

This response was submitted to the consultation held by the Nuffield Council on Bioethics on *Public Health: ethical issues* between May and September 2006. The views expressed are solely those of the respondent(s) and not those of the Council.

Food Standards Agency

Thank you for sending your consultation document "Public health: ethical issues" to the Food Standards Agency.

The document and its case studies highlight very clearly both the complexity and numerous dimensions of public health issues. Many of these issues are directly relevant to the Agency's remit covering food safety and healthy eating. (As a number of the working party members are already aware, from their own experiences).

The FSA acts as a Government Department, an independent regulator and a consumer protection body. We are an evidence-based organisation and guided by three core values –

Putting the consumer first,

Being open and transparent

Being an independent voice.

Our actions are based on many sources of evidence, including advice from our expert scientific committees and the views of consumers and other stakeholder groups. We seek to have a dialogue with stakeholders and reach decisions that are proportionate and risk based, in an open and transparent way. We believe that acting this way is an important part of building public trust in who we are and what we do. It is therefore an important part of delivering our contribution to the public health agenda.

My comments below concentrate on the questions in the consultation document of most direct relevance to the FSA:

The definition given for "Public Health" ("What we, as a society, collectively do to assure the conditions for people to be healthy") looks sensible, providing it is understood to include individual responsibility as well as traditional collective action. (In terms of the FSA's activities, public health would include the provision of information to enable individuals to make healthy choices).

Factors influencing public health: The interactions between the five factors (environment, social and economic, lifestyle, genetic background, preventative and curative health services) would appear to cover the main influences affecting public health.

Although not explicitly part of the working group's original terms of reference, I note you have asked for comments on the economic issues raised by public health. In addition to the general socio-economic (equity) issues raised by public health, a sizeable literature exists on public health economics, dealing with the justification for intervention and its benefits and costs. The economic arguments for public intervention are usually based around some form of market failure, such as externalities (e.g. costs imposed on others), informational asymmetry (e.g. lack of

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Case studies: The case studies on obesity and supplementation of food (fortification) are both of direct interest to the FSA and highlight the potential complexity and scale of public health issues. Obesity has been identified as a significant health issue, affecting both children and adults, and is being tackled by authorities in each of the four UK countries. The Agency's contribution is to encourage improved diets, tackling not only calorie intake but the overall quality of the diet, including for example fruit and vegetable consumption and salt intake. We aim to work with all stakeholders- businesses, consumer and health interests and individuals – to encourage development of healthier products (e.g. with less added salt), increase awareness of the importance of a balanced diet, improve food preparation and cooking skills and encourage changes which facilitate healthier choices (e.g. simplified nutrition information on front of pack).

The FSA also has a strong interest in fortification of food. We are actively engaged in assessing the potential risks, costs and benefits of fortification of flour with folic acid. An important element of this work has been to carry out deliberative consumer research to explore attitudes to this issue, and we will be publishing the results of this study shortly.

We welcome further debate about the issues raised by the consultation document and wish you well with your further deliberations.

¹ See for example "The literature on the economic causes of and policy responses to obesity" by T Skinner et al in *Acta Agriculturae Scandinavica*, Section C – Economy Vol 2, Number 3-4 Sept-Dec 2005