The Health and Social Care Alliance Scotland (the ALLIANCE)
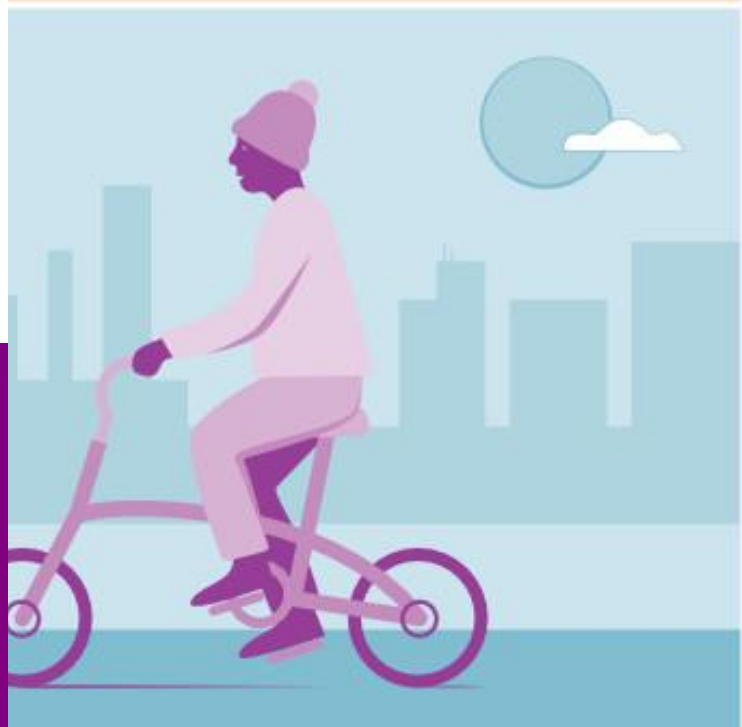

ALLIANCE
HEALTH AND SOCIAL CARE
ALLIANCE SCOTLAND
people at the centre

National Good Food Nation Plan and Specified Functions Consultation – ALLIANCE response

22 April 2024

Introduction

The Health and Social Care Alliance Scotland (the ALLIANCE) welcomes the opportunity to respond to the Scottish Government's consultation on the Good Food Nation Plan and Specific Functions.

The development of the Good Food Nation Plan represents a chance for Scotland to break the food poverty cycle and guide us towards fulfilling the right to food in Scotland for all.

As a member of the Scottish Food Coalition, the ALLIANCE believes that keeping food as a key policy concern is important if Scotland is to counter injustice and inequality in our current food system.

We welcome the Plan overall, especially the emphasis made on human rights and dignity. We believe that the references to the Sustainable Development Goals and National Performance Framework will promote policy coherence and an outcomes based approach[1].

It is vital that plans and policies are co-produced with people with lived experience – and particularly people with lived experience of food poverty and insecurity or for whom access to food is difficult.

1. **Does each individual Good Food Nation Outcome describe the kind of Scottish food system you would like to see?**

Outcome 1: Everyone in Scotland eats well with reliable access to safe, nutritious, affordable, sustainable, and age and culturally appropriate food.

Mostly agree.

Outcome 2: Scotland's food system is sustainable and contributes to a flourishing natural environment. It supports our net zero ambitions,

and plays an important role in maintaining and improving animal welfare and in restoring and regenerating biodiversity.

Mostly agree.

Outcome 3: Scotland's food system encourages a physically and mentally healthy population, leading to a reduction in diet-related conditions.

Mostly agree.

Outcome 4: Our food and drink sector is prosperous, diverse, innovative, and vital to national and local economic and social wellbeing. It is key to making Scotland food secure and food resilient, and creates and sustains jobs and businesses underpinned by fair work standards.

Mostly agree.

Outcome 5: Scotland has a thriving food culture with a population who are interested in and educated about good and sustainable food.

Mostly agree.

Outcome 6: Scotland has a global reputation for high-quality food that we want to continue to grow. Decisions we make in Scotland contribute positively to local and global food systems transformation. We share and learn from best practice internationally.

Mostly agree.

2. **What, if anything, would you change about the Good Food Nation Outcomes and why?**

Suggested amendment to outcome 1:

Rephrase outcome to: "Everyone in Scotland eats well with reliable and dignified access to safe, nutritious, affordable, sustainable, and age and culturally appropriate food".

In line with the Internation Covenant of Economic, Social and Cultural Rights (ICESCR), communities need to have the right to culturally appropriate food[2]. The core of this is to articulate the right to food and the duty of Government to respect, protect and fulfil this right. Dignity should be included as it is a core element of Scottish Government policy[3].

Within international treaties, the link between food and the dignity of the human person is outlined[4]. For example, the right to adequate food is contained within the ICESCR and was recognised by the United Nations Committee on the Economic, Social and Cultural Rights[5]. Food is more than a nutritional need, and as inherently important to realising other human rights such as the right to health, the right to an adequate standard of living and the right to social and medical assistance[6].

Additionally due to the disproportionate impact of unequal access to food, health inequalities, food insecurity and diet related illness on different groups within Scotland, we think it vital for the Good Food Nation Plan to also take an intersectional approach to food policy[7].

As we acknowledged within our response to the Good Food Nation (Scotland) Bill consultation, this outcome is particularly pertinent in relation to social care[8]. We know from our research *My Support My Choice* that many people using social care experience limited choice when it comes to food[9]. Many people, particularly those accessing Self-directed Support via Option 3 (the local council arranges the support) reported being served food at atypical and inconvenient times, that could vary each day (e.g. breakfast at 9am, lunch at 11am). One person outlined that they were offered a range of dietary choices by their care provider each week – but that none of them were geared to food commonly eaten by people from their ethnic community.

Other people highlighted the need to include preparation time for hot food for people, and the importance of the social element of eating with people (including support with eating if required). Many people will have a paid carer provide support with food, but said support is often restricted to a very limited time period and food that is quick to prepare and eat.

People with experience of sensory loss highlighted the importance of proper support with shopping for food[10]. A blind participant was told that they could not have help with shopping, because that was outwith the purview of Self-directed Support, and that they should order food online instead – even though their screen reader struggled with online grocery ordering. They also found shopping stressful if reliant on assistance from shop workers who they did not know and who were not fully trained in how to assist blind and partially sighted people.

Suggested amendment to outcome 3:

Rephrase outcome to: "Scotland's food system encourages a physically and mentally healthy population, by meeting the gold standard of nutrition so that any improvement in nutrition would result in an improvement in health, and leading to a reduction in diet-related conditions."

In the report 'Food, health and income' John Boyd-Orr proposed that we should aspire to the gold standard of nutrition – 'that standard of nutrition beyond which my improvement in nutrition does not lead to an improvement in health'. Since then, life expectancy has risen by 20 years: but has stagnated in the last decade, while dietary inequalities have grown[11].

Suggested amendment to outcome 4:

Rephrase outcome to: "Our food and drink sector is prosperous, diverse, innovative, and vital to national and local economic and social wellbeing. It is key to making Scotland food secure and food resilient and creates and

sustains jobs and businesses underpinned by fair work standards, fair trade and fair dealings in the supply chain."

Farmers are price-takers and often operate on unsustainably low margins[12]. This is also true for farmers in other countries, which is why fair trade should also be included in this outcome[13].

Suggested amendment to outcome 5:

Rephrase outcome to: "Scotland has thriving and diverse food cultures where people from all walks of life take pride and pleasure, and are educated in the food they make, serve and eat."

With our partners at the Scottish Food Coalition, we believe that the geographical and ethnic diversity of Scotland's food cultures should be celebrated. This reflects the Scottish Government's vision in developing the Good Food Nation (Scotland) Act for Scotland to be "a Good Food Nation, where people from every walk of life take pride and pleasure in, and benefit from, the food they produce, buy, cook, serve, and eat each day"[14].

The right to food which is healthy and culturally appropriate is the basic legal demand underpinning food sovereignty[15]. Guaranteeing it requires policies which support diversified food production in each region and country. Our current diet is limited in all possible ways - lacking diversity in ingredients, flavours, techniques, and meaning- and it is affecting our health and wellbeing[16]. Food is not just about providing energy or profit; it is also about enjoyment, community, and tradition, and is an essential social act. This is also in line with the Culture Strategy for Scotland[17].

Suggested amendment to outcome 6:

Rephrase outcome to: "Food policymaking is coherent, rights-based, long-term and joined up, both within Scottish Government and between national government and local public bodies. It contributes to global food system transformation through international co-operation. The process for

developing policy and reporting on progress is inclusive, transparent, based on international as well as local evidence; and trusted by all stakeholders."

Along with our colleagues at the Scottish Food Coalition, we believe that the global reputation of Scotland's high quality food is implicit in Outcome 4 and within the indicator on food exports, a may not need repeating.

As stated within the Good Food Nation Plan consultation document, "As well as setting out our ambitions for a Good Food Nation and the policies we will use to achieve them, the Plan also has a key role to play in driving greater coherence in food-related policymaking across both national and local levels".

Instead, we believe that this outcome would better serve when explicitly referencing governance and the potential work of the Scottish Food Commission to enable accountability across Scottish society.

3. Do you think that these targets will contribute to achieving the overall Good Food Nation Outcomes?

Mostly agree.

4. Would achieving these targets contribute to making the kind of Scottish food system you would like to see?

Mostly agree.

5. If you have other comments on the suggested Good Food Nation targets, please comment:

We recognise the work the Scottish Government has taken to develop the targets proposed. For the targets to not only contribute but fulfil the vision of the kind of Scottish food system we would like to see, more specific detail is required on each target as they currently appear quite broad.

Moreover, we note that there is limited mention within the proposed targets and indicators of health and social care and its linkages to food and the right to food. For example, a target could include ensuring that all health and social care staff are trained in identifying malnutrition by 2023.

Additionally, we note that there is an indicator for increasing the number of pupils receiving free school meals. The ALLIANCE believes that a target should be included within the Good Food Nation Plan to implement universal free school meals in primary, secondary and non-mainstream schools by 2028. Children and young people should co-produce any policies related to and impacting them.

In line with UNCRC, there should also be a stronger 'child protection' element – a target to reduce children's exposure to aggressive marketing, and unhealthy food environments. One target for example would be the elimination of food and drinks high in fat, salt and sugar (HFSS) advertising on billboards, bus stops and so on.

We recommend the inclusion of indicators for targets focused on health inequalities that are linked to the social and commercial determinants of health, with an outcomes focused approach in line with the National Performance Framework[18].

The ALLIANCE supports the Scottish Food Coalition's view that, although the targets are useful in contributing to improvement, and are aspirational, they could be more ambitious. For example, the proposed target "Reduce the number of households facing moderate to severe food insecurity" could instead be rephrased as "Eliminate severe food insecurity by 2030" because Sustainable Development Goal 2 has already committed the Scottish Government to 'zero hunger' by 2030.

We set out below some further proposed changes to the targets.

- **Halve childhood obesity by 2030 and significantly reduce associated diet-related inequalities.**

We suggest that this target should be refined, including the baseline, children's age and the reduction of inequality. We recommend that measurement of children at P1 and P6 should be introduced as implemented in England[19].

Having targets specific to these two age cohorts would help with measuring the impact of early years policies (ante-natal care, breastfeeding, and health visiting, Best Start, early learning and childcare); and school-age policies (school meals, food education in schools, holiday income supplements, Scottish Child Payment).

The target could be expressed along the lines of, "85% of children have a healthy weight at P1 and at P6, with the gap between the quintiles reduced to 5%".

We also suggest that specific nutrition targets should be introduced for particular and intersectional groups. For example, research shows that young people living in low income households are at increasing risk of obesity and it would be helpful to work with young people to develop a target and a set of possible interventions to improve young people's diets[20].

- **Reduce adult diet related health inequalities**

A target to reduce this gap would require much wider action related to socio-economic and other factors outwith food policy, so it makes sense to focus on a narrower target more closely related to dietary inequalities.

The gap in healthy life expectancy in Scotland is growing. Healthy life expectancy for males in the most deprived areas of Scotland was 26 years lower than in the least deprived areas. For females the difference was almost 25 years.

Furthermore, 22% of adults and 14% of children consumed the recommended portion of fruit and veg in a year[21], whilst 34% of parents felt their diet has become less healthy, and 17% felt their child's had too. Contributing to this is the fact that the cost of eating a healthy diet is greater than the cost of eating a less healthy diet[22].

We recognise that obesity is a growing issue in Scotland. We also know that a cause of obesity is an obesogenic environment[23]. To combat this, there should be a greater focus on preventative measures within the targets alongside reducing health conditions closely linked to diet inequalities including cardiovascular disease, diabetes and some cancers, as well as dental health. Such a focus will also improve the impact on the NHS pressures and the economy.

Further, nutrition intake targets could be included in line with the Scottish Dietary Goals[24]. For example, our fibre intake at 17g/day is among the lowest in Europe even though adequate fibre intake has been associated with a 15-16% risk reduction in all-cause mortality[25]. Low fibre intake is a consequence of high consumption of foods which are low in fibre and nutrients - and a low consumption of fruit, vegetables, wholegrains, pulses, nuts and seeds.

A target to reduce inequalities could be supported by food policy interventions at local and/or national levels. For instance, an additional indicator for this target could involve increasing the funding for projects under Community Food and Health to support work in low income communities that addresses health inequalities and barriers to healthy and affordable food[26].

- **Reduce per capita food waste by 33% by 2025**

To the Scottish Food Coalition's knowledge the Good Food Nation Plan will be published in 2025. If this is the case, this target seems inappropriate. Instead, the Plan could include a review, potentially conducted by the Commission, to update on food reduction progress[27].

As stated above the Scottish Government should include ambitious actions to accompany the target within the Good Food Nation Plan*.*

- **Reduce drop off in breastfeeding rates at the 6 to 8 week point by 10% by 2025**

As above, to our knowledge the Good Food Nation Plan will be published in 2025. If this is the case, this target seems inappropriate. Instead, the Plan could include a review, potentially conducted by the Commission.

Encouraging and supporting breastfeeding is an important public health activity. There is good evidence that breastfeeding protects the health of children and mothers. Yet, there are marked inequalities in breastfeeding, with babies born to mothers in more deprived areas being one of the groups least likely to be breastfed[28]. An accompanying target or indicator may include implementing breastfeeding support or increasing promotion of breastfeeding benefits.

Achieving these targets would be assisted by better data-gathering and analysis closer to real time. It is important to get disaggregated data on purchases, either through Scotland engaging actively with the Food Data Transparency Partnership or developing its own food data systems.

Overall, the ALLIANCE recommend that future targets are co-produced with people with lived experience – and particularly people with lived experience of food poverty or for whom access to food is difficult. Done properly, co-production takes time, and involves investing in people to support their input. Such systems bring significant benefits and expertise that would deliver better Good Food plans – but they would also require engagement from local authorities and Health and Social Care Partnerships, as well as Ministers.

These recommendations could be achieved, for example, by setting up a large Scotland-wide citizen panel to provide both data on food habits and

feedback on food policy proposals. This could complement Scottish Health Survey data.

We recommend that the Good Food Nation Plan also includes an explicit commitment to allocating more of the health budget to prevention including nutrition, as part of the wider population health strategy under development.

We recommend that all targets are designed to be SMART (Specific, Measurable, Actionable, Relevant and Time Bound).

6. **Do you think these indicators will be useful for measuring progress towards the Good Food Nation Outcomes?**

Mostly agree.

Why or why not?

For the indicators to enable the measurement of progress towards the Good Food Nation outcomes we recommend that more specific detail is included within the final Plan as they currently appear quite broad. For example, in relation to the indicator on Scottish Dietary Goals, does this refer to reaching all of the goals or specific ones?

We have listed the indicators below that we recommend are further developed.

- **Percentage of pupils present at school taking school meals (free or paid for)**

The Plan should include baseline data by local authority on school meals uptake: price; ingredient cost and total cost per meal; and food waste. Such information should be published regularly.

- **Percentage of adults and children consuming recommended 5 portions of fruit and vegetables each day**
- **Fruit and vegetable intake of children aged 2-15**

These will be helpful indicators in line with Scottish Dietary Goals, however, as the Scottish Health Survey is completed on a self-reporting basis we believe that additional data gathering methods should be applied here. These could include analysis of purchase data.

- **Number of local authorities that participate in the Food for Life Scotland Programme**

Although this indicator is necessary, we recommend that this is aligned and monitored alongside the outcomes of the programme, including free school meal uptake.

- **Funding committed to food education and community food projects**

We recommend that the funding committed is adequate to reach targets. We welcome the investment from Scottish Government in this area, however, we recommend that an indicator is added which evidences the outcomes of such funding to enable the measurement of monitoring and progress.

7. **What other indicators, if any, would you like to see included?**

One missing indicator is the affordability of a culturally valued, adequate diet. This would be a hugely useful indicator for monitoring implementation of the right to food. Scottish Food Coalition member, Nourish Scotland, has worked with community advisors to co-produce a 'good enough' way to do food for some typical households and this approach could be extended and mainstreamed to provide a useful indicator of progress[29].

In addition, the ALLIANCE reiterates our calls for health and social care staff to be trained in identifying people experiencing or at risk of malnutrition and aiding with improved access to high quality food[30]. We suggest that as part of their Good Food Nation plans, the Scottish Government, local authorities and Health and Social Care Partnerships should embed training on malnutrition and preventative action as a compulsory element of any training programmes and CPD schemes for health and social care workers.

Existing material includes Food Train's "Raising the Issue of Malnutrition Toolkit"[31]. We recommend that the Scottish Government and public bodies draw upon existing expertise in this area from within the third sector – particularly given the sharp increase in food poverty and use of food banks resulting from the COVID-19 pandemic and the cost of living crisis.

In line with the upcoming consultation on Restricting the Promotion of Food and Drink high in fat, sugar or salt, we also suggest an indicator specifically on the level and impact of fast food marketing on children, young people and adults [32].

The ALLIANCE suggests that outcomes and indicators for successful policy implementation should be focused on people with lived experience. These should include (but not be restricted to) the following:

- Does everyone have access, in a dignified and culturally appropriate manner, to nutritious, sustainable, and safe food?

- Have plans been co-produced with key stakeholders, including people with lived experience? Co-production should include involvement in design, implementation, and assessment processes.

- Do plans acknowledge the rights of seldom heard from and minority groups, and respond to their requirements?

- Are plans published in an accessible format and freely available to all?

- Is there a clear and transparent system of accountability for when plans and targets are either not met, or stakeholders deem them not fit for purpose?

- Do plans respond to the requirements of the community and set ambitious targets to develop Scotland as a Good Food Nation, where "by 2025, Scotland will be a Good Food Nation where people from every walk of life take pride and pleasure in, and benefit from, the food they produce, buy, cook, serve and eat each day"?[33].

In collaboration with the Scottish Food Coalition, we recommend the following indicators are included:

Suggested additional indicators in relation to our food and drink sector:

- Number of living wage employers and employees in the sector
- Number of volunteers in food and drink related third sector

Suggested indicators on our food culture:

- Number of allotments
- Number of citizen supported agriculture schemes/number of veg boxes/number of farms selling direct to the public
- Number of schools and nurseries with food-growing gardens
- Number of people eating together/cooking meals from scratch
- Number of meals served in public diners
- Number of young people being educated in food systems at all levels
- Number of public sector, health and social care staff trained in malnutrition, food insecurity and preventative measures.

Suggested indicators relating to the global food systems and Scotland:

- Number of people and organisations engaged in co-producing the Good Food Nation Plan and it's review
- Accessible information and inclusive communication is being produced and proactively provided on food and related rights
- Number of people engaged in developing the plans of local public bodies
- Number and scale of international food and food insecurity research projects
- Number of engagements with international colleagues on the food system

9. Does this reflect what you think life should look like for a child in Scotland as a Good Food Nation? What changes, if any, would you make?

Mostly agree.

We would like to see incorporation of the UNCRC and human rights acknowledged within the plan. For example, this could look like adding a bullet point like: "I am aware of my rights in relation to food, and my human rights are met".

10. Does this reflect what you would like your life to look like, as a parent / carer in a Good Food Nation? What changes, if any, would you make?

Mostly agree.

We would like to see incorporation of human rights throughout the plan. For example, this could look like "I am aware of my rights in relation to food, and my human rights are met".

11. Does this reflect what you would like your life to look like, as an adult in a Good Food Nation? What changes, if any, would you make?

Mostly agree.

We would like to see incorporation of human rights within the plan. For example, this could look like "I am aware of my rights in relation to food, and my human rights are met".

18. If you have any further comments on the national Good Food Nation Plan, please comment here

As a member, the ALLIANCE supports wider calls from the Scottish Food Coalition that everyone should have access to high quality food, as a human right. It is essential that people's equitable access to food is considered as part of the design and implementation of policy across Scotland. Such actions would be in keeping with wider Scottish Government commitments to ensure that "by 2025, Scotland will be a Good Food Nation where people from every walk of life take pride and pleasure in, and benefit from, the food they produce, buy, cook, serve and eat each day"[34].

We welcome the overall framing of the plan, with the emphasis on the right to food, and dignity. It is helpful to see the linkages to the Sustainable Development Goals and National Performance Framework[35]. However, we reiterate that human rights and intersectionality must be embedded within the Plan. Taking a human rights based approach to scrutiny will ensure the Parliament is aware of any decline of human rights protections and is able

to identify opportunities to advance human rights to help build a fairer, more just society[36].

We believe that the following United Nations Office for the Human Rights Commissioner (OHCR) framework of the four key elements of the right to food can provide guidance for the rights and obligations that the Good Food Nation Plan should contain[37]:

- Availability
- Accessibility (physical and economic)
- Adequacy
- Sustainability

Alongside this we suggest that in order to meaningfully demonstrate a commitment to human rights based approaches, the Plan should set out its provision for participation, accountability, non-discrimination, empowerment and legality, following the PANEL principles[38].

The action that the Scottish Government has committed to and taken to reduce inequality; provide greater food resilience and security; enable healthy and local food choices; and support our food and drink sector, all while working towards our net zero goals has been extremely positive. However, we are concerned with the lack of substantive actions within the consultation document. Instead, there should be concrete tools and resources contained and committed to within the Plan akin to the priorities, aims and actions found in, for example, the Women's Health Plan[39].

We are glad to see that there have been efforts made by the Scottish Government to undertake consultation events with interested stakeholders via, for example, the Kitchen Table Talks[40]. However, the ALLIANCE recommends that any future development, implementation and delivery of the Good Food Nation Plan should be co-produced from the outset to shape cross-cutting policy from the ground-up. The process of co-production should involved those with lived experience, the third and

voluntary sector, members of the food, drink, hospitality, farming, and agricultural industry. We feel that this is especially needed to highlight Scotland's astonishing diversity of community food projects and engaged citizens, and of small producers struggling against the odds to supply local customers.

To enable everyone to understand the Good Food Nation Plan, their related rights and information on food and relevant support services should be accessible and inclusively communicated. This also includes any accompanying guidance to the Good Food Nation Plan and specified functions. The Scottish Government, local authorities and public bodies should use accessible information and inclusive communication to work with people with lived experience in the design of Good Food plans and implementation, and provide timely access to high quality, targeted information in accessible and individually tailored formats (e.g. hard copy and digital; face-to-face; community languages; large print; Braille; Easy Read; BSL; electronic notetakers; captions; Alt-text) at every stage of their journey through services no matter their age, disability, gender, religion, socioeconomic status, ethnicity, or cultural background[41].

Alongside co-production, efforts should be made to establish collaborative partnerships to achieve the whole system good food nation vision. Such collaboration should include businesses, local authorities, the public sector, health and social care services, the third and voluntary sector, schools and universities, farmers and fishers, communities and families.

For example, Volunteer Scotland recommends signposting to volunteer-led activities which promote access to food including Food Banks, organisations like Food Train as well as the plethora of community allotment and community larder projects that exist across Scotland[42]. Given the importance of volunteering and the third sector for many marginalised communities accessing food, it is vital that the Good Food National Plan acknowledges this.

We suggest that a review is undertaken of the existing work that has been proposed within the consultation document, and its effectiveness in relation to the targets and indicators. Additionally, we recommend that environmental and equalities impact assessments are undertaken within said review.

The ALLIANCE recommends that the Plan is resourced adequately for implementation, with costings published alongside the draft plan.

19.   Please let us know if we have missed any function falling within a specified description or relevant specified functions in the list.

The ALLIANCE welcomes the inclusion of health and social care within the specified functions. For further clarity we suggest the below should be specifically referenced within the finalized specified functions:

- The provision of food within educational and childcare contexts (including nurseries, childminders, schools, and colleges).

- The provision of food within social care contexts (including care at home, residential care, day centres, and short break facilities). This provision and consideration should encompass the requirements of people accessing care, unpaid carers, and those providing social care and support (including auxiliary staff and workers). This also aligns with the development of the National Care Service.

- The provision of food within hospital and healthcare contexts. This provision and consideration should encompass the requirements of people accessing healthcare, unpaid carers and the families of people accessing healthcare, and those providing healthcare and support (including auxiliary staff and workers).

- We also recommend that as well as the guidance provided by the specified functions, Ministers must also regard the Plan in decision and policy making when carrying out non-specified functions.

20.   Why do you think this specified function / function falling within a specified description should be added?

We believe that the addition of the specified functions will provide much needed clarity within health and social care contexts. This will ensure that those who often experience lack of access to, availability of and adequate food within these sectors are covered by the Plan(s). Please refer to our answer to question 2 for further detail.

Additionally, it is important that connected (and significant) legislative and policy changes are considered in the design of Good Food plans. For example, the National Care Service has strong overlaps with access to food for people who access social care; planning should consider overlaps with health and social care, education, justice, and environmental concerns, with an explicit focus on the impact of any plans on people from seldom heard from groups (e.g. disabled people, people living with long term conditions, and unpaid carers).

There is great importance in providing guidance to Ministers and those with responsibility for carrying out the Good Food Nation Plan, we are not convinced that this provides an adequate safeguard for implementation of duties. For example, whilst local authorities must have regard to "the consideration of the impact of food promotions on public health" unless this is embedded in, for example, marketing and advertising legislation it will not have legal force when making such decisions. We are concerned that functions not specified risk them not being implemented fully.

We recommend the following additional mechanism to enable policy coherence:

- A regular meeting of the Interministerial Group where current and forthcoming legislation is scrutinised with regard to the Good Food Nation Plan, with a report being published which shows how Ministers have taken the Good Food Nation Plan into account[43].

- Under the responsibilities of the Scottish Food Commission, there should be the requirements to prepare advice to Scottish Government and public bodies on how to ensure that policies and legislation have regard to the Plan, and specifically include how it impacts people with lived experience of food poverty and insecurity.

About the ALLIANCE

The Health and Social Care Alliance Scotland (the ALLIANCE) is the national third sector intermediary for health and social care, bringing together a diverse range of people and organisations who share our vision, which is a Scotland where everyone has a strong voice and enjoys their right to live well with dignity and respect.

We are a strategic partner of the Scottish Government and have close working relationships with many NHS Boards, academic institutions and key organisations spanning health, social care, housing and digital technology.

Our purpose is to improve the wellbeing of people and communities across Scotland. We bring together the expertise of people with lived experience, the third sector, and organisations across health and social care to inform policy, practice and service delivery. Together our voice is stronger and we use it to make meaningful change at the local and national level.

The ALLIANCE has a strong and diverse membership of over 3,500 organisations and individuals. Our broad range of programmes and activities deliver support, research and policy development, digital innovation and knowledge sharing. We manage funding and spotlight

innovative projects; working with our members and partners to ensure lived experience and third sector expertise is listened to and acted upon by informing national policy and campaigns and putting people at the centre of designing support and services

We aim to:

- Ensure people are at the centre, that their voices, expertise and rights drive policy and sit at the heart of design, delivery and improvement of support and services.
- Support transformational change, towards approaches that work with individual and community assets, helping people to stay well, supporting human rights, self management, co-production and independent living.
- Champion and support the third sector as a vital strategic and delivery partner and foster better cross-sector understanding and partnership.

Contact

Billi Allen-Mandeville, Policy and Information Officer
E: billi.allen-mandeville@alliance-scotland.org.uk

Rob Gowans, Policy and Public Affairs Manager
E: rob.gowans@alliance-scotland.org.uk

T: 0141 404 0231
W: http://www.alliance-scotland.org.uk/

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