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How much priority is given to nutrition and health in the EU Common Agricultural Policy?

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\textbf{A B S T R A C T}

Agriculture in the European Union (EU) is strongly influenced by the Common Agricultural Policy (CAP). There have been repeated calls for CAP to address nutrition-related health, particularly obesity and non-communicable disease (NCD) in the EU. However, aligning agricultural policy such as CAP with nutrition is complex, not least because the aims of agricultural policy are predominantly economic, presenting a challenge for developing coherence between agricultural trade and health policy. This research examined the political priority given to nutrition-related health concerns within CAP to date, and the solutions suggested by agricultural, trade and health policy-makers and public health nutrition advocates, via interviews of 20 high-level participants from respective sectors. The participants provided diverse perspectives, often varying by sector and institution, on the connections between agricultural policy and nutrition-related health, the extent to which nutrition concerns have been addressed via CAP and whether CAP is an appropriate and effective policy approach to improve nutrition-related health in the EU in the future. The key findings suggest the need for communication and agreement of clear high-level nutrition guidelines, clarity on the EU mandate to address nutrition-related health concerns via policy, and stronger engagement of civil society in the issues if CAP is to address nutrition more than it is doing currently. The difference in worldviews between agricultural/trade representatives, and those from public health, also needs to be addressed.

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\section*{Introduction}

Diet is a leading cause of the global burden of obesity and non-communicable disease (NCD), including cardiovascular disease, cancer, and diabetes mellitus (World Health Organization, 2000; Yach et al., 2004; James, 2008), with diets high in fats, sugar and salt, and low in fruit, vegetables and whole grains causing health problems worldwide (World Health Organization/Food and Agricultural Organization, 2003). An important determinant of diet is food price and availability, which is directly influenced by agricultural policy. Agricultural policies affecting food price are separated by many often lengthy pathways of influence over population nutrition, however there are numerous agricultural policy levers that have been identified to have the potential to change food process and thereby nutrition outcomes (Dangour et al., 2013; Kanter et al., 2015). As recognised by the WHO’s Global Strategy on Diet, Physical Activity and Health (2004) (World Health Organization, 2004), it seems essential for agricultural policy to be designed with nutritional priorities (James et al., 2006).

Most developed countries provide substantial subsidy to their agricultural sectors. For example, in the United States, agriculture is influenced by the ‘farm bill’, an ongoing legislative package dealing with both agricultural and food policy, and updated every five years (Bellemare and Carnes, 2015). In the European Union (EU), agriculture is strongly influenced by the Common Agricultural Policy (CAP). The EU’s CAP was established in 1962 in the Treaty of Rome (1957), after the founding members of the European Commission (EC) emerged from a decade of severe food shortages following World War II (Lloyd-Williams et al., 2008). In contrast to the US ‘farm bill’, which includes food policy in its remit and devotes 80% of its budget to nutrition programs such as food stamps and school lunches (only indirectly benefiting farmers) (United States Department of Agriculture), CAP is considered a tool for only agricultural policy. However, whilst addressing food and nutrition is not one of CAP’s primary objectives, there was a food...
security and nutrition (albeit reducing malnutrition) motive to the introduction of the CAP (Folmer et al., 1995; Lang and Heasman, 2004).

Fundamentally, CAP is a system of subsidies paid to EU farmers to support European food production, rural and environmental development and livelihoods, and domestic market protection through tariffs/levies (Schmidhuber, 2007; Matthews, 2012). Its main purposes today are to guarantee minimum levels of production to support the basic food needs of European countries at reasonable prices, to ensure a fair living standard for European farmers, and to preserve the rural environment and way of life (Jeffery, 2003).

Similarly to the situation in the United States (Bellemare and Carnes, 2015), the first decades of CAP were dominated by market support measures for agricultural produce and subsidies to EU producers coupled to production. This policy, promoting production, eventually led in the 1980s to surpluses of, for example, butter, cheese, meat and grains (Budhram and Rock, 1991) – a time of ‘wine lakes and butter mountains’ (Kassim and Le Gales, 2010; Atkin, 2011).

A turn towards a more market-oriented system began with the MacSharry reform (1992), which aimed to reduce over-supply through reduced levels of market support for some produce types. The Agenda 2000 reform divided CAP into two ‘pillars’: (i) market supply measures and; (ii) additional measures introduced to serve environmental and rural development objectives. In 2003 reforms decoupled direct payments to farmers from production levels; a further move to discourage overproduction (Brady et al., 2009). New rules introduced included cross-compliance, meaning farmers’ direct payments were now conditional upon following regulations on the environment, food safety, animal welfare and maintaining agricultural land (Schmid and Sinabell, 2007).

In mid-1990s, critical discussion of the lack of nutrition consideration in CAP emerged (Elinder, 2003), focused on overproduction and distortion of the food supply through disproportionate support to some areas of production (Elinder, 2005; Lang and Rayner, 2005), and maintenance of high prices of fruits and vegetables by limiting availability (Faculty of Public Health). Health experts argued for the need to decouple payments from production to prevent overconsumption of foods associated with NCD (Faculty of Public Health), and suggested withdrawal of market support in the fruit and vegetable sector, which would increase availability, lower prices and improve nutrition (Veerman et al., 2005). As CAP became more market-oriented and farmers increasingly produced for market demand rather than for subsidies, calls to address nutrition-related health through CAP have focused on reducing obesity and diet-related NCDs (Elinder, 2005; Hawkes, 2007; Pederson, 2008). However the mechanism(s) for aligning agricultural policy and nutrition are not well understood (Elinder, 2005; Hawkes, 2007), and makes more complex by the economic aims of agricultural policy, which presents a challenge for developing coherence between agriculture, trade and health policy.

This is complicated by lack of clarity in the legal mandate to address health issues at EU level. While the EU has a legal mandate through the Maastricht Treaty (1993) for ‘protection and improvement of human health’, it is mainly through research, health information and education (Maastricht Treaty, article 129). The Lisbon Treaty (2009) explicitly classified the division of competences between the EU and member states as ‘exclusive competences’, ‘shared competences’, or ‘supporting competences’. Public health is an area of ‘supporting competence’, thus the EU has no legislative power in this field and may support but not interfere in the exercise of this competence reserved for member states’ (Europa, 2010). The consequences appear inconsistent with food safety issues justified as ‘protecting consumers’ and ensuring free circulation of food commodities in the internal market, which is why these are rigorously addressed at EU level (Eur-Lex, 2015).

Food systems, including agricultural production and policies that affect production practices, have important consequences for population health, particularly with respect to ensuring the security of supply, nutritional quality and safety of our food (Dangour et al., 2012). Fig. 1 conceptualises the relationship between agricultural policies and production practices, and diet. Agricultural policies and practices, including input, production and trade policies, shape diets through changes to food availability, price, nutritional quality and the diversity of foods available. But whilst broad policy interventions have been identified, exact policy mechanisms, and their relative effectiveness, remain unclear including why and how nutrition and health considerations receive political priority in agricultural trade policy.

Political priority, the degree to which political leaders pay attention to and address an issue, backing it with financial, technical and human resources, (Shiffman and Smith, 2007), is necessary to address a problem such as nutrition-related health in agricultural policy, and therefore requires investigation (Shiffman and Smith, 2007). To date little research addresses the political priority accorded to nutrition-related health in agricultural policy, and the solutions as perceived by policy-makers. This study aims to fill this gap by drawing on a framework developed by Shiffman and Smith (2007) for analysing determinants of political priority for global health issues (Shiffman and Smith, 2007). The objective was to examine stakeholder perspectives on why, which and how nutrition-related health considerations receive attention and compete with other interests in the CAP, and draw conclusions for future policy initiatives.

### Material and methods

**Interviews with key participants**

An interview guide was developed to examine the four broad elements – Actor Power, Ideas, Political Contexts and Issue Characteristics – of the Shiffman framework (2007) to determine the political priority given to nutrition-related health in the CAP, and also to explore potential policy solutions (Shiffman and Smith, 2007).

‘Actor Power’ examines the strength of the organisations and individuals concerned with nutrition-related health in the CAP. Factors explored include support from health organisations to CAP, communication channels between CAP policy-makers and health/nutrition experts, leadership regarding nutrition-related health considerations in agriculture and trade, the role of industry in shaping CAP, and the mandate of CAP for considering nutrition.

The ‘Ideas’ element examines how the individuals and organisations involved with nutrition-related health in the CAP understand and portray it. It identifies conflicting agendas within health, economic or environmental sectors, and examine the perceived level of importance of nutrition-related health considerations in CAP.

‘Political Contexts’, focuses on the environments in which actors operate, examining the role and presence of political opportunity for policy change and the degree to which CAP organisational structures and norms support effective action.

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1. Fruit and vegetable prices were mainly kept high through price support. Whenever prices fell below certain levels, produce were retrieved from the market. As fruits and vegetables quickly perish, these produce were then destroyed which also led to environmental concerns.

2. Article 6 of the Treaty on the Functioning of the EU (TFEU), which the Maastricht Treaty was renamed.
'Issue Characteristics' examines features of the problem such as the presence and quality of indicators and measures that demonstrate the problem and can be used for monitoring. This element also explores the size of the problem in relation to other concerns of agricultural policy. The final part, explores policy solutions for addressing nutrition-related health in CAP.

Key participants were identified through purposive and snowball sampling in agriculture, trade and health sectors relevant to CAP policy-making relevant to nutrition. Initial participants were recruited to represent a range of EC and EU national roles, based on their seniority and relevance of their roles in the organisations of interest. Participants were asked for suggestions of other relevant participants, yielding seven interviews. We endeavoured to conduct interviews with people likely to represent a diverse range of perspectives by selecting both those known to have concerns for nutrition in agricultural policy, sometimes recommended by other interviewees, and those thought not to have this interest. Some interviewees recommended to us that we interview particular colleagues they felt may represent a different view to themselves. Table 1 presents a summary of the study participants by sector and role type.

17 interviews were conducted with 20 participants. Three interviews were with two participants from the same organisation. The final sample included individuals involved in the CAP from several EC directorates, organisations involved in trying to raise the profile of or with a stake in the role of nutrition-related health in the CAP; and individuals from selected country permanent (agriculture) representations to the EC, and national ministries. Two participants had a previous recent role in these organisations rather than being current employees. Interviews were conducted between August 2013 and January 2014. Written consent was obtained from each interviewee prior to the interview. The opinions expressed during the interview are those of the individuals and not necessarily their institutions.

Analysis

Interviews were transcribed verbatim and transcripts were coded and analysed using thematic content analysis to identify...
themes reflecting the interview guide and based on the Shiffman framework (Shiffman and Smith, 2007). Following each interview we listened to the audio recordings to adapt the questioning of later participants, and for identifying the need for additional interviews. Analysis of coded transcripts was conducted independently by two researchers and any disagreements were discussed and agreed upon. The results were reported under the four key categories of the Shiffman framework and a fifth category on the policy solutions, but allowing some flexibility as some arguments and thoughts overlapped across the themes. Policy solutions were discussed separately, and where they related to particular ideas, were also mentioned in the four preceding themes.

Results

Actor power

The support for CAP and the power of the individuals/organisations relating to CAP in the context of nutrition-related health were analysed. Overall, participants from inside and outside of the EC perceived external organisations concerned with public health, particularly the European Public Health Alliance (EPHA), the World Health Organization (WHO) and Food and Agriculture Organization (FAO), are supportive of CAP.

“I believe they [health organisations such as EPHA, the WHO and FAO] would in general support agricultural policy; they do not support all features of the CAP. In the past we did have difficulties with certain aspects of our policy such as export refunds and others which have in the meantime disappeared.”

[Internal stakeholder, agriculture/trade]

“…we think it’s important to have [CAP]. Because there are obviously different scenarios if we removed the subsidies. … But we think that at the moment… it’s important to support farmers to produce food,…and we have been trying to advocate for better ways of doing that already for some years…This is what we’ve been trying to do with the new CAP.”

[External stakeholder, public health]

The main reasons participants stated for support for CAP related to the aims of the policy in providing secure livelihoods for European farmers, and more recently sustaining countryside and providing public goods. However, not all EU countries are supportive of CAP.

“There’s market management which generally tends to be counter-productive. There is the bulk of expenditure goes through the direct payments route which essentially is paying producers for not doing very much for continued existence. It’s a form of subsidy. We don’t think it’s a good use of public funds. And then you have the second pillar… of the CAP which is rural development and agri-environment expenditure where we can see a genuine justification in terms of its impact on growth and its impact on environment objectives but it’s only a very small proportion of the budget.”

[External stakeholder, agriculture/trade]

When asked who should be leading nutrition-related concerns in CAP, DG SANCO was seen from within and outside the EC as the lead institution.

“I think the responsibility is on DG SANCO in the first instance to protect consumer, or to support consumer interests and then to bring that to bear…”

[External stakeholder, agriculture/trade]

“At the end of the day the proposal that will go out is proposal from the Commission, which follow the inter-service consultation, and it’s up to DG SANCO to be strong in the inter-service consultation.”

[External stakeholder, agriculture/trade]

However, other groups such as DG AGRI were also considered to have an important role, particularly by those within the EC.

“Nutrition? The key players of course is DG AGRI and DG SANCO.”

[External stakeholder, agriculture/trade]

“Who are the key players? I mean the key players are the European Commissioners in the College [of Commissioners]… the decision is a college decision, it’s not SANCO imposing on others.”

[Internal stakeholder, public health]

Some participants noted that whilst DG SANCO is important for nutrition, it has limited financial power, and DG AGRI administrates the CAP. However, DG ENVIR (the Directorate General for Environment) and DG CLIMA (the Directorate General for Climate Action) were given as examples of how external influence can be exerted on DG Agri.

“The two main players [for considering nutrition in the CAP] are DG SANCO and us [DG AGRI]. … On the relation between DG SANCO and DG AGRI, it’s not been easy… DG SANCO has a lot of policy and … very limited budget.”

[Internal stakeholder, agriculture/trade]

“It depends really on the extent to which DG SANCO can influence DG AGRI. …in the current CAP with the greater influence of environmental considerations, DG ENVIR, DG CLIMA are clearly now beginning to exercise more muscle, and beginning to strong-arm DG AGRI and say ‘listen, you’re taking a bloody big chunk of the budget. We want to see something for it.’”

[External stakeholder, agriculture/trade]

One EC participant suggested a lack of expertise and rotation of staff between roles in DG AGRI/TRADE and DG SANCO may be holding back nutrition consideration.

“So those who draw up the first draft or proposal, they have to check all aspects. … They have to read, to look at the state of play of research in this field, speak to stakeholders before they draw up any draft. … Of course usually this is done by people who have a certain background. So they can have a background on biology, or some technical background which helps a lot to understand it. But it may also be sometimes people who have not this background but they work in the Commission and they are good in this sort of gathering of information. We have a system of rotation, so it may be that you have a completely different background from your education but then you jump into a new subject and you learn to deal with it.”

[External stakeholder, agriculture/trade]

NGO nutrition and health expertise and influence was also lacking within CAP, with a perception that stronger civil society mobilisation is needed for greater momentum and action from DG AGRI and DG SANCO.

“Nope, never heard of them [European Public Health Association]. So either I’m missing something or they’re not having much of an influence on the debate.”

[External stakeholder, agriculture/trade]

“I don’t think you have all the context there [in current CAP discourse] and all the actors sufficiently active to draw the attention that there is a need.”

[Internal stakeholder, agriculture/trade]
"If you want to make it [nutrition in CAP] a European issue you have to generate some momentum behind that."

[External stakeholder, agriculture/trade]

It was however noted that nutritional concerns are a high priority for consumers.

"The difficulty of this is in Europe you have an extremely high awareness in the population of these issues [nutrition-related and NCD issues], so you cannot just simply ignore them."

[Internal stakeholder, agriculture/trade]

The European Parliament (EP) was also seen as instrumental, particularly for change driven by civil society, as Members of the European Parliament (MEPs) are very sensitive to public opinion. Furthermore, the Lisbon Treaty gave equal power to the EP in a co-decision process.

"While I’ve repeatedly stressed the influence of the Commission, you should not underestimate the influence of the European Parliament."

[External stakeholder, agriculture/trade]

"The Euro parliament was quite vocal in the CAP revision process. Especially because it was the first time they were treated as an equal with regards to that... There are some really good people who want to have CAP as... I would say as healthy and social as possible as well."

[External stakeholder, public health]

"There are a number of MEPs which are supporting the case, which are sympathetic about the ideas of more health concerns, about more nutrition policy, and I think that helps."

[External stakeholder, agriculture/trade]

The role of the agri-food industry was seen as important by both agri-trade and health participants, with a strong role in shaping the CAP. Others stressed industry plays a role in only some aspects as CAP supports farm production and does not set policies for food processing (discussed in greater detail under ‘solutions’).

"Yes industry has a role in shaping the CAP’s agenda, of course it does. After all it’s a policy for the industry also... So they’re very interested. So industry in terms of primary production to farmers, and also of course the food industry which happens to be the most important section of our European industry and export industry. So of course they’re extremely interested in our policy and every move we do."

[Internal stakeholder, agriculture/trade]

"Yes [industry does] have a role [in shaping the CAP policy agenda], and they use it pretty well. Primary producers, who are pretty well organised in separate member states, but also internationally, so pan-European or whatever, so in branch and producer organisations in the areas of dairy, meat, sugar, you name it, tobacco etc, so the primary producers. But then you have the food processors, retailers, and all of them are really, really vocal and well prepared."

[External stakeholder, public health]

Communication channels within the EC and with external stakeholders were mostly seen as effective and important, given the EC’s role as a guiding institution with a strong interest in developing policy community coherence and civil society mobilisation around this issue.

"We tend to have a very good working relationship with officials in the Commission... generally it’s a pretty friendly relationship."

[External stakeholder, agriculture/trade]

"Access to officials in the commission is easy."

[External stakeholder, agriculture/trade]

"My impression of the EU system is it’s very difficult, and it’s cultural barriers and it’s scientists speaking with civil servants... Trying to speak the same language. ... I think people are trying to do their best but I wouldn’t say it’s easy."

[External stakeholder, public health]

However, a key issue raised by internal and external stakeholders, was whether the EC has a legal mandate to address nutrition. There were divergent views on this. Based on the Treaties relevant to CAP, nutrition was perceived by many as being an issue for member states, rather than something that can be addressed at EU level.

"There is no competence of the EU [in nutrition]. I think it’s simply not in line with the treaty."

[Internal stakeholder, agriculture/trade]

"That’s where the people in DG SANCO always say ‘yeah, but there’s a limitation, there’s a very serious limitation to what we can do because, the people who can make a change in terms of health and health regulations, that’s national states’."

[External stakeholder, public health]

"Well one thing [holding back nutrition from taking a more central position in CAP] is the legal basis, it’s the treaty. Otherwise you risk, which would be the worst case scenario that you put something under the heading of the CAP, you finance it, and somebody, some smart lawyer comes around and says ‘this is all illegal, it’s a misuse of public money. This is supposed to go to farmers and not to health authorities, or...’ ."

[Internal stakeholder, agriculture/trade]

Whilst nutrition-related health was perceived as not being an EU competency, food safety was.

"In consumer and public health there is not a lot of competencies for the EU. ... There is some directives but there is not a lot of legislation. In food safety... over 90% of all laws are harmonised on the EU level. This is one of the food policies, one of the key aspects of the common legal framework of the EU, this is one of our strongest part, as I think everybody will agree with excellent results, because the food chain works."

[Internal stakeholder, public health]

"I’m not an expert on EU regulation but that’s true that the EU, the Treaty, the Treaty simply doesn’t regulate health whereas it regulates food safety. For obvious reasons, I mean because of the food supply chain is crossing borders all the time."

[External stakeholder, public health]

Some participants from agriculture/trade, including country representatives, felt that it is possible to address nutrition at EU level, and doing so is an issue of legal interpretation and political will.

"That [nutrition as a key consideration in CAP violating conditions of the Treaty] to me sounds like a pretty spurious argument for keeping something out of the debate. I certainly see no reason why it ought to exclude nutrition from the debate. At the end of the day part of this is about language, and consciousness, and if you start to reference nutrition and nutritional value, if you only started to reference it and it gets into people’s consciousness."

[External stakeholder, agriculture/trade]

3 The informants expressed or were asked to express their views and opinions on this issue: they are not legal experts, and some of them also made this point when giving their opinion.
I wouldn’t say that [nutrition] can’t be addressed [at the EU level]. I would say that it is something that if we decide to address we have to get into this.”

[Internal stakeholder, agriculture/trade]

“15 years ago nobody talked about food security. Now, every second speech about the whole area of agriculture was peppered with references to food security. So why shouldn’t nutrition be part of that narrative.”

[External stakeholder, agriculture/trade]

In summary, there was support for the importance of CAP from participants across all sectors and organisations interviewed, but nutrition and related health were not seen as being well addressed. The responsibility for this was perceived as being predominantly with DG SANCO, supported by other EC institutions, and there was a suggestion of a lack of nutrition expertise in the EC overall. However, fundamentally the mandate for the EC to address nutrition in CAP was strongly questioned. Industry was considered to have a strong role in influencing the CAP, but currently health NGOs do not. Stronger civil society influence was seen as important to mobilise the health debate in the EC.

Ideas

In this element differences in how actors involved with nutrition in CAP understand and portray the issue was analysed. Although health, and particularly nutrition-related health, was often mentioned as an emerging topic for Europe it was acknowledged by most participants it has a low status within CAP, although some participants felt the policy importance is increasing.

“The reality is that other considerations have seriously outweighed any consideration about nutrition policy.”

[External stakeholder, agriculture/trade]

“In this house if I put 7 [out of 10] to farmer income I can easily put 5 to the environment. It’s an important issue. Another issue which is important increasingly is animal welfare… and if we are 7, 5, I would put 3 for animal welfare. Nutrition is lagging behind. Clearly. … I would put 2.”

[Internal stakeholder, agriculture/trade]

“Public health to be honest has a very, very low rating at this moment in time, so I would give it between 2 and 4 maximum [out of 10].”

[Internal stakeholder, public health]

“If I follow CAP in the last 20 years, nobody cared about nutrition in the 70s or in the 80s, and now it’s really an issue. It is there, you have to look at this.”

[Internal stakeholder, agriculture/trade]

Some agriculture/trade participants perceived nutrition as secondary to economic and environmental agendas.

“You have conflict between taking a fair income for farmers, ensuring reasonable prices for consumers, allowing the market to work but in addition to that, showing signing to the market that they have to develop or give priority to health aspects, and at the same time that they have to cultivate in a way which is fairly with the environment.”

[Internal stakeholder, agriculture/trade]

“When you ask a policy-maker at the Commission and you ask him for the considerations of certain policy measures I think you might hear these kind of consideration [the environment, food safety, the welfare of rural farmers] more than nutrition.”

[External stakeholder, agriculture/trade]

Some issues raised here included that environmental degradation can undermine the sustainability of production, that higher standards regarding nutrition can – like with those for the environment – mean losing out in international competitiveness, and the conflict with consumers wanting cheap food which is not necessarily healthy.

“The problem we certainly face, we have a large debate in the European Union about the fact that the European Union has so strict standards, and is so much concerned with all these issues that we lose out on being competitive.”

[Internal stakeholder, agriculture/trade]

Public health participants, also reflected on health compared with higher policy priorities, but also focused on justifying nutrition.

“So this is the dilemma [the respondent mentioned conflicts for nutrition-related health with other issues, for example with the health of the workforce], health is there, it is on the agenda, but it is quite low on the agenda. But it’s improving, absolutely.”

[Internal stakeholder, public health]

“[CAP is predominantly an economic instrument] and certainly to support food production, viable and sustainable, it’s an efficient food production for the European population, plus for external trade reasons. And we feel it should support the food production in the EU in terms of amount and quantity, but also the quality.”

[External stakeholder, public health]

There were also perceived conflicts within the health agenda, with food safety and security receiving greater priority. Some respondents from agriculture/trade equated food security with nutrition.

“I think when you ask a policy-maker at the Commission. for the considerations of certain policy measures you might hear these kind of considerations [the environment, food safety, the welfare of rural farmers] more than nutrition.”

[External stakeholder, agriculture/trade]

“When you think about food security and growing population, then in this aspect it got a lot of attention food security, it means also that everybody who gets this, has a proper nutrition.”

[Internal stakeholder, agriculture/trade]

Another argument often emerging from agriculture/trade participants, including country representatives, was that agricultural policy includes minimal intervention policies and thus production is largely market driven, suggesting that nutrition outcomes are dependent on consumers demanding healthier foods.

“You need to ensure that what you produce is sold. I’m certain, most of the farmers produce what is asked by the market. So here we get into a chicken and egg issue. If you don’t produce it, it is imported… and then also you see farmers who believe in different things who decide, I mean, you’ve got organic farmers, you’ve got, you know, who move the market, as the consumer began to be more aware and interested in what they are eating.”

[Internal stakeholder, agriculture/trade]

“At the end, ultimately the market ought to be the driver for production decisions and policy decisions… So therefore the market is now trying, I think, to steer a course between convenience and nutrition and healthy eating and so on.”

[External stakeholder, agriculture/trade]
However, a health respondent suggested that the free market approach is not optimising outcomes. The implications of the argument from the agriculture/trade side, focusing simply on the need for better consumer education, are discussed in greater detail under ‘Solutions’.

“I don’t, and I think it’s based on some pretty good evidence, I don’t think leaving food security and agriculture up to the free market is an optimal solution.”

[External stakeholder, public health]

An important theme was that CAP spending requires strong justification as it accounts for almost 40% of the EU budget. Countries supportive of CAP perceived that the recent attention given to environmental protection helps the EC justify CAP spending with taxpayers, and that nutrition could also be used in such a way. For example, the European School Fruit Scheme (SFS) was perceived as a good health initiative and justification of CAP spending. Established by the EU under the leadership of DG AGRI in 2008, co-financed by DG AGRI, member states and private sector contributions, the SFS provides children with fruit or a vegetable regularly at school, as part of an educational programme.

“I think it could help the legitimacy of the CAP, is if somebody said ‘hold on a second, this is not about simply subsidising food production, this is about nutrition, it’s about public health, this is a new dimension’... explaining to the 90% why 40% of their tax payers’ money is going to 10% of the population... You have the School Fruit Scheme (SFS) and the School Milk Scheme (SMS), both which are designed to I guess encourage people towards a more healthy diet. If the parents understand that actually this is being funded by the EU through the CAP it gives greater legitimacy to the CAP.”

[External stakeholder, agriculture/trade]

In summary, nutrition is in conflict with other EC policy agendas perceived to have higher priority, particularly by agriculture/trade participants. Almost all respondents ranked nutrition policy low importance, though some suggested its status was improving. In contrast to nutrition, food-safety policy receives high priority and is perceived to be comprehensively addressed at EU level. There was also the suggestion that nutrition could be promoted as a way to justify high CAP spending (from taxes) amongst citizens.

Political contexts

The environments in which actors operate were analysed. Several structural reasons were suggested that may shape the political priority given to nutrition in the CAP. These included a lack of consultation/collaboration across EC departments, including lack of clarity around responsibility for projects and ‘siloed’ working, a need to find a balance between EC directiveness and subsidiarity, and the EP agricultural committee’s lack of attention to what is said by other committees.

“It’s probably more a problem for the EC [organisational structures or norms that contribute, or not, to addressing nutrition in the CAP], that the issue is the more and more segmenting the approach, meaning DG AGRI is more focused on subsidies and the CAP and SANCO more focused on balanced diets and so on, labelling, and the issue is how they can be more and more consistent in their approach.”

[External stakeholder, agriculture/trade]

“We always find a balance between directive and what we call subsidiarity. You need to leave member states the room to apply policies, because people are different, cultures are different.”

[Internal stakeholder, agriculture/trade]
“And the reality is that frankly [nutrition is] not a huge influence, because when you involve politicians, ministers, inevitably it becomes purely political. . . Because this is ministers having an influence over farmers’ incomes. . . That’s high politics.”

[External stakeholder, agriculture/trade]

A theme for agri-trade respondents was the inappropriateness for the EC to push for nutrition policy change as not enough is known about what is healthy food or a healthy diet. Although WHO recommendations were acknowledged, many felt there were no agreed international ‘dietary guidelines’, to support EC action.

“There is science behind [healthy food products and eating patterns], but there’s no definition yet.”

[External stakeholder, agriculture/trade]

“The science is still developing. . . in terms of the long-term effect of nutrition. . . We have not yet all the picture of the impact of nutrition.”

[External stakeholder, agriculture/trade]

“Consumers is, I would say today quite lost in terms of nutrition. What is good, what is not so good.”

[External stakeholder, agriculture/trade]

“I think it depends on how you define health then. We have to discuss what is healthy. Is milk without any fat healthier than milk with fat, than the natural one? So here I think when you need to define health. You have kind of designer foods, it doesn’t mean that designed food is healthier.”

[Internal stakeholder, agriculture/trade]

Similar views were heard from DG SANCO.

“But what is nutritional healthy foods? I mean, this is very difficult to say.”

[Internal stakeholder, public health]

Health and agriculture respondents felt farmers produce food that is generally healthy, but that the products the consumer receives are quite different. Many participants perceived the responsibility for healthy diets and nutrition lays not with farmers (‘upstream’), but with the food processors and retailing industries, or the consumer (‘further ‘downstream’), and suggested that in its current form CAP is not the place in the supply chain for interventions to improve diets.

“I see [farmers] responsible for the land, because this is what they work with. They manage the natural resources. They produce food like the humanity used to eat for many, I mean if you look for centuries ago obesity was not a problem and you had the normal fat milk, not even what you find now in super-markets which is half fat. So I don’t know if the problem is with them. I would say not.”

[Internal stakeholder, agriculture/trade]

“We are at the production chain, we are not here to tell the consumers how to combine the food or how to make the choice.”

[Internal stakeholder, agriculture/trade]

“Agricultural product as such are not an issue, what may be an issue is how they are transformed. I see for instance that over time people are eating less and less, but the calorie density of some products has drastically increased. So these are elements that we need to consider for instance.”

[Internal stakeholder, public health]

“First of all the CAP is supply driven and not demand. Secondly, the CAP is focused on primary production and not on the food chain including the consumer and product pathway.”

[Internal stakeholder, public health]

There was divergence regarding the suggestion that unhealthy diets and subsequent health problems are a ‘downstream’ or demand-side issue while CAP is an ‘upstream’ or supply-side policy. Participants from within the EC, and also external agriculture/trade organisations, tended to perceive unhealthy diets a problem arising from both demand-, and supply-side, but further down the supply chain from the farmers (i.e. the food processors and retailers). Conversely, participants from public health outside of the EC were more mixed in their views – some saw it as a demand-side issue, and others saw it as also being supply-side and something that could be addressed through changes to agricultural policy (discussed further under ‘Solutions’).

The practicalities of promoting healthier diets, mostly in regard to increased fruit and vegetable consumption, were also discussed limitations as to what can be grown where (depending on climate), storage conditions and perishability, perception that fruit and vegetables are expensive, lack of knowledge/skills regarding how to cook vegetables, and the education required regarding the healthiness of fruit and opposed to juice. Labelling and health claims regulations were also mentioned as disadvantaging wholefoods.

In summary, nutrition was widely considered to have a low priority in CAP. Many agriculture/trade participants, and some from DG SANCO, suggested it is inappropriate for the EC to enact policy change unless there is better understanding of healthy diets. In addition responsibility for healthy diets was perceived to rest further ‘downstream’ from farmers with food processors and retailers, outside CAP’s remit.

Solutions

Few solutions have been proposed to address nutrition-related health in the CAP, even from external stakeholders in advocacy roles or public health experts.

“The key thing is. . . he said, ‘you public health people, you’re pretty good at pointing out the problems, but you’re really bad at finding the solutions’. ”

[External stakeholder, public health]

“It was about building a narrative that was positive, and about being a positive, constructivist actor at the meetings, not shaking the finger and saying what you’re doing wrong, but trying to see what we could do better.”

[External stakeholder, public health]

Some external stakeholders believed the EC is only interested in ‘safe’, incremental solutions, when the radical change is needed. A view expressed by a DG SANCO representative supported the incremental approach.

“On one hand they [CAP negotiators] are looking at innovative solutions, and it’s good to cover two in one, etc, but when it comes to really introducing, proposing and then implementing something truly innovative, I don’t really think they want or they can take it on board. I think they stay with safe solutions.”

[External stakeholder, public health]

“The Commission is unlikely to propose any obligatory regulations. Everything is self, voluntary etc. What else, they are not very much going into taxation. It’s just the regular stuff. I don’t think there will be anything super-new suddenly. This is again this very individual, very small-scale way of trying to solve a problem, instead of just changing the whole system.”

[External stakeholder, public health]
“There is not one single bullet. You need to act at all levels to make a change. So that’s my first lesson over time, is that a drastic change on one point will not make any change if you don’t change a little all the levels.”

[Internal stakeholder, public health]

EC participants discussed the many challenges they perceive to be promoting dietary changes, and believe others’ influence agricultural production.

“In the past we used to be allowed to couple the payments that we would give to production. Since we are in the WTO we cannot do that anymore, so that’s out of the question for us to tell the farmer what to produce. Even to tell him to produce is a problem in the eyes of the WTO. So this is an issue that goes beyond us. Secondly, we also saw that it didn’t lead to the good results. You know the famous stories of the 80s with the mountains and rivers.”

[Internal stakeholder, agriculture/trade]

“Guidelines on nutrition, if you think of the context, what do you think should be done on nutrition? Define the level of fat in milk? Define the combinations of food that you are eating? And come out with a law on that? I don’t know even if citizens would accept that.”

[Internal stakeholder, agriculture/trade]

“If the industry and the consumer wants something different I’m sure they will tell the farmer. … We wouldn’t want to get into any of this. It didn’t work. You can’t tell 10 million farmers. It never worked.”

[Internal stakeholder, agriculture/trade]

From a public health perspective, industry was mentioned as a big impediment to promoting dietary change.

“The problem is that the people who knows about nutrition advice. … how should we be eating, they’re not the ones controlling the supply chain. I mean, basically the supply chain, farm to fork, we’re not in control. We’re giving the advice from sitting, looking at what’s going on, but the food industry is controlling it. … So that’s the whole problem. We’re trying to give people the advice, but the food industry, they’re the ones in charge.”

[External stakeholder, public health]

Opinions regarding solutions differed significantly between participants from public health organisations, those from the EC and external agriculture/trade organisations. Health advocated changes in agricultural policy, proposing that consumer interventions will have little impact on consumption withoutstructural changes.

“When you talk to people responsible for or involved in developing policies in the agriculture field, but also in health, it’s that consumers as individuals should be educated about and informed, and when they know what’s in food and what types of food they are to eat, they will do that. And we know that from public health it doesn’t work like that. … maybe farmers should be incentivised, motivated in financial ways to produce maybe more fruit and vegetables, better quality, organise farmer markets in, everywhere where it’s possible. I think this is the predominant obstacle. Working at the individual level instead of the systemic.”

[External stakeholder, public health]

In contrast many EC participants, including from DG SANCO, believed changes to agricultural policy would have little impact on consumption and may have unintended consequences. Proposed solutions were consumer-facing interventions – information and education. This reflects the argument discussed under ‘Issue Characteristics’ that CAP addresses agricultural production but the problem is with processing of foods.

“Nutrition as such is a lifestyle choice, or a cultural choice, and is not us to regulate.”

[Internal stakeholder, public health]

“Information. Explaining to people. Conscious choice. When they go to the supermarket and buy something, or when they prepare the meal, that this is important and they have to think about what they’re actually eating, and their children have a healthy diet. But if you impose it it’s like ex-Soviet Union telling people what to eat.”

[Internal stakeholder, agriculture/trade]

“You have a big political debate in Europe, there are really two political camps, nothing to do with agriculture. Is the role of policy to provide a framework that is safe and healthy for everybody, or is the role of policy to tell ‘you have to eat once a week vegetables, you have to eat once a week this, you have to do’, and you know, I tend to believe it’s rather the first one.”

[Internal stakeholder, agriculture/trade]

“Well [to achieve healthier diets, the policy levers needed are] to help boosting the education of the citizens, because markets are simple, markets move in the direction where there are clients.”

[Internal stakeholder, public health]

Many respondents both inside and outside the EC saw potential for fiscal policies such as food taxes, but with many difficulties in their implementation. Reformulation of agricultural products was generally considered ineffective in addressing obesity and NCD, and a strategy that the EC could only implement on a voluntary basis. Self-regulation more generally was considered by some non-EC participants as an ineffective way of addressing nutrition, but was the only method seen as supported by, or sometimes available to, the EC.

“I think it becomes difficult. I mean, on what do you impose the tax? I have no difficulty on imposing a tax on [names a brand of cola]… It’s pretty straightforward. But it becomes a bit of an issue when it’s something like cheese, for example.”

[External stakeholder, agriculture/trade]

“If there’s a market for low fat milk, produce it and you sell it well, but we do not tell you to produce low fat milk, if there is then, … is there someone who wants to buy it?”

[Internal stakeholder, agriculture/trade]

Cross-compliance-type measures – currently used to benefit the environment and animal welfare – were suggested as a possible solution to address nutrition in the CAP by one respondent.

“Well if animal welfare is justified, why not nutrition?”. [Internal stakeholder, agriculture/trade]

However, this idea was unpopular with agriculture/trade policy-makers as they saw it as an unnecessary burden on farmers that would not benefit nutrition. Many, including from DG SANCO, also made the point that ‘healthy’ products are already available for purchase.

“I don’t think that we should invent new legislation or new policies. I think we just have to use even more what we have, together with the member states, with their national policies, especially public health, and together with the sectors, especially the producers in having a better and higher quality better nutritional quality products on the market.”

[Internal stakeholder, public health]
“I don’t see any easy way to implement a cross-compliance in nutrition issue. I see a lot of technical difficulties.”
[Internal stakeholder, agriculture/trade]

“I think that people who are believing that cross-compliance could be a solution for nutrition policy are not aware of the need for simple and controllable ways of acting.”
[Internal stakeholder, agriculture/trade]

A DG SANCO respondent suggest that nutrition could be considered a public good and supported through CAP's Pillar 2, which addresses the environment and animal health.

“The current link of the dairy payments via the cross compliance to the legislation could be much more improved, yes. Abolish the whole payments, transfer them all to rural development and other programmes which are demand driven, that’s probably a bit hypothetical and visionary but fostering the link to public goods and to outputs to demand driven… take away [payments within pillar 1 and move them towards pillar 2] but it would be nice, I mean in our point of view it could be very helpful if the preventative aspects and the health driven aspects could be fostered by giving away money for investments that go into improving the quality of nutrition, the animal health, the animal welfare and all the issues.”
[Internal stakeholder, public health]

Whilst suggestions regarding agricultural policy solutions for addressing nutrition were critiqued by the EC and the agriculture side, and the ‘information/education’ approach critiqued by external public health participants, there was substantial agreement regarding the need to address the food processing industry and the availability of their products.

“… not only about making fruit and vegetables more available or attractive or, you know, a lot of people talk about ‘making the healthy choice the easy choice’, but I think more than making the easy choice it should be the only choice in many circumstances, like in schools, at work.”
[External stakeholder, agriculture/trade]

Some also felt that whilst subsidies are distortive, programmes like the SFS, which is positive for nutrition but also develops a market, are justifiable.

“We have a long experience with giving subsidies, and our experience was not that positive. If you give a subsidy, the economic agent will react in such a way that they will minimise the subsidy. For instance fruit and veg. I think it’s more useful to spend the money in something like the SFS, giving subsidy to fruit and veg, given to school in the context of a global education package.”
[Internal stakeholder, agriculture/trade]

“There might be an issue about organising the sector, which is a very fragmented sector… But I think our main priority… is to make sure that programme like the SFS that are efficient and remain in place are fully developed, and that there is a good promotion policy.”
[External stakeholder, agriculture/trade]

“Promotional fruit and veg for instance, it’s an excellent example. I mean, we are not eating enough vegetables and not eating enough fruits in the EU. We are below the WHO recommendation. So making that change will have a positive effect on the discussions on the right policies on agricultural policies.”
[Internal stakeholder, public health]

There was suggestion from participants from a range of sectors/organisations in regard to the disconnect between agricultural production and food consumption, and the role of processing in this, that we need a broader governance framework, with the suggestion of rather than a CAP, a Common Food Policy or Common Sustainable Food Policy would allow for the entire food supply chain from farmer to consumer to be addressed.

“It would be better if there would be at least more coherence between all these different member states who are talking to industry on, on, let’s say standards for their sugar or whatever. I think it would be better if there would be only one or two or something like that. But that’s just not the case, and it may be something which will develop in the future but I’m not sure if that will.”
[External stakeholder, agriculture/trade]

“I’m fairly convinced, in the next decade we will no more have agricultural policy, we will have food policy.”
[Internal stakeholder, agriculture/trade]

“[The EC] feel that they are most accountable to just farmers basically. Consumers are a little bit the second or perhaps third consideration.”
[External stakeholder, public health]

In summary, the lack of specific ‘solutions’ suggests this is a complex area to tackle, with challenges that include respective WTO rules, appropriate nutritional guidelines, and the influence of industry. Another key challenge is the difference in perspective between EC and agriculture/trade participants and public health participants, with the former advocating consumer-facing interventions and the latter advocating for more structural changes to agricultural policy. Some participants, from a range of sectors and organisations, feel we will need a broader governance framework that would allow for the entire food supply chain from farmer to consumer to be addressed.

Discussion

The increase in the prevalence of obesity and NCDs across Europe has raised questions as to whether better nutrition can be leveraged through agricultural policy at European level. Respondents interviewed in this study provided diverse ideas and arguments on where the roots of the problems lie and on whether CAP is an appropriate and effective policy for nutrition.

Our analysis revealed that nutrition consideration in CAP ‘is a minefield of interests and contested space with many competing actors and agencies all pushing their own perspectives’ (Kealey, 2011), similar to other areas of CAP policy-making (Erjavec and Erjavec, 2009; Candel et al., 2014). These institutional factors include the EU budget, WTO negotiations, the consequences of treaties, member state interests, interests across the food supply chain and a host of civil society voices with public health being seen as weak (Lines, 2009; Kealey, 2011). Some of these interests wield considerable political clout, as also documented in the US (Bellemare and Carnes, 2015).

Two major issues especially were raised that impede the possibility of nutrition-related health being addressed more explicitly within CAP. First, despite a reasonably clear understanding internationally amongst nutritionists and public health scientists, many of the study respondents still perceived a need, before action is taken, for a better understanding on healthy diets and whether supra-national dietary guidelines are applicable to different dietary and cultural habits across Europe. This type of argument, calling for greater evidence, has been used previously as a way to deflect nutrition and NCD concerns (Shelley, 2012). However, this is a complicated area, not least because European countries have a wide range of dietary habits, and it is difficult to establish disease attribution from a food based, whole-supply-chain perspective.
The existing evidence in this area needs to be better communicated, including stronger and clearer guidelines from international organisations such as the WHO which would give EC a greater mandate on which to act.

Second, there is a need to clarify the scope of the legal mandate for the EC and the CAP to address nutrition beyond consumer education strategies (i.e. labelling, minimum taxation level) or whether this is an issue to be addressed at national level. In general, within the European legal framework there are examples of the introduction of market correcting policies to address public health, despite the weak treaty mandate, for example tobacco control policies (Greer and Kurzer, 2013). Currently, through CAP, the EC has set rules/regulations regarding food safety to avoid movement of unsafe foods across borders. While there are other avenues for addressing nutrition in the CAP, it has been suggested that the legal integration and the extension of EU jurisdiction to regulate public health is the surest trajectory (Greer and Kurzer, 2013). Policy-making is a dynamic process greatly influenced by the way issues are framed and understood (Russell et al., 2008), and some respondents were of the view that if the will is there, nutrition can be legally justified as an issue to be addressed by CAP.

Greater public awareness of public health issues related to nutrition and the interest of civil society in these problems would help in empowering advocacy groups into taking a more influential role in discussions relating to policies on food. Civil society organisations may not have the financial influence of industry groups, “but they can publicise an issue, bring a legal case to the Court of Justice, mobilise voters and bridge the gap between EU institutions and national or subnational organisations” (Greer and Kurzer, 2013). Their influence is vital for catalysing policy change. Internally to the EC, DG SANCO is seen as having a key role in leading the topic, including among other directorates.

While some suggestions were made concerning how to improve diets, these largely related to the demand-side, mainly information driving consumer decisions – the ‘downstream’ public health interventions to date focus on labelling, health promotion and educational campaigns (Barling, 2007). Some supply-side interventions are in place already via CAP, such as the SFS – which can provide a useful platform for understanding how pro-nutrition policies can be successfully incorporated in CAP without contradicting the EU’s legal mandate – but in general there is a lack of further ideas on how to address nutrition through CAP, and little attempt has been made to intervene upstream (Caraher and Coveney, 2003). This is partly due to uncertainty of the legal mandate at the EU level but also due to key actors involved with agricultural/trade policy, and DG SANCO, believing that CAP is a supply-side policy while poor nutrition and resulting diseases are a demand-side issue. That DG SANCO respondents also support such an approach suggests that this may be a politically expedient way of supporting the institutional status quo, at least publically. However it may be disingenuous to separate institutions or individual respondents from the influence of the prevailing political worldview since the 1980s, a neoliberal perspective with a focus on markets and individual responsibility for health behaviours and outcomes (Erjavec and Erjavec, 2009; Walls et al., 2015). In contrast, public health experts argue that there is greater need for supply-side policies, as educating consumers has not proved effective at improving behaviours or health outcomes at population level. Caraher and Coveney (2003) raised the lack of policy addressing structural issues such as corporate concentration of production, which may be considered by many respondents the domain of CAP (Caraher and Coveney, 2003), but this was not raised by the study participants.

CAP accounts for a large amount of EC spending and thus raises numerous political debates. Accordingly, one idea suggested was that CAP expenditure might gain further legitimacy among the public and member states by explicitly addressing nutrition and healthy diets, as the SFS has shown.

Another suggestion previously presented in the literature (Keeley, 2011) and also raised during the interviews is the potential need to move from current CAP towards a broader food policy (i.e. Common Food Policy or Common Sustainable Food Policy), encompassing the whole of the food supply chain from farmer to the consumer. It can be argued that while CAP has been modernised and harmonised with the ideas of a single market and market liberalisation it lags behind the modern structures through which food passes, which include increasingly long and complex chains of actors. As evidenced by the comment of many of the respondents, CAP is currently seen as a policy related to farms, farmers, and the countryside which in the context of modern supply chains is only at the beginning of the production and processing pathways (Popkin, 2014). Many respondents suggested a need to address the food processing industry and availability of their products, a sentiment aligned with Hawkes et al. (2012) who noted that policies intervening in agricultural production to promote healthy eating are unlikely to be effective if they do not account for food processing, distribution and marketing (Hawkes et al., 2012). In 2011 MEP Oana Elena Antonescu (EEP, Romania) stated that “the current debate on the CAP focuses mostly on payments; however it should also focus on health and better integration of production and consumption”, and highlighted the relevance of agricultural policy to factors influencing diet including price and availability (Keeley, 2011). Keeley (2011) interpreted this as symbolic of the importance of parliamentarians as a target for lobbyists, a theme also addressed by the respondents of this study.

Finally, it needs to be noted that the study is limited to themes that recurred throughout the interviews. These are people’s perceptions and understandings and not those of the institutions they represent. Sampling bias may arise from systematic differences in those accepting and declining invitations to be interviewed. A number of respondents that were approached declined to be interviewed, particularly those from the EC. Those who did agree to interviews may be more sympathetic to the concerns of this study. However, we endeavoured to conduct interviews with people likely to represent a diverse range of perspectives on this issue.

Conclusion

The results suggest that for nutrition to gain greater priority in the CAP, a number of areas should be developed and clarified. Public health should take a more constructive role with its criticism and providing solutions. Greater civil society engagement and high-level governance support regarding nutritional guidelines from institutions such as WHO, for example, would also provide the EC with a stronger mandate for action.

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