Case Study 3 – Salt Intake

Transcription of Interview

Duration of Interview: 01:58:19
The Food Standards Agency was set up in 2000 so it’s a relatively new organisation but it was one of the manifesto commitments from the Labour government of 1997 that they would establish an independent regulator to look after food safety issues. And that was in the light of the BSE crisis, Salmonella in eggs in the late nineties, sort of consumer confidence in food issues was at a pretty low point and Blair, when he was leader of the Opposition, commissioned a report – I can’t remember who by but I’ll find out – to look at how trust in food issues could be increased or got back to where they hoped it should be and one of the recommendations was an independent regulator to govern food safety issues.

So it was a manifesto commitment and it took three years for the Agency to be set up because you need primary legislation, all those sorts of things, and then just get the body to being and it came into being in April 2000.

The Agency is in probably, I wouldn’t say quite unique because there’s one other regulator that’s in the same position as us, is we are what’s classed as a non ministerial government department so we are a government department like the Department of Work and Pensions, the Department for Business and Enterprise, all the major big department of State, we are the same as them but we don’t have Ministers, we have a Board who sits at the top.

So we report direct to Parliament so we produce an Annual Report, we produce Accounts, all those sort of things all go to Parliament but we just don’t have Ministers and a Secretary of State and all the other things that sit with this.

We report to Parliament if we need a Minister through the Department of Health so Dawn Primarolo, who’s currently the Minister for Public Health, she will answer Parliamentary questions on our behalf in the House of Commons and then a Lords Minster will do the same for us in the House of Lords and there’s not one particular person. So that’s
how we get into Parliament is via the Department of Health but we don’t report to the Department of Health.

Ministers, however, have got within the founding statute of the Agency the power of direction so, if they think we’re going off at a complete tangent, if they think God what the hell are they doing, the Secretary of State for Health, whoever that might be at the time, can say Agency you will do this and, of course, that’s the nuclear option. Ministers don’t want to have to use that and we don’t want that to be done to us because we’re an independent body.

The Agency was very much set up to protect the interests of consumers in relation to food and drink as well, it’s sort of been expanded, so we are very much a consumer protection body. Our primary interest is making sure consumers can buy safe food, they can make informed choices about the food that they’re buying and the nutritional content and all those sorts of things and we’re gradually now moving into helping people making healthier choices through the Salt Campaign and understanding what the impact of a high salt diet might be, the traffic light labelling system that you might have seen in supermarkets, that’s all us as well. We’re now starting to look at sugars and fats and how can we help the nation deal with those sorts of things in the light of the obesity crisis and those sorts of things.

So, as I say, we are an independent regulator but we’re also a government department but without Ministers so that sets where we are in the scheme of government which is an odd position to be in and I’m not sure most of government actually really understands that unique position that we have. So, for example, if Cabinet is taking a collective decision on a particular issue that impacts on the food sector and, for example, there’s a report that’s been going on at the moment the Cabinet office are working on on future food policy for the government and we obviously had a keen interest in that. When a Cabinet committee is discussing a report like that we’re not at the table because we don’t have a Minister so that is a bit frustrating for us to a certain extent, we have to feed in through the Department of Health.

So there are issues which may be interesting for your study around does the way government is set up now, modern government with regulators, with arms length bodies of Agencies and obviously departmental parties, all these different plethora of what the media call the
kwangos, which is obviously not a term we would use for ourselves because it’s slightly derogatory, it is government and the structure of government that’s traditional through Cabinet discussions, does that actually match the way that government is set up in the twentieth first century and I think there is quite an interesting debate about that to be had.

Definitely yeah.

So anyway that’s a sort of brief intro.

Brilliant. I mean yeah I’d definitely be interested in touching on a lot of those issues that you mentioned especially as one thing that I noticed when, like you say, being an independent body I suppose you must have the advantage of the reputational factor as well, that people trust you more and I suppose government use that as well.

I think what’s interesting is you’re right, the Agency has a very high trust level, consumer trust within the Agency is – I don’t know what the exact figures are, they’re probably on our website somewhere but they’re always consistently high – but I think that is partly to do with we’re not seen as part of the government. There must be all sorts of factors that play into that.

The Agency, when it was set up, made a very conscious decision to be a very open and transparent organisation. I think one of the faults that perhaps was identified in the late nineties is that decisions were made behind closed doors and nobody knew what evidence was being taken into account or assessed and, therefore, things had to be much more transparent than they were in the past.

So the Board meets in public probably about nine times a year, its monthly Board meeting are held in open session. Anybody can come along, it’s all pod cast and web cast and you can phone in and listen. It’s not participative because people can’t participate in the meeting, that’s for the Board, but people at the end of the meeting can ask questions and do ask questions, either if they’re sat there or they email in a question or phone in a question and the Board will answer that and I think that’s quite an interesting way of making policy and I think it means that, if the Board takes a decision, whilst a section of the society may not like
that decision – there’s usually somebody doesn’t like something for whatever reason – at least they know how the decision was made and they’ve seen the evidence and they’ve seen the discussion so they can’t argue with the process and actually then to argue against the actual decision the Agency say we need more evidence from you and if you don’t think we’ve made the right decision then tell us why, you can’t argue with the process because you saw this in action, and I think that’s a really interesting way of working.

Definitely and I think it does meet a lot of the targets, like you say, that the government are trying to – so this is a very simplified model of the development of the 6g daily salt intake. I went through the public records and through this mind map, that I can’t present to you because it’s too big, but just trying to basically identify the main players really, the scientific advisors, policy makers and then the actual decision maker and I’ve identified it here as the Chief Medical Officer but that may not be correct.

I would say this is the FSA Board up here. The Chief Medical Officer probably would have been involved probably around here. The CMO would have been around here somewhere. I think there’s probably more layers and I think this is where the politics of things come in, that you’ve got your evidence which is probably yes, up to about here and this I suppose is where my influence comes in and my team comes in. What we will be saying to the Salt Team, who are coming round here, is you’ve got the evidence that is suggesting high intakes are not a good thing and therefore we need to reduce the intakes and you’re looking at around 6g of salt a day. What we will be saying around here is, if you’re trying to persuade people to reduce their salt intake, what’s the impact on food businesses of doing that because when you’re coming in here you’ve got your impact assessment.

Because can people actually achieve 6g a day and I think one of the things that has been found more up here is that, yes, we can try and persuade people to reduce their salt intake by not using salt at the table or in their cooking but actually we’re probably reducing salt intake much more by working with the Food Industry to take salt out of preprepared foods, pizzas and curries and those sorts of things, the chilled cooked variety. So if we’re trying to reduce to say 6g and maybe we come out as high as 3, could the industry actually do that, what would be the cost of trying to achieve that.
Now all of the salt work is voluntary and I think that’s a really important point. Industry could turn around and say we’re not doing it, we don’t believe the evidence, it’s not in our interests to do that and, therefore, the Agency has to work in a way that tries to persuade businesses that this is a good thing to do and actually what I think the majority of businesses who have worked with the Agency to reduce their salt levels have seen it as a market opportunity that if they can offer – we’re raised awareness, I suppose, all round this loop that a high salt diet is not a good thing so consumers are aware of that, they’re starting to put less salt in their cooking and on their chips and things, but actually the biggest help is to give them food that has less salt in it in the first place so consumers will be, through the education I suppose that we’ve given them, will be looking for lower salt alternatives.

So the manufacturers will think that’s handy, I can produce pizzas with less salt in and my competitor, his pizzas have more salt in then hopefully they’re going to come to me and I’ll sell more of my pizzas. So I think that’s the incentive that comes in with the food industry and what we will have done on the impact assessment is is that actually feasible, can they do that without really harming what businesses is trying to do. So my team, which is the Better Regulation Team, is around that sort of what’s the impact of this on businesses.

I did understand, I did read that retailers had already tried to reduce their salt at an earlier stage but they’d slowed down.

Yeah I think that’s right. I think sometimes with these it depends who you ask, retailers are not going to say no we’ve never done this, we’ve never thought about it. I had a meeting with Marks and Spencers not so long ago on different regulatory issues and Marks and Spencers said quite openly we saw that you were looking for saccharine advice and coma advice on salt, we could see the writing on the wall that eventually, when you’ve gone through this long process that government seems to have to go through, you will at some point be coming out with statements that high salt is not a good thing and you would like manufacturers to reduce.

So businesses will see the writing on the wall and decide that’s the best way to go because Marks and Spencers, Tescos, Sainsburys are world leaders and are pretty clever at these sorts of things and will see that that’s a good marketing opportunity for them.
And I suppose they can do things that you wouldn’t be able to do as far as reducing like say the – I suppose this is just my personal opinion – like the traffic light system. If the Food Standards Agency was to impose that instead of through the retailers’ actual choice to bring that out.

That’s a really good question. We don’t at the moment have the legal powers to impose traffic light labelling or front of pack nutritional labelling at the moment, we can’t do that. Because the majority of food legislation is governed by Brussels, I think it’s over ninety percent of food legislation derives from the EU and we don’t have the powers to introduce that, so whilst the previous Prime Minster will say if you don’t do what we tell you we’ll regulate. Actually we couldn’t have done that and it’s unfortunate he said it and would have put us in quite a difficult position if we’d got to that stage. That may change, the food information regime is being reviewed at the moment and there may be powers to compel businesses to do it.

Traffic light labelling is a really interesting example because there are some food businesses that have embraced it, there are others who have said no we think it’s completely misguided and doesn’t help consumers and therefore we’re going to introduce our own system and there’s a massive supermarket chain, who I won’t mention but it’s easy to work out, who are completely anti what we’re doing and will not follow it and don’t think it’s the right thing to do. Then there’s a bunch in the middle who will take the big supermarket chain’s system, they will take our and they’ve come up with a hybrid.

We think our system’s best, the supermarket thinks theirs and these in the middle think there’s is the best. What the Agency has done is said we will run with traffic light labelling and all the other systems that are out there for the next couple of years, we will assess the impact of those, we will look at what consumers want, what do they find the most helpful, what gives them the information that they need. If the evidence should show that the big supermarket system is better and more helpful to consumers we’re not going to die in a ditch about it because our job is to protect consumers. If that’s a better method than the one we’ve come up with then we will go with that method.
I think the interesting thing is the supermarket over here who says that theirs is the best method won’t share the evidence that they’ve got with us so it’s going to be one of those interesting debates but at the moment we can’t compel people to do. Similarly with salt, if we’d gone to a large food manufacturer of say preprepared curries or that sort of thing and tried to persuade them to reduce the salt content in their food they could have turned around and said no, we don’t want to, it costs us too much, we can’t be bothered, our customers are quite happy with the level of salt and it can only be done through persuasion and trying to influence them that this is the right thing to do and that it’s a good thing to do.

Could we impose 6g of salt? I’m not sure we could because you can’t say to individuals like you and me that you will only eat 6g of salt a day because you just can’t possibly do that. So I think now that the Agency’s moving more into the healthy food diet and those sorts of things, we don’t have the regulatory regime sitting there unlike food safety to actually use to compel people to what we want to do and, therefore, salt I think is an extremely good example. How do we get people to change their behaviour, how do we get manufacturers to change their behaviour and deliver a healthier nation at the end of it and I think those are the things that we’re now grappling with.

So with reference to the scientific knowledge before it becomes part of the Agency process, I suppose here would be kind of a – and also, I suppose, when I say scientific knowledge I mean any information that’s used to carry out a risk assessment or to assess risk so that could be Agency reports, anything internal.

The Agency will commission its own scientific research if it feels that there’s an issue but I’m sure that the policy teams will be horizon and scanning to see what research is out there and what are the indications.

And that’s how this would have come up?

I’m not totally sure because I haven’t been involved in salts a great deal but I would have thought that there was a report to [sounds like Sachen 18:49] or somebody which was indicating that a high salt diet is not a good thing for you.
That seems to be the case yeah. When I read this out, sorry I hesitate because I realise that you weren’t directly involved in setting the salt standard, so when I ask this question I do mean from an Agency perspective. So the point of entry of the scientific knowledge when it became part of the Agency decision process, what were the points of entry?

The Agency is divided into different bits and there is a Nutrition and team so it would be that team that will be the point of entry, it’s that team’s responsibility to look at nutritional type things so they would have been looking out for the salt stuff.

And they will pass it on to?

They will deal with it themselves. The team that say deals with salt is part of the Nutrition team and they will have policy advisors, they will have scientists, all sorts of people, so that will be contained within that part of the Agency.

So where does it go on from there, once they’ve seen it as an issue I suppose, like you say, here where they come, do they present it to your team?

I’m trying to think about the policy making process, it’s quite a complicated process that something’s flagged up through the scientific evidence that we need to do something in this area, the policy team will mull that over, chew that over and think what are our options for this, how can we deal with this particular policy issue, how can we reduce salt intakes in the nation and at some point will have decided that the evidence is showing you the 6g and therefore we need to reduce in take to that and then they will have decided as a policy team that the best ways of tackling that, because we don’t have legislative levers, it has to be an education campaign and working with the food business manufacturers to reformulate their food. So those will have been the sort of policy options.

The target of 6g a day was in the Agency’s strategic plan in 2005 which was a five year strategic plan to 2010 so, at some point – this is before my time, I’ve only been here a couple of years – at some point the people dealing with salt will haves gone through internal processes to decide is this the right thing, should the Agency be doing this, should we invest
money and invest resources in doing this, is this the right thing for the Agency to do. They will eventually have got to the FSA Board who will have approved the work and as a policy issue in the direction in which we were going and also would have agreed that it should be one of the strategic targets of the Agency over the next five years to reduce salt intake levels down to 6g a day.

So I think that’s the sort of process and the Board before that, before it gets to the Board which is what we were talking about before about the impact assessment, other people within the Agency will have played into my team, as it was at the time, will have advised on the impact assessment, the Communications team would have talked about how do we have an advertising campaign or an awareness campaign on salt issues. There’s a Consumer branch whole will have talked about how you to influence consumers, we would have talked to people about what was the best way of influencing food businesses to reformulate. So it’s a big piece of work from the original evidence and the original scientific advice, gradually lots more and more people will be pulled in until we just get working on it.

Okay. I think I’m going to show you this map.

There is a report coming out from the National Audit Office, probably not going to be published until October, which is looking at three government campaigns on changing public’s behaviour and they’ve looked at the salt campaign and there’s two others, one is Think which I think is a driving campaign and the other one is on flu jabs and the National Audit Office are due to publish that after the recess so probably not until October and I think that, for your work, will actually give you quite a lot of information about how this whole process has worked and the costs of campaigns and all that. So it will be a very useful piece of work if you’re still doing this in October.

I don’t know what else I’ll be doing, I hope so I guess. I suppose this is the point where we talked about here, I won’t expect you to read all this tiny writing, but the Food Standards Agency together with the agreeance, I guess, of the Chief Medical Officer – he would have been not be so involved at that point?
I don’t think he’d be that involved actually. Because we’re an independent body I think the CMO would be not excluded but he would just be somebody we would talk to, I presume, but I don’t think he’s integral to this as much as you’re suggesting on the flow.

But the way I saw it was that the Food Standards Agency is here then they commission the SACM and they carry out a risk assessment, I suppose, looking at the appropriate approach at the time, taking in the different kind of evidence, looking at what is the most strongest evidence and I suppose that was the urine.

Yes there’s the Sachen urinary sampling that goes on and that’s going on at the moment. Well no, that’s probably been done and the results are due pretty soon actually. The consultation document that the Salt Team wants published, as I said right at the beginning, should be out by July or before recess and that will have the results of the latest Sachen sampling survey. So that will be something to look out for.

So once this process has finished they present their results to the Food Standards Agency, is that correct?

Yeah the Salt Policy team will pull all this together and they present it to the FSA Board.

And then it goes off internally to look at the patterns of exposure, is that correct, look at the different options? Would it still be part of this process?

I think what we’re getting the Board to do is a) agree that 6g is the right level, the target that we should be aiming for, and then to approve that the mechanisms that we’re going to try and get people down to 6g of salt a day are the appropriate ones which are through education and reformulation. So that’s what we’re asking the Board –

So that’s more for like an area going towards the Board?

Yes, then the discussion with the food industry will happen but also you’ve got your consumer awareness reasoning so that’s the things that you see on the side of buses and advertising campaigns and all those sort of things. So you’ve got the two streams of work
which are ongoing at the same time, you can’t have one without the other because the food industry aren’t going to produce low salt food if consumers don’t want it.

**Or don’t know about it, exactly.**

Or don’t know about it. What we’re then doing is, with all of this going on this will sort of feed back in so this will be your sampling that’s going on at the moment, evaluation and review which sort of goes into recommendations. So just because we’re beavering away down here what we need to do is is this working, are levels coming down to 6g and, if they’re not, what more do we need to do or, if they are then great, let’s keep up that sort of work or do we need to maintain the sort of activity.

Because this is not cheap to do all of this work. I can’t remember what the figures are but you’re into millions, to do all this sort of work. If we’ve achieved 6g, shall we take it lower or is that right. So the whole thing becomes a circle of policy making that informs each other.

**That’s brilliant, that helps a lot.**

I hope so.

**I suppose that the Board has a lot of lines of evidence presented to them at that point?**

Yes.

**Would you say that they are weighted differently and is that driven by the scientific knowledge?**

The way the Board is that the FSA sees itself as an evidence based organisation. The Board yes, scientific evidence it places a great deal of store by, however, the Board has to weigh up other issues that are around at the time like the cost benefit analysis, is this achievable, because even though the science – and this is where things do get quite complicated – even though the science says this course of action should be taken, if it’s going to and salt’s not a
good example, but if it’s going to drive a whole section of food businesses out of business is that appropriate action to take if it’s only going to save one life a year. Those are the difficult decisions that the Board has to make and Folate – and there was a whole debate last year at the Board about folic acid and fortifying bread and it’s going to be, yes it will be good for women who are expecting and there will be hopefully less children born with malfunction but there’s a risk to older people who are eating the same bread and there’s a risk to them and their health.

So those are the sorts of things that have to be weighed up, which way do you actually go. So yes, the Board will be strongly influenced by the science and may ask for further studies to be done, may ask for a presentation from the scientists themselves so they can really get to understand what’s going on but it’s one part of the evidence that they use to form a complete view of a policy issue.

**And to make those decisions, they’re extremely hard aren’t they, extremely tricky decisions?**

Yeah and done in the open so that you’re sat there, I’m sat there and we’re all watching them take those decisions so, yes, it’s not easy. Some issues, I don’t know about the salt because I wasn’t here, but folic acid, for example, they will come back to at different times. They may not be ready to make a decision because the evidence, we think we’ve given them enough but actually they would say no, we need to hear, like on folic acid, the impact on older people, we’d like a bit more information about that because once the decision’s made it’s made and it can’t be undone unless new evidence were to come along.

**That really does show the seriousness of the decision, doesn’t it?**

Exactly.

**So I’m sure I’ve read this and I’m sure maybe I should know the answer to this but, as far as the Board, how many people are on that Board?**
The Board is, I was going to say twelve but you might want to have a look at the website, I can’t remember how many there are.

And is there representation from?

None of them are representatives, none of them, that’s a really important point, they don’t represent particular constituencies or particular groups. They’re appointed I think by Ministers in all four countries so England, Scotland, Wales, Northern Ireland for their expertise in a particular area. So you will have scientific expertise in a particular issue, you will have somebody who is particularly knowledgeable about how Local Authority enforcement works, you’ll have somebody who is particularly knowledge from a food business that operates its points of view but they’re not there to push their particular hobby horse so to speak.

So the Local Authority representative is not there to represent the Local Authorities, her job was not to fight the Local Authority’s corner, it was to bring the expertise that she has to the table to help the Board collectively make a decision.

Normally if someone was involved in the process I would have asked them to split the decision process down into particular stages and then to identify where they’re involved. What I will ask you to do, if you see this as a number of stages, if you can identify those stages, either draw on here or just describe them, then I’ll just ask you a number of questions about those stages, the role and the responsibility of the Agency which we’ve probably covered already and if we have then just say pass, rewind.

I would have thought, although it’s not listed, the cost benefit analysis would be at this stage before it gets to the Board.

Is that the first stage you would say?

I would have thought it was more Stage 2.

Okay Stage 2 Cost Benefit Analysis. And how many stages do you foresee this?
I think three is probably pretty accurate otherwise it will just make the whole thing so complicated. I think the thing to put in is the feedback, it’s not a binary process and out popped this work, the work has to inform the evidence and it just keeps going.

So what would you identify the first stage, what would you call it?

The first stage I think is evidence gathering and then second stage evidence evaluation and third stage probably decision and implementation because then you’re implementation will feed back into your evidence gathering.

So what was the Agency’s role in the first stage? I suppose that is evidence gathering though isn’t it?

I think the Agency is responsible for the whole process, as the government’s body to protect consumers we’re responsible for everything. So yeah, we’re responsible for gathering the evidence.

That answers the second question as well. With regards to the scientific knowledge the Agency received?

I’m not sure I can answer that, no.

I suppose this is from Sachen but I suppose if there’s so many people?

I think what you’ll find is when the NAO study comes out, a lot of that will be in it.

How abundant is the qualitative and quantative data?

I don’t know the answer to that, I’ve never seen it.

It probably is different stages, would you say it varies on the political, social, technical and costly nature of it?
I would be surprised if it weren’t costly because it’s quite big.

Is it more costly at one point, at these different stages?

That’s a good question. I think if you’re commissioning research that’s naturally costly, the money you’re spending. Evaluation of the evidence that you’ve gathered is internal costs, it’s staff costs. There may be some external expertise but it’s largely contained internally. The third one about decision making and implementation, that’s where I think it probably becomes most costly because your advertising campaigns are not cheap, they’re pretty expensive. Persuading industry to reformulate is probably less expensive because it’s just meetings, I would have thought, to try and persuade somebody that the course of action is the right one to take. So I think the greatest expense is probably around consumer awareness raising but other costs will be pretty high as well.

I suppose the technical part of it would be the evaluation?

Yes.

And the social part, would that be the final stage?

I would have thought it’s when you’re here, it’s deciding how you’re going to – it’s the social who are the target people, your consumer awareness raising, who are you going to target so I know, for example, they targeted mothers because they’re the ones that prepare the food in the home, they’re the ones that do the cooking. There’s no point, well possibly I don’t know, single guys at home, what’s the point of targeting them because actually they’re only feeding one person. Those sorts of social modelling, I would have thought, has gone on so that when you come out with – and this is how all advertising is done, is targets the people you want to most influence.

And then you actually go and talk to those people?

Yeah so they will have done some social modelling.
As far as the political aspect, when does come in?

The political aspect will have come in around here.

And is that internal, external or both?

What we would have done is gathered the evidence. Here we would have talked to government departments of what we were proposing to put to the Board and we probably would have told Ministers what we were thinking of putting to the Board because what you don’t want is the Board to make a decision we want to reduce salt to 3g a day and somebody going to a Minister and saying how on earth have you got to that. So that’s the political check and balance.

Sort of like the mediating?

Yeah.

I was going to say how important was the scientific knowledge but –

I would have thought it was essential, yeah.

I suppose a lot of the onus is put here but it’s still essential all the way through the process.

Yeah if you didn’t have the scientific knowledge up here then you wouldn’t even have started this.

With regards to the passing on of scientific knowledge, I suppose would be this point here, I might have just answered my question really because they passed it onto themselves.

It’s shared with scientific committees, it’s part of an internal process.
I suppose what I could ask you then is once they’ve gathered all that and they’ve decided their action forward, if they’re going to Parliament the type of scientific knowledge they will present to Parliament –

But the thing that’s interesting is we wouldn’t, no this doesn’t go to Parliament, there’s no need to go to Parliament with this because we’re not using legislation, this is purely about persuading people to do something that we can’t compel them to do. If we had been setting a legal limit and needed legislation and we would have had to have gone to Parliament, the Board would have made a recommendation to government Ministers and Ministers would have gone to Parliament on our behalf and the Minister will have signed off we’d had a consultation.

We probably had a consultation document on the limit anyway but there would have been a consultation document and there would have been draft legislation that we would have prepared and the scientific evidence would have been presented as part of that as justification as to why we were taking a course of action and that may have gone to Parliament.

I think what’s interesting is if this were legislation it was secondary legislation so it doesn’t get debated on the floor of the House, there’s no big first reading, second reading and all that sort of stuff. It’s purely a statutory instrument that gets laid, if it gets preyed against then there’s a debate, if it doesn’t it just goes through. Some of the Parliamentary committees will scrutinise what we’re doing and they’ll look for the evidence but in this instance it won’t have gone to Parliament because there’s no legislation.

Which of the following actions – and this might be a bit abstract thinking – when it comes to the three stages – because I’m studying three different regulatory decisions where I’ve got nuclear waste and also doing disposal of diseased avian flu carcasses so the relationship with the operator is very much different so some of these won’t be looked at in your three stages but as far as say the first stage, as far as receiving information – and maybe this is not something you feel like you can answer.

What do you mean?
Receiving the scientific knowledge from outside of the Agency into the decision process. I mean, would you have to inform people to give you that information or would you have to actually prosecute them or enforce them to do it?

I think it isn’t, it certainly isn’t prosecuted, it’s certainly isn’t enforced, it’s certainly not sanctioned or threatened, in this situation it’s not those, not of it is heavy handedness. I would have imagined – so they’re all sort of nos – I would have thought it was encourage, influence, guide, the softer ways of doing things. Probably not educate because we probably won’t know it until we’ve done something. Possibly a bit of persuasion, probably less instruction. So I would have thought it was the middle area.

And is that the same throughout the stages?

I’m just thinking about that.

I guess you’re communicating with different people aren’t you?

Again, I think you’re right, I think it is the same in all stages. It’s certainly none of these because we don’t have the powers to do it. We cannot, as we were talking about traffic light labelling in this certain supermarket, we have no powers to say to them you must give us your evidence. They can just carry on saying not so, therefore, we can only do it through encouragement and persuasion and trying to influence them.

Would you say this is the better part, to be informing them so then you receive the information throughout the process? I’m just trying to think of one sort of scale when you might see an issue like, for instance, when you’re talking with the retailers.

Personally I think the middle is best.

Which are?
The sort of guide, influence, encourage and persuade because, if you can get somebody to do something through those mechanisms, personally I think people are more likely to carry on doing what we want them to do because they know why and you’ve brought them along. There are occasions where you have to use the more heavy handed route, threatening, sanctioning, enforcing and prosecution, but does that change people’s behaviour because they want to and because they have to and, if you look at it in other areas away from food, just because somebody has to change their behaviour doesn’t mean to say that next time they’re not going to do it again whereas one would hope if you’re in this middle area because they now understand why you’re wanting a change in behaviour that actually makes the behaviour change stick. So personally I think the middle is probably the most useful.

I was going to ask you for passing on of the information but I think in this case it’s…

I’m not sure that’s relevant.

…not quite relevant and only if it is I think you’ve answered it as passing it onto the retailers.

Yeah.

When I used to talk to people in conferences about what I was doing and about the amount of risk taking in regulatory decision making and risk based decision making I always used to describe it as a pendant swinging towards – yeah going towards risk reversal, going towards risk taking. I won’t try to bias the answer but what would you say today where we were on a range from very conservative to very liberal or maybe don’t know?

I would probably say pre liberal. I know that’s sort of hedging my bets in the middle almost which is a truly Civil Servant way and the reason I say that is I think with risk, risk is such a big issue that we have and the Agency have to bear in mind what risks are consumers prepared to take. It’s not our risk really. There are some areas of food where, regardless of the risk, we have to take that away because it’s so serious that potentially people could die, there’s a serious imminent risk to public health and if that’s the case then we have to take
decisive action and therefore we would probably be very conservative because the risk is so high, the government and society won’t accept that risk.

There are other areas where, and healthy eating is perhaps a good example, where so far governments and the European Commission have not given legal powers to member states to take action and that may be because the risk to the population as a whole is not as high as say Salmonella or something like that or Listeria which are really life threatening and, therefore, we can take a more liberal approach than we would if there was an imminent risk to public health.

I think there’s also something around what’s the public acceptability of risk, does the public want to take this risk for itself and that’s something that the Board will have to consider in taking a decision down here in the third area. We all take risks, we run across the road when the lights are just about to change and that’s a risk that we as individuals decide to take for ourselves so should we as a government body remove that risk and actually no, we shouldn’t do anything about that because the public have decided for themselves how to handle that risk.

I think the government is dealing with all these things all the time around smoking and drinking and food issues so what we’ve done in this area is we’re educating consumers around the risk to their health of consuming too much salt, we’re helping them reduce their salt intake through reformulation with businesses but actually we’re not taking the risk away because if we were we would just ban salt and actually society wouldn’t accept that. So I think that’s why I would say we’re in the middle ground.

**What about ten years ago?**

Not just because it was a different government ten years ago but I would say it was probably more conservative and the reason I say that is I think there was much more of a command and control attitude to what there is now. I think there is now a greater understanding of risk and public acceptability of risk and management of risk than there probably was ten years ago.

**And twenty years ago?**
God, I wasn’t even working. I would say I don’t know.

What about ten years in the future?

I think that’s a really interesting question. If you look at some of the big issues around public health and things like obesity, if all the work that’s going on at the moment of trying to encourage people to have a more healthy lifestyle around drinking and smoking and eating and exercise and all the rest of it, if those are shown not to work then you can see us becoming more conservative because people will be directed.

So I think I would straddle two and three, I think it depends how things go now and that will very much influence the future. If people – and, you know, all the sort of indications– there was this thing on the radio this morning and they were talking about the Lord D’Arcy report on the NHS and on the radio they were saying this morning that feedback is that people want the government to tell them more about how to be healthier, less obese, stop smoking, stop drinking, that sort of thing. So to a certain extent the public see this as part of the government’s role which would put you more in the conservative camp whereas I think there is a feeling within government that actually people need to take responsibility for themselves and what we do is give them the tools to do that.

In twenty years time hopefully it won’t be my problem, I don’t know, I won’t have retired but I might be doing something else.

Do you think the principle way that scientific knowledge is being used has changed?

I think with the Agency it’s the openness and sharing and I think that is a massive change.

Does the use of scientific knowledge vary among regulatory bodies?

Within the Agency no but I think across government it does and a lot of that is around the openness and transparency of different organisations. People can test our scientific evidence then challenge it which they can’t in other areas so well.

Transcribed by Typing Solutions

www.typingsolutions.org.uk
That makes sense. And is there a need to strengthen and reform the use of scientific knowledge or do you think that it’s pretty much at the maximum as it is?

I think there’s never any harm in reaffirming the importance of scientific knowledge, I think science has to be a bedrock and actions shouldn’t be taken or you shouldn’t start thinking about taking action if there isn’t the scientific knowledge there in the first place. You can’t do things on a whim, there has to be a firm basis, and I think when you get right to the end when you’re trying to change consumers’ opinions quite rightly they need to know why you’re doing this and what made you start rather than just we thought it would be quite a nice thing to do today.

How do you think it’s best to present all these different lines of evidence?

Personally, I would say in the most open and transparent way that you possibly can. However, I think there also needs to be a certain amount of interpretation put on the scientific evidence because the majority of people – and people I think are a lot brighter than most people will give them credit for – won’t understand the evidence and, therefore, presentation of the evidence is incredibly important as long as you don’t skew the evidence and that’s a really difficult thing to avoid doing because having read the evidence you know it’s telling you something and you have to be very careful you don’t present the evidence as that’s the thing it’s telling, people should be able to make their own minds up.

Yes on top of that you could say have we looked at this, it tells us blah but to actually interpret the evidence without putting your own value judgement on it and allowing people to make their opinion up before they read yours is something I think is very difficult to do but essential. Few consumers are going to plough their way through some of the size of some of these scientific documents.

Okay, thank you very much.

You’re welcome.
Thank you so much. I was going to ask you if I could send you, I can send you this electronically or can I just leave it with you, I was just going to ask you to do a personality questionnaire, it’s just a forty question thing.

It is about me?

Yes.

Okay send it to me electronically, let me give you my card and then I can send it back to you electronically.

That would be great, I think that’s probably the best way isn’t it?

End of File – 00:57:52]