

Food & Health

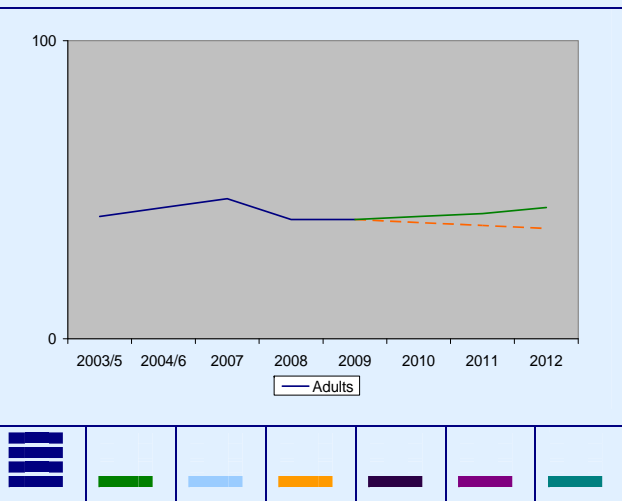
Cardiff Health Alliance recognises the ever increasing importance of the role of diet and nutrition on the health of the population and seeks to reduce health inequalities by enabling and supporting people to access a healthy balanced diet. Rates of obesity are increasing particularly amongst children and there are still inequities in being able to access an affordable, nutritious diet and a lack of knowledge and skills to prepare it. The link between health inequities and poor diet is inextricable - individuals living in more deprived areas consume a less healthy diet than those living in less deprived areas.

There is a wealth of evidence demonstrating the positive relationship between the uptake of a healthy balanced diet and good health throughout the life course. A healthy balanced diet reduces the risk of chronic diseases including coronary heart disease (CHD), certain types of cancer, such as those of the colorectum and breast, stroke, overweight and obesity, type II diabetes and hypertension; key causes of mortality and morbidity (Food Standard Agency (FSA) and Welsh Assembly Government, 2003). Research suggests that improved diet could reduce CHD and cancer deaths by a third, thus improving life expectancy and general health and well being (Department of Health, 1998).

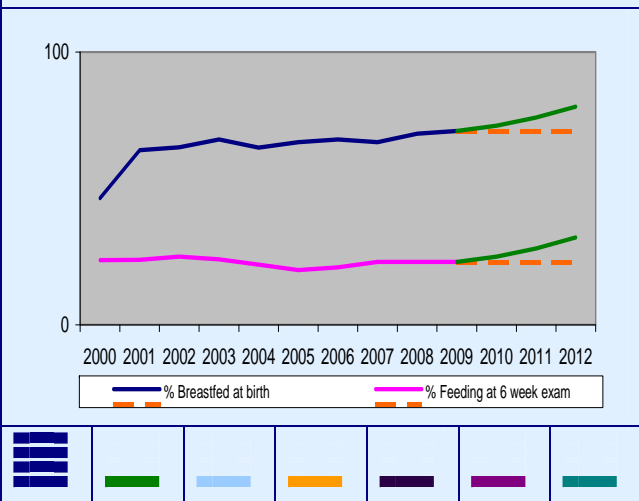
Food and health issues cut across a wide range of policy agendas, involving a large number of sectors that may not be directly involved in health, and therefore significantly contributes towards achieving each of the seven outcomes identified within the Integrated Partnership Strategy. Food and health must be considered in its widest sense, and actions around food nutrition, food provision, food procurement, food sustainability, food safety, and food education and training, are considered in the development of the Implementation Plan.

Headline Indicators and how are we doing?

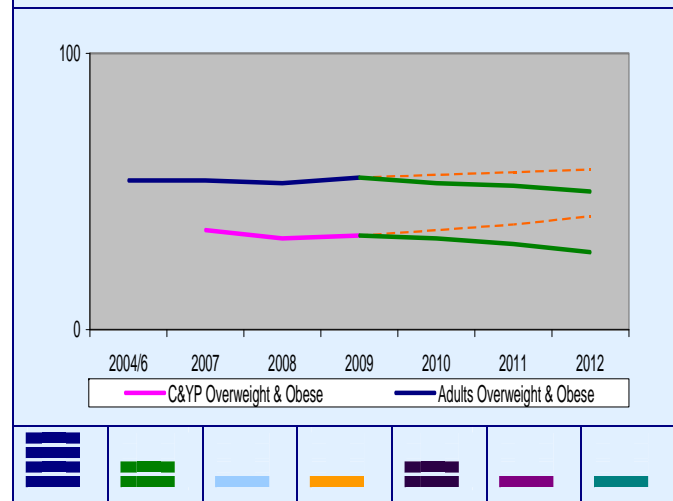
1. % achieving 5-a-day fruit and vegetable consumption (Welsh Health Survey)



2. % of breastfed babies (Child Health 2000 system, South Glamorgan)

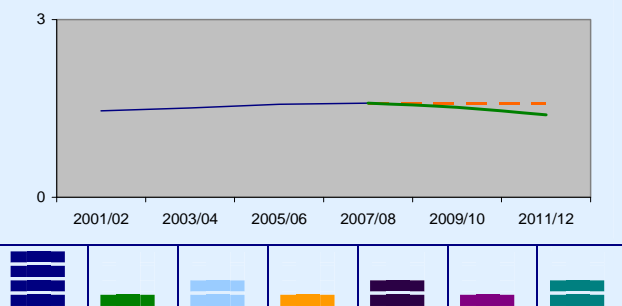


3. % overweight or obese (Welsh Health Survey)



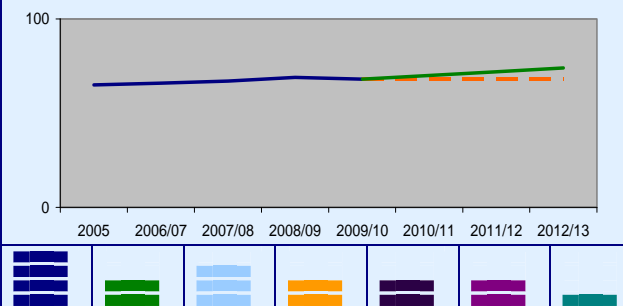
4. Average number of decayed, missing and filled teeth (dmft) in 5 year olds

(Cardiff University, childhood oral epidemiology programme)
(Speculative data up to 2007/08)



5. % of premises that are 'Broadly Compliant' (National Food Hygiene Rating Scheme)

(Environmental Health, Cardiff Council)



Data Development:

- Local data on fruit and vegetable consumption for children and young people.
- Local data for 'Healthy Weight'.
- Availability of healthy options in schools, leisure centres, public sector organisations
- Develop local data on sustainable procurement

Key:

--- The route we will take if we do nothing — The curve we want to turn

The bars under each graph represent how the indicator impacts on the seven Cardiff outcomes for the city as seen below:

Healthy	Environment	Safe	Thriving & Prosperous	Full Potential	Live, Work & Play	Fair, Just, & Inclusive
---------	-------------	------	-----------------------	----------------	-------------------	-------------------------

Story behind the baselines

- A healthy balanced diet is one based on the 'Eatwell Plate Model' (FSA). There are many factors that influence eating behaviours. Some factors, such as affordability, access, and education may become real barriers and be more difficult to overcome. The factors that influence food choice are:
 - Food production – food industry, agricultural practice & policy, distribution & transport systems, government policy
 - Availability of food at a price the consumer can afford to pay
 - Individual choice – peer group influences; culture; income; lifestyles; advertising, ethics; status; family influences; psychological factors; individual taste preferences; income; religion; social conventions; knowledge and information.
- Those on a low income are less likely to eat wholemeal bread and vegetables; tend to drink more soft drinks; and tend to eat more processed meats, whole milk and sugar. Food poverty exists where people cannot afford to buy a diet that meets the recommended intake for themselves and their household through lack of money, skills or opportunities to access safe, nutritious food. Groups which are most at risk of poor diet include early years, children and young people, older people and vulnerable groups, e.g. homeless people and those with drug or alcohol problems.
- Cardiovascular Disease (CVD) is the single largest cause of death in Cardiff. Poor diet can contribute to the increased risk of CVD.
- Currently, over half of the population of Cardiff are reported to be overweight or obese, which can increase the risks to health. Many overweight and obesity issues can be tackled through lifestyle factors such as diet and physical activity.
- Excessive dietary salt intake raises the risk of high blood pressure, which in turn increases the risk of stroke and premature death from CVD.
- Diet has been shown to be a key modifiable risk factor in the development of a number of cancers, with more influence over some cancers than others, such as those of the stomach, large bowel (colon) and breast.
- In Cardiff, in 2007-08, the percentage of 5 year old children with at least one decayed, missing or filled tooth (%dmft>0) was 41.7%. This ranged from 25% in Rhiwbina, Radyr and St Fagan's to 72.4% in Ely and Caerau. The challenge for Cardiff is to focus commissioning efforts towards the more deprived southern arc of the city for the provision of essential treatment services especially for children and other vulnerable groups.

- Breast milk provides optimal nutrition, growth and development for the human infant. It provides protection from gastro-enteritis, chest and ear infections, diabetes, allergies and other illnesses. There are considerable variations in breastfeeding rates, with older, better-educated and higher social class women being more likely to breastfeed. Breastfeeding rates in Wales are amongst the lowest in the UK. In the South Glamorgan area in 2009, rates of breastfeeding initiation were 71% but this figure fell to 23% by 6 weeks.
- Broadly compliant – all food businesses are inspected by the Food Safety Team of Cardiff Council and risk rated using a standard process. Broadly compliant premises are those that achieve satisfactory scores with regard to hygiene practices, condition of structure and cleanliness and confidence in management. This is also a Welsh Assembly Government performance indicator.
- National Food Hygiene Rating Scheme –introduced on 1st October 2010, this scheme applies to all businesses that supply food directly to the public and its aim is to provide consumers with an informed choice about where to buy food or eat out. Following an unannounced inspection by the Food Safety Team, a food business will be given a rating out of 5 with 0 = “urgent improvement necessary” and 5 = “very good”. This will give businesses an incentive to improve their standards and legal compliance so contributing to a reduction in food poisoning cases.
- The publication of the *Pennington Inquiry* report on the 2005 E-Coli 0157 outbreak has had a considerable impact on all public health services within Wales. An Action Plan for Cardiff Council was drawn up and is being driven by Public Protection which covered all services providing or procuring food as well as food safety enforcement and the standards of school toilets. The enforcement of food law has come under far more scrutiny since this outbreak and led to the competency of Environmental Health Officers (EHOs) and the way EHOs enforce the law coming under increasing pressure.

Partners with a role to play

- | | | | |
|--|---|---|---|
| <ul style="list-style-type: none"> • Cardiff & Vale University Health Board <ul style="list-style-type: none"> ○ Community Dieticians ○ Dental health practitioners • Public Health Wales • Third Sector | <ul style="list-style-type: none"> • Cardiff Council: <ul style="list-style-type: none"> ○ Adult Services, Health Partnership Team ○ Direct Services, Catering, Leisure & Play ○ Schools and Lifelong Learning ○ Parks and Sport (Events) ○ Environmental Health | <ul style="list-style-type: none"> • Cardiff Health Alliance • Children & Young Peoples Partnership • Consumers • Food industry (producers and retailers) | <ul style="list-style-type: none"> • Catering businesses • Rural regeneration (Co-ops, markets etc.) • Care establishments • Universities and Colleges • Media |
|--|---|---|---|

What are we going to do?

Key themes for consideration when promoting healthy eating include nutrition, food provision, food safety, food sustainability, food education and training.

- **Increase the procurement and provision of safe, nutritious and sustainable food for the whole population through large public organisations, businesses, community groups and event organisers.** Areas that have been identified that could bring about significant improvements in the provision of healthy and nutritious foods for the population of Cardiff include: public sector organisations; large public events; rewarding excellence in businesses and establishments; Cardiff food supply including local food schemes such as food co-operatives and allotments.
- **Increase the uptake of safe, nutritious and sustainable food through policy development, education and training and food provision in the identified target groups.** Priority groups include: Infants 0-4 years; children and young people; older people; vulnerable groups specific to Cardiff. Providing individuals with nutrition knowledge and skills is essential to empower them to make appropriate lifestyle choices. Food education and training is key to develop communities' capacity to address food and health issues. The messages and approaches that are used to inform and support people to make healthy, safe, sustainable food choices should be delivered by appropriately trained workers, supported by accredited professionals.
- **Identify and influence policies and strategies that impact on food and health issues.** It is essential that all sectors consider the social, economic and environmental influences on people's food intake and the potential to improve nutritional health through their own and national policy. Areas of priority include: Maximising communication opportunities; ensuring a co-ordinated approach; promotion through city wide strategies.