Choosing interventions to reduce food poverty

<div style="text-align:right">E</div>

Section D described the many types of barriers to healthy eating experienced by people in food poverty. This section looks at those barriers to healthy eating for which actions can be organised and delivered locally. However, tackling one barrier by an individual local food project will only have a very limited impact, because of the multi-factorial nature of food poverty. At local level food poverty needs to be addressed by integrated programmes of activity. To be effective they need to tackle a range of barriers and be supported by coordination between local planning authorities, health authorities and other key players.[1]

Many local food projects are also supported by the national health, social and environmental programmes described in Section C. However, there are clearly some areas – such as food advertising on children's TV and reform of the Common Agricultural Policy (CAP) to support healthy diets – which have not yet been adequately addressed by government policies. Local communities and PCTs may be interested in joining campaigns to tackle them.

This section also outlines the different settings for local food programmes and underlying principles for success. Examples of good practice are provided for programmes and for individual project components of programmes in the different settings.

See Tool E1 *Local actions that can lower barriers to healthy eating on a low income.*

Settings for local food programmes

There are three main settings for local food programmes: the community, schools, and workplaces. A local nutrition and food poverty strategy can include projects that cover one or more of these settings, and can be complemented by actions in primary care. Examples of individual components of different programmes are provided on pages 130-137.

The community setting

Community food projects can have some, if not a large effect on eating habits and can improve skills and confidence in food purchasing and preparation. Long-term indications of changes in nutrition, such as blood vitamin levels, are harder to find. However, many argue that assessment of the success of food projects should include their wider effects on regeneration and social capital. In this context they can:[2]
- decrease social isolation
- give people a new sense of worth and increase feelings of well-being
- raise levels of skills and training
- enable individuals to take more control of their health and welfare.

The underlying principles of successful local community programmes on healthy eating

Although there are many different types of project, the following are some underlying principles which are key to success:[2, 3]

- Focusing on diet alone or diet and physical activity rather than tackling a range of different health risk factors.
- Developing imaginative partnerships between the public sector, the local community and the private sector.
- Having clear goals based on a proven, effective theoretical base to encourage changes in people's behaviour through changes in knowledge and attitudes, the development of practical skills and through improving access to a healthier diet.
- Using multiple strategies which include the development of a supportive environment in which healthier choices are affordable and available and in which the culture is supportive of healthy eating.
- Ensuring that programmes are of sufficient intensity and duration and have sustainable funding rather than short-term start-up funding. (It is increasingly being recognised that it takes a minimum of two years to establish community food initiatives such as food access projects.)
- Developing interventions with the real involvement of local people, and creating projects which respond to local needs and have shared ownership and credibility.
- Ensuring that the different agendas of professionals, volunteers and users are reconciled.
- Generating and maintaining true support from community members.
- Energy and commitment from key workers, whether paid or voluntary.

See Tool C1 *The health agenda related to food poverty* for information on government programmes specifically targeting the community, such as 5 A DAY.

Examples of good practice

The projects described below are examples of good practice for programmes that tackle eating on a low income. More examples of good practice can be found in:

- *Making Links: A Toolkit for Local Food Projects* by Sustain (see details on page 134).
- www.healthaction.nhs.uk
- reports of the 5 A DAY pilot projects on www.dh.gov.uk

The Expanded Food and Nutrition Education Programme (EFNEP)

The EFNEP services have been available to people on low incomes for over 30 years in all 50 states of the US and have been applied to groups of low-income women in the UK.[4] An evaluation has shown significant short- and long-term changes in knowledge, attitudes and behaviour in all ethnic groups. The keys to its success are that:

- it trains people from the local community to educate other homemakers in food/nutrition topics under the supervision and support of trained professionals or a community nutrition educator
- it is tailored towards clients' needs
- it builds on the positive aspects of clients' existing diets, and
- it develops skills/competences (menu planning, shopping and cooking on a limited budget, food storage, meeting nutritional requirements) for providing nutritious diets within available resources.

Promoting Healthy Eating through a Dorset-wide Strategic Partnership

Partners include the local council and West Dorset Food and Land Trust. The interventions include: Grow it, Cook it, Eat it; fruit breakfast and healthy lunch boxes; hot meals in schools; a local food directory and cook book; and teaching cookery skills.
For more information contact 01202 858350.

Yeovil Healthy Food Project

This project began with community mapping and then identifying local producers and shopkeepers interested in supplying healthy food and asking the community to identify practical ways to meet their needs. So far the project has set up a food distribution centre to supply food co-ops, local shops and school fruit tuck shops. It is also supporting the development of community-led growing projects, and developing work with local shops and a local wholesaler. The health benefits so far are reduced social isolation and increased fruit and vegetable consumption.
For a copy of the report of the project, contact 01935 412838.

I (Community Action for Food and the Environment)

This programme aimed to make improvements in health, the economy and the environment by increasing access to a healthier diet, particularly for those people on low incomes. It also aimed to encourage greater production and consumption of local produce. It included Fresh Ideas, a programme to support community food initiatives which aim to improve access to a healthier diet. I's work is now part of the East Sussex Food and Health Partnership.
For more information contact 01273 485304.

HELI Forum (Healthy Eating on a Low Income)

This Forum is part of the Isle of Wight Anti-poverty Initiative and has over 50 members. The programme identifies local food poverty issues, and includes eating habits and shopping basket surveys, cookery demonstrations, planning a food poverty conference, producing a healthy eating calendar with budget cookery tips and food-in-season recipes, and circulating a quarterly newsletter.
For more information contact 01983 535 437.

Airedale and Craven Primary Care Trust

A 5 A DAY pilot in Airedale and Craven focuses on specific population groups and works through five main areas: community development, primary health care, schools, retailers, and the media. Two local food networks were set up, bringing together local workers with an interest in food, and working groups were then formed on childhood nutrition, nutrition for the elderly, and local food production. A particularly interesting programme is the 5 A DAY training session for local cooks which was organised with the Bradford Community Dietetics Department. Seventy-five per cent of the cooks taking part in the session have since tried out new ideas for including fruit and vegetables in their school meals.
For more information see www.dh.gov.uk/PolicyAndGuidance/HealthAndSocialCare/Topics/FiveADayGeneralInformation

The school setting

Children's and parents' awareness of healthy eating, and their desire to be more informed and involved in the food provided by schools, are generally increasing. However, although most children know what a healthy diet is, this does not mean that they eat healthily.[5]

There are several types of school food project that can be effective in improving diets but, to maximise their effectiveness, they need to be part of a whole-school approach. (This means that the project involves not just the taught curriculum, but also school catering, tuck shops and extra-curricular activities.) Programmes which take a whole-school approach appear to be more effective in improving diet than teaching alone.[6] They can be even more effective if supported by family involvement and interventions in the wider community.[3]

See Tool C1 *The health agenda related to food poverty* for information on government programmes specifically targeted at the school setting, such as the National Healthy School Standard and Food in Schools.

Examples of good practice

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5 A DAY the Bash Street Way

This is a whole-school intervention aimed at increasing the consumption of fruit and vegetables among primary schoolchildren. The programme includes school tuck shops and school lunches, tasting opportunities, point-of-purchase marketing (posters and quizzes), newsletters for children and parents, and curriculum materials. The evaluation of the programme indicates that, compared with control schools, there was a modest but significant effect on cognitive and attitudinal variables and on fruit intake.

For a copy of the final report contact the Enquiry Desk, Library and Information Services, Food Standards Agency (020 7276 8000 or e-mail: library&info@foodstandards.gsi.gov.uk).

Food Dudes

Food Dudes, a project developed by the Bangor Food Research Group, appears to have increased the amount of fruit and vegetables eaten at primary school during lunch and break times. This is a whole-school package with two main elements: a video featuring the heroic Food Dudes, and tasting opportunities with associated small rewards such as stickers, pens and pencil cases.

For more information see www.psychology.bangor.ac.uk/research/bfru

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The workplace setting

The workplace offers opportunities to promote healthier lifestyles – including healthy eating – as workplaces have a stable population, a constant environment and opportunities for peer support or competition. However, there are no evaluated examples of workplace programmes which target those lower paid workers who work after main office hours – such as cleaners or security guards.

Workplace nutrition interventions are generally aimed at weight loss, healthy eating and healthy catering.

Weight loss programmes

Weight loss programmes in the workplace commonly involve an element of competition. Competitions between teams are more effective than individual competitions and these programmes tend to be more effective for men. (Women tend to prefer programmes which

encourage cooperation rather than competition.) Recruitment rates are high, but most weight loss is regained once the intervention has finished.[7]

Healthy eating programmes

Healthy eating programmes based on screening and individual counselling are more effective than those based on group activities and workplace-wide programmes.[7]

Healthy catering

A review by the Health Education Authority concluded with four main recommended strategies for healthy catering initiatives: [8]
- Adapting popular choices to make them more healthy.
- Implementing healthy catering practices across the board, e.g. small reductions in the fat content of meals, and increasing the proportions of vegetables and starchy foods.
- Taking care to present healthier items appetisingly.
- Promotion of specific menu items in larger outlets where there are a number of choices.

Actions in primary care

A well motivated, informed and skilled primary care team could play a major part in facilitating dietary change in their patients. It is suggested that the most appropriate role for GPs is to give their endorsement to the importance of nutrition both to patients and to other members of the primary care team. There is good evidence that nurse-led lifestyle modification programmes in primary care can result in modest changes in risk factors. There is also currently a mismatch between the needs and expectations of patients and the level of involvement in nutrition by primary care professionals.[9]

Lay 'food and health advisors' are local people who are recruited and trained to work in primary care teams and alongside community dietetic services. They appear to increase the coverage of community initiatives, and act as a link or 'culture broker' between formal health services and health professionals and members of socially deprived communities.[10] There are now 50 such schemes across the country.

Health professionals such as midwives, health visitors, community nutritionists and dietitians also have an important role to play in facilitating dietary change through a range of initiatives such as Sure Start projects, increasing breastfeeding rates and raising uptake of the Welfare Foods Scheme/Healthy Start.

Examples of good practice

Fruit and vegetable project for adults on low incomes
A recent randomised trial showed that brief interventions by nurses in primary care were effective in increasing consumption of fruit and vegetables among adults on low incomes. There were two groups – one receiving nutrition counselling and the other behavioural counselling. Within each group, each patient received two 15-minute consultations two weeks apart, and written information to support the consultations. Although nutrition counselling was effective, behavioural counselling based on social learning theory and the Stages of Change model was more effective.[11]

The Bolton Community Nutrition Assistants' Project

This project began in 1995 and has achieved Beacon status. Local people are trained by food and health advisors to develop practical activities to address the food and health needs of their local communities. Interventions include discussions, cooking and tasting sessions, food games, shopping, food co-operatives and grow-your-own food schemes. An evaluation indicated that over half the respondents shopped and ate more healthily as a result.[12] More than two-thirds said that they preferred a local person advising them, rather than a health professional.

For more information contact Julie Holt, Food and Health Advisor, Nutritional and Dietetic Services on 01204 360094.

Further guidance

Information on food and food poverty programmes in general is available from:

Cancer Prevention: A Resource to Support Local Action in Delivering the NHS Cancer Plan
Produced by the Health Development Agency.
Available online at www.hda-online.org.uk or free from the Health Development Agency.

Poverty Bites: Food, Health and Poor Families
By E Dowler, S Turner and B Dobson. Published by the Child Poverty Action Group. Price £9.95.

Hunger from the Inside: The Experience of Food Poverty in the UK
Published by Sustain. Price £10 (to Food Poverty Network members), or £20.

Developing Local Networks to Tackle Food Poverty
Published by Sustain. Price £5 (to Food Poverty Network members), or £10.

See also the websites www.modernnhs.nhs.uk/nhsbeacons and www.haznet.org.uk

Individual components of local food programmes

This section provides examples of individual components which can form part of local food poverty programmes. The projects have been listed according to the different programme settings in the community.

Projects in the school setting

Further guidance

General guidance can be found in:

Sodexho School Meals and Lifestyle Survey 2002
Published by Sodexho Limited. Price: £120.
This includes eating patterns, children's and parents' views on school food and regional differences.

Eating Well at School: Dietary Guidance for School Food Projects
Part 1: For school governors and head teachers
Part 2: For policy makers
Part 3: For catering contract managers
Published by the Department for Education and Skills.

School food policies

Many schools now have food policies which set a framework for all food-related activities in school, ensuring that children receive consistent messages and support. The setting up of a school food committee or a school nutrition action group (SNAG) involving staff, pupils and caterers and, when appropriate, health and education professionals, is a useful step in drawing up a school food policy. Only 12% of schools in the UK have such committees and there has not been an increase since 1998.[5] Schools which do have a committee are far more likely to encourage healthy eating at home and in schools. However, pupil participation in some school food committees is low, and only around 3% of the secondary school population are really involved with the food that is served at their school.

The school food policy can be part of the healthy eating option of the National Healthy School Standard, which all local education authorities are now signed up to. Schools could be encouraged to choose this option.

Further guidance

Chips are Down
Published by the Health Education Trust (E: enquiries@HealthEdTrust.com).
Contains detailed information on developing school food policies and school nutrition action groups.

The Grab 5! Pack
Published by Sustain. Price £40 plus p&p, or downloadable from www.grab5.com.
The *Grab 5! Pack* includes an action pack (with useful contacts and tips on how to set up practical initiatives that promote fruit and vegetables, such as school gardens, cooking schemes and breakfast clubs), a key stage 2 curriculum pack, and a model school food policy.

See Tool E2 *Model school food policy.* This reproduces the model school food policy from the *Grab 5! Pack* described above.

Breakfast clubs

The proportion of children not eating breakfast increases with age and the trend is rising. Currently, 18% of boys and 21% of girls in England aged 15-16 have nothing to eat before school. The food that many other children eat is not breakfast at home, but sweets, crisps, chocolate, and fizzy drinks bought on the way to school.[5]

There is good evidence which shows the physiological benefits of eating breakfast:[13]
- The daily percentage of energy from fat is lower.
- Breakfast-eaters tend to be thinner.
- Serum cholesterol levels are lower.

There is also anecdotal evidence that children who eat a good breakfast concentrate better during morning school.

In response, schools have been encouraged by the Department of Health and the Department for Education and Skills to set up breakfast clubs. There are several different models, ranging in complexity from simply supplying tea and toast to running a catering service and providing planned activities. An evaluation of 58 breakfast clubs showed that their aims include improving health and nutrition, improving education, developing social skills, and improving the relationship of the school with parents.[14] However, the food supplied was not always nutritious and well balanced.

See Tool E3 *Checklist for running a breakfast club.* This is reproduced from *Breakfast Clubs: A How to Guide*, described above.

School lunches

Compulsory nutritional standards for schools meals were re-introduced in 2001. They apply to all lunches supplied by schools during term time, whether or not they are free. They also apply to packed lunches provided by the school for school outings. The Food Standards Agency is carrying out a survey to assess compliance with these standards and associated guidance. However, offering children healthy choices does not mean that they will choose them. The top five foods that children think schools should provide are: pizza, burgers, fresh fruit, squash/fizzy drinks and sandwiches.[5] It is at least encouraging to see fresh fruit on the list!

Schools meals can make a significant difference to children's diets and 24% of parents suggest that their child would not have a proper meal if it was not available at school.[5] Families on low incomes claiming free school meals can find it much harder to feed the family in the school holidays.

Fifty-four per cent of children in social classes D and E are entitled to free school meals. However, the uptake of free school meals is very low and decreases with age: 30% of 8-10 year olds take their free meal, falling to 12% of 15-16 year olds.[5] There are several reasons for not claiming free meals, including the considerable stigma, embarrassment and bullying of children when openly claiming their free meal. Their choice may also be limited, as the value of the free meal may not cover the food they wish to choose. The issue of claiming free meals is being addressed in some schools by the introduction of smart cards for all children. This benefits all children by reducing the risk of losing cash or having it stolen.

See Tool E4 *Nutritional standards for school lunches.* This gives the compulsory nutritional standards.

See Tool E5 *Nutritional guidelines for school meals.* This gives a summary of the Caroline Walker Trust guidelines.

School cooking clubs

There is little opportunity within the national curriculum for children to learn about cooking and to develop their cooking skills. However, 82% of parents wish their children to be taught cooking at school and 68% of children would like to be taught.[5] There are two major projects in this area: Cooking for Kids and Focus on Foods. These clubs take place out of school hours or in holidays, and may provide a one-day experience only. For some children, they may be one of the few opportunities they have to cook. The cooking clubs also give children the opportunity to handle, taste and prepare foods that are new to them.

Further guidance

Cooking for Kids Manual
Published by the Department of Health. Available free from Joe Monks at the Department of Health (T: 0207 972 2000).

Focus on Food
Details of the Focus on Food campaign and curriculum materials to support classroom learning can be downloaded from www.waitrose.com/focusonfood

Materials are also available by e-mailing cookschool@designdimension

Healthy snacks

The evidence suggests that fruit tuck shops may be effective in increasing fruit intakes when part of a whole-school approach.[15] However, by themselves they do not have a significant effect on intake.[16]

The National School Fruit Scheme is being rolled out to all schools in 2004. This will supply a free piece of fruit to all children aged 4 to 6. The results of the pilots have been published in *The National School Fruit Scheme Evaluation Summary*,[17] which is available from the Department of Health website.

Some schools have devised a healthy snack policy which includes food sold in school vending machines as well as food brought in by the children.

Further guidance

Set Up a Fruit Tuck Shop
A guide from the Ideas Bank section of *Grab 5*. See www.grab5.com

National School Fruit Scheme
For information see www.dh.gov.uk

Projects in the community setting

Further guidance

General information can be found in:

Food Projects and How They Work
By P McGlone. Published by the Joseph Rowntree Foundation.

Making Links: A Toolkit for Local Food Projects
Published by Sustain. Price £5 (to Food Poverty Network members), or £10.

5 A DAY guidance, published by the Department of Health:
Booklet 1: A Local 5 A DAY Initiative: Increasing Fruit and Vegetable Consumption – Improving Health
Booklet 2: A Local 5 A DAY Initiative. A Handbook for Delivery.
Available from: www.dh.gov.uk

The Food Poverty Project Database
www.foodpovertyprojects.org.uk
This has details and contact points for food poverty projects across the country. You may find it helpful to arrange to visit a selection of projects to see how they operate.

Let Us Eat Cake!
This quarterly newsletter from the Food Poverty Network has ideas for projects, and information on funding sources, new publications, and regional and national events. To subscribe, call 020 7837 1228 or e-mail foodpoverty@sustain.web.org

Information projects

People on low incomes have requested more information about healthy diets,[18] although their knowledge levels are about the same as for most other people except for those on the highest incomes. A recent review showed that self-help resources were as effective as advice from dietitians and nurses, and better than advice from doctors, in achieving lower blood cholesterol levels through dietary changes.[19]

Further guidance

Hassle Free Food: A Guide to Cheap, Quick, Healthy Eating
Published by the Health Education Board for Scotland. Available to download from www.hebs.org.uk.

So You Want to Lose Weight for Good
Published by the British Heart Foundation. Available from: www.bhf.org.uk

Transport to supermarkets

'Transport to supermarket' schemes involve local authority subsidised public transport, supermarket-run buses or local projects. They are particularly helpful for older people and people with disabilities, but can help anyone living in a 'food desert' to bring heavy and bulky shopping home. They can therefore improve access to shopping for fruit and vegetables, and also enable users to buy better quality food at cheaper prices.

Further guidance

Community Transport Association
Highbank
Halton Street
Cheshire SK14 2NY
W: www.communitytransport.com
T: 0161 367 8780.
A free advice and information service on a wide range of community transport initiatives.

Feguslie Park Access to Shopping Project Report
Available free from Annette Beattie on 0141 887 9650.

Food co-operatives

A food co-operative is a membership organisation which organises to buy food in bulk, either direct from wholesalers or from farmers. The savings of buying in bulk can be a third to a half of local shop prices, with fruit and vegetables offering the biggest savings. Some schemes also deliver food to people who are elderly, disabled or housebound. They are often run by local unpaid volunteers who gain new skills and can increase their chances of obtaining paid employment.

Community food co-operatives can improve local access to affordable fruit and vegetables and allow people to try new foods at affordable prices. They also help develop self-confidence, self-esteem and new skills in those running the co-op. They are often staffed by unpaid volunteers but do need start-up funds. Grants may be available from the Neighbourhood Renewal Fund, New Deal for Communities and the Single Regeneration Budget. The Co-operative Wholesale Society (CWS) offers small grants under the Community Dividend Scheme (0161 827 5349).

Further guidance

Food for Thought
Available from Wolverhampton Food Co-ops Umbrella Group (T: 01902 304 851). Price £1.
A report and video.

Starting Your Own Community Food Co-op
Available free from the Co-operative Wholesale Society (T: 0161 827 5349).
The Co-operative Wholesale Society also runs the Community Dividend Scheme (T: 0161 827 5950) which can help by offering small grants for setting up co-ops.

Community cafés

Community cafés provide a place where people can eat a cheap meal in a sociable setting. They do not necessarily provide healthy food. They can, however, be used as a point of access for information and advice about health and welfare and may develop new skills in volunteers.

Further guidance

Just for Starters
Published by and available from the Health Education Board for Scotland (T: 0131 536 5500). Price £60.
An information and advice pack on community cafés.

Community Catering Initiatives
Published by Community Health UK. Available from Community Health UK (T: 01273 234868; www.chuk.org). Price £7.50 + p&p.
A report of six community cafés including a checklist of criteria necessary for a successful community café.

Cooking clubs

Cooking clubs involve local people working with a health professional in one or a series of practical cooking sessions. As well as teaching cooking skills, the clubs give people a chance to try different foods without the fear of wasting money if they do not like them. Evaluation shows that they can increase nutritional knowledge and improve food-related skills as long as the people have a go themselves and the examples are relevant to participants' cultural, social and economic circumstances.[20]

Further guidance

Get Cooking, Get Shopping
Published by the Co-operative Group. Can be downloaded from www.co-op.co.uk.
A free resource which shows people how to run a cooking club and learn to cook for themselves. It comes in two sections, one for organisers and tutors and the other for participants.

OK Let's Cook
Available from Healthy Norfolk 2000 (T: 01603 487 990). Price £2.
A book of healthy low-cost recipes produced by the community food group of Norwich Community Health Partnership.

No Dosh, Good Nosh
Produced by Nightsafe, a charity that works with homeless people. Available from Nightsafe (T: 01254 587 687). Price £1.
Contains cheap, healthy and easy-to-cook recipes.

www.lutonpct.nhs.uk/cookclub.htm
This website, produced by Luton Health Action Zone Asian Cookery Club (see below), includes some recipes.

Examples of good practice

Asian Cookery Club in Luton
Around 500 people have attended classes which are run by paid local club leaders. These are local women who have completed the accredited training course devised by the project. This project has been awarded Beacon status.
For more information contact 01582 497 162.

Locally grown food projects

These include grow-your-own schemes, farmers' markets and box schemes. The objectives include not only healthy eating but also sustainability, transport, neighbourhood renewal, education, leisure and increased social capital. There is evidence that farmers' markets offer good value for money, provide an opportunity to buy fresh, local produce and give people a sense of well-being and belonging. They can also revitalise the local rural economy. There is similar evidence of positive effects of farmers' markets as there is for community growing schemes.[3] Another initiative is box schemes, where a box of produce is delivered to or collected by an individual consumer. Most current box schemes are concerned with organic foods and do not involve deprived areas.

Further guidance
The Soil Association
T: 0117 929 0661
Provides training on setting up and running a farmers' market.

Growing Food in Cities
A toolkit produced by Sustain. Available from Sustain. Price £10.

City Harvest
Published by Sustain. Available from Sustain. Price: full report £30, summary £5.
A report on food production in London.

Community shops

Community shops are set up as a response to the closure of existing local shops, particularly on housing estates and in rural areas. They rely on volunteers and grants or subsidies. There are no formal evaluations available.

Further guidance
How to Make Your Community Shop Succeed
Published by Community Enterprise Ltd (0131 475 2345).

If the Village Shop Closes ... A Handbook on Community Shops
Published by Oxford Rural Community Council (01865 883488). Price £3.50.

Village Shops and Post Offices: A Guide to Village Investment
Published by VIRSA (Village Retail Services Association – 01305 259 383). Price £15.

Food redistribution

These schemes redistribute surplus food from shops and supermarkets to day centres and hostels for the homeless. Supermarkets are often reluctant to take part due to hygiene concerns about un-refrigerated foods and food eaten after the use-by dates. Also, the schemes may not be empowering to the people receiving the food, and can mask the underlying issue of overproduction of food.

Further guidance

Crisis Fareshare
T: 0870 011 3335
Crisis Fareshare has developed a rollout scheme and can offer information on how to set up a food redistribution scheme.

South and West Lancashire Food Bank
T: 01695 555 717 (Linsey Pavsia)
An example of a redistribution scheme.

Services for older people

Meals on wheels provide essential support to help older people live in their own homes when they can no longer cook for themselves. They are recognised as an essential component of community care. There is also the potential for them to provide social support, although many people find that the meals are left in a rush.

Lunch clubs not only provide food but are also sociable and give carers a rest. However, there are insufficient schemes to provide for all those who could benefit, and some are too expensive. They are run by a range of voluntary organisations or through local authorities.

Many people living in residential homes and sheltered accommodation are undernourished. There are many underlying reasons for this, including long-term poverty and illness and, in residential homes, also inappropriate food and food that does not meet nutritional guidelines.

Further guidance

The following two organisations are both major providers of lunch clubs.
Age Concern Lunch Clubs T: 020 8679 8000
Women's Royal Voluntary Service T: 01235 442900

Eating Well for Older People: Practical and Nutritional Guidelines for Food in Residential and Nursing Homes and for Community Meals
Published by The Caroline Walker Trust.

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Tools

Local actions that can lower barriers to healthy eating on a low income

Providing help with money matters
- Local authority anti-poverty unit
- Debt counselling from Citizens Advice Bureaux
- Cheaper credit from credit unions
- Bartering of goods and services through Local Economy Trading Schemes (LETS)
- Claiming benefit entitlements
- Discretionary benefits from the Benefits Agency
- Increasing literacy and numeracy skills

Providing information and support to improve knowledge and skills in:
- healthy diets
- budgeting
- shopping
- food labelling
- food storage
- foods that can be prepared at home quickly and easily
- cooking
- structuring time for eating as a family
- breastfeeding
- improving literacy and numeracy skills.

Providing better housing conditions to tackle:
- lack of cooking equipment or no kitchen
- lack of storage to enable bulk buying
- lack of access to gas, meaning higher fuel bills.

Improving access to cheap, good-quality foods, especially fruit and vegetables
- Better range, quality and price of foods, particularly fruit and vegetables, in readily accessible shops.
- Cheaper, more convenient and easier to use transport to supermarkets for those without cars.
- Supporting shopping-carrying schemes, food vans and home or community delivery schemes from retailers.
- Safer streets to reduce the fear of crime which limits walking even for those who can carry heavy shopping.

Helping to change food preferences for adults and children
- Providing opportunities to try different foods without fear of waste.
- Supermarket tours, helping people to select foods and to interpret food labels and health claims.

Improving nutrition in schools
- Providing breakfast before school, to help children who are not given breakfast at home.
- Offering healthy snacks from tuck shops or vending machines.
- Offering healthier school meals.
- Addressing organisational issues – including long queues and overcrowding – to make school meals a better experience.
- Organising payment for school meals so that it is not obvious which children are claiming free school meals, thus leading to better uptake.
- Ensuring that a school food policy is chosen as part of the National Healthy School Standard.
- Raising awareness of the power of advertising.

Model school food policy

The model school food policy reproduced below is supported by a series of appendices that outline a range of issues to consider when developing and implementing a food policy. These appendices can be downloaded from the Grab 5! website www.grab5.com.

The *Grab 5!* Model School Food Policy

1   Responsibilities

The Board of Governors recognises the important connection between a healthy diet and a student's ability to learn effectively and achieve high standards in school. The Board also recognises the role a school can play, as part of the larger community, to promote family health, and sustainable food and farming practices.

The Board of Governors recognises that sharing food is a fundamental experience for all people; a primary way to nurture and celebrate our cultural diversity; and an excellent bridge for building friendships, and inter-generational bonds.

2   Mission

The educational mission is to improve the health of the entire community by teaching students and families ways to establish and maintain life-long healthy and environmentally sustainable eating habits. The mission shall be accomplished through food education and skills (such as cooking and growing food), the food served in schools, and core academic content in the classroom.

3   Aims

3.1   To improve the health of pupils, staff and their families by helping to influence their eating habits through increasing their knowledge and awareness of food issues, including what constitutes a healthy and environmentally sustainable diet, and hygienic food preparation and storage methods.

3.2   To increase pupils' knowledge of food production, manufacturing, distribution and marketing practices, and their impact on both health and the environment.

3.3   To ensure pupils are well nourished at school, and that every pupil has access to safe, tasty, and nutritious food, and a safe, easily available water supply during the school day.

3.4   To ensure that food provision in the school reflects the ethical and medical requirements of staff and pupils, e.g. religious, ethnic, vegetarian, medical, and allergenic needs.

3.5   To make the provision and consumption of food an enjoyable and safe experience.

3.6   To introduce and promote practices within the school to reinforce these aims, and to remove or discourage practices that negate them.

4   Objectives

4.1 To work towards ensuring that this policy is both accepted and embraced by:
- Governors
- School management
- Teachers and support staff
- Pupils
- Parents
- Food providers
- The school's wider community

4.2 To integrate these aims into all aspects of school life, in particular:
- Food provision within the school
- The curriculum
- Pastoral and social activities

5   Methods

5.1 Establish an effective structure to oversee the development, implementation, and monitoring of this policy, and to encourage a participatory approach to meeting the objectives. For ideas see www.sustainweb.org/g5fp/index.htm.

5.2 Develop an understanding and ethos within the school of safe, tasty, nutritious, environmentally sustainable food, through both education and example. Refer to appendix B for ideas.

5.3 Create an environment, both physical and social, conducive to the enjoyment of safe, tasty, nutritious, environmentally sustainable food. Refer to appendix C for ideas.

5.4 Help to promote and raise awareness of environmentally sustainable food production methods and socially responsible food marketing practices. Refer to appendix D for ideas.

Signed
_____
Chair of Governors

Date
_____

Checklist for running a breakfast club

Here is a checklist of the things that you should do when setting up a breakfast club, and a list of the things that you could do to help the club develop.

		Yes	Not yet
Must do's	Be clear about what you want to achieve – and assess parental interest in your plans and likely demand.	☐	☐
	Prepare the budget, identify fundraising needs, decide how to collect breakfast club fees from the children/families.	☐	☐
	Check legislation and insurance requirements.	☐	☐
	Determine premises and purchase essential equipment.	☐	☐
	Agree catering arrangements/menus and plan activities.	☐	☐
	Recruit/appoint staff and volunteers; enlist support from head and other teachers in the school, school nurse, etc. Set up management committee (if required).	☐	☐
	Devise strategies for encouraging attendance.	☐	☐
	Confirm procedures for children registering on arrival, accidents, etc. Check need for school crossing supervisor.	☐	☐
	Prepare promotional information and circulate.	☐	☐
	Plan how to evaluate the club.	☐	☐
Could do's	Develop more extensive programmes of activities and study support that provide learning opportunities.	☐	☐
	Hold themed breakfast weeks. Vary or expand the menus.	☐	☐
	Invite other children/schools to use the club (perhaps to increase club size).	☐	☐
	Identify ways to give the children more responsibility for running the club.	☐	☐
	Advertise the club further afield; start a club newsletter or other marketing.	☐	☐
	Link your club's activities into the wider aims of the school or community.	☐	☐

Nutritional standards for school lunches

These are the minimum nutritional standards for school lunches set by the Department for Education and Skills. If your education authority or school has set higher nutritional standards, you should meet those. The standards below apply to all lunches for students during term time, whether they are free or lunches which students pay for. They also apply to hot and cold food, including packed lunches provided by the school for students on school trips.

Primary schools

Lunches for primary school pupils must contain at least one item from each of the following food groups:
- Starchy foods such as bread, potatoes, rice and pasta. Starchy food cooked in oil or fat should not be served more than three times a week.
- Fruit and a vegetable must be available every day. Fruit-based deserts must be available twice a week.
- Milk and dairy foods.
- Meat, fish and alternative sources of protein. Red meat must be served at least twice a week. Fish must be served at least once a week.

Cheese may be included in the meat/fish protein group for primary children.

Secondary schools

At least two items from each of the following food groups must be available every day and throughout the lunch service:
- Starchy foods such as bread, potatoes, rice and pasta. At least one of the foods available in this group should not be cooked in oil or fat. (For example, if one option is roast potatoes, another option could be boiled rice.)
- Vegetables and fruit
- Milk and dairy foods
- Meat, fish and alternative (non-dairy) sources of protein. Red meat must be served at least three times a week. Fish must be served at least twice a week.

For more information see www.dfes.gov.uk/schoollunches

Nutritional guidelines for school meals

The Department for Education and Skills now has minimum nutritional standards for school meals (see Tool E4). These are food-based standards which interpret the Caroline Walker Trust guidelines for nutritional guidelines for school meals for children aged 4-18.[1] A summary of the Caroline Walker Trust guidelines is provided below. Further details of the nutritional guidelines for school meals can be found at www.dfes.gov.uk/schoollunches/annexcii.htm.

Caroline Walker Trust nutritional guidelines for school meals

The overall aim of these nutritional guidelines for school meals is to contribute to a diet which contains more bread, cereals and other starchy foods, more fruit and vegetables, and less fat, sugar and salty foods, and which is richer in minerals and vitamins.

The report of the Committee on Medical Aspects of Food Policy (COMA) *Dietary Reference Values for Food Energy and Nutrients for the United Kingdom*,[2] forms the basis for these recommendations on nutritional standards.

The CWT guidelines provide figures for the recommended nutrient content of an average school meal provided for children over a one-week period. In practical terms this is the total amount of food provided, divided by the number of children eating it, averaged over a week.

Summary of nutritional guidelines for school meals for children aged 4-18 years

Energy	30% of the Estimated Average Requirement (EAR)
Fat	Not more than 35% of food energy
Saturated fatty acids	Not more than 11% of food energy
Carbohydrate	Not less than 50% of food energy
Non-milk extrinsic sugars	Not more than 11% of food energy
Non-starch polysaccharides (fibre)	Not less than 30% of the Calculated Reference Value
Protein	Not less than 30% of the Reference Nutrient Intake (RNI)
Iron	Not less than 40% of the Reference Nutrient Intake (RNI)
Calcium	Not less than 35% of the Reference Nutrient Intake (RNI)
Vitamin A (retinol equivalents)	Not less than 30% of the Reference Nutrient Intake (RNI)
Folate	Not less than 40% of the Reference Nutrient Intake (RNI)
Vitamin C	Not less than 35% of the Reference Nutrient Intake (RNI)
Sodium should be reduced in catering practice.	

References

1   Sharp I (ed.) *Nutritional Guidelines for School Meals*. London: The Caroline Walker Trust.

2   Department of Health. 1991. *Dietary Reference Values for Food Energy and Nutrients for the United Kingdom. Report of the Panel on Dietary Reference Values of the Committee on Medical Aspects of Food Policy*. London: HMSO.

Guidelines for catering for schoolchildren with special diets

Religious diets

Hindus	No beef.	Mostly vegetarian; fish rarely eaten.	Period of fasting common.
Jews	No pig meat.	Meat must be kosher. Only fish with fins and scales eaten.	Meat and dairy foods must not be consumed together.
Muslims	No pig meat.	Meat must be halal; no shellfish.	Regular fasting, including Ramadan.
Rastafarians	No animal products except milk.	Foods must be I-tal or alive, so no canned or processed food, no added salt, no coffee.	Food should be organic.
Sikhs	No beef.	Meat must be killed by one blow to the head.	

Be aware of the content of meat products. For example, turkey burgers sometimes contain pork.

Vegetarians

Many people are vegetarians. You should make every effort to offer a variety of vegetarian options.

Allergies

Food allergies are estimated to affect 1% or 2% of the adult population and are more prevalent in infants and children. The most common allergenic foods are eggs, milk, fish, shellfish, peanuts, soya, wheat, tree nuts and seeds. Allergies to certain foods, such as peanuts and peanut products, other nuts, seeds and their derivatives, and shellfish can be particularly acute. People suffering from a severe food allergy need to know the exact ingredients in their food, because even a tiny amount of the allergenic food could kill them.

How can you help?

- Make sure you know which children suffer from an allergy and to which food.

- Make sure your staff are aware of the potential hazards from the use of severe allergens such as nuts and nut products through training sessions or notices.

- If you use severe allergens in a recipe, find ways of passing information to those such as dinner nannies who supervise nursery children during lunch. This should be by clearly labelling it in words or symbols "contains nuts", making it clear from the name of the dish or by verbal communication. The school should ensure that dinner nannies are aware of those children who may suffer severe allergic reactions to nuts or nut products.

- Remember also that any oil that has previously been used to cook products containing nuts can carry minute traces of nut proteins and thus have the same effect as nut oils.

- Beware of accidentally transferring food from one dish to another. Cooking equipment can be a means of cross-contaminating foods with peanut or nut protein. Allergy sufferers can react to the smallest amount of protein and even minute amounts transferred through cross-contamination could cause a severe reaction.

- Ask the catering supplier to provide information as to whether the ingredients or flavourings used in their products contain nuts or seeds.

- If you prepare food, check the complete recipes of all your products so that you can answer questions if asked.

- Be clear about the school's policies regarding first aid and administering medication, and whether a member of staff has been trained to administer medication in the event of an allergic reaction by a student. **If you think someone is suffering from a severe allergic reaction, call an ambulance immediately.**