

Scottish Government consultation on Health and Social Care Strategy for Older People

Response from Obesity Action Scotland

Closing date: 19 June 2022

Question - Do you have examples of communities, voluntary/third sector and public sector organisations working together to improve older people's health and wellbeing and reduce any health inequalities which they experience?

Obesity Action Scotland is a national partner for Scotland's Whole Systems Approach to Diet and Healthy Early Adopter Programme, championed by the Scottish Government and presented in the Programme for Government. OAS also hosts the National Co-ordinator role which actively supports the programme. Whole Systems Approaches (WSAs) are increasingly understood as effective in addressing overweight and obesity in Scotland by promoting a healthy weight and diet. A WSA embraces the complex system of factors that contribute to an obesogenic environment and acknowledges that there is no 'silver bullet'. Taking a WSA across the life course is essential, to ensure as many people as possible arrive at older age a healthy weight.

Eight local areas across Scotland have adopted a WSA to diet and healthy weight. The programme started pre-pandemic and has evolved and adapted as a result of the pressures of the pandemic. The programme encourages cross-sector working and working groups consist of health practitioners, third sector representatives, physical activity specialists, local business owners and local residents. In the first lockdown, North Ayrshire's team were proactive in establishing emergency food services for the most vulnerable people in their communities. This was a combined effort of many local partners working together. In Eyemouth, Scottish Borders, the local working group have prioritised three main themes from their workshops. There is high momentum to implement actions locally, many of which are targeted at the more vulnerable community members, such as older people.

Question – Is there anything else you would like to add about preventative and proactive care for older people? Please tell us if there is anything you would like to add on this section.

Here we are commenting on paragraph 5.28 on food and nutrition for older people and the example of the Eat Well Age Well programme cited immediately after it.

As stated in the consultation document, malnutrition in older adults is a key topic. There has been increasing attention on malnutrition in older adults nationally, which is welcome. However, this often focuses on undernutrition only, which is the focus of the example cited in the consultation document. We believe a focus on malnutrition in all its forms is more appropriate.

Understanding the whole spectrum of malnutrition is key to effective action. Use of a historical definition of malnutrition, to mean only undernutrition, risks creating confusion and an unnecessary conflict in priorities and actions. In fact, a focus on tackling only one aspect of malnutrition could cause harm. At OAS, we published a position statement on malnutrition¹ that called on policy

¹ <https://www.obesityactionscotland.org/publications/policyposition-statements/position-statement-on-malnutrition/>

makers to ensure when they use the term malnutrition, they are not inadvertently only referring to undernutrition, as we have seen this issue arise regularly in policy documents relating to older people. We would ask that this call is implemented in the Health and Care Strategy for older people.

In this regard, it may be helpful to imagine malnutrition as a continuum from undernutrition to overweight and obesity, with the possibility of micronutrient imbalances occurring at any point.

In recognition of the whole spectrum of diet-related problems, authorities such as the World Health Organization², European Commission and Global Nutrition Report have been increasingly using the terms of '*malnutrition in all its forms*' and '*double burden of malnutrition*'. We would like to see the consultation document updated to account for this, with malnutrition replaced with malnutrition in all its forms. The Scottish Government should adopt the WHO definition of malnutrition, and should include the whole spectrum of malnutrition, including overweight and obesity, in any policies targeting malnutrition and diet in older people in Scotland.

Continuing to focus on malnutrition as only undernutrition ignores a significant issue of overweight and obesity in older adults in Scotland. In Scotland in 2020, data from the Scottish Health Survey shows that 73% of people in the 65-74 age group and 66% of people aged 75 and over were living with overweight, obesity or severe obesity, compared to less than 1% of the age 65 and over population being underweight³ (we acknowledge that the Scottish Health Survey only contains data for older adults still living at home, and does not include those living in care homes). We know the fact that rates of obesity decline for those in the 75 and over category is potentially due to a survival bias whereby the adults who had obesity at a younger age are not as likely to survive into older age.⁴ If we want a healthy and thriving population of older adults in Scotland we must achieve a healthy weight population.

These high levels of overweight and obesity have a significant impact on the health outcomes of older populations, with a much greater incidence and prevalence of non-communicable diseases like type 2 diabetes. Evidence shows there is a strong association between increasing age with increased rates of type 2 diabetes. The 60-69 age group accounted for 25.9% of new type 2 diabetes cases in 2020, compared to 5.9% in the 30-39 age group⁵. The data reports that 27.7% of the 60-69-year-old population in Scotland had type 2 diabetes in 2020, compared to only 2.2% of those aged 30-39⁶.

A clear link is observable between diet and disease in older people. Older people are 'nutritionally vulnerable' and have specific nutritional requirements for their age, one being that daily energy requirements decrease in older age. Long term conditions, changes to mobility and/or cognitive capacity can impair their ability to meet these needs, and deficiencies in certain macronutrients, vitamins, and minerals are common in this age group⁷.

² https://www.who.int/health-topics/malnutrition#tab=tab_1

³ The Scottish Government. *The Scottish Health Survey 2020 Edition* - telephone survey, volume 1, main report <https://www.gov.scot/publications/scottish-health-survey-telephone-survey-august-september-2020-main-report/documents/>

⁴ Di Angelantonio, E., Bhupathiraju, S.N., Wormser, D., Gao, P., Kaptoge, S., de Gonzalez, A.B., Cairns, B.J., Huxley, R., Jackson, C.L., Joshy, G. and Lewington, S., 2016. Body-mass index and all-cause mortality: individual-participant-data meta-analysis of 239 prospective studies in four continents. *The Lancet*, 388(10046), pp.776-786.

⁵ NHS Scotland Scottish Diabetes Survey 2020, Table 63 <https://www.diabetesinscotland.org.uk/wp-content/uploads/2022/01/Diabetes-Scottish-Diabetes-Survey-2020.pdf>

⁶ NHS Scotland Scottish Diabetes Survey 2020, Table 68 <https://www.diabetesinscotland.org.uk/wp-content/uploads/2022/01/Diabetes-Scottish-Diabetes-Survey-2020.pdf>

⁷ LaBrier AT, Corish CA, Dwyer JT. Nutrition in Older Adults. In: Buttriss JL, Welch AA, Kearney JM, Lanham-New SA, eds. *Public Health Nutrition. The Nutrition Society Textbook Series*. Second Edi. Wiley Blackwell; 2018:175-191

The diet of older adults in UK is poor, in common with adults of all ages. A recently published statement from the Scientific Advisory Committee on Nutrition (SACN) on nutrition and older adults (using National Diet and Nutritional Survey [NDNS] 2014/15-15/16 data) concluded that the NDNS data on diet, nutrient intakes and blood analytes for people aged 65+ indicates that, *'similar to all UK adults, older adults exceed maximum recommendations for intakes of saturated fat, free sugars and salt, and fail to meet recommendations for fruit and vegetables, fibre and oily fish. There is also evidence of low intakes of some micronutrients'*⁸.

Free sugar intake is recommended to be below 5% of total dietary energy intake, however, older adults are consuming more than double the recommended level. Mean intake of free sugars as a percentage of total energy was around 11% in both the 65-74-year-old and 75+ age groups in 2019. Saturated fat intake is recommended to be below 10% of total dietary energy intake. Both older age groups exceeded this according to the SACN data – with mean saturated fat intakes (as percentage of total energy intake) of 12.5% and 14.3% in 65-74-year-olds and over 75s, respectively. Finally, a low intake of important nutrients, like protein, is reported in older adults, with 27% of those aged 65-74, and 33% aged 75+, having protein intakes below the daily recommended levels⁹. This data demonstrates that the diets of older people are unhealthy and excess consumption of saturated fat, salt and sugar is associated with overweight and obesity.

Paragraph 5.28 in the consultation document also refers to prevention of malnutrition. In this regard, we would like to see action which promotes an environment that supports a healthy lifestyle for all, including older people, such as a nutritious balanced diet and improved physical activity levels, through government intervention and targeted programmes in Scotland. Action should also focus on the creation of a food environment which supports healthy dietary options for all, including older adults, through policy and regulation that tackles the availability, specifically portion size, affordability and accessibility of a healthy diet. We have called for these as recommended actions in our recently published briefing paper on older people and obesity¹⁰, and would like to see them prioritised in Scottish Government policy in tackling malnutrition and unhealthy diets in older people.

In the briefing paper¹¹, we outline recommended actions for addressing overweight and obesity in older people. These include:

- the implementation of actions to improve food and physical activity environments to prevent weight gain across the life course;
- creating a food environment which supports healthy dietary options for all, including older adults, through policy and regulation that tackles the availability, affordability and accessibility of a healthy diet;
- promote affordable and appropriate physical activity opportunities for all, including older adults;
- the Scottish Government should ensure that opportunities for weight management and early detection of type 2 diabetes services are accessible to the older adult; and
- the Scottish Government should adopt the WHO definition of malnutrition, and should include the whole spectrum of malnutrition (including overweight and obesity) in any policies targeting malnutrition or diet in older people in Scotland

⁸ Scientific Advisory Committee on Nutrition (SACN). *SACN Statement on Nutrition and Older Adults Living in the Community.*; 2021.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/953911/SACN_Nutrition_and_older_adults.pdf

⁹ Ibid

¹⁰ Obesity Action Scotland (2022) Obesity and Older People Briefing

<https://www.obesityactionscotland.org/media/1754/obesity-and-older-people-briefing-final.pdf>

¹¹ Ibid

We would like to see these recommended actions considered by the Scottish Government for inclusion in the Health and Social Care Strategy for older people to help tackle issues of poor diet and overweight and obesity in older adults in Scotland.

About us

Obesity Action Scotland provide clinical leadership and independent advocacy on preventing and reducing overweight and obesity in Scotland.

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