eating for health
Co-ordinated action, improved communication and leadership for Scottish Food and Health policy

MEETING THE CHALLENGE 2004

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**Introduction**

Scotland’s health is improving but not fast enough and major health inequalities persist in our society. *Improving Health in Scotland: The Challenge* which was published in March 2003, sought to promote a step-change in health improvement – by both society and individuals – by setting out a strategic framework to support the delivery of a more rapid rate of health improvement. *The Challenge* focuses actions around four themes: early years; teenage transition; the workplace; and communities. Healthy eating is one of seven special focus programmes.

Good nutrition can help to reduce the prevalence of many common diseases in Scotland today including cardiovascular disease, cancer, diabetes, obesity and osteoporosis. *Food and Health in Europe: a new basis for action* (2004) highlights the urgent need for integrated, multisectoral food and nutrition policies, encouraging the sustainable production of safe food of high nutritional quality. The case for improving the Scottish diet is well established and has been operationalised through a leading multisectoral, life course approach laid out in the Scottish Diet Action Plan (SDAP) (1996). The implementation of the SDAP is a key action identified with *The Challenge*. The SDAP builds upon an strong evidence-base with actions directed towards communications, creating supportive environments and policy change.

A challenge for food and health policy is that policies in many sectors – ranging from agriculture, food processing, manufacturing and retailing, to catering and advertising all shape the availability, affordability and eventual consumption of food. Policies must be well co-ordinated to give public health adequate priority across all sectors.

Communication is also challenging. As the recent Regional Food and Health strategy seminar (2003) highlighted, work at national, regional and local levels will be strengthened by enhanced consultation and communication. Better communication will improve learning, networking and partnership building between the wide array of people involved in improving Scotland’s diet so that we can achieve less talking and more action through more effective discussion and listening.

The WHO Global strategy on diet, physical activity and health (2004), identifies the leadership role of government in initiating and developing food and health policy and in ensuring its implementation. Health Ministers have an essential responsibility for coordinating and facilitating the contribution of other departments and government agencies. Through the new structures and plans contained in this report Scottish Ministers seek to offer strong leadership, building upon existing structures, processes and partnerships to deliver improved diet and health and create a firm platform to further develop food and health policy in Scotland and respond to the ongoing Health Improvement Challenge.

**Gillian Kynoch**
Scottish Food and Health Co-ordinator
The Purpose of This Document

- *Eating for Health – meeting the Challenge* is a strategic framework for Food and Health, developed through dialogue and discussion with partner organisations that builds upon the key actions outlined in *Improving Health in Scotland – the Challenge*.

- The strategic framework will be used as a basis for developing further food and health policy and to guide national and local food and health action plans. The framework should inform and co-ordinate work between partner agencies, local government and communities.

- This framework aims to add to the Scottish Diet Action Plan (SDAP) (1996) by establishing a joint implementation strategy with delivery partners for its further and ongoing implementation.

- The paper gives a snap shot of the wealth of current work underway across the country to implement the SDAP ahead of next year’s planned summit report.

- The paper also announces new leadership, communication and consultation structures in the form of a Scottish Food and Health Council and *Healthy Living Food and Health Alliance*.

- The framework will act as a bridge between the SDAP (1996) and emerging future strategic directions led by the new Food and Health Council.

- Over the next year the Scottish Executive will use this strategic framework as the basis of an ongoing and active dialogue and debate with the members of the *Healthy Living Food and Health Alliance* in order to take forward an invigorated and focused effort.
Co-ordinated Action, Improved Communication and Leadership for Scottish Food and Health Policy

1. In order to ensure continued co-ordinated action and commitment towards food policy and health and to strengthen the work of the Scottish Food and Health Co-ordinator, the Scottish Executive intends to:

- engage widely on a strategic framework which will develop further food and health policy to guide national and local food and health action plans. The framework should inform and co-ordinate work between partner agencies, local government and communities;
- deliver a cross-cutting annual Food and Health action plan in support of this strategic approach;
- establish a Scottish Food and Health Council with a Ministerial lead focused on formulating, delivering and reporting on an annual action plan. The Food Champions group will merge with the Council. This will be a publicly appointed body of key stakeholders and experts together with heads of relevant Scottish Executive departments and the Food Standards Agency Scotland (FSA Scotland);
- join with FSA Scotland to establish a national Healthyliving Food and Health Alliance, to ensure strong and effective engagement and interactive communication with all key sectors, including food retailers and manufacturers, stakeholders and networks, facilitating information sharing, consultation, evidence gathering and partnership development;

Strategic Framework for Food and Health

2. The Strategic Framework for Food and Health has been developed through dialogue and discussion with partner organisations and builds upon the key actions outlined in Improving Health in Scotland – the Challenge. Over the next year the Scottish Executive will use this strategic framework as the basis of an ongoing and active consultation with the members of the Healthyliving Food and Health Alliance through a series of structured events.

This framework aims to add to the Scottish Diet Action Plan (SDAP) (1996) by establishing a joint implementation strategy with delivery partners for its further and ongoing implementation.

The framework will act as a bridge between the SDAP (1996) and emerging future strategic directions lead by the Food and Health Council.

3. It is intended that the strategic framework will be used:

- to build on the national key actions to promote healthy eating outlined in Improving Health in Scotland – the Challenge (2003);
- to integrate cross-cutting elements of Scottish Executive food policy and the strategies of key partners such as FSA Scotland and NHS Health Scotland;
- as an adjunct to existing guidance to public sector bodies, including local government and NHS Health Boards, to assist them in developing local and regional nutrition action plans;
- to stimulate all sectors to play their full role in the achievement of the Scottish Dietary Targets and guide the activity of the Scottish Food and Health Alliance.

Policy Background


5. In 1994 a series of targets for dietary improvement in Scotland for 2005 were announced.

6. In 1995 the Scottish Diet Action Group was set up with the task of preparing an Action Plan.

7. The Scottish Diet Action Plan (SDAP), Eating for Health (1996), secured widespread agreement on policies, priorities and interventions through provision of a framework of action to improve diet and make progress towards achieving the dietary targets.

8. The Foods Standards Agency – A Force for Change (1998) established the FSA, responsible for protecting public health by promoting a safer food supply and ensuring that consumers have the information they need to be able to choose a safe and healthy diet. Responsibility for national nutrition policy in Scotland is shared between the Scottish Executive Health Department and FSA Scotland, working in partnership to fulfil their interdependent roles in relation to health promotion and nutrition.

9. The continuing implementation of the SDAP was confirmed in the White Paper, Towards a Healthier Scotland (February 1999) and endorsed by the Scottish Parliament with the publication of Our National Health; a plan for action, a plan for change (2000).
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10. Dietary improvement is not achievable without tackling the poor life circumstances which underpin so much of Scotland’s poor dietary and nutritional status. The implementation of the SDAP, therefore, is being taken forward in context of the Executive’s wider policies and structures to promote social justice as set out in Social Justice: A Scotland Where Everyone Matters.

11. A range of new programmes, from the New Deal initiatives and Social Inclusion Partnerships through to Family Centres and Integrated Community Schools, to tackle poverty and deprivation are being taken forward. Some contain direct dietary initiatives as a key health component. In others, the beneficial impact, for example, of enhanced employment, improved educational opportunities and better transport services can be predicted to have a major impact upon diet.

12. This work is strongly supported by the strategic objectives of FSA Scotland which, in the Scottish context, includes:

- achieving an improvement in the health of the Scottish population by encouraging and facilitating the adoption by the population of a healthy, balanced diet;
- reducing inequalities by enabling and encouraging the disadvantaged and vulnerable to improve their diets.

13. Scottish Ministers appointed a Food and Health Co-ordinator in 2000 to take forward the further implementation of the SDAP with the support of Scottish Executive, NHS Health Scotland and FSA Scotland, including working with partner organisations, stakeholders and the food industry, to ensure the achievement of the key elements within a joint implementation strategy.

The Scottish Diet Action Plan

14. The SDAP made 71 recommendations targeted towards nine key areas:

- Primary producers
- Manufacturers and producers
- Retail sector
- Community action
- Pregnancy, pre-school children and school students
- Caterers
- National Health Service
- Local authorities
- Getting the message across

These recommendations:

- acknowledged that improving Scotland’s diet would be a lengthy and complex task;
- confirmed the Scottish Dietary Targets for 2005, including targets for breastfeeding rates;
- identified that the most immediate and attainable benefit to the Scottish diet would be doubling consumption of fruit, vegetables and an increase in complex carbohydrates, for example potatoes, wholemeal bread and cereals;
- highlighted the key interests in a position to exercise major influence on the Scottish diet and recommended action for each;
- defined the barriers to adopting a healthier diet in terms of food affordability, availability, culture and skills;
- set the first task as ensuring that the Scottish population understood clearly the need for change.

The recent report of the Joint WHO/FAO Expert Consultation on Diet, Nutrition and the Prevention of Chronic Disease (2003) provided updated evidence and recommendations on population nutrient intakes which confirmed the ongoing relevance of the Scottish Dietary Targets.

15. The Scottish Executive will report on the progress made to implement the SDAP recommendations, and upon how Scotland’s diet measures up against the Scottish Dietary Targets, next year in 2005.

The Scottish Dietary Targets for 2005 are in Annex A.

Integration with the Health Improvement Challenge

16. A wider framework for action to improving the health of the people of Scotland is laid out in Improving Health in Scotland – the Challenge (2003). This includes work on all the determinants of health. A step-change in health improvement – by both society and individuals – is sought by setting out a strategic framework to support the delivery of a more rapid rate of health improvement. The Challenge focuses actions around four themes: early years; teenage transition; the workplace; and communities, and seven special focus programmes: physical activity; healthy eating, smoking; alcohol; mental health and well-being; health and homelessness; and sexual health.
17. Tackling health inequalities is an overarching policy direction within *The Challenge* and *Towards a Healthier Scotland* and work is in progress to develop and sharpen our focus on inequalities and to move towards an action plan which can be endorsed by all partners.

18. Three key actions have been identified to promote healthy eating as part of *The Challenge*:

1. Implement the next phase of the Scottish Diet Action Plan to the extent that it has a measurable, incremental impact in Scotland each year to 2010.

2. Support the integrated programme, launched January 2003, of communication and public education, in the context of the wider health improvement agenda, to increase demand for, confidence in, and skills for, healthy eating.

3. Measure food consumption between 2003 and 2010 to monitor progress towards the targets set out in the Scottish Diet Action Plan using the Scottish Health Survey.

19. In the next phase of the SDAP implementation, action will focus on the key targets of increasing consumption of fruit and vegetables and upon reducing consumption of fat, particularly saturated fat.

The key conceptual stages in the next phase of work will be to:

- increase the demand for healthy food;
- supply that demand for healthy food;
- provide support, education and skill development to allow people to break through the barriers of food cost and availability, and the negative impact of culture and lack of food skills.

20. Much of this work will be undertaken at both a local and national level in Scotland, but there will also be wider interactions because of the global nature of the food industry. This highlights the importance of effective inter and intra-government links.

21. Public information and skills development will only be successful if all sectors of Scottish society have access to healthier food choices in the context of their day to day lives. Therefore work with communities, particularly those characterised by social exclusion, will be essential to support the overall strategy.

22. A great deal of activity to combat poor diet is being taken forward through highly productive, smaller initiatives at community and local level involving the voluntary and community sectors, often driven by communities themselves and supported by community planning partnerships (CPPs) and social inclusion partnership (SIPs). This effort is increasingly being strengthened through joint planning by NHS Boards, local authorities and CPPs.

23. Local and national strategies will be required to address the multiple barriers to accessing a healthier diet, expressed in the Scottish Diet Action Plan in terms of food affordability, availability, culture and skills.
strategic framework

24. As a basis for developing the necessary co-ordination for Food and Health policies and the setting of key priorities, a food chain approach has been utilised. Each of the following objectives is set for action throughout the food chain to achieve the Scottish Dietary Targets:

1. promote the consumption of healthy diet and food choices;
2. promote the preparation and provision of meals which offer a balanced diet;
3. increase access to healthier food choices, particularly in low-income and rural areas;
4. work with the food manufacturing, processing and retailing industries to further develop and promote healthier food choices;
5. ensure that primary food producers at both national and local level contribute fully to the achievement of the Scottish Dietary Targets.
1. Promote the consumption of a healthy diet and food choices by:

- implementing a marketing strategy to increase consumer demand for healthier eating;
- providing reliable, accessible information about food, nutrition and health;
- providing accessible product information to consumers in retail and food service settings;
- ensuring that the marketing strategy supports a comprehensive health education programme and initiatives that address barriers in all settings;
- ensuring a whole-school approach to food related education in schools and pre-school education;
- promoting and increasing breastfeeding and improving infant feeding practice.
2. **Promote the preparation and provision of balanced meals by:**

- working with the public and private sector catering services and companies to increase the availability of healthy food choices and promote breastfeeding in public places;

- implementing and monitoring nutritional standards for the public sector, for example school meals, the NHS, local authorities and prisons to ensure that the public sector is exemplary in its food provision;

- developing and implementing nutrition education for the catering sector;

- developing and promoting award schemes for the catering and food service industry;

- provision of training and education in all food sectors and settings.
3. Increase access to healthier food choices, particularly in low income and rural areas, addressing availability, affordability, culture and skills by:

- community and local planning processes, and local nutrition action plans;
- addressing issues of access and retailing policies and practices;
- supporting community food initiatives and locally-based projects;
- reviewing targeted food distribution programmes.
4. Work with the food manufacturing, processing and retailing industries to further develop and make available, healthier food choices by:

- harnessing the food-related science base to support product development and food technology;
- optimising knowledge and technology transfer;
- setting product specifications for the public sector;
- assisting in the marketing of food choices that support the Scottish Dietary Targets;
- leveraging the food industry in Scotland and the UK to contribute its fullest potential to the achievement of the Scottish Dietary Targets.
5. Ensure that primary food producers are contributing their full part to the achievement of the Scottish Dietary Targets by:

- working with all sectors of Scottish agriculture and fisheries to promote and develop the sustained availability of core Scottish produce as part of a healthy diet;
- developing and promoting the potential of the local food sector;
- prioritising current grant schemes in favour of projects which support the Scottish Dietary Targets as well as adding value to Scottish produce;
- supporting through research the development of produce which contributes to the further implementation of the SDAP.
Public Communication

The implementation of the SDAP is being supported by an integrated programme of communication and public education, to increase demand for, confidence in, and skills for healthy eating and to promote increased physical activity within the context of the wider health improvement agenda.

26. The components of this programme comprise of:

1. The Healthyliving campaign: a multi-media, multi-component approach, communicating information, positive messages and skills about healthy eating and physical activity. This includes TV and radio advertising, programming, written materials and a health advice and information telephone service and web site. The campaign, supported by a PR strategy, is delivered by the Scottish Executive in partnership with NHS Health Scotland.

2. A public information and training approach, delivered by NHS Health Scotland, supports the Healthyliving campaign in a variety of settings: including workplace, schools, the NHS, and communities, together with food retailing outlets. Clear, consistent messages are given high profile and linked to ongoing health promotion activities undertaken locally by health boards and local government and by NHS Health Scotland.

3. Working in partnership with the private and public sector, the national Healthyliving brand is being embedded into local work, initiatives, projects, and promotions. The adoption of the brand by partners and organisations working together to implement the SDAP and the Physical Activity Strategy together with emerging and existing Health Improvement policies on a range of issues, will give added value and cohesion to, and recognition of, all efforts and contributions. Moreover this will help ensure that messages conveyed and in turn received by the public are clear, consistent and mutually reinforcing.

Evaluation and Monitoring

27. NHS Health Scotland has been charged with co-ordinating the evaluation of the wider health improvement policy, as set out in Improving Health in Scotland: the Challenge (2003). As part of this process, NHS Health Scotland is taking the lead in the ongoing development and implementation of the SDAP evaluation and monitoring strategy. This complex task will be complemented by the measurement of food consumption trends between 1996 and 2010, monitoring progress towards the achievement of the Scottish Dietary Targets.

In addition to monitoring the implementation process, evaluation will also look at population reach, programme results and impacts, and progress in reaching intermediate and longer term outcomes.

A Working Group on monitoring progress towards the Scottish Dietary Targets has been set up. The group is made up of academic, research and health experts and will provide advice to the Scottish Executive and FSA Scotland. The group will report in the summer of 2004.

The Scottish Executive will use these findings to report on the progress made to implement the SDAP recommendations, and upon how Scotland’s diet measures up against the Scottish Dietary Targets, next year in 2005.

Food and Health Annual Action Plan

28. The Food and Health Council will deliver a cross cutting annual action plan for Food and Health each year in support of the wider health improvement strategy.

The Food and Health Action Plan for 2004/05 can be found in Annex B.

In summary, this year the Scottish Executive intends to:

1. Develop a stronger interface with the Food Industry with an aim to influence particularly food composition and labelling.

2. Use Public Sector providers to demonstrate an exemplar role in the provision of healthier choices and to support the production of healthier foods

3. Launch new Scottish Catering Awards, making it easier for people eating out to know where to go for healthier food and to drive up standards throughout the catering industry.

4. Build upon the work under way to implement Hungry for Success: A Whole School Approach to School Meals in Scotland (2003) by further supporting schools to teach children how to eat a healthier diet.

5. Ensure that all food and drink marketing and advertising aimed directly at children works with us to promote healthier lifestyles rather than against us.

6. Ensure continued coordinated action and commitment towards food and health policy through the establishment of new communication and leadership structures.
7. Deliver a clear and sustained health message on healthy eating to the public through the Healthyliving campaign.

8. Focus national and local food and nutrition strategies to contribute to tackling health inequality and particularly upon improving access to a healthier diet.

9. Monitor, evaluate and report upon the impact of food and health policies.

10. Combat the rise of obesity and overweight within the population through an integrated approach with diet and physical activity.

Food and Health Council

29. A Scottish Food and Health Council will be formed in order to provide leadership and expert advice and to integrate cross-cutting elements of Scottish Executive Food and Health policy and the strategies of FSA Scotland.

30. The Food and Health Council will comprise of the heads of key policy areas within the Scottish Executive, FSA Scotland, appointed key experts and stakeholders. The Council will be chaired by the Deputy Health Minister responsible for Health Improvement and, through him, link directly to the Joint Ministerial Group for Health Improvement. The Council will have a focus on delivery and will be responsible for the planning and implementation of an annual Scottish Food and Health Action Plan and offering leadership to Food and Health policies and strategies in Scotland.

Healthyliving Food and Health Alliance

31. FSA Scotland and the Scottish Executive Health Department will jointly establish a new Scottish Healthyliving Food and Health Alliance to support the further implementation of the Scottish Diet Action Plan (SDAP) and emerging Food and Health policies and strategies.

32. The Alliance will be open to all and developed to fully represent the breadth of interests involved in implementing a multi-sectoral, food chain based, food and health strategy. There will be an emphasis on inclusion and wide engagement, seeking to involve people broadly, across all sectors, stakeholder groups and networks as well as individuals.

Objectives

33. The Alliance will have clearly defined functions and processes which will be taken forward within the extent of the individual remits of the organisations involved.

The objectives are to:

- provide a multi-sectoral forum for communication, dialogue and consultation;
- contribute to the definition and focus of national policy;
- support delivery of policy objectives within a national and inclusive structure across Scotland;
- facilitate a strategic programme of consultation, information sharing, evidence gathering and partnership development to effectively capture and disseminate the extent of implementation of the SDAP; and
- provide an opportunity to network and develop partnerships.

34. The Alliance will be supported and administered jointly by the Scottish Executive Health Department and FSA Scotland.

Programme of activity

35. The Alliance will encourage networking within sectors and a more integrated approach between sectors. Members will be given the opportunity through topic based workshops to share information and good practice and feed into Scottish policy development and the work of the Food and Health Council. An ongoing program of mini-forums or workshops reviewing progress and actions in the key priority areas outlined in the strategic framework is planned.

36. Communication within the Alliance will be supported by a section on the Scottish Executive website designated to Food and Health Policy and by a regular Alliance newsletter. Members of the Alliance will receive regular updates from the Scottish Executive, FSA Scotland and partner organisations as well as communications on the work of the Food and Health Council.

Interaction between the Food and Health Council and the Healthyliving Food and Health Alliance

37. The Council will inform the strategic direction of Food and Health policy and monitor the delivery of policy and the annual action plan. The inputs of the wider Alliance received through communication channels, workshops and events will be fed back to the Council and in this way facilitate the involvement of the wider Alliance in Scottish policy making. Members of the Council will be encouraged to actively participate in the activities of the wider Alliance.
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Annex A – Examples of Action

Examples of Action to Promote the Consumption of a Healthy Diet and Food Choices

**BREASTFEEDING**

In the early 1990s Scotland’s breastfeeding rates were among the lowest in Western Europe. The SDAP included recommendations for action and a target for breastfeeding rates. Breastfeeding initiation and duration are increasing in Scotland. The proportion of women who start breastfeeding after the birth of their baby has increased from 50% in 1990 to 63% in 2000. The proportion of mothers continuing to breastfeed for up to 6 weeks has increased by 33% over a 10-year period to 40% in 2000. Mothers in Scotland are more likely than mothers in other UK countries to continue breastfeeding at all stages from 6 weeks to 9 months.

The Scottish Executive seeks to co-ordinate and stimulate support for breastfeeding through the Scottish Breastfeeding Group and the appointment of a National Breastfeeding Adviser (NBA). The NBA has worked with NHS Boards to stimulate the development of strategies to support breastfeeding. Thirteen of the 15 NHS Boards now have a breastfeeding strategy. This work has been supported by NHS Health Scotland through research, training, resource development, and a communications and health education package including TV advertising.

Scotland now has the highest level of participation in the UNICEF UK Baby Friendly Initiative of any UK country (more than 85%). 47% of Scottish maternity units have achieved the UNICEF award for good practice in support of breastfeeding whilst 28% have achieved the Certificate of Commitment. Scotland’s first UNICEF community award was achieved in December 2002. There are nine breastfeeding peer support programmes across Scotland and 150 breastfeeding support groups; breastfeeding mothers are benefiting from improved practice and innovative forms of support.

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Further information is available at: [www.show.scot.nhs.uk/breastfeed](http://www.show.scot.nhs.uk/breastfeed) or [www.hebs.com/healthscotland](http://www.hebs.com/healthscotland)
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ADVENTURES IN FOODLAND – IDEAS FOR MAKING FOOD FUN FROM AN EARLY AGE

Childcare staff can help children develop an appreciation for a wide variety of foods, encourage active play and help them avoid sugary foods that do harm to their teeth.

Adventures in Foodland has been developed by NHS Health Scotland and other key partners, as a comprehensive guide to help child carers encourage young children to develop a taste for healthy eating, promote oral health and become more physically active. The pack has three different elements:

• food and facts – a practical guide on nutrition, oral health and physical activity;
• activities – introduces a range of fun activities to involve children and their carers;
• a training booklet to help child carers get the most out of the pack and to support group training exercises.

NHS Health Scotland are running a number of Train the Trainers sessions on the use of Adventures in Foodland who will in turn deliver local workshops in the future. The pack has been distributed widely to childminders, playgroups, nurseries, Sure Start Projects, health promotion departments, dietetic departments and health promotion resource centres.

Further information is available at www.hebs.com/healthscotland

SCOTTISH NUTRITION AND DIET RESOURCES INITIATIVE

The Scottish Nutrition and Diet Resources Initiative (SNDRI) was set up in March 2001, with funding from the Scottish Executive.

The Initiative:

• produces cost-effective materials for health professionals that are well-researched, scientifically-based, peer-reviewed, pre-tested with patients, and free from commercial bias;
• delivers a quality-controlled process for developing and pre-testing client-centred materials, producing new and innovative diet materials;
• produces educational materials linked with the national priorities of cardiovascular disease, cancer and mental health.

Materials are designed at different levels of complexity, meeting the needs of both professionals and clients requiring nutrition and dietary advice.

The information is tailored to suit the individual, the professional group, or the client group on a regional basis. Emphasis is given to the needs of low income and minorities as appropriate.

The project has produced 31 new resources to help meet the national priorities and targets, including childhood obesity, coronary heart disease, cancer, diabetes and for those with learning disabilities and language difficulties. SNDRI works with many partners and is governed by a multi-agency Steering Group with representatives from many different organisations and professions, including NHS Health Scotland, Nutrition and Dietetic Departments, Royal Pharmaceutical Society of Great Britain, the FSA, Health Promotion and General Practice.

Further information is available at www.sndri.gcal.ac.uk

The Consumer
Examples of Action to Promote the Consumption of a Healthy Diet and Food Choices

HUNGRY FOR SUCCESS

The Scottish Executive has invested £63.5 million over 3 years in a revitalised school meals service in Scotland. Nutritional standards have been developed for school meals and these will be enforced and monitored by performance management systems for schools. These are set out in Hungry for Success: A Whole School Approach to School Meals in Scotland (2003). Crucially, this initiative will be integrated into a health promoting school approach and will create a supportive environment for healthier living (of which healthy eating is a part) in schools. Children will be provided with healthier food choices, supportive environments and information and support for healthy food choices.

Measures include:
- free fruit for all pupils in primary 1 and 2
- new nutrient standards for school meals
- standard portion sizes and product specifications
- provision of drinking water
- actions to incentivise uptake of free school meal entitlement
- improved facilities in dining rooms.

The recommendations are based upon seven underlying principles:
- creating a Positive whole school/whole child ethos
- partnership working
- pupil consultation
- eliminating stigma
- managing the process
- influencing choice
- incentives to improve general uptake.

The approach includes a detailed strategy for monitoring progress and performance and support for schools and education authorities to achieve the standards. As part of this strategy, monitoring is being built into HM Inspectorate of Education school inspections from August 2004. Target nutrient specifications for manufactured products have been set by FSA Scotland to assist caterers to achieve the nutrient standards and to drive up food quality within this sector. Menu planning and analysis software (H4S) is being developed ready for release in August 2004.

The full report can be found at: [www.scotland.gov.uk/library5/education/hfs-00.asp](http://www.scotland.gov.uk/library5/education/hfs-00.asp)
SCOTTISH HEALTHY CHOICES AWARD SCHEME

This is a national healthy eating award scheme, funded by the Scottish Executive and managed by the Scottish Consumer Council, following a direct recommendation in the SDAP. The award aims to provide a strategic focus for:

- the development of locally-based award schemes;
- to encourage and support interagency working among health boards, local authorities, retailers, consumer groups and caterers;
- to encourage caterers to provide healthy choices; to influence consumer awareness of healthy choices;
- to stimulate interest in and demand for healthy foods.

The award is open to all eating establishments in Scotland and is based on comprehensive criteria for healthy choices, food safety and hygiene, and provision for non-smoking areas and support for mothers wishing to breast feed on the premises. The award is delivered via the majority of NHS Boards across Scotland with input from local authority environmental services. It has been successful in encouraging bulk applications among private and public sector mass caterers and suppliers, including those who provide school meals services.

Further information is available at: www.shcas.co.uk
Examples of Action to Increase Access to Healthier Food Choices

**SCOTTISH COMMUNITY DIET PROJECT**

The Scottish Community Diet Project (SCDP) is funded by the Scottish Executive Health Department following a recommendation in the Scottish Diet Action Plan. The over-riding aim of the SCDP is to improve Scotland’s food and health. They do this by supporting work within low-income communities that improves access to and take-up of a healthy diet.

SCDP work with individuals, groups and agencies at local, regional and national levels, providing networking, capacity building, practice and policy development.

They build upon the valuable experience, understanding, skills and knowledge within Scotland’s communities and their unique contribution to developing and delivering policy and practice at all levels.

SCDP help support low-income communities to:

- identify barriers to a healthy balanced diet;
- develop local responses to addressing them;
- highlight where actions at other levels, or in other sectors, are required.

Major obstacles being addressed by community-based initiatives are:

**Availability** – increasing access to fruit and vegetables of an acceptable quality and cost.

**Affordability** – tackling not only the cost of shopping but of getting to the shops.

**Skills** – improving confidence and skills in cooking and shopping.

**Culture** – overcoming ingrained habits and attitudes.

Through their activities they encourage and enable a contribution by Scotland’s low-income communities to the government’s strategies on health improvement, education, agriculture, social justice and lifelong learning.

The project’s activities include:

- funding community activity through a small grants scheme;
- supplying a route for low income communities to feed their experiences and views into policy-making through organisation of conferences and seminars specially aimed at these groups;
- running capacity building training events covering topics such as: how to carry out research; running a community food initiative; and good practice in participation;
- dissemination of good practice through promotion of networking via study tours for community groups and a regular newsletter;
- publishing tool kits, for example on breakfast clubs and community gardening.

Further information is available at: [www.dietproject.org.uk](http://www.dietproject.org.uk)
Addressing Availability, Affordability, Culture and Skills

BREAKFAST CLUBS

Breakfast Clubs exist in many schools and community venues throughout Scotland. They are set up for a variety of reasons, the main one being to ensure that children start the day with a healthy breakfast. As well as benefiting children’s health, breakfast clubs can also help to improve children’s attendance, punctuality and attentiveness at school. Research in Scotland suggests that breakfast clubs are more sustainable when the social aspects are well developed and integrated with food provision.

Good practice guidelines for Breakfast Clubs have been produced based on the experience of breakfast clubs around the country. Breakfast Clubs: A Head Start (Scottish Community Diet Project 2001) is a step by step guide to the ups and downs of setting up and running a Breakfast Club and includes Healthy Breakfast guidelines. Breakfast Clubs are currently funded in a variety of ways. Traditionally, funding has been granted by education authorities and Health Boards to support programmes, mainly in Social Inclusion Partnership areas. In November 2001, the Scottish Executive launched a new strategic approach to breakfast service provision in Scotland and provided for a new Breakfast Service Grant to expand services targeted on vulnerable children most in need of a breakfast service.

EDINBURGH COMMUNITY FOOD INITIATIVE (ECFI)

ECFI is a well established Edinburgh-wide food initiative. It is funded by and works closely with the City Council and the Lothian National Health Service Board. It supports and delivers a range of food initiatives across the city including:

- **Snack Attack** – Which delivers thousands of pieces of fruit to all the city’s primary schools.
- **PIP** – Which works with 40 of the city’s nurseries to promote health to children aged 3 to 5 and their families.
- **Sure Start** – which works in 12 children and family centres across the city.

ECFI also support a network of 13 independent local food co-operatives offering affordable fruit and vegetables, backed up with help ranging from initial start up support, ongoing help with business processes and a full range of health promotion advice.

ECFI is a Registered Scottish Charity and a Company limited by Guarantee with a six-member Board of directors, a manager who reports to the Board and 13 paid staff who report directly to the Manager. In addition to the Board there are also five special advisors representing the group’s funders. There is also a health promotion specialist who reports directly to the Manager on secondment from the Lothian National Health Service Board.

To operate in accordance with their charitable aims ECFI supplies mainly fresh fruit and vegetables and does not compete with high-street grocers or supermarkets. The intention is to provide disadvantaged communities and groups with affordable fruit and vegetables that they would otherwise not have access to.

ECFI has recently begun sourcing vegetable supplies from local charities involved in food-growing initiatives such as the Edinburgh Cyrenians, this provides them with a secure market and reasonable prices for their produce while providing ECFI with fresh local produce for their customers. They are also looking at establishing a broader purchase and supply network with other groups of a similar nature.

Contact ecfi@madasafish.com for more information.

Contact ecfi@madasafish.com for more information.
Examples of Action to Increase Access to Healthier Food Choices

FOOD IN FOCUS FROM PLOUGH TO PLATE:
A regional conference to inform a local food and health strategy

The Grampian Food and Health Action Plan is being developed as part of Grampian’s overall Health Improvement Strategy. A regional conference was held to consult widely on the best way forward and fully engage with organisations and individuals within the food sector.

It provided a unique networking opportunity to encourage local partnership working and successfully built a joint ownership of a food and health framework for Grampian.

The conference was interactive and workshop-based, organised jointly by NHS Grampian and the Scottish Community Diet Project. Voice was given to those with the potential to influence a positive change in eating habits and all the key interests highlighted in the SDAP were represented at the event.

Some key themes emerged:

- listen to the ideas and concerns of communities
- positively influence the health of young people in schools
- link food producers and consumers
- improve the availability of local produce
- give caterers a clear responsibility for providing healthy food
- involve all sectors of the food chain
- improve information about access to funding for food initiatives.

The action plan, informed by these themes, will be taken forward in partnership with key individuals and organisations. It is anticipated that working groups will be set up and links made to existing services, groups and networks to determine specific actions and timescales. The revised plan will provide a clear framework for future action.

In Grampian the innovative appointment of a Food Access Co-ordinator supports the awareness, implementation, monitoring and ongoing strategic development of the food access and poverty aspects of the Grampian Food and Health Action Plan.

Find the conference report at

and general information on work underway in Grampian at
www.health-promotions.com
THE FOOD TRAIN

The Food Train is a local voluntary and charity organisation, which provides a grocery shopping home delivery service for older people, housebound and disabled people, across Dumfries and Galloway. It receives funding from the European Union, Scottish Enterprise Dumfries and Galloway and the Better Neighbourhood Services Fund.

The Food Train started in 1995 in Dumfries with a handful of customers and volunteers and is growing rapidly across the region.

The aim is to provide a low cost home shopping delivery service for older people, housebound and disabled, enabling customers to:

- obtain a wide variety of food and household goods at reasonable prices
- have their shopping delivered direct weekly
- enjoy a healthier diet
- have regular contact with people
- remain in the comfort of their own home within their own community.

Volunteers collect shopping lists, and take the orders to Somerfield, Safeway, SPAR and Farmfoods where they are made up ready for delivery. The shopping is delivered and unpacked. Customers pay the cost of the shopping and a small delivery charge. The service can be used whenever it is needed: long term or short term to cover periods of illness or recovery. There is no minimum order size. Deliveries are made 52 weeks of the year and all volunteers are checked through Disclosure Scotland. The service is approved as a provider of domiciliary care by Dumfries and Galloway Social Services Department.

Further information is available at: [http://thefoodtrain.co.uk/dumfries.html](http://thefoodtrain.co.uk/dumfries.html)
Examples of Action of Work with Food Manufacturers, Processors and Retailers to Make Available Healthier Food Choices

**SCOTTISH FOOD AND DRINK**

Scottish Food and Drink is an industry-led strategy and action plan. The Scottish food and drink cluster has the food processing industry at its core and embraces the drinks, agriculture, fishing, aquaculture, science and education base. The food and drink processing industry is a major contributor to the Scottish economy, with sales of £7.3 billion and employing 17% of Scotland’s manufacturing employees – over 48,000 people. It is also a fundamental part of the supply chain for the Scottish tourism industry which injects £2.47 billion into the economy annually.

The vision for a Smart Successful Scotland – creating, learning and connecting faster for sustained productivity growth, competitiveness and prosperity – is at the core of the work being carried out within the Scottish Food and Drink Industry.

The group is supported by Scottish Enterprise and the Scottish Executive where a joined up approach to both promoting health and Scottish Industry interests pays dividends for both. The industry plays an important part in the implementation of the SDAP, influencing what people choose to feed themselves and their families as well as underpinning the whole food culture in Scotland.

The Scottish Enterprise food and drink team is based with Scottish Enterprise Grampian. Examples of collaboration in 2003 were the Omega 3 Group, preparing for an application to the Joint Health Claims Initiative on behalf of the Oily Fish industry and helping to orchestrate the very positive industry response to the implementation of Hungry for Success.

Further information is available at: [www.scottishfoodanddrink.com](http://www.scottishfoodanddrink.com)
SIMPLY ORGANIC

The retail trade has clearly identified convenience as a major driver of consumer behaviour. Healthier choices too must become the easy choice in today’s market.

Simply Organic, based just south of Edinburgh, produces a new and innovative range of organic foods. Formed in 1998, the company pioneered the market for packaged organic foods which are both convenient and healthy.

It is a fast growing small business with 25 employees and a turnover this year of around £2 million – and profitable. In April 1999 Simply Organic secured its first major UK-wide listing with Tesco to stock soups and pasta sauces from the range. Since then it has gone on to extend its listings with Tesco and also secure listings for its soup and ready meal ranges in Sainsbury’s. There are now 10 organic soups, six pasta sauces, and five ready meal products in the Simply Organic range. Development is also underway on a brand new range of fresh organic convenience foods aimed at children.

Further information is available at: www.simplyorganic.co.uk

CHARIS

Innovation within the Food industry will be key to improving the Scottish diet.

CHARIS, supported by the Scottish Executive, provides an innovative and technical service for food and drink companies to develop new products and processes through improved knowledge and technology transfer from the academic and scientific sectors.

Charis Innovative Food Services Ltd was established as the commercial arm of the Charis Initiative, a bilateral venture employing the complementary resources and expertise of the Hannah Research Institute and the Scottish Agricultural College. The other arm of this initiative, Charis Food Research is a division of The Hannah Research Institute and operates as a charity, developing platform technologies and providing technical support to Charis Innovative Food Services Ltd where required.

The trial plant and laboratory on-site facilities are supported by a team of specialists and research scientists, technologists and technical staff from Charis Food Research, and a network of external contacts. Charis Innovative Food Services Ltd provides practical advice to caterer’s and food manufacturers on healthier eating, current Government recommendations, ingredient selection, food preparation, processing, serving methods and menu planning.

Further information is available at: www.charisfoods.co.uk
Examples of Action to Ensure that Primary Food Producers are Contributing to Achieving the Scottish Dietary Targets

**BERRY SCOTLAND**

The Berry Scotland Programme Board has brought together health experts, plant breeders, food industrialists, marketers and growers to work out how consumption of Scottish soft fruit can be increased in Scotland.

Identifying key bioactive compounds in soft fruits, and estimating their impact on disease risk and finding ways to incorporate fruit within the food chain are the key challenges for the group to address. From yoghurts to puree or even berry lollies – the Berry Scotland Board want to help facilitate an increase in consumption of easily available, affordable soft fruit in Scotland.

Soft fruit is known to have considerable health benefits including antioxidant properties from components such as flavinoids. Being a Scottish crop – the health and economy of Scotland could be considerably improved by higher intake of raspberries, strawberries and blackcurrants eaten in many different ways.

The Scottish Executive has granted funding to support a scientific co-ordinator for identifying and co-ordinating research knowledge and gaps in this field and to facilitate developments between growers and consumers. The co-ordinator will work for two years with research scientists liaising with food product developers to identify how berry consumption can be increased.

Soft fruit is a Scottish crop that is nutritious with great health benefits and can be an everyday item without being an expensive luxury ingredient. As well as exporting our fruit, the Berry Scotland Board wants to encourage people to make it part of their daily diets so it becomes a regular Scottish staple food.

The Berry Scotland Board not only includes scientists but representatives from Scottish fruit growers, the National Farmers Union, experts on rural land diversification and marketing groups so that a strategy can be adopted which will be of benefit to health, the economy and agriculture.

Finland has recorded significant health benefits from a programme which included a Berry project to increase consumption of soft fruits. The North Karelia project was a public health programme adopted by Finland in 1972 to combat their high rate of heart disease and high fat diet – a health record very similar to Scotland’s. The berry programme was a small part of this wider public health initiative but reaped considerable benefits. Fruit and vegetable consumption increased from about 20 kg per person annually in 1972 to 50 kg in 1992. Soft fruit products are now part of the staple diet in Finland and school children and adults alike eat a range of berries on a regular basis.

For more information, contact j.beattie@dundee.ac.uk or c.patterson@dundee.ac.uk
### LOCAL FOOD FOR LOCAL PEOPLE

Funded jointly by local councils, the Health Board and the Scottish Executive, Forth Valley Food Links (FVFL) works with local food producers and communities to increase access to, and availability of, locally-grown fresh produce. The first organisation of its kind in Scotland, FVFL works to build the local food sector contributing to economic development, health improvement, environmental improvement and social inclusion. The help they provide ranges from assisting farmers wishing to diversify into alternative crops aimed at local markets and retailers, to helping schools and community based groups set up their own growing schemes or fruit and vegetable cooperatives. To encourage more local and diverse food growing they operate a small grant scheme, open to small businesses and community groups alike. Communication between farmers, local groups and community representatives are being strengthened through a Community Food Partnership and a Food Producers Forum.

Further information is available at:  
[www.forthvalleyfoodlinks.org.uk](http://www.forthvalleyfoodlinks.org.uk)

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### FAS FALLAIN: WESTERN ISLES GROW HEALTHY PROJECT

Fas Fallain aims to encourage healthy eating and improve the affordability and availability of fresh produce on the Isles by encouraging the growing of fresh locally produced foodstuffs. Through the provision of training and advice, individuals and communities will be helped to grow their own food for home consumption with surpluses generating an income stream through their sale in local shops and a network of local produce outdoor markets. Fas Fallain offers training in horticulture, cookery and social business development as well as various healthy eating activities. The capital infrastructure for establishing local markets are already in place and community assets are used and extended as a main objective. Raising confidence and combining education with enjoyable social occasions and gatherings are very much part of the project which also aims to have a positive impact upon mental health. The project is funded by New Opportunities Fund, Western Isles Enterprise and Western Isles NHS Board.

Email Mary Maclean:  
MaryM.Cearn@wihb.scot.nhs.uk
### Annex B
**Dietary Targets for Scotland for the Year 2005**

<table>
<thead>
<tr>
<th>Category</th>
<th>Target Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fruit and vegetables</td>
<td>Average intake to double to more than 400 grams per day.</td>
</tr>
<tr>
<td>Bread</td>
<td>Intake to increase by 45% from present daily intake of 106 grams, mainly using wholemeal and brown breads.</td>
</tr>
<tr>
<td>Breakfast and cereals</td>
<td>Average intake to double from the present intake of 17 grams per day.</td>
</tr>
<tr>
<td>Fats</td>
<td>Average intake of total fat to reduce from 40.7% to no more than 35% of food energy.</td>
</tr>
<tr>
<td></td>
<td>Average intake of saturated fatty acids to reduce from 16.6% to no more than 11% of food energy.</td>
</tr>
<tr>
<td>Salt</td>
<td>Average intake to reduce from 163 mmol per day to 100 mmol per day.</td>
</tr>
<tr>
<td>Sugar</td>
<td>Average intake of NME sugars in adults not to increase.</td>
</tr>
<tr>
<td></td>
<td>Average intake of NME sugars in children to reduce by half, that is to less than 100% of total energy.</td>
</tr>
<tr>
<td>Breastfeeding</td>
<td>The proportion of mothers breastfeeding their babies for the first 5 weeks of life should increase to more than 50% from the present incidence of around 30%.</td>
</tr>
<tr>
<td>Total complex carbohydrates</td>
<td>Increase average non-sugar carbohydrates intake by 25% from 124 grams per day, through increased consumption of fruit and vegetables, bread, breakfast cereals, rice and pasta and through an increase of 25% in potato consumption.</td>
</tr>
<tr>
<td>Fish</td>
<td>White fish consumption to be maintained at current levels.</td>
</tr>
<tr>
<td></td>
<td>Oily fish consumption to double from 44 grams per week to 88 grams per week.</td>
</tr>
</tbody>
</table>
Annex C

Scottish Executive Food and Health Action Plan 2004/05

This year the Scottish Executive intends to:

1. Develop a stronger interface with the Food industry
   - Ministers to lead on a series of talks aimed at achieving reductions in fat, especially saturated fat, reduction in portion sizes and particularly levels of salt in manufactured foods.
   - To work on the development of a food labelling system or endorsement symbol, using the Healthyliving brand, that clearly highlights healthier choices to consumers.
   - To further develop strategic alliances with food retailers.

2. Use Public Sector providers to demonstrate an exemplary role in the provision of healthier choices and to support the production of healthier foods.
   - We will continue to support the full implementation of Hungry for Success: A Whole School Approach to School meals in Scotland, achieving national standards in school meal provision in all primary schools by the end of this year.
   - We will publish revised procurement guidance covering local government, prisons and hospitals, which will highlight the options for using fresh, local produce.
   - We will establish standards for pre-5s food provision (similar to standards for school meals). Food contracts for hospitals, prisons, local government and the Scottish Executive will also come under scrutiny.

3. Make it easier for people eating out to know where to go for healthier food and to drive up standards throughout the catering industry.
   - We will launch a new Scottish catering award, with food on the High Street and food in the workplace as the main targets.

4. Support schools to teach children how to eat a healthier diet.
   - We will develop support materials and advice for teachers about how they can best deliver nutrition education in schools. It will feature practical food skills, shopping and making meals.

5. Ensure that all food and drink marketing and advertising aimed directly at children works with us to promote healthier lifestyles, rather than against us.
   - Scottish Ministers will work with UK Ministerial colleagues. Action will be linked with the Food Standards Agency’s debate on the promotion of foods to children.

6. Ensure co-ordinated action and commitment towards food policy and health.
   - The Scottish Executive will consult widely on a strategic framework which will further develop food and health policy to guide national and local food and health action plans. The framework should inform and co-ordinate work between partner agencies, local government and communities.
   - SE will establish a Scottish Food and Health Council with a Ministerial lead focused on formulating and delivering an annual plan of action. The Food Champions group will merge with the Council. This will be a publicly-appointed body of key stakeholders and experts together with Heads of relevant Scottish Executive Departments and FSA Scotland.
• SE will join with FSA Scotland to establish a new national *Healthyliving Food and Health Alliance*, to ensure strong and effective engagement and interactive communication with all key sectors, including food retailers and manufacturers, health professionals, consumer representatives, stakeholders and networks, facilitating information sharing, consultation, evidence gathering and partnership development.

7. Deliver a clear and sustained health message on healthy eating to the public.

• The *Healthyliving campaign* will focus on motivation and on changing attitudes. National advertising will be supported by a multimedia communications package and linked to specific national activity in local government, NHS, community and voluntary sectors and the private sector, particularly the food industry.

8. Focus national and local food and nutrition strategies to contribute to tackling health inequality and particularly access to a healthier diet.

• We will continue to work with local government and NHSScotland to spread evidence-based and best practice, utilising established learning networks to inform community planning partnerships.

• We will support work within low-income communities through the *Scottish Community Diet Project* improving access to, and take-up of, a healthy diet.

• We will work with retailers to improve access to healthier choices in *neighbourhood shops* located in low-income areas.

• We will build upon best practice to integrate improved food access into *health and homelessness* strategies.

9. Continue to monitor, evaluate and report upon the impact of food and health policies.

• Scottish Dietary targets were set for 2005. We are preparing to report upon progress towards these targets and the wider implementation of the Scottish Diet Action Plan.

10. Combat the rise of *obesity* and overweight within the population.

• Direct the *combined approaches on diet and physical activity* to combat obesity and weight gain in an integrated and multi-sectoral approach as advocated by the WHO Global strategy for diet, physical activity and health.