

Consultation response from the  
National Heart Forum

Consultation: Draft diet and nutrition  
strategy

Consulting body: Food Standards Agency  
Scotland

Date: September 2003

**NATIONAL HEART FORUM  
RESPONSE TO:  
FSA SCOTLAND'S *DRAFT DIET AND NUTRITION STRATEGY***

**September 2003**

The National Heart Forum

The National Heart Forum (NHF) is the leading alliance of over 45 organisations working to reduce the risk of CHD in the UK. Member organisations represent the medical and health services, professional bodies, consumer groups and voluntary organisations. Members also include many individual experts in cardiovascular research. Government departments have observer status. The purpose of the NHF is to work with and through its members to reduce disability and death from CHD. Our four main objectives are:

- To provide a forum for members for the exchange of information, ideas and initiatives on coronary heart disease prevention;
- To identify and address areas of consensus and controversy;
- To develop policy based on evidence and on the views of member organisations;
- To stimulate and promote effective action.

The NHF embraces professional, scientific and policy opinion in current issues on CHD prevention. It co-ordinates action to reduce heart disease risk through information, education, research, policy development and advocacy.

**INTRODUCTION**

The NHF welcomes the opportunity to comment on the consultation document and would like to commend the Agency for setting out its statement of general objectives and practices for the next 3 years in a clear and comprehensible format.

The Scottish Diet Action Plan rightly identifies that a significant number of avoidable premature deaths from coronary heart disease are attributable to poor diet. The principle dietary changes that are needed to benefit heart health are:

- Increased fruit and vegetable consumption
- Reduced consumption of fat, especially saturated fat
- Reduced consumption of salt
- Appropriate calorie intake for weight management

Further analyses published by the National Heart Forum have estimated the predicted changes that can result from modest and achievable changes in diet-related risk factors:

- If everyone were able to reduce and maintain a level of serum cholesterol of less than 6.5mmol/l, the CHD reduction would be around 11%;
- A reduction in diastolic blood pressure to a level below 76mmHg across the population would result in a 15% reduction in CHD for men and 12% for women;
- Changes in the prevalence of obesity could be responsible for a 3% change in CHD if the prevalence of BMI over 30 was reduced to 6% among men and 8% among women.<sup>1</sup>

## SPECIFIC COMMENTS

As part of its diet and nutrition strategy, FSA Scotland may wish to consider the following points which have been made under the different section headings.

### 1. Promote consumption of healthy diet and food choices

- NHF commends FSA's preliminary research to inform ways of targeting healthy eating messages to address the gap between people's awareness of what they should eat and what they actually do eat. Another area of focus for FSA Scotland should be to look into how healthy eating messages are exploited by industry to successfully market products, in order to help the development of more effective communication strategies. In order to tackle the problem of confusing nutritional messages, FSA Scotland should also look into ways in which the use of health and nutritional claims for promotional purposes should be better regulated.
- As part of its on-going role, FSA Scotland in partnership with others, needs to address the difficulties raised where nutritional advice to increase consumption may conflict with food supply or safety issues eg the eat more oily fish message versus need to conserve fish stocks and fears over dioxin and heavy metal contamination.
- NHF is pleased with the FSA's commitment to estimate the Scottish population sample size required in FSA UK surveys to ensure meaningful results for Scotland. NHF would also like to stress the importance that diet and nutrition surveys take into account food eaten outside the home, as well as the likely effect of mis-reporting.
- FSA Scotland should also continue to disseminate widely its information leaflets – particularly those such as the eating for pregnancy and breastfeeding leaflets – which are targeted at the priority areas such as early years, identified in the *Improving health in Scotland* report and NHF's own *young@heart* report<sup>ii</sup>. FSA Scotland should also continue to target hard-to-reach groups such as the black and ethnic minority community.

### 2. Promote the preparation and provision of meals which offer a balanced diet

NHF welcomes FSA Scotland's commitment to participate in the implementation planning for taking forward the *Hungry for Success* report. NHF also commends its plans to co-ordinate the development of nutrient specifications for manufactured food products used in school meals – a recommendation that has been made in NHF's *young@heart*<sup>ii</sup> and *Looking to the Future*<sup>iii</sup> reports.

As part of its work in supporting the whole school approach to improve the nutritional quality and uptake of food in schools, FSA Scotland could also:

- Advocate that other food sold in the school environment including tuck shops and vending machines meets the nutritional standards;
- Encourage strengthening of children's practical understanding and skills around food and nutrition through working with stakeholders to ensure these areas are included in the national curriculum;
- Together with relevant partners, establish an independent accreditation system for providers of educational materials featuring food or branded food products, to help teachers assess the quality, reliability and impartiality of their content<sup>ii</sup>.

As part of its work to provide guidance and support for caterers to enable them to develop a working knowledge of food and health and its application to catering, FSAS should also:

- Encourage caterers to include healthy options and promote uptake of these at point of sale through levers such as competitive pricing<sup>iii</sup>.
- Encourage caterers to provide nutritional labelling at point of sale.
- Encourage caterers to provide healthy portion sizes.
- Consider the development of an award scheme for healthy catering institutions.

### **3. Increase access to healthier food choices, particularly in low income and rural areas**

In his annual report for 2003, the CMO for Scotland identified women and children's health as a key priority, as children are the future of Scotland and women have a key role to play in their health. FSA Scotland should tackle access to healthier food choices for families from disadvantaged communities as a priority.

As part of its work in this area, FSA Scotland should:

- Recognise that poor people's most immediate concern is lack of money.<sup>iv</sup>
- Encourage and support local food projects and co-ops.<sup>iv</sup>
- Encourage the development of more street and local markets, as well as local shops selling good quality healthy food in deprived areas.<sup>iv</sup>
- Encourage industry stakeholders to reduce prices on healthier products eg during price wars.<sup>iv</sup>
- Continue to support the implementation of nutritional guidelines for school meals across the whole of Scotland, and begin to consider its role in the monitoring and evaluation of the standards.

### **4. Work with the food manufacturing, processing and retailing industries to further develop healthier food choices.**

- NHF welcomes FSA Scotland's focus on salt, but would like to stress the need to also address high fat and sugar content of manufactured foods.<sup>iii</sup> In addition, FSA Scotland needs to work with FSA UK to closely monitor food products, to ensure that levels are brought down and kept down.
- FSA Scotland should also work with industry on the issue of large portion sizes, to ensure they are appropriately labelled with nutrition information, and appear along-side regular sized portions so that consumers have the opportunity to make informed choices.

### **5. Ensure that agriculture and fisheries interests contribute fully to the achievement of the Scottish dietary targets**

Through its efforts to promote the consumption of healthy diet and food choices, FSA Scotland will inevitably contribute to a demand for healthier products such as fruits and vegetables. It should therefore work with stakeholders from agriculture and fisheries to discuss how they can meet this demand.<sup>iii</sup>

### **6. Monitor progress towards the Scottish dietary targets set out in the Scottish Diet Action Plan**

- The Improving for health in Scotland report rightly identifies an increased consumption in Scotland of what is commonly referred to as 'junk' food. Future assessments of dietary intakes in Scotland should also assess the rise in consumption of snacks, fast food, confectionery and soft drinks.
- The Scotland's Diet Action Plan identifies incessant promotion and advertising of foods which should form only a small part of the overall diet as a problem. FSA Scotland should advocate controls on marketing in schools and make the recommendation to broadcast regulators to ban advertising during children's TV programmes.<sup>ii</sup>

## RELEVANT WORK / INITIATIVES OF THE NHF

### Nutrition toolkit

NHF is developing a toolkit on nutrition and food poverty which will assist those working at local level in the development and implementation of local food poverty and nutrition projects. The toolkit brings together evidence on the effects of poor diet on health, examples of good practice and guidance on how to develop effective action on nutrition. It is currently being developed in a format for England and **NHF would welcome the opportunity to work with FSA Scotland and partners to develop a Scottish version of the toolkit.**

### *Young@heart*

NHF's *young@heart* initiative aims to ensure that every child born in the UK will be able to live to the age of at least 65 free from avoidable coronary heart disease. The *young@heart* policy framework document<sup>ii</sup> **sets out a comprehensive nutrition strategy** to achieve the initiative's aims. A second report from the *young@heart* initiative<sup>v</sup> is due to be launched in the autumn. This report will provide a review of the evidence and a comprehensive audit of UK policies which impact on children's and young people's health.

### Status of this response

The views expressed in this paper are consensus-based and do not necessarily reflect the views of individual members of the National Heart Forum.

Mm/nutrition/7746

---

<sup>i</sup> McPherson K, Britton A and Causer L. 2002. Coronary Heart Disease: Estimating the impact of changes in risk factors. London: The Stationery Office.

<sup>ii</sup> National Heart Forum. 2002. Towards a generation free from coronary heart disease: Policy action for children's and young people's health and well-being. London: The Stationery Office.

<sup>iii</sup> National Heart Forum. 1999. Looking to the future: Making coronary heart disease an epidemic of the past. London: The Stationery Office.

<sup>iv</sup> National Heart Forum. 1998. Social inequalities in coronary heart disease: Opportunities for action. London: The Stationery Office.

<sup>v</sup> National Heart Forum. 2003. A lifecourse approach to coronary heart disease prevention: Scientific and policy review. London: The Stationery Office (*in press*).