Ongoing changes in the Common Agricultural Policy are restructuring the food system to reduce the commodity price of sugar. As a result, sugars will become cheaper to incorporate into processed foods, potentially increasing sugar contents in existing products and the diversity of products containing sugar. This is likely to have a negative impact on initiatives to reduce sugar consumption in the UK and across Europe.

Background
The harm associated with consumption of excess sugar is a prominent public health concern. In July 2015 the UK Scientific Advisory Committee on Nutrition (SACN) halved the recommended intake of free sugars to 5% of daily calories. In October 2015 Public Health England published *Sugar reduction: from evidence into action*.

The amount of sugar in our diet is influenced by a number of factors, including agriculture. For over a half-century EU Common Agricultural Policy (CAP) has been influencing the diets of European consumers by determining to a large extent the price and availability of most food items in Europe. This includes European-produced sugar, almost entirely derived from sugar beet. Historically, European sugar beet has been among the most protected agricultural sectors under CAP, keeping European commodity sugar prices relatively high.

CAP reform and sugar liberalisation
The 2013 CAP reform agreed to liberalise the EU sugar market. Most importantly, as part of these reforms, sugar quotas will be abolished in 2017. Liberalising this sector will lower EU commodity (or wholesale) sugar prices significantly. Prices have already begun to fall, from about €700 per tonne in 2012 (before the reform) to about €400 in 2015.

The European Commission has projected that in the next decade, EU production of sugars will increase by around 15%, from 16.8 million tonnes in 2016 to 19.3 million tonnes by 2024. This includes a trebling of high-fructose corn syrup (HFCS) production, from 0.7 million tonnes to 2.4 million tonnes per year. As a result, the Commission expects Europeans to be consuming more sugar in the coming decade.

Impact on UK sugar consumption
There are a number of ways that the lower commodity price and increased production may increase consumption. For instance, lowering the price will make it economically more viable to incorporate sugars into processed products, potentially increasing their overall content in foods. It may also encourage the incorporation of sugars – and especially HFCS – into a broader range of foods. HFCS has a number of advantages as an additive, including sweetness, flavour enhancement, stability, freshness, texture, pourability, and consistency.

The introduction and use of HFCS in the USA was associated with a fall in the price of sugar-sweetened beverages and a marked increase in their consumption. Addition of sugars to processed foods is likely to be particularly pronounced among cheaper products, so may disproportionately affect consumers on a lower income.

Mixed signals on sugars
This reform creates mixed signals for the food industry. On the one hand, official recommendations are calling for individuals to reduce sugar consumption. Pressure is also growing on companies to reformulate their products to reduce sugar content, with some calls for legislation setting mandated limits. On the other, sugar reforms in CAP will dramatically and abruptly lower the cost of sugars to the food industry.

If health initiatives are to succeed in improving diets, there needs to be much better alignment of agricultural policies and food systems with public health objectives. Currently this alignment is absent and the conflict between policies stands only to worsen in the near future.

Types of sugar - definitions
In this briefing we use the term sugar to refer both to:

- common white or brown sugar produced from sugar beet or cane
- high-fructose corn syrup (isoglucose), a liquid sweetener made from maize or corn, commonly used outside Europe to sweeten beverages.
Questions for policymakers
The UK faces significant, imminent questions about the implications of the cheapening of sweeteners:

• How will the abrupt and marked drop in the commodity price of sugar affect use and consumption in the UK?
• What are the health implications of the increased sugar production?
• What are the implications of a marked increase in HFCS production, given its attractiveness as an additive to sugary drinks and processed foods?
• How can the UK align its policies to reconcile the contradictory set of market signals and public health objectives sent to the food industry?
• To what extent is there an opportunity for the UK to implement agricultural and other policies to mitigate any potential health harms of sugar liberalisation?

Potential public health responses
Given the projected increase of sugars in the food supply, a number of policy responses could be adopted:

• Ensure that dietary surveillance, in particular the National Diet and Nutrition Survey, is prepared to adapt food and nutrient tables to reflect changes to the sugar content of foods in the UK diet.
• Mandate targets for reducing the sugar content of processed foods, and implement robust systems for monitoring compliance.
• Conduct a health impact assessment of the sugar reforms, and of other agricultural policies.
• Incentivise farmers to shift production away from unhealthier commodities such as sugar to healthier commodities, such as fruits and vegetables.
• Work toward aligning UK agricultural policies with public health objectives through closer collaboration between Public Health England, the Department of Health and the Department for Environment, Food & Rural Affairs.
• Formally integrate public health into CAP and other agricultural and trade negotiations at the EU level.

Conclusion
There has been insufficient consideration in public health of the significance of agricultural policy in shaping the food supply and population health. In light of recent CAP changes and the wider emerging public health evidence, it is particularly pressing that the UK adopt a set of short-term responses to address the projected increase of sugars in the food supply.

In the longer term it will be necessary to devise structural interventions aimed at aligning agricultural policy with health policy at both the national and the EU level.

References and resources

• Liberalising agricultural policy for sugar in Europe risks damaging public health: Emilie Aguirre et al, BMJ, October 2015 www.bmj.com/cgi/doi/10.1136/bmj.h5085
• Analysis by Emilie Aguirre. Contact: eka30@cam.ac.uk / pm491@medschl.cam.ac.uk

The Centre for Diet and Activity Research (CEDAR) is studying the factors that influence dietary and activity related behaviours, developing and evaluating interventions, and helping shape public health practice and policy. CEDAR draws on the expertise of a wide range of scientific disciplines, including behavioural science, biostatistics, epidemiology, health geography, health economics and human nutrition research. www.cedar.iph.cam.ac.uk