

Why I am taking legal action against the Government over pesticides

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In a speech last year Tony Blair said that people must take more responsibility for their health. However, for people living near to crop fields that are regularly sprayed with toxic pesticides the responsibility for their health lies directly with the Government and is therefore completely out of their control.

This is something that I, along with many other rural residents, have discovered to our cost.

My family and I have lived next to intensively sprayed fields for over 22 years. Six years ago, after examining the Government's pesticides policy, I discovered that there has been, (and continues to be), an inherent fundamental failure at all levels to protect rural residents and communities from exposure to agricultural chemicals.

The current method of assessing the risks to public health from crop-spraying is based on the model of a '*bystander*', which assumes that there will only be occasional, short-term exposure of only a few minutes. It also assumes exposure will only be to one individual pesticide at any time.

I have continued to argue that this model does not address the long-term exposure for those living near sprayed fields, repeatedly exposed, to mixtures (or "*cocktails*") of pesticides and other hazardous chemicals, throughout every year, and in many cases, like mine, for decades.

This means that there has never been any assessment of the risks for residents or others exposed over the longer term, (including young children attending schools near sprayed fields), and yet pesticides are not supposed to be approved for use until risk assessments have been undertaken to provide evidence that there will not be a health risk.

Therefore in the absence of any risk assessment there is no evidence to support the Government's claim that pesticides are safe and that there are no health risks to people in the countryside from crop-spraying.

Pesticides, by their very nature, are designed to kill living organisms. They include insecticides, herbicides and fungicides, amongst others, and over 31,000 tonnes are sprayed on UK farmland every year. Farmers cannot control pesticides once they are airborne and therefore the exposure that rural residents and others receive is not really from misuse, abuse or illegal use of pesticides, but about the overall exposure from the legal, approved use of these substances.

People can be exposed to pesticides via air, water, contaminated surfaces and food, amongst other sources, and the routes of exposure include through the lungs (inhalation), the skin (dermal absorption) and the eyes, as well as ingestion (orally). Once pesticides have been absorbed, they can enter the blood stream and be carried throughout the body.

The safety data sheet for each pesticide product shows how hazardous these chemicals are via inhalation with warnings such as, “*Very toxic by inhalation,*” “*Do not breathe spray; fumes; vapour,*” “*Harmful, possible risk of irreversible effects through inhalation,*” “*May cause cancer by inhalation,*” “*May be fatal if inhaled.*”

Babies, children, pregnant women, the elderly and those with pre-existing medical problems are particularly vulnerable to the effects of pesticides.

Yet there is no legal obligation for farmers to notify anyone of any intended spraying application or to supply information on the chemicals being used, regardless of whether adverse health effects have been suffered.

Throughout my campaign I have continued to receive reports from people from all over the UK reporting acute and chronic long-term illnesses and diseases in rural communities surrounded by sprayed fields.

The acute ill-health effects that are commonly reported to me include sore throats, burning eyes, nose, skin, blisters, headaches, dizziness, nausea, stomach pains and flu-type illnesses, amongst other things.

The most common chronic long-term illnesses and diseases reported include various cancers, (eg. breast, prostate, stomach, bowel, brain, and skin cancer) leukaemia, non-Hodgkins lymphoma, neurological conditions, (including Parkinson’s disease, Multiple Sclerosis (MS) and Myalgic Encephalomyelitis (ME)), asthma, allergies, along with many other medical conditions. Reports of this nature have gone on for decades and many are related to young children.

A number of official reports have alerted successive Government Ministers to the dangers of pesticides. As long ago as 1951, the “*Working Party on Precautionary Measures against Toxic Chemicals used in Agriculture,*” commented that “*chronic toxicity is the main problem.*” The British Medical Association’s (BMA) 1990 report “*Pesticides, Chemicals and Health*” and a Commons Agriculture Select Committee report in 1987 both concluded that none of the Government agencies involved with pesticides had made any serious attempt to gather data on the chronic effects of pesticides on human health.

Despite the recommendations that both of these reports made, the situation has not changed, as there still does not appear to be any monitoring for chronic effects.

Since 2002 I have presented the case regarding the lack of protection for residents to 5 different DEFRA Ministers. This is as a result of numerous Government reshuffles, for as

soon as an incoming Minister has started to get to grips with the pesticides portfolio, they've either been moved to another department or sacked!

As a result of my determination to get the Government to act there has been consideration of the issue by the Government's Advisory Committee on Pesticides (ACP) and the Government regulators, the Pesticides Safety Directorate (PSD); two Government Consultations on crop spraying, followed by a year-long investigation by the Royal Commission on Environmental Pollution (RCEP), which had been specifically requested by Ministers to re-examine the evidence regarding the risks to people from pesticides.

The RCEP identified grounds for concern in respect of all the areas they addressed, including health, exposure and risk. They were highly critical of both the ACP and the PSD and concluded that the previous advice that had been given to both Ministers and the public regarding the safety of residents and bystanders exposed to pesticides "*represented too sanguine a view of the robustness of the scientific evidence.*"

The RCEP questioned the independence of the PSD, which receives 60% of its funding from the agro-chemical industry, and suggested that the PSD's current structure seemed to be making health and environmental considerations subordinate to pest control.

However, in spite of the fact that the Government had requested it, its response to the RCEP report, published in July 2006, continued to demonstrate the Government's clear commitment to protecting industry interests over and above protecting public health. The Government yet again rejected all the criticisms of the inadequacy of the existing policy; refused to acknowledge the health risks inherent in the spraying of agricultural chemicals; continued to maintain that the current system is robust and that this is merely an issue of "*perceived nuisance*"; and dismissed any link between pesticides and chronic effects.

This is in stark contrast to statements recently published by the European Commission in relation to the new EU Thematic Strategy on pesticides, which acknowledged that, "*Long term exposure to pesticides can lead to serious disturbances to the immune system, sexual disorders, cancers, sterility, birth defects, damage to the nervous system and genetic damage.*"

(Source:[http://europa.eu/rapid/pressReleasesAction.do?](http://europa.eu/rapid/pressReleasesAction.do?reference=MEMO/06/278&format=HTML&aged=0&language=EN&guiLanguage=en)

[reference=MEMO/06/278&format=HTML&aged=0&language=EN&guiLanguage=en](http://europa.eu/rapid/pressReleasesAction.do?reference=MEMO/06/278&format=HTML&aged=0&language=EN&guiLanguage=en))

DEFRA has previously stated that, "*If there is scientific evidence that use of a pesticide may harm human health that is considered unacceptable*". However, this approach is simply not being followed in current pesticides policy.

DEFRA, the ACP and PSD have confirmed that they accept "*minor transient symptoms*" as they say that the aim of pesticide legislation is to protect only against "*serious*" effects.

This again calls into question the lawfulness of the Government and ACP's current approach. The EU Directive 91/414/EEC and the UK equivalent legislation (the Plant

Protection Products (PPP) Regulations 2005) require that a pesticide shall not be approved unless it has been established that there will be “*no harmful effect*” on humans or animals. This clearly means protecting against any adverse health effects occurring, not simply those that the regulators and scientific advisors deem to be *serious* adverse effects.

A few weeks prior to the Government’s response to the RCEP report there had been yet another Government reshuffle. In came the new DEFRA Secretary of State, David Miliband and the Farming Minister Lord Rooker. I put in requests to meet with both Ministers to be able to present the case regarding the lack of regulation for residents, in the same way I had with all the previous DEFRA Ministers before them.

However, despite the fact that David Miliband had previously stated in writing to Tony Blair that “*We also need to maintain the confidence of people in rural areas that the Government understands their concerns,*” my meeting requests were declined.

The fact that neither the Secretary of State nor the DEFRA Minister responsible for pesticides saw it necessary to hear the case and arguments presented on behalf of rural residents in the UK, (from the very person who had raised the issue in the first place), *prior* to making a decision that has far reaching impacts on rural residents and communities is an absolute disgrace and shows a complete disregard for protecting public health.

There has now been over 50 years of documented scientific and medical evidence in relation to the dangers of pesticides and the acute and chronic long-term ill health effects that can result following exposure.

This cannot be allowed to continue for the next 50 years. Many of the conditions that are reported in rural areas, including cancer and leukaemia, are devastating diseases that are on the increase, especially in children, and even though there could be a number of different causes for any chronic illness or disease, all the causes must be identified in an attempt to try and prevent them from occurring.

The European Commission has recognized very clear long-term health impacts and yet the British Government appears to be in denial that these impacts exist.

The Government’s response to this issue has been of the utmost complacency, is completely irresponsible and is definitely not “*evidence-based policy-making*”. It also appears incompatible with EU legislation on a number of counts and this is the reason I am taking legal action, as Government must be challenged over its failure to act to protect public health, especially in relation to babies, children and other vulnerable groups.

Therefore I wonder how Tony Blair thinks rural residents can take responsibility for their health when in fact they are being prevented from doing so by his Government’s own policy?