

# Welsh Food Alliance

Volume 2

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## Food and Health

### - Older people have their say

Older people in Wales have been given the opportunity *to have their say about their food and health*.

500 survey forms were distributed to older persons organisations throughout Wales. A great deal of information has been received.

Our preliminary findings are that:

- Obtaining and carrying home shopping when people are ill or in inclement weather is a major issue. Many used public transport. A fortunate few have families and friends to assist.
- Many have difficulty reading labels, opening vacuum packed products, and 'screw on' top bottles. High and low shelves are a problem. It is difficult to purchase smaller packs of food. Buying smaller packs and tins costs more!
- Some found it expensive to eat properly, especially when buying fresh fruit and vegetables. Unfortunately we

had little response to our 'Meals on Wheels' question.

- 'Meals on Wheels' in rural areas seem an almost non-existent service, with an overall lack of this service and lunch clubs. This should be a major source of concern.
- From one rural village several respondents asked, "Does a Christmas lunch provided by the church answer your question about community provision?"

The overall preliminary conclusion was that *older people are very sensible and knowledgeable about their dietary needs*. As distinct from "more professional guidance" (see 'When I am 64 ...and more' report) *they require help and support in accessing affordable good food*. Older people require practical help from food retailers and caterers, assistance in remaining independent in their own homes, and service provision to suit their individual needs and circumstances, that makes this possible. *We would welcome more information about shopping service delivery charges, and 'Meals on Wheels'*. Further news in our next newsletter.

Further copies of our survey form can be supplied with a stamped addressed envelope, and if possible should be returned by 15th August 2002. Though information will be equally valued after this deadline. Survey results will be presented to the National Assembly for Wales consultation 'When I'm 64 ...and more' (available on 02920 825191). Deadline 30th August 2002.

## Future Events

### Prevention is better than cure

**27th September 2002, 2.15-4.15pm**

This meeting takes place in the Council Chamber, Glamorgan Buildings, Cardiff University, King Edward VII Avenue, Cardiff (near Central Police Station, Cathays Park), following requests for more information and discussion at our 20th May Alliance consultation.

Jane Hutt AM, the Health and Social Services Minister has agreed to introduce this theme. Our main speaker will be Dr Edward Coyle, Director of Public Health, Gwent Health Authority. The Minister will also launch the Welsh consultation on the UK Food Poverty Eradication Bill.

Changes in the NHS and public health require public participation if they are to be effective. How do we:

- prevent food-related diseases and obesity?
- improve integrated work across public and private sectors?
- enable older and disabled people to keep healthy in their own homes?

Your comments and ideas will be welcome. To reserve a free place contact: 0845 3304926 or 01633 663114.

### Welsh Food Alliance

The Welsh Food Alliance is a non-profit making knowledge based policy development and promotion network. It brings together multi-disciplinary expertise to link all aspects of food policy in an integrated way. This is disseminated in its quarterly newsletter, and conferences. The Alliance aims to provide a new perspective on food policy founded on the principle of informed public participation in the policy development process. It uses an extensive network of local and international contacts to help stimulate positive action at all levels of government. Join us today and help us in this crucial enterprise.

### Food, Health and Families

**23 January 2003, 6.15 – 8.15pm**

We are fortunate to obtain Dr Elizabeth Dowler, the UK expert on Food, Health and Poverty, at the above venue. As we near the Welsh General Election, we also have an 'Any Questions' Panel with representatives of the main political parties. Participants so far include Dr D Lloyd AM, and Mr D Melding AM. This is a forward diary date for a meeting that you will not wish to miss. WFA members will have first preference for these two meetings (see membership form – page 4).

# National Health and wellbeing strategy

*There are many consultations on various issues which include food aspects. How and who will integrate these into a workable framework at a national level?* In our view the three times of life, set out below, could be addressed by what are technically called N.H.S. National Service Framework agreements (see our last edition), and given the full weight of the Chancellor of the Exchequer, in the Treasury report by Derek Wanless, 'Securing our future, taking a long term view'. This contains a powerful public health message that we support.

## **(I) Low birth weight and Children's Health**

One essential aim is to reduce the number of children in poverty and to give every child the best possible start in life in Wales. Within several miles of each other, the percentage of babies born under 2,500g varies between 2% and 3% in prosperous wards to as high as 20% in poorest wards. A Health Authority Consultant commented recently, *"It will take generations of consistent campaigning for better health, education and improved lifestyle to turn around these figures"*.

## **Nutritious school meals**

Poor nutrition of women in their childbearing years is one of the causes of low birth weight. How can we improve the nutrition of mothers to be? Let us "Begin at the beginning". Every day of five days in a week for 35 weeks of the year.

Wales could improve the nutritional status of its future mothers and fathers

by giving them a nutritious and acceptable school lunch. These pupils will be parents in a few years. What they eat, what they were taught in school about eating for health and how far they enjoyed cooking, will influence the weight of their babies, their own health and the future health of their children.

## **(II) Older people**

At the other end of life, good nutrition is also a key to health. The National Assembly report 'When I'm 64 ..and more' summarises "the ability to eat a healthy diet is constrained by poverty, problems of access to shops .. and the ability of older people to prepare food for themselves ... and limitations of the Home Help and Meals on Wheels Services". Our Older Persons Survey on Food and Health is still taking place (see page1).

*An elderly person may be able to shop perfectly well in fine weather but may not be able to face slippery pavements or bitterly cold winds. When people are ill can 'Meals on Wheels' be made available for short periods? Old people need warm rooms, and money for food may be short because fuel bills are going to be high. The nutritional status of old people in Winter may depend more on helping them to sleep in a warm room, or by cutting out draughts from windows than in good advice on eating well.*

## **(III) Middle Years**

Healthy eating slogans, "eat five fruit and veg a day", or "avoid too much fat and sugar" are having their slow effect. With age the risk of illness

increases, and so does the number of people who need hospital care. The Audit Commission Wales report *Catering in hospitals* states "Hospital catering is an essential part of patient care. Patients need nutritious and appetising food ... to aid their recovery". It is the third job of community nutrition policy to *provide nutrition before and after hospital care*.

A patient badly fed before admission is likely to stay longer in hospital, to pick up an infection, to respond less well to surgery or treatment and to have a higher risk of death. *How could the nutritional status of people on the waiting list be improved?* Here indeed, is scope for new ideas and ingenuity. Protein-calorie malnutrition is the likely danger. Temporary 'Meals on Wheels' might be used in some cases. After patients are discharged from hospital, good food may make the difference between recovery and readmission. And one reason for hospitals being unable to discharge patients is that home based services, 'Meals on Wheels' or help with shopping or cooking, are not ready to help them, especially in rural areas.

**Come and have your say at our 27th September public meeting (see page 1)**

We of course deal with food and health. We do not forget there are other contributory factors for all age groups, such as smoking, drug abuse, obesity and lack of exercise.

## **National Youth Food Assembly**

The Alliances second National Youth Food Assembly, and the National Food Teachers Symposium, take place on 3 July 2002. These events take a great deal of organising - all done on a voluntary basis - as our contribution to make certain that young people are involved. We hope participants have an enjoyable day. Our thanks to the National Assembly for Wales for providing the venue. To our sponsors, the Co-operative Group, and to the Food Standards Agency Wales for what we know will be an excellent healthy lunch. Jean Sullivan, our School Liaison person deserves our special thanks, and all our volunteers who have made this event possible.

## **Four recommendations: Health and wellbeing in Wales**

The idea of NHS Service Agreements is very simple and essentially involves tracking and monitoring increasing amounts of public expenditure, and *securing preventive outcomes*, for coronary heart disease, diabetes, older people, and children.

- Vulnerable people require access to *affordable nutritious food* (and exercise). *Increased fruit and vegetable consumption is an essential ingredient for all.*
- The *Welsh Procurement Initiative* could be an important vehicle if it can

promote more nutritious school meals, lunch clubs for older people, and other community nutrition services.

- Development of Health Promotion to include 'Community Food Advisers' to *promote and support food security*, and to create local alliances between, for example, vulnerable population groups, service providers, food producers, retailers and caterers.
- A *Food and Health Policy Council* that will make public participation, and citizens involvement in policy formulation a reality.

## School Meals - Scotland

Reading the detailed debate of a Scottish Parliament committee, one can see how seriously they are debating and taking evidence on the proposed Scotland Free School Meals Bill. This long Scottish debate, including good media coverage, identified a range of complex issues, including design of new school buildings, stigma attached to free school meals, tooth decay, the provision of free school milk and water, pupil behaviour patterns, and peer group pressure. *With the state of child health in Wales, when can we have a similar debate?*

## School meals - Wales catering guidance

Guidance will be issued soon. In England guidance was published in April 2001. Why can we not take the lead – must we always follow England? A recent survey states that Cardiff uses a nutritionist to check menus or monitor provision. Whilst some authorities monitor statutory ‘food groups’ in broad terms, others were more specific. In Cumbria, for example, there is *"monitoring by trading standards food analysts and inspection by client services to ensure rigorous compliance with rigid county specifications with national nutritional guidelines written in"*. We are aware that a number of local authorities in Wales follow this practice.

## Food and the National Curriculum

Food is an optional element within the national curriculum, and is being ‘squeezed out’ by other material areas, for reasons discussed in previous editions. In our view care is required to *avoid fragmenting and watering down the important vocational and educational place of food technology within the national curriculum*. This is because this will lead to a lower profile and status for food, with serious consequences for personal health and well being, and all food related courses and occupations within the Welsh economy. As one of our members commented recently “on a desert island which will be of most use, the kitchen and skills given, or the computer rooms that are replacing them”.

## UK Welfare Food Scheme - Urgent Reform Required

The Scheme was introduced in 1940 as part of the war effort. This provided cod liver oil, orange juice and a pint of free milk or low cost milk to pregnant women and children under 5, plus national dried milk for bottle fed babies. In 1968 and 1971 beneficiaries were limited to women and children receiving welfare benefits. Cod liver oil tablets and orange juice were replaced by vitamin tablets containing vitamins A, D & C.

Today vitamin supplements, a daily pint of milk or dried baby milk are available to pregnant women, breast feeding mothers, and children under 5 in families receiving Income Support or Job Seekers Allowance.

The Alliance has written to the Chancellor of the Exchequer requesting the Scheme be revised as part of a wider policy to reduce the percentage of low birth weight babies. These are highest in poor wards. Recently the first scientific review of the Scheme occurred since 1940. The seventh draft appeared in November 1999.

## Current Scheme problems

The take up is low for both milk and vitamin supplements. Families in receipt of Income Support and the Job Seekers Allowance must ask for vitamin supplements at a clinic. Dried milk can be obtained from a chemist with a choice of commercial brands. The government recommend that women should take a folate acid supplement when anticipating pregnancy. If this is not already the case, would it be reasonable to assume that any further revision to the Scheme will contain folate acid? *But will they be available from the chemist?* Many commercial supplements are available for pregnancy and pre-pregnancy. *Will those available under the Scheme contain all the other minerals and vitamins recommended by the Royal College of Obstetricians and Gynaecologists?* Enquiries could be made about how the Scheme operates in Wales. How can we reform the Welfare Food Scheme to improve health and low birth weights in Wales?

## Recent Research

### Would you believe it?

Improving the vitamins, minerals, and fatty acids in the diet of young offenders appeared to reduce their anti social behaviour dramatically according to a Home Office backed study. The results are to be published shortly in the British Journal of Psychiatry. (Guardian 26th June 2002)

The recent report has interesting connotations if followed through. For why should not this be the cause of much disruptive behaviour also taking place in our schools. We await further experiments. Are we at last to see the dismissal of ‘junk food’, and the fruit and vegetable regime coming into its own, with the supply of vitamins, minerals, and fatty acids that we all need being seen as of overriding importance.

### Eating Smart

Providing large amounts of reliable information over prolonged periods on what individuals eat will be of enormous benefit to scientists, health experts and people themselves. Unfortunately, measuring what free living people eat with any degree of certainty is a major problem. You maybe able to accurately remember what you ate yesterday, but three days ago? East Anglia University and several private companies are applying smart card technology (familiar to all in the form of credit and loyalty cards) to this important public health problem (Dietetics Today, May 2002). Will this potentially powerful tool for measuring food intake find many applications? As a means of self empowerment, is this one way forward, whereby food consumers, in shops, schools, work places, care homes, etc. are enabled to monitor and influence their own diet, and is this the way future food policy will develop?

## Consultation

### Nutrition Strategy and Action Plan

The Food Standards Agency shortly publish their final consultation paper. Readers are encouraged to respond by 4th August 2002. Copies can be obtained from 02920 678911, or [wales@foodstandards.gov.gsi.uk](mailto:wales@foodstandards.gov.gsi.uk)

## Alliance Responses to consultations

### Infants and young children

The recent 'Halifax' Codex meeting (UN: international standards setting body), discussed the issue of health claims, particularly relating to infants and young children. We have now written to the Minister stating "we would really welcome clarification of the UK government's position regarding health and nutritional claims related to all foods for consumption by infants and young children".

### Food standards in health and social care

The Assembly consultation on the first draft of the *fundamental aspects of health and social care* has been completed, and in due course a wider consultation takes place (Contact Jonathan Issacs: (01686) 624784). The importance of this document from a nutrition perspective is that it relates to all public and private sector care settings. The national *minimum standards established for Care Homes under the Care Standards Act 2000* also establishes for the first time, formal requirements in respect of food and meal times for vulnerable people in nursing and residential homes. Readers may also note a forthcoming Assembly consultation on *Domiciliary Care* (Contact Nicholette Martin 029 20825191), and the public sector catering briefing in our last edition. The key will be the method and extent of financing quality standards. In respect of food the relevant NHS National Service Framework and specific dietary recommendations

could drive action, for example, for particular groups of people (see Health and wellbeing article – page 2). *How will standards and different monitoring arrangements be co-ordinated?*

### Food Poverty Bill

The Health and Social Services Minister will launch the Welsh consultation on the Food Poverty Eradication Bill on the 27th September 2002 (see page 1). Ron Bailey, the London based campaign organiser, will also be present to hear people's views. Ron accepts that the Bill is written for England, but they are very responsive to suggested improvements. Copies can be obtained by sending a stamped addressed envelope to the Alliance, or E-mail enquiries@foodjustice.org.uk

### NHS (Wales) Bill

The Alliance submitted detailed evidence to the Assembly Government and the Westminster MPs Welsh Committee. We proposed:

- extending Community Health Council functions beyond the NHS to include health and wellbeing.
- adding functions to the Wales Centre for Health, to include: "the assessment of policy and evaluating integrated working in Wales", and "developing and sharing expertise in promoting and sustaining public participation related to the protection and improvement of health". Plus, of course, independent public representation on the Centres management body.

- When regulating 'health professions' we proposed a wider role in regulating new professions, for example, 'Community Food Advisers'.

### 'Targeting Health Improvements for all'

In detailed evidence the Alliance proposed:

- (1) Improve the quality and uptake of school meals in Wales.
- (2) Improve the nutritional status of:
  - Patients awaiting hospital treatment or surgery.
  - Patients discharged from hospital to reduce risk of readmission.
- (3) Improve the nutritional status of elderly people living at home.

### Pesticide Residue Reduction Policy

The Pesticide Action Network (PAN) Europe is promoting a suggested European Union Directive that will require all EU Member States to establish pesticide use reduction programmes within two years, based on a common framework, with specific numerical targets designed to achieve progressively more stringent, qualitative and quantitative reductions in pesticide use and with regular evaluation and revision involving stakeholder participation. Recently, the Alliance received an Assembly report on pesticide reduction policy. In response we have requested Assembly Government views on the suggested Directive. PAN Contact (0207) 274 8895. [www.pan-uk.org](http://www.pan-uk.org)

Welsh Food Alliance



Cynghrair Bwyd Cymru

## Membership Application

Name: \_\_\_\_\_  
Tel. no: \_\_\_\_\_ Fax no: \_\_\_\_\_  
Email: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Please let us know if you wish to contribute in specific ways:

Send to WFA, 216 Stow Hill, Newport, NP20 4HA  
with £5 p.a. for individual membership or £40 for corporate membership.

## Get In Touch...

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