

Moving Forward on Food and Health

Report of the Conference Workshops

5 February 2008
Murrayfield Stadium, Edinburgh

There were six workshop themes, into which the participants self-selected to discuss some key questions relating to the context for a National Food Policy, and to make recommendations for future action. The six themes were:

- Working Throughout the Food Chain
- Community Action
- Food in the Public Sector
- Encouraging and supporting people to make healthier food choices
- Best possible Start
- Tackling the obesogenic environment

Is the vision or 'direction of travel' correct?

All the groups agreed with the vision for food in Scotland, and supported it as the overall direction of travel for food and health policy and action. They also generally endorsed the aspirations from the 2007 conference as still being relevant and useful.

In discussing the vision and context for the workshops, the following key points were made:

- Aspirations should address *all* members of the population, and a focus on the middle class population who can afford fruit and vegetables would help generate demand. It is more important to focus on those at risk rather than the lowest income.
- There is a continuing need to bridge these differences between national policies and local priorities and actions.
- A good 'measure' of the vision should be established to assess successes or failures. This may be different for each setting, and therefore further indicators may be required to measure and monitor progress.
- Some targets are still 'too safe' and not ambitious enough.
- Food prices have risen and the effect of this needs to be taken into account. For example, local produce may not always be best or most accessible in terms of cost.
- Food labelling continues to be confusing, with the differences between the GDA and traffic light systems causing problems, especially for those with literacy difficulties.
- Food advertising needs to go further on advising people of the healthy food choices available, without taking a 'nanny state' approach to telling people what to eat.
- Researching consumer demand or food production outside of Scotland and beyond England would be beneficial.
- Schools have a great influence in local communities and it would be best if they were used more to achieve the vision.
- There is a need to work with conflict and inconsistencies with issues that do not all fit together easily e.g. sustainability vs. health vs. environmental

Do you agree with the proposed actions in the discussion document?

No group challenged the proposed actions, and the discussions focussed on participants' understanding and suggestions for development of the actions included in the consultation.

Key issues arising in these stage of the workshop were:

- Food labelling was considered to be progressing with help from debate across the EU.
- It was noted that individuals when surveyed did show interest in what they ate. However only about 12% considered this when actually buying – people are assumed to buy with their eyes and with trust, as opposed to with thought and consideration.
- Retailers need to buy in to the idea of moving forward through legislation, changing attitudes, and cooperation to keep the food industry moving forward.
- Although not all schools are equal in terms of implementing food policies, all head teachers should make healthy eating a priority, include it on the curriculum, and involve the school children more. Health Promoting School should lead on this, and nurseries should also be included.
- Training and incentives are needed to ensure that national standards are applied across the whole public sector.
- A training programme on infant nutrition involving the wider workforce working with children is needed.
- The voluntary sector is often an untapped resource with lots of passion, but the lack of long term funding means that it cannot be sustained and used effectively.
- The food industry, particularly the major supermarket chains, needs to be included in any action as they hold such power in communities. Control and incentives should be used to convince food industry businesses to take a greater interest in the local community.

How do we get there? How do we do this?

All six workshop groups discussed what actions they considered necessary to move forward towards the vision for food and health in Scotland. They made a multitude of recommendations, with particular relevance to the sectors they were addressing in their groups, and these have been included in full in the Appendices. After some reflection and additional expert contributions through the afternoon, the groups sought to prioritise their recommendations in the final session of the day. Some key themes and focal areas emerged from this prioritisation exercise:

SOCIAL MARKETING

- **Media campaigns and positive social marketing**
- **Find new ways to 'sell' positive nutrition (and consequences) messages. For instance, learn from the private sector and link to other areas, build on social marketing, and develop practical tools for choice.**
- **Develop research methods for incentivising healthy access and choice, e.g. subsidiary fruit and vegetables or £50 for breastfeeding.**
- **Research new ways to sell positive nutrition.**
- **Research and recommend methods for incentivising access and choice of healthy food.**

EDUCATION, SCHOOLS & SKILLS

- **Practical food skills and cookery as part of the National Curriculum in Scotland for 3-18 year-olds. Include parents and children working together.**
- **Ensure all primary and secondary schools have kitchen facilities and make sure the local community has access to them**
- **Nutrition, breastfeeding and cooking as part of the school curriculum - and pre-school**
- **Teachers need to be trained and a greater number of 'Home Economics' teachers need to be employed. Pupils need greater incentives to take up 'Home Economics'**
- **Government re-investment in food skills in schools, and infrastructure in FE & Higher sector – building kitchens and labs in colleges once again.**
- **Bigger emphasis on knowledge and skill development in areas of health inequality, linking the theory and practice together**
- **Build confidence around cooking skills e.g. C2Cook – Grampian**
- **Skills for life – operational training with a high level of commitment**
- **Increase availability of and access to practical food skills programmes in shopping, cooking, and budgeting.**
- **Provide money, facilities, people, and opportunity to equip adults/kids with food skills, e.g. trainers' network joined up 'cooking' initiatives'.**

PUBLIC SECTOR LEAD

- **Put an obligation on local authorities to formally adopt a food/nutrition public health plan/framework and work more closely with the local NHS Board**
- **Audit Scotland to add health improvement criteria – ie actions taken**
- **NHS settings to set a better example for staff, patients and visitors**
- **Council facilities to lead the way e.g. healthy vending machines/canteens**
- **Public procurement to take on Food For Life targets: 75% fresh, prepared on site (needs school kitchens), 50% local (sourced from local community), 30% organic (cuts down dietary pollution, helps environment) Examples – East Ayrshire, Highland**
- **Joined up thinking in partnership: LA's, NHS, Prisons and Universities**

INFORMATION

- **Leadership, co-ordination and communication strategies to be put in place plus a central information and advice point for initiatives**
- **Scottish Government to draw on existing examples of good practice and produce guidelines/toolkits for local authorities on procurement**
- **A national database of nutritionally analysed recipes – sharing across sectors**

WORK WITH THE INDUSTRY

- **Retailers to work more closely with community groups to increase fresher, local produce use. The Government should incentivise this.**
- **Give positive recognition to retailers who are supporting healthy living and get buy-in from those who are not supporting this objective**
- **Build innovation and skills in the food & drink industry to support product innovation, reformulation, and high value, high quality products.**

THE THIRD/COMMUNITY SECTOR

- **Raise awareness/ the development of social enterprise as part of a sustainability strategy**
- **Voluntary sector – sustainable funding for breastfeeding, weaning, cookery support etc**

EMPLOYERS

- **Extended maternity leave, full pay, and breastfeeding support on return to work**

FUNDING

- **Provide funding advisors – to offer information about the funding available and application processes**

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APPENDICES

Full Action Notes from the Workshop Groups

Community Action

SOCIAL ENTERPRISE

- **Raise awareness/ the development of social enterprise as part of a sustainability strategy**
- Voluntary sector to take control of own monitoring and evaluation
- Voluntary sector measure and identify best practice in food and health
- Train community leaders as agents of change to improve health, diet, cooking skills via community food initiatives and community dieticians
- Co-ordinate voluntary sector in more 'horizontal' manner
- National agencies should liaise with local service providers i.e. current PR material to access and achieve consistent messages

SCHOOLS

- **Ensure all primary and secondary schools have kitchen facilities and make sure the local community has access to them**
- Open up school kitchens as a community training resource

RETAIL

- **Retailers to work more closely with community groups to increase fresher, local produce use. The Government should incentivise this.**
- Supermarket chains to operate under tighter controls and standards eg less packaging, using locally grown produce, pay farmers a fair rate
- Efficient dialogue with local industry
- Create incentives for companies to aid their local communities and achieve Healthy Working Lives Award
- Draw in food industry manufacturers and retailers to aid communities – financial incentives, corporate responsibility

FUNDING

- Scottish Government to invest in viable initiatives (commercial and voluntary sectors) to ensure long term sustainability
- Funding a few sustained projects is the wrong way as it compromises smaller community-led initiatives. Instead, Government should increase community funding, perhaps through an increased health promotion budget.
- Increase health promotion budget beyond the 1% of NHS monies. More preventative work to fund community action on health
- Ring-fence CHP/ CHCP money available for food activities
- Embed support (capacity building funding) to communities/ organisations within LA and NHS (CHP's)
- Government investment in community infrastructure
- Long term funding
- Government funding for community food hubs and distribution networks e.g. EKOS report applied

- More sustainability in funding for core resources – e.g. staff

PROMOTING HEALTHIER FOOD CHOICES

- Minimise the use of chemicals in food production
- More support for local food producers and community projects e.g. Scottish honey
- Encourage the use of home grown food and 'allotment' training grounds to educate people on how to grow their own food
- Train community leaders as agents of change to improve health, diet and cooking skills via community food initiatives and community dieticians

NETWORKING

- Share information (food projects and contacts) through directories and working groups
- Consistent messages and actions e.g. physical activity leisure centres serving chips and fizzy drinks
- Develop national co-ordination of local food networks
- Co-ordinate and share food and health information eg through a website possibly linked to the Food and Health Alliance website to ensure consistent messages and actions are being shared

PLANNING

- Communities need to be adequately resourced and supported to develop, grow and ensure they are meeting objectives and outcomes
- Identify projects such as Borders Berries and High 5 Fruit which need longer term evaluation and follow up
- Ensure that land is set aside for future potential food growing ie allotments, community farms and gardens within new housing schemes

Best Possible Start

PROVIDING SUPPORT

- Long term funding and investment in the voluntary sector (who have a key influence on peers) to deliver support
- **Voluntary sector – sustainable funding for breastfeeding, weaning, cookery support etc**
- More people (staff/volunteers) to help new mums ie within maternity wards
- Mechanisms to support women in the first year (stay at home, breastfeeding) as in other countries and to pay for longer maternity leave
- Identify and provide training for key groups who will deliver weaning support – voluntary sector

NUTRITION

- Look into providing guidelines on vitamins and nutrients for new mums (distribution issues)
- **Nutrition, breastfeeding and cooking as part of the school curriculum and pre-school**
- Adopt and enforce an infant feeding strategy in Scotland
- Regulate baby food labelling

EDUCATION AND TRAINING

- Education and training to support guidelines. Should be available for the wider workforce, population and community nurses
- **Leadership, co-ordination and communication strategies to be put in place plus a central information and advice point for initiatives**

IN THE WORKPLACE

- Protected time in the workplace for breastfeeding
- **Extended maternity leave, full pay, and breastfeeding support on return to work**

THE PUBLIC

- Involve and engage with consumers
- Stress the importance of parents and carers in cooking skills development

MISCELLANEOUS

- **Media campaigns and social marketing**
- Include mental health issues (Post-natal depression, nutrition etc)

Encouraging and supporting people to make healthier food choices

FUNDING

- **Provide funding advisors – to offer information about the funding available and application processes**
- Longer term funding for successful voluntary sector projects with the ability to adapt
- Longer term NHS Funding for public health community projects

NHS/LOCAL AUTHORITIES TO LEAD BY EXAMPLE

- **Put an obligation on local authorities to formally adopt a food/nutrition public health plan/framework and work more closely with the local NHS Board**
- **Audit Scotland to add health improvement criteria – ie actions taken**
- **NHS settings to set a better example for staff, patients and visitors**
- **Council facilities to lead the way ie healthy vending machines/canteens**
- Local Authority Environmental Health to adopt nutrition and health as the third food discipline with food safety and food standards work.

PRACTICAL COOKING SKILLS

- **Practical food skills and cookery as part of the National Curriculum in Scotland for 3-18 year-olds. Include parents and children working together**
- **Bigger emphasis on knowledge and skill development in areas of health inequality, linking the theory and practice together**
- **Teachers need to be trained and a greater number of ‘Home Economics’ teachers need to be employed. Pupils need greater incentives to take up ‘Home Economics’**
- **Build confidence around cooking skills e.g. C2Cook – Grampian**
- Promote uptake of food & health courses in workplace

EDUCATION

- Primary school level education focusing on the importance of the effect of what we eat on our health and backed up with practical sessions
- Better links between schools and community projects ie the sharing of resources, access to parents and a two pronged approach
- More emphasis should be put on a rounded education from 3 – 18 years. Educating children about nutrition in various groups and settings, including food knowledge, dietary requirements, health issues and hands on activities
- Local food industry and school partnerships (allowing children to cook with donated ingredients)
- Early Years interventions that help develop understanding of the importance of food at a young age
- Opportunities to work with parents with children in nursery on cooking skills. More action – a ‘hands on’ approach to ‘interesting’ education
- Use the ‘Curriculum for Excellence’ as an opportunity to embed food education. We need to educate the next generation of parents
- Relationship with food – socialising rather than seeing food as only a fuel
- Pre-5 nutrition guidelines – easily achievable in a LA context

Food in the Public Sector

PROCUREMENT

- **Scottish Government to draw on existing examples of good practice and produce guidelines/toolkits for local authorities on procurement**
- **Public procurement to take on Food For Life targets: 75% fresh, prepared on site (needs school kitchens), 50% local (sourced from local community), 30% organic (cuts down dietary pollution, helps environment) Examples – East Ayrshire, Highland**
- Review procurement in all public sector areas eg NHS, Local Authorities, Education
- Share knowledge, especially on evaluation of procurement
- Provide more nutrition knowledge and support within the procurement process
- Incentivise to produce more locally, reduce food miles, and reduce carbon footprint. Build into future contracts.

HEALTHY DIET

- **A national database of nutritionally analysed recipes – sharing across sectors**
- Reduce the barriers/constraints to people eating a healthy, nutritious diet. Knowledge is high: how do we shift behaviour? Share best practice
- Operational staff should advise on what works
- Food production for the public sector (eg cook/chill - cook/freeze) needs to be developed further in Scotland

FUNDING

- Protect budgets for public sector catering from inflation costs, also costs for going local and costs of crop losses
- Increased funding for patient meals per day should be more than the current minimum
- Redress the balance between the priority given to food and health in Scotland and funding/resources given to public sector catering

FOOD POLICY

- Offer incentives, training and support to help implementation of actions within a food policy
- Implement national food/nutrition standards for the public sector
- Local authority education departments should consider how they can give greater priority to promoting healthy eating at school

HOSPITALS

- Every hospital should include a food production kitchen wherever possible
- Food is a basic human right. Every patient should receive high quality, nutritional care
- NHS Board level commitment and implementation of the QIS food, fluid and nutritional care in hospitals

MISCELLANEOUS

- **Joined up thinking in partnership: LA's, NHS, Prisons and Universities**

- **Skills for life – operational training with a high level of commitment**
- Promote the introduction of protected meal times
- Ban the word 'healthy', instead focus on 'balanced, nutritious, Scottish, tasty'
- Catering budgets should be inflation protected and include insurance for price increases i.e. poor crop etc.

Working Throughout The Food Chain

RETAIL

- **Give positive recognition to retailers who are supporting healthy living and get buy-in from those who are not supporting this objective**
- **Build innovation and skills in the food & drink industry to support product innovation, reformulation, and high value, high quality products.**
- Use the purchasing power of the public sector for food procurement: recognizing that initially will cost more to buy fresh and sustainable
- Give/Allow the public sector the mandate to buy sustainably (EU procurement issues?)

CAREERS

- **Government re-investment in food skills in schools, and infrastructure in FE & Higher sector – building kitchens and labs in colleges once again.**

LIFE

- Promotion of cookery within schools from nursery to secondary. This would include an appreciation of the whole process of food production. Dedicated sustainable funding.

COMMUNITY

- More support for work being done in the most deprived areas, and a realisation that the timescale for making a difference is generational rather than political
- Community projects require funding to sustain them

Tackling the Obesogenic Environment

MARKETING

- Marketing to understand and appreciate consequences of food (and lifestyle) choice.
- Government should launch a hard hitting campaign showing how an obese bodyweight leads to increased risk of chronic disease (Type II diabetes, cancer, etc.). It should focus on reducing portion size.
- **Positive social marketing** to be used to publicise and develop a network of basic cookery skills and courses for communities.
- Address 'zoning' around schools, vans, and fast food outlets to support Health Promoting Schools. Ensure school boards and PTA's uphold healthy eating and HPS messages.
- Skill development: Provide a consumer guide to what/where/how to buy and what/how to make healthy choices

EDUCATION

- **Money, facilities, people and opportunity to equip adults and children with food skills.**
- Educate people more about the link between what they eat and physical/mental health.
- Compulsory cookery classes in schools to give all children basic life skills
- Ensure all children get basic food preparation skills at school along with knowledge to make healthy food choices.
- Create 'Growwell' – a community development approach to helping kids and their parents develop the confidence, skills, and desire to achieve a healthier lifestyle. Money is needed!
- Cooking classes/road shows for both children and adults showing how inexpensive and nutritious healthy eating/meals can be.
- Need to put practical food skills into school – both primary and secondary, to be compulsorily part of the curriculum – this would enable all children leaving school to be able to cook healthily meals for their families.
- Fund cooking skills, knowledge of nutrition, and how to make basic consumer choices in schools, clubs communities, etc. using local produce/producers.
- Redesign of towns and cities to include a ring of farms growing organic fruit and vegetables and allotments and community gardens where people can learn to grow, cook, and process local food. These can supply fresh, local, organic food to schools, nurseries, prisons & hospitals. Access to farms by walking and cycleways as well as by public transport to reconnect people with the way food is produced and recreate a positive local food culture.

RESEARCH

- **Research new ways to sell positive nutrition.**
- **Research and recommend methods for incentivising access and choice of healthy food.**
- Better measures of the diet in the community so we can see how and when we need to act and if we are improving diet.
- Develop a way of pricing food so it reflects the true cost of production, transport, and health effects (all externalities) so that healthy, local, organic food becomes the cheapest food to buy, so addressing inequalities and sustainability at the same time.

LEGISLATION

- **Require legislation to make food healthier for people who won't do it themselves.**
- Local authorities having the power to intervene in school children's nutrition, i.e. internal meals, removing fast food outlets from school boundaries, mobile vans, etc. Encouraging a stronger school-home link, i.e. parent involvement in meal input.
- Supply/advertising of less 'healthy' foods directed at children. Can Government influence this? Or can we get agencies to put on pressure?

FOOD ACCESS

- **Increase availability of and access to practical food skills programmes in shopping, cooking, and budgeting.**
- Better access to healthy foods in poorer communities. Subsidies for healthy foods.
- Positive (not negative) health messages – Eat Well, feel better
- To provide healthy food vouchers to those living in deprived communities. Similar to Healthy Start vouchers for pregnant and new mothers. (This is a recommendation in a recent Food Poverty report for Ireland www.phaic.org)