Gogolewska, T Garcia-Azcarate, G Keller, Stella-Maria Xiraki
European Commission, Directorate-General for Agriculture and Rural Development, C2. Olive oil, horticultural Products, Brussels, Belgium

An estimated 22 million children in the EU are overweight. More than 5 million these are obese and this figure is expected to rise by 400 000 every year. Improved nutrition can play an important part in combating this problem.

In November 2008 the European Commission welcomed the political agreement in the Agriculture Council on its proposal for a European Union-wide scheme to provide fruits and vegetables to school children. The Council Regulation was published in January 2009.

European funds worth €90 million every year will pay for the purchase and distribution of fresh fruits and vegetables to schools. This money will be matched by national and private funds in those Member States which chose to make use of the programme. The programmes would be co-financed, either on a 50/50 basis, or 75/25 in the so-called 'convergence regions', where GDP/capita is lower.

The School Fruit Scheme aims to encourage good eating habits in young people, which studies show tend to be carried on into later life. Commission analysis of existing national policies and consultations with experts have demonstrated that the benefits of such a programme can be enhanced if the provision of fruit is accompanied by awareness-raising and educational measures to teach children the importance of good eating habits. Encouragement will also be given to networking between different national authorities which run successful school fruit schemes. The scheme starts during the 2009/2010 school year.

In April 2009 the Commission has published an Implementing Rules Regulation for the School Fruit Scheme, setting out the detailed rules for the application of the School Fruit Scheme, including rules concerning the allocation of aid between Member States, financial and budgetary management, national strategies, related costs, accompanying measures and information, monitoring and evaluation and networking measures.

Successfully developing and defining this policy has relied on a transparent process and involvement stakeholders from Public Health, Education, Agriculture and the fruit and vegetable industry.

Strategic opportunities for health promoting agriculture in Europe

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There is consensus that the EU Common Agriculture Policy affects dietary habits, however there is less consensus on the magnitude of the impact. Current reform processes, such as decoupling, changing compensation structures (flat rate) in the School Milk Scheme, have most likely mitigated the impact of the CAP on public health nutrition. Current programs like the EU school fruit scheme (EU SFS) presented today and proposed legislation Food Aid to Most Deprived Persons (MDP), depart from traditional CAP instruments and target increasing demand for certain products and social policy goals.

The Budget Review 2008/2009 and the post-2013 CAP debate will shape future food and agriculture policy in the EU and offer strategic opportunities for creating major changes in food and nutrition policy. However, creating public support for inclusion of a health promotion dimension in the CAP will require new research agendas and mobilization of public health professionals and organizations.

This presentation will provide participants with insight into the political processes, possible scenarios of what shape CAP will take in 2013 and beyond. These processes open windows of opportunity for a stronger public health dimension in CAP or a healthier food policy, but successful advocacy will require building strategic alliances, new research and practical advocacy tools.

5.2. Workshop: The joint action for ECHIM; taking the development and implementation of the European Community Health Indicators shortlist forward

Chairs: Arpo Aromaa, Finland and Nick Fähy, European Commission
Organizer: Center for Public Health Forecasting, RIVM, Bilthoven, The Netherlands

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As of 1998, the European Commission has called for and funded projects which aimed to develop a list of public health indicators for implementation at European level. In successive order these have been the ECHI-1 (European Community Health Indicators) project, the ECHI-2 project and the ECHIM project. The main outcome of these projects has been the so-called ECHI shortlist; a list of 88 indicators, together with accompanying metadata (definitions, calculation methods, preferred data sources, etc.). This shortlist is at the core of European Union public health monitoring policy. For that reason the Commission, in the 2008 call for proposals called for a Joint Action for working on the implementation of the ECHI shortlist in all Member States.

A proposal was submitted and accepted for funding and on 1 January 2009 and the Joint Action started. In this workshop a comprehensive overview of the ECHI work will be presented. First of all, the decade of developmental research preceding the Joint Action will be summarized as to sketch the point of departure for the current activities. Technical specificities of Joint Actions (a new financing mechanism), as well as the most important administrative information concerning the Joint Action for ECHIM (e.g. which project partners and which Member States are involved) will be briefly described. Secondly the objectives, methods and first results of the Joint Action will be presented, together with problems encountered in practice and problems expected for the future. Thirdly, the main means of dissemination of the indicators and their metadata will be presented, which consists of two (coherent) websites. Lastly, the policy context for the ECHI work will be sketched. This will include a historic overview, leading up to the role of ECHI in the currently effective Health Strategy. Moreover, the most important new developments relevant for public health monitoring will be presented, such as European Health Interview Survey (EHIS) and European Health Examination Survey (EHES) developments. The added value of this workshop is that participants will be informed on the state of the art of one of the main EU public health monitoring policies, and that this will be done in a comprehensive way, looking at the ECHI work from a historical, political and practical angle.

State of the art of the work on the European Community Health Indicators shortlist

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The European Community Health Indicators (ECHI) work started over a decade ago with the ECHI-I project. This project acquired a central place in the EU Health Monitoring Programme, collecting proposals for indicator definitions from many European projects. These proposals were arranged systematically in the ECHI long list. During the successive ECHI-II project, from the long list, a shortlist of about 80 indicators was selected for priority implementation: the start of a European public health monitoring system. The next phase was coordinated by the ECHIM project. ECHIM identified national health information experts, and started mapping the availability of data in the Member States (MS) for calculating the shortlist indicators. Indicator metadata (calculation methods, preferred data sources, etc.) was documented in a structured way in the ECHI Documentation Sheets, and an update of the shortlist was performed. In this presentation, the main outcomes of the three ECHI projects and their coherence will be explained in more detail. In 2007 the EU Health Strategy White Paper 'Together for Health' was adopted, stating as one of its actions the implementation of a European ECHI system. In 2008 the European Commission therefore called for a Joint Action (JA) for ECHIM. This new financing mechanism implies a direct invitation from the Commission to the MS to present a proposal. Public Health Institutes from five countries took the lead in preparing the proposal, and 24 MS in total gave a declaration of intent for participating in the JA for ECHIM. It started per January 1st of this year and has a 3-year duration. More information about the JA's goals, methods and administrative structure will be presented during the workshop.

Entering a next phase in the developmental work—starting the implementation process

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The Final Report of the European Community Health Indicators Monitoring (ECHIM) project presented a review of availability and comparability of data and ECHI shortlist