

Nourish Scotland response to:

‘A Healthier Future – Action and Ambitions on Diet, Activity and Healthy Weight’ Consultation

January 2018



About Nourish Scotland

Nourish Scotland is a civil society organisation campaigning on food justice issues in Scotland. We believe tasty and nutritious food should be accessible to everyone, be sustainable, and be produced, processed, sold and served in a way that values and respects workers. We campaign for solutions that work across the board: we take a systems approach toward food and health, poverty, fairness, workers’ rights, rural economy, environment, climate change, land use, and waste.

Summary of our response to the consultation on A Healthier Future

Nourish Scotland welcomes the approach taken in the Scottish Government's 'A Healthier Future' draft Strategy, particularly the ambition to focus less on individual behaviour and more on the wider environment in which food choices are made. However, given the scale of the problem we need to go even further than the measures proposed. Bold action is needed to transform our whole food environment, and make the healthy choice the easy choice for everyone in Scotland.

Food Standards Scotland (FSS) leaves no doubt: “Given clear evidence of lack of progress towards our Scottish Dietary Goals, together with current and projected unsustainable prevalence of overweight and obesity, maintaining the status quo is not an option.”¹

We need to be clear about our destination. FSS expects “as many as 40% of us being obese by 2030.” Is this the society we want to be? If not, we need to change the system and the norms that shape our lifestyle and food choices. Tweaks in the margins won’t do. We need to put an end to the laissez-faire that has let the food industry create our obesogenic food environment. We need to set ourselves binding targets, with strong monitoring and accountability mechanisms, and put long-term commitments in place. The exemplary work on smoking and on climate change shows what can be achieved if there is political commitment combined with a comprehensive approach and effective monitoring.

As we see it, the four pillars that must form the backbone of our action on obesity are:

1. Enabling healthy diets

Reducing sugar, fats, and salt intake is important but not enough. People in Scotland are eating much too few fruit, vegetables, and whole grains, therefore lacking essential fibre and micronutrients, and too little oily fish, critical source of omega 3. We should be aiming for John Boyd-Orr’s ‘gold standard of nutrition’ which he defined in 1936: “the standard is not just to provide a diet which will keep people alive, but a diet which will keep people in health; and the standard of health adopted is a state of well-being such that no improvement could be effected by a change in the diet.”²

¹ [http://www.foodstandards.gov.scot/downloads/Board meeting - 2017 March 08 - Diet and Nutrition one year on 0.pdf](http://www.foodstandards.gov.scot/downloads/Board_meeting_-_2017_March_08_-_Diet_and_Nutrition_one_year_on_0.pdf)

² <http://www.nourishscotland.org/wp-content/uploads/2017/01/Nourish-Magazine-Issue-6-Boyd-Orr.pdf>

This Strategy must do more to reverse the bias towards unhealthy food in our food environment. And the Scottish Government should commit to support initiatives such as community food projects or Peas Please³, which are changing norms and environments to help everyone eat healthily.

The poorest in society face the double burden of poverty and ill health. Actions to enable healthy diets should be focused on those most in need.

2. Transforming our food environment

A Healthier Future falls well short of bringing the real shift urgently needed by our health. Nourish wants to see a commitment to a blanket ban on price and non-monetary promotions on unhealthy foods and drinks. Stricter action is also needed on advertising to protect children and adults alike from the constant exposure of advertising for products that we should not be eating as frequently or abundantly as we are told by the industry. Compulsory reformulation to reduce unhealthy contents and add fibre and micronutrients to our food is long overdue.

The Strategy should demonstrate its commitment to changing the food environment by dedicating a similar or higher level of investment for population-wide, preventative measures as for individual measures such as the weight management services.

3. Taking a whole-of-government, whole-of-society approach

Public health must be a priority for all departments of the Government. Scottish agriculture, fisheries, and food sectors need to measure success by looking at the Good Food Nation objectives. Narrowing health inequalities must be a key priority not just for Public Health and Social Justice, but also Planning and Industrial strategy for example. This will need leadership from the highest level of Government to join the dots and build consensus.

The Good Food Nation Bill provides a key opportunity to develop a cross-cutting framework for advancing sustainability, fairness, and health in the food system.

Public sector leadership is key. Public food procurement need to be aligned with the Scottish Dietary Goals. Public institutions must lead by example in healthy workforce practice, and nutrition must become central in social and health care thinking.

4. Setting a robust framework for action

The scale and urgency of the obesity crisis calls for bold action that is embedded in a robust framework of monitoring, progress reporting, and accountability. Climate change action has demonstrated the power of legally binding targets to spur action in both private and public sectors and build public support. The Scottish Government should set itself binding targets for improvements on meeting the Scottish Dietary Goals and obesity and diabetes type 2 reduction. Change should be monitored as part of a comprehensive accountability and reporting process established through the Good Food Nation Bill.

Full consultation response

Question 1

Are there any other types of price promotion that should be considered? Yes

Please explain your answer.

We welcome and support the proposal to tackle price promotions with legislative action in Scotland. We urge the Scottish Government to make this measure a blanket ban on promotions for unhealthy foods and drinks by including all price promotions (multi-buys including X for £Y, temporary price reductions, and ‘extra-free’) and non-monetary

³ <http://www.nourishscotland.org/projects/peas-please/>

promotions. Such a blanket ban would demonstrate the Government's stated commitment to match its action on obesity with previous action taken on smoking and alcohol.

Non-monetary promotions are not addressed in this draft Strategy, yet they represent an effective marketing tool used by the industry to increase sales. These promotions involve strategic placement of product within stores (i.e. end of aisle, window and entrance displays, display at eye-level, and at checkouts), product information promotions (i.e. banners, flyers, shelf decoration), and promotions with prizes (i.e. prize draws). Banning such promotional tactics will go some way towards addressing the bias of the retail environment towards unhealthy products. This will not stop people from consuming discretionary foods and drinks but it will make it easier for them to have healthier shopping baskets.

The risk of industry adapting types of promotions in response to restrictions on certain methods of promotion must be avoided for these policies to be effective. A smart and comprehensive ban on price and non-monetary promotions on HFSS products in the new diet and obesity strategy for Scotland is more likely to stimulate the changes in consumption patterns we desperately need.

Question 2

How do we most efficiently and effectively define the types of food and drink that we will target with these measures? Please explain your answer.

We recommend using the Ofcom nutrient profiling model (NPM)⁴, which is currently being reviewed by Public Health England (PHE). As outcomes of the review and the consultation are expected early in 2018, we suggest using the updated model and monitoring its performance.

The FSA/Ofcom nutrient profiling model (NPM) specifies which food and drink products can be advertised during children's programmes on TV and radio, based on whether their nutritional profile meets a set of criteria including positive (fruit, vegetables, protein, fibre) and negative (salt, sugar, fat) factors⁹. A score is calculated that shows the balance between negative and positive nutrients in the product. A food is classified as 'less healthy' where it scores 4 points or more and a drink is classified as 'less healthy' where it scores 1 point or more.

We suggest looking into lowering the threshold to zero points or more to define 'less healthy' drinks that are included in the price promotion ban. 'Diet' soft drinks that contain no sugar, replaced with artificial sweeteners, will have a neutral score and would fall outside the current NPM 'less healthy' criteria. However, some scientific research has put in doubt their harmlessness to our health^{5,6}. What is certain is that they have no nutritional value. In addition, excluding diet soft drinks from the ban would be likely to lead to the industry increasing the promotions on those products. We therefore advise to follow the precautionary principle and include those products in the price promotions ban while confirmation is sought on the health impact of artificially sweetened drinks.

Question 3

4

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/216094/dh_123492.pdf

⁵ <https://www.theguardian.com/lifeandstyle/2017/apr/20/stroke-and-dementia-risk-linked-to-low-sugar-drinks-study-finds>

⁶ <http://circ.ahajournals.org/content/116/5/480>

To what extent do you agree with the actions we propose on non-broadcast advertising of products high in fat, salt and sugar? Please explain your answer.

We agree with proposed actions 1.17, 1.18, and 1.19 but generally feel that they fall short of the bold action needed on advertisement. We therefore make the following recommendations.

What kind of society do we want Scotland to be?

The aim of restrictions on advertising of junk food and soft drinks must be to gradually denormalise the frequent and abundant consumption of food and drink that damages our health. Action on obesity must be embedded within a long-term vision for a Scotland that has a strong food culture, is healthy, and as a consequence has a thriving economy, with less working days lost from sickness, and a flourishing local and national food sector. Small changes in the regulation of advertising on HFSS food and drink are not going to help us achieve that vision. We need a fundamental review of the messages people constantly hear and see when it comes to food. That means much less advertising of the food and drink we need to eat less of, and much more of the things we need to eat more of.

Similarly to action on smoking, change is not going to come overnight. We need to look at a 10-year horizon to set the ambition for the society we want to live in and take strong action to realise our vision. This Strategy is an early step in that direction.

Protect everyone from unhealthy advertising

We are supportive of the intention to better protect children from junk food advertising stated in 'A Healthier Future'. However, we want to stress that action on advertising should also address adults' exposure to unhealthy food advertising. While children may be more impressionable, it is parents and adults who do the grocery shopping and make the decisions when eating out or ordering food, and they are undeniably also sensitive to advertising^{7,8,9}. With rates of overweight higher than ever, regulatory intervention to help adults take control of their food choices is long overdue. In the words of the House of Commons Health Select Committee "it would be no bad thing in tackling obesity if adults were exposed to less advertising of unhealthy food."¹⁰

Beyond a voluntary approach

We welcome the Scottish Government's commitment to monitor and review the implementation and impact of the Committee of Advertising Practice (CAP) code on non-broadcast advertising of products high in fat, salt and sugar, and take action to embed good practice. We urge this commitment to lead to the creation of a robust regulatory framework.

The CAP's track record of effectively tackling the harmful health impact of advertising is poor, as demonstrated by the most recent CAP regulations which contain various loopholes. The Committee of Advertising Practice, who writes these regulations, is an industry body; its members are representatives of advertisers, agencies, media owners and other industry groups¹¹. We question the relevance and effectiveness of this model of industry self-regulation given the urgency in addressing the ongoing diet-related public health crisis.

⁷ <http://ajcn.nutrition.org/content/early/2016/01/20/ajcn.115.120022.abstract?sid=baa6247d-124d-4051-89fe-9240e0bb9d03>

⁸ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2743554/>

⁹ <http://www.dailymail.co.uk/news/article-5276913/Mind-games-junk-food-giants-use-make-eat-more.html>

¹⁰ <https://publications.parliament.uk/pa/cm201617/cmselect/cmhealth/928/92808.htm>

¹¹ <https://www.asa.org.uk/about-asa-and-cap/people/cap-panels-and-committees.html#CAP>

The Scottish Parliament has extensive powers to tackle the constant exposure to unhealthy food advertising faced by everyone in Scotland; these include the press, printed adverts, outdoor displays, billboards, point of sale displays, adverts at sporting, music, and cultural events and festivals, and sponsorship of events¹².

We urge the Scottish Government to take action to ban HFSS food and drink advertisement in all those media that contribute to children's exposure and to strictly limit advertisement in media with an adult audience. The focus of regulation should be on exposure, not targeting. We would argue for the establishment of an independent regulator to oversee the development and implementation of advertising regulation. This regulator should be equipped with statutory powers to ensure consistent regulation and enforcement and the effective protection of the most vulnerable in our society.

In the case of action on smoking, public support followed from Government leadership and action. There is already some support for strict action on advertising, and we can expect public support to grow overtime as a 'new normal' is created by the regulatory framework.

Strictly regulating advertisement and promotions of unhealthy foods and drinks will incentivise the industry to drastically cut HFSS and increase the healthy content of the food and drinks they market to our population.

A level playing field for healthy food

There is a need to level the advertising playing field to enable healthy foods to compete for appeal and customers' attention – *i.e.* fruits, vegetables, nuts, oily fish, and foods high in fibre, which are the foods we don't eat enough of for optimal health. We suggest for example setting up a scheme of marketing support for healthy food SMEs, and guidelines or rules to increase the availability and affordability of advertising space for healthy food SMEs.

In this regard, it is relevant to mention a campaign that was recently launched by the UK-wide Peas Please initiative, which Nourish Scotland is leading on in Scotland. On 18th January Peas Please announced plans to set up a dedicated, independent Vegetable Advertising Fund which would run promotional and advertising campaigns seeking to increase the appeal of vegetables for British consumers. We strongly encourage the Scottish Government to commit to supporting this campaign.

Question 4

Do you think any further or different action is required for the out of home sector? Yes

Please explain your answer.

Nourish Scotland welcomes the announcement of an Out of Home Sector Strategy and strongly support the proposed set of actions. As Food Standard Scotland (FSS) noted in March 2017, improvements in retail and manufacturing have not been met in the Out of Home (OOH) sector "which is skewed towards provision of less healthy food in Scotland [and] is lagging behind"¹³.

We add that;

Actions which could make the most significant difference must be made mandatory through legislation. This includes in our view: portion control, reformulation, nutritional labelling – including information on the fruit and vegetable content of meals –, and a ban on price promotions to match action in retail. The practice of upselling, where price incentives encourage us to buy larger portions, should be forbidden.

¹² Alcohol Focus Scotland, Promoting good health from childhood

¹³ http://www.foodstandards.gov.scot/downloads/Board_meeting_-_2017_March_08_-_Diet_and_Nutrition_one_year_on_0.pdf

Overall, we believe the proposed set of actions for OOH will fall short of significantly improving our food environment and consequently our health. FSS recommended addressing a range of issues in an OOH strategy⁸. Most issues are included in ‘A Healthier Future’, however, we are concerned by the lack of action to address “the current skew towards less healthy options” and “the provision of HFSS food and drink and density of premises selling HFSS foods in local environments”

The Out of Home Strategy should seek to tip the balance in favour of healthy food in the out of home sector. This should include using planning powers, environmental health licensing, business tax rates, and any other tools available to the Scottish Government and Local Authorities to improve the offer and affordability of healthy food take-aways and quick service restaurants. Making the healthy choice the easy choice means not only restricting the ubiquity and promotion of unhealthy food, but also supporting food businesses that offer food and drink that meets the Scottish Dietary Goals.

The Peas Please initiative is currently working with OOH businesses and contract caterers to increase the vegetable content of eating out options in the UK. At three Vegetables Summits in October 2017 commitments were secured from major brands, including Greggs the baker and Sodexo, as well as from industry bodies such as the Sustainable Restaurant Association and Soil Association Out To Lunch. This voluntary initiative should be backed by regulation to ensure long-lasting impact.

We reiterate the call for public intervention made by Pete Ritchie, Director of Nourish Scotland and co-convenor of the Scottish Food Coalition, at the Health and Sport Committee on 19th December 2017¹⁴: we need “minimum standards, not just on the lack of high fat, sugar and salt in food, but on the positive presence of whole grains and fibre. We need to make it harder for anybody to open a food outlet and sell whatever they want. That is vital for our health. [The Out of Home Sector] is a very under-regulated area in the sense that anybody can set up a business and sell stuff that is not very good for our health.”

Our last suggestion for the Out of Home Strategy, is to include measures to restrict or ban displays and promotions of HFSS products as impulse buys at point of non-food sales (clothes stores, petrol stations, news agents etc.).

Question 5

Do you think current labelling arrangements could be strengthened? Yes

Please explain your answer.

Nourish supports further action to improve labelling. In particular we need more consistent application of front of pack (FoP) labelling across the retail industry and improved and consistent nutritional information across the out of home sector. Labelling of the added sugar and the fruit and veg content of food and drinks should also be made available or improved in retail and out of home.

Added sugar

Scottish Dietary Goals¹⁷ state that average intake of free sugars should not exceed 5% of total energy in adults and children over 2 years. However, free sugars are not marked on food and drink in Scotland, and therefore it is difficult for the public to know how much they consume. Further consideration should be given to the concept of a teaspoon symbol on the packaging, as suggested by Jamie Oliver during the Health Select Committee hearing in 2015¹⁸, to mark number of teaspoons of free sugars in a package of food or drink.

¹⁴ <http://www.parliament.scot/parliamentarybusiness/report.aspx?r=11287>

Any new labelling scheme must be straightforward. We recommend indicating the amount of added sugar of the whole package contents, not per portion of 30g or 100ml for example.

5-a-day

We also see the value of a compulsory roll out of ‘x of your 5-a-day’ labelling on the front of pack matched by similar action in the OOH sector (see question 4). Whilst the 5-a-day message is very widely recognised, knowledge about what makes up one of the 5 daily portions of fruit and veg is weaker, especially for vegetables. Providing that information systematically, alongside public health messaging, could contribute to a shift in attitudes and norms. The Peas Please initiative highlighted that people in the UK currently get only 0.5 portion of veg per 3 meals eaten out. It should not be normal for ready-meals and meals in the OOH to contain less than one portion of vegetables.

Question 6

What specific support do Scottish food and drink SMEs need most to reformulate and innovate to make their products healthier?

While Nourish Scotland is not able to comment on specific support needed by SMEs, we would like to make two comments relevant to the issue of reformulation.

First, reformulation should not only seek to lower content of HFSS, but also to increase the content of fibre and nutrients, for example by adding unprocessed fruit, vegetable, and nuts.

Second, we have strong reservations about a purely voluntary approach to reformulation. Regulation is needed to set the baseline both in terms of maximum HFSS and minimum fibre and whole grain content. Compulsory baselines would prevent competitiveness issues and improve the healthfulness of the food offer in Scotland across the board.

Obesity Action Scotland (OAS) concluded in a recent briefing paper¹⁵: “So far, the current voluntary approach in the UK to reformulation has neither improved the diet of the population nor changed obesity levels. Elsewhere, a “level playing field” involving mandatory approaches has been effective.”

“One of the main arguments for a regulated approach is creating a level playing field for business. This was presented by the British Retail Consortium during the House of Commons Health Committee hearings in October 2015. Similarly, Professor Susan Jebb argued that we need to be prepared to act when the voluntary approach fails, with incentives for companies that take part and disincentives for those that stay out. A regulated approach, it was also argued, would not affect competitiveness but would support monitoring.”

OAS called for a “clear, mandatory and supportive framework for reformulation with time-bound targets and sanctions for non-compliance” Manufacturing, retail and out-of-home should all be engaged in reformulation efforts.

Question 7

Do you think any further or different action is required to support a healthy weight from birth to adulthood? Yes

Please explain your answer.

Taking a life-course perspective is essential for preventing diet-related diseases. As stated by the World Health Organisation: “Early in life, when eating and physical activity habits are formed and when the long-term regulation of energy balance may be programmed, there is

¹⁵ <http://www.obesityactionscotland.org/media/1025/obesityandreformulationweb.pdf>

a critical window for intervention to mitigate the risk of obesity and type 2 diabetes later in life.”¹⁶

We note that actions 2.10, 2.11, 2.12, and 2.13 are primarily based on advice and education, which is inconsistent with A Healthier Future’s stated focus on improving food environments to enable healthy behaviours. Actions to support healthy weight from birth to adulthood can only be successful if implemented in environments and culture which support parents and children to lead healthy lifestyles.

The first 1000 days

The first 1,000 days, from conception to an infant’s second birthday are crucial. “The right nutrition during this 1,000 day window has a profound impact on a child’s ability to grow, learn and thrive—and a lasting effect on a country’s health and prosperity”¹⁷. Increased focus on both pre-natal and breastfeeding support is therefore very important. Nutrition pre-conception also has a significant impact on child health, underlining the importance of a whole population approach.

We welcome the Scottish Government’s announcement¹⁸ of £2.6 million new funding for breastfeeding resources but urge for this funding to be used in the most effective way possible, implementing demonstrated best practice from abroad.

Pre-natal support to women to have a healthy diet could for example be done through vegetables prescriptions (see question 9) and community food initiatives (more on this in question 12).

Further down the line, the expansion of free child care announced by the Scottish Government is a fantastic opportunity to build in healthy food habits from the earliest age. The Government must ensure that nurseries have the funding, skills, and resources necessary to offer healthy, unprocessed food to attending children.

Helping parents access healthy foods is crucial. We look forward to seeing the results of the Scottish Government reform of the Healthy Start Scheme and welcome the stated intent to increase the value, eligibility, and transition to a card system.

Healthy eating in the school environment

We welcome actions 2.14 and 2.17 and recommend two additional areas for action.

First, we support the idea of a complete ban on soft drinks in schools – including brought into the schools by children. A recent BBC poll demonstrated strong public support for such a ban, with 2/3 of UK respondents in favour¹⁹.

Second, as research has demonstrated that junk food outlets cluster around schools^{20,21}, urgent action is needed to strengthen planning rules in Scotland to enable Local Authorities to take unchallengeable action. It is interesting for example that South Korea introduced ‘green food zones’²² for healthy eating around schools and framed this law as ‘Safety Management of Children’s Dietary Life’.

Child rights

We encourage the final Strategy to frame action on healthy diets in childhood in terms of child rights. Child right to health and play can add legal and moral impetus to public health measures and can reframe health as a shared responsibility of the state, parents, and

¹⁶ http://apps.who.int/iris/bitstream/10665/204871/1/9789241565257_eng.pdf?ua=1

¹⁷ <https://thousanddays.org/the-issue/why-1000-days/>

¹⁸ <http://www.gov.scot/Publications/2017/12/7260/7>

¹⁹ <http://www.bbc.co.uk/news/health-27254780>

²⁰ <https://www.sciencedirect.com/science/article/pii/S135382921200158X?via%3Dihub>

²¹ <https://www.sciencedirect.com/science/article/pii/S1353829212001086?via%3Dihub>

²² <https://extranet.who.int/nutrition/gina/en/node/22937>

child²³. Scottish Ministers have a duty under the Children and Young People (Scotland) Act 2014 to keep under consideration whether there are any steps that they could take that might give further effect in Scotland to the UN Convention on the Rights of the Child¹⁴. The Convention on the Rights of the Child protects the child's right to food in the context of the right to life, survival and development, to health, to nutrition and to an adequate standard of living.

Question 8

How do you think a supported weight management service should be implemented for people with, or at risk of developing, Type 2 Diabetes – in particular the referral route to treatment?

Although weight management services are valuable, the level of investment signalled for this action focused on individuals has not been matched by similar commitments for preventative measures. The Scottish Government has successfully utilised an Individual, Social, Material (ISM) model to target actions in response to climate change; a similar approach should be taken with respect to public health to ensure that the commitment to transforming material factors, such as the food environment, receives the same attention and funding as approaches focused on the individual.

Funding must be made available for the preventative agenda and population-wide measures, which we know are cost-effective and will make a difference. Again to make a comparison to climate change, the Climate Challenge Fund has supported an incredible network of initiatives that take community-based action on greenhouse gas emissions; a similar fund to support community action on health would be welcome. For example, community food initiatives can support physical and mental health, by providing relief from social isolation and food insecurity and creating positive relationships to nutritious food.

If this funding commitment is maintained in the final Strategy, we would welcome a commitment to transparency about how this money will be spent, and impact monitoring.

We would also propose that this funding is used to trial and evaluate a number of different approaches to supporting healthy diets through the NHS.

For example we would encourage the Scottish Government and NHS Health Scotland to trial a programme of vegetables prescriptions for low-income households at risk of, or already, overweight. This would allow to help those most in need to eat more healthily, contributing to narrowing the health inequalities gap. In the United States, Wholesome Wave has set up such programmes in various places with positive outcomes²³. "A produce-prescription program at a pediatric clinic in a low-income Los Angeles community. Doctors and patients saw such positive experiences that the partnership was honored by the US Chamber of Commerce and by Fast Company as a world-changing idea"²⁴.

We propose the provision of specific help with diet through the NHS for patients living with long-term conditions in which a healthy and protective diet is particularly important, and the person's ability to meet their dietary need is restricted by affordability.

Question 9

Do you think any further or different action on healthy living interventions is required? Yes
Please explain your answer.

²³ <https://www.wholesomewave.org/how-we-work/produce-prescriptions>

²⁴ <https://www.wholesomewave.org/news/doctors-la-houston-and-miami-prescribing-fruits-vegetables-partnership-between-target-and>

The poorest in society face the double burden of poverty and ill health. Actions to enable healthy diets should be focused on those most in need.

We make further recommendations in answer to question 12.

Question 10

How can our work to encourage physical activity contribute most effectively to tackling obesity?

Messages and measures to encourage physical activity must be embedded in healthy lifestyle narrative and practice. We suggest three areas for improvement in this regard.

First, we commend the commitment to increase funding for active travel, but would like to stress the need to improve the conditions in which active travel takes place. We echo Scottish Cancer Prevention Network's point that "Active travel should be safe, affordable and convenient." In the list of top priorities must be to improve urban air quality and drivers' awareness of, and attitude to, more vulnerable road users: "road safety advice must most forcefully be aimed at those who pose the greatest risk, not those at risk of the greatest harm"²⁵

Second, we reiterate our call for a ban on junk food advertising or sponsorship by HFSS food and drink brands at sporting and cultural events.

Third, the food offer in sport centres must be a key area of action. Free fruit and vegetables should be made available to children and healthy choices should be on offer for all, both for snacks and meals. This could be achieved for example through extending the Healthcare Retail Standard criteria to all sporting venues.

Question 11

What do you think about the action we propose for making obesity a priority for everyone?

In the words of the WHO: "Obesity prevention and treatment requires a whole-of-government approach in which policies across all sectors systematically take health into account, avoid harmful health impacts, and thus improve population health and health equity."²⁶ Improving our diets needs to be a priority for everyone in the Government, not just Public Health.

That is not yet the case, as illustrated in the recent Rural Economy and Connectivity Committee's scrutiny of the draft budget, during which much of the discussion focused on the industry's Ambition 2030 target to double the size of the sector. The tensions and inconsistencies with this agenda and our broader commitments to becoming a Good Food Nation, in which 'everybody in Scotland has ready access to the healthy, nutritious food they need' and 'diet-related diseases are in decline' need to be scrutinised and openly discussed.

It is also crucial that the public sector leads by example to make obesity a priority for everyone. In that regard, we urge the Government to align meals in public kitchens and in publicly funded events and venues with the Scottish Dietary Goals, and roll out the Healthcare Retail Standard in all publicly funded locations. Existing projects and campaigns such as the Healthy Living Awards should also be reviewed for impact and target audience reach, and strengthened. And public institutions should take the lead with healthy workforce practices.

²⁵ <https://www.facebook.com/nick.hubble.12/posts/10213344402037172?pnref=story>

²⁶ http://apps.who.int/iris/bitstream/10665/204176/1/9789241510066_eng.pdf

More generally, the health and social care services need to incorporate nutrition into their core practice. Nutrition is central to health. Hospital food should be of the highest nutritional value everywhere. Social care services support our most vulnerable citizens and have to balance respecting individual autonomy with a responsibility to help people eat healthily.

Question 12

How can we build a whole nation movement?

Building a whole-nation movement requires a whole-of-government commitment. Improving nutrition must be a goal across Government and indeed, at the most senior level of Government.

We see a need for action at three levels to build a whole nation movement and help everyone engage with the public health agenda: at the community, Local Authority, and national legislative level.

Community food initiatives are absolutely crucial venues for engaging communities with the public health agenda and provide many wider benefits. We therefore welcome the acknowledgement of their important role in point 3.14, but this renewed commitment must come with an increased budget. Most community food initiatives are stretched extremely thin and operate in constant economic insecurity. They often spend scarce human resources applying for funding from multiple short-term, limited sources. Investing in community food initiatives is very cost-effective; these projects provide infrastructure, and deliver long-term, preventative action at a low cost. Communities contain a wealth of knowledge, creativity, energy, and skills, which could be harnessed with better public support.

At the middle level, the role of Local Authorities is key to reach the whole population. In recent years the potential of Cities to bring about change has come into the spotlight. In the realm of food policy, many networks have emerged to foster cooperation and cross-learning.²⁷ When it comes to tackling obesity, examples from abroad have shown what can be achieved when Cities show leadership, take a cross-departmental approach, and foster collaboration between local actors.

In 2012, Amsterdam set its sights on eradicating childhood overweight and obesity in the city by the year 2033²⁷. The Amsterdam Healthy Weight Programme is aimed at all children under the age of 19 and their parents, care-givers and teachers, but there is a particular focus on children who are already obese and those from high risk social groups. This Programme seeks to address the structural causes of obesity: individual lifestyle factors and values and psychological aspects underlying them, the social and physical environment, and living and working conditions that make it difficult for people to ensure their children eat healthily, sleep enough and exercise adequately. It requires all Council departments to contribute through their policies, plans and day-to-day working. Impacts are continuously monitored, and adjustments are made to the policy where necessary, which ensures efficacy and continuity. Between 2012 (just before the programme began) and 2014 overweight and obesity prevalence has levelled off, with a 10% decrease in prevalence in children of all age groups and 18% decrease among very low social economic groups.

The French VIF initiative (previously EPODE – “together let’s prevent childhood obesity”) is also often mentioned as example of effective collaborative action²⁸. It started in 10 towns in 2004 and has since then been taken up by more than 250 Local Authorities. This initiative is

²⁷ IPES-Food. 2017. What makes urban food policy happen? Insights from five case studies. International Panel of Experts on Sustainable Food Systems.

²⁸ <http://www.paha.org.uk/Resource/epode-ensemble-pr%C3%A9venons-lob%C3%A9sit%C3%A9-des-enfants>

aimed at children aged 5-12 who are overweight or at risk of weight gain. A whole range of local actors are mobilised – schools, nurseries, doctors, nutritionists, local press and businesses, after-school and sport clubs, politicians, and civil society – to support and advise families about their child's weight status, diet, and activity. Local initiatives can also develop resources or run campaigns and activities with participating actors. Examples include: breakfast clubs, distribution of leaflets in supermarkets, surgeries and community centres, or the involvement of food experts in classroom activities. While overweight and obesity have levelled across France but are increasing in lower socio-economic communities, in VIF towns, overweight and obesity are decreasing in all communities.²⁹

Finally, at the national level, the upcoming Good Food Nation Bill provides a once-in-a-generation opportunity to engage everyone in Scotland around the questions and issues that surround our food system, and to enshrine a rights-based and whole-of-government, whole-of-society approach into law. Nourish, both individually and with our partners in the Scottish Food Coalition, have been working hard to engage people and communities in Scotland with the Good Food Nation agenda. We will soon be launching our Kitchen Table Talks toolkit, to support groups across Scotland to engage with food issues and share their views on key priorities for action. We encourage the Scottish Government to support these efforts through a broad and inclusive consultation process on the Good Food Nation Bill.

The Good Food Nation Bill must connect all the dots related to food: creating a whole nation movement starts by linking ongoing work from the National Chef, to the circular economy, to dietary goals, to narrowing inequalities, to agriculture and fisheries.

The United Nations institutions have developed, through the right to food, a framework for collectively addressing food issues. It is encouraging that the Scottish Government are considering incorporating a rights-based approach, bringing policy coherence across food systems governance with the aim of ensuring:

1. Food is affordable
2. Food is geographically accessible
3. Food is nutritious
4. Food is safe and free from harmful chemicals
5. Food is culturally appropriate
6. Anyone wanting to produce food has access to land and resources.
7. Anyone wanting to make a living from food has access to infrastructure and markets.
8. Food is produced with care for the environment

Question 13

What further steps, if any, should be taken to monitor change?

Change should be monitored as part of a comprehensive accountability and reporting process established through the Good Food Nation Bill.

Years of unmet Scottish Dietary Goals indicate that we need to be looking at nutrition through a whole food system lens. Alongside the right to food, the Sustainable Development Goals are the global blueprint for achieving a healthier as well as fairer and more sustainable food system.

New legislation will be needed to underpin a robust governance model. This should establish duties at both national and local level to produce Good Food Plans. Priorities in these plans should be modelled on the action needed to meet the SDGs, including increasing access to nutritious food alongside other food system wide goals, and, crucially, linking production with consumption.

²⁹ <http://vivonsenforme.org/>

Annual reports of progress will enable a new statutory Food Commission to produce accurate State of the Food System reports to Parliament. This new Commission would also be responsible for giving evidence to Parliament on the impact of future legislation on progress towards the Sustainable Development Goals, ensuring that improving nutrition is at the forefront of parliamentary scrutiny.

Question 14

Do you have any other comments about any of the issues raised in this consultation?

Planning

We welcome the commitment to research good practice on using the planning system to control food outlets near schools to inform the review of Scottish Planning Policy. We would encourage this review to look at the role of the planning system in a more holistic manner, not only in the vicinity of schools. There is some academic research on the prevalence of fast food outlets according to the level of deprivation^{30,31,32,33,34}, but no recent and comprehensive data on 'relative access to healthy food' across retail and OOH in Scotland as far as we are aware. The then Food Standard Agency Scotland commissioned research on access to healthy food in retail in 2005³⁵ which found that access to, and the cost of, healthy foods varied across Scotland, to the disadvantage of more deprived or rural areas.

Taxation

Large retailers and caterers create our collective food environment, providing us with the bulk of our shopping and most of our meals outside the home. The food on their shelves and menus, the discounts and promotions they offer, and their marketing strategies influence the products we buy. This power should come with responsibility; the responsibility to help us meet the nutritional standards set for our nation.

We call for the introduction of a Multiple Retailers' and Caterers' Levy in Scotland. This Levy would tax the "health difference" between what we are sold and what we should be eating. It would be applied to the aggregate sales of large retailers and caterers, including all food and drinks. Large retailers and caterers would be required to report periodically on the nutritional composition of their sales. They would then pay a levy on the difference between their sales and the Scottish Dietary Goals for specific macronutrients.

We expect a Multiple Retailers' and Caterers' Levy would have the following impacts:

1. influence relative food prices in favour of healthier foods and
2. incentivise large retailers and caterers to sell and promote healthier foods, both in what they decide to put on their shelves (including reformulation) and in their marketing strategies.

Nordic Council

We suggest that the Scottish Government applies for membership of the Nordic Council³⁶. We believe this would be very beneficial for research cooperation, especially in the light of Brexit. Nordic countries have seen a true cultural revolution with regards to food in recent

³⁰ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2898050/#b49-ijerph-07-02290>

³¹ <https://www.sciencedirect.com/science/article/pii/S0749379705002564>

³² <https://www.sciencedirect.com/science/article/pii/S0195666306006519>

³³ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2729724/pdf/1479-5868-6-52.pdf>

³⁴ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1277840/pdf/1479-5868-2-16.pdf>

³⁵

<https://www.food.gov.uk/sites/default/files/multimedia/pdfs/publication/accessinghealthyfood0108.pdf>

³⁶ <http://www.norden.org/en/theme/ny-nordisk-mad/>

years. Scotland can learn from this experience, and urgently needs a similar transformation if it is to succeed at improving diets and tackling obesity and diet-related non-communicable diseases.

Impartial evidence

To enable this cultural shift, it is important to minimise contradictory health messages with respect to food. Public funding for independent research is paramount³⁷, and the Scottish Government should introduce further measures to ensure the integrity of industry-funded research.

Sustainable diets

In the same way as health must be integrated into all policy areas, sustainability is key to achieving the primary objectives set for Scotland by the Government and must be a priority across all government departments. We strongly recommend that promoting sustainable diets is made an integral objective of Food Standards Scotland.

³⁷ IPES-Food (2017). Unravelling the Food–Health Nexus: Addressing practices, political economy, and power relations to build healthier food systems. The Global Alliance for the Future of Food and IPES-Food.