



1. Formal details of the paper

1.1. Title of the paper

Brighton & Hove Food Poverty Action Plan and Healthy Ageing and Food – bringing a food focus to Brighton & Hove as an ‘Age Friendly City’.

1.2 Who can see this paper?

The contents of this paper can be shared with the general public.

1.3 Date of Health & Wellbeing Board meeting

20 September 2016

1.4 Author of the Paper and contact details

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2. Summary

2.1 Provide a short summary of the paper

The paper presents for information both the **Food Poverty Action Plan** and **Healthy Ageing and Food – bringing a food focus to Brighton & Hove as an ‘Age Friendly City’.**

The **Food Poverty Action Plan** (FPAP) is a multi-agency citywide initiative owned by the strategic partners of BH Connected.

The overall aims of the FPAP are to;

- reduce the impact of food poverty on the health and wellbeing of local people,
- mitigate against the likely impact on future health and social care budgets if food poverty is not addressed,
- focus the city’s limited resources on the most effective solutions



The FPAP was accepted at the Neighbourhood Equalities and Communities Committee Nov 2015. It is both pragmatic and aspirational. It contains 80 actions, over half of which build on existing Brighton & Hove City Council and partner services or functions. Delivery of these is achievable within current resources. Additionally, there are aspirational actions where external funding is being sought by community partners.

Healthy Ageing and Food (HAF) is a scoping report that sets out to identify what an 'Age Friendly City' might look like in relation to food. It links closely with the Food Poverty Action Plan, and supports the aims of 'Spade to Spoon' - the city's food strategy and is a work-stream within the Public Health Older Peoples Programme.

3. Decisions, recommendations and any options

- 3.1 The Health and Wellbeing Board is asked to note the **Food Poverty Action Plan** (Appendix 1); that food poverty is unacceptable and that collective strategic action should be taken to prevent and address this issue in Brighton & Hove.
- 3.2 The HWB is asked to note the recommendations in the **Healthy Ageing and Food report** (Appendix 2) outlined in 4.9 below.
- 3.3 The HWB is asked to accept a progress report on the **Food Poverty Action Plan** at the end of the 3 years; and on **Healthy Ageing and Food** after 3 years.

4. Relevant information

These two pieces of work are important as good nutrition supports both mental and physical health across the life course. The city's Joint Strategic Needs Assessment (JSNA) sets out key information about the importance of good nutrition. A focus on food will contribute to other citywide priority outcomes around health, wellbeing and addressing inequalities.

- a. Food poverty is 'the inability to afford or to have access to the food necessary for a healthy diet'. Food poverty does not exist in isolation from other forms of poverty nor do food prices exist in a vacuum from other household expenses such as rent, fuel and water. Food poverty is not just about hunger – it is about difficult choices ('food v



fuel'; 'skipping meals', 'trading down') and long term unhealthier food choices.

Food poverty is an increasing problem in the city. There are 14 areas of Brighton & Hove in the poorest 1% for income deprivation nationally, and it is an expensive place to live¹. Data related to premature deaths in England shows that Brighton and Hove ranks 98th worst out of 150 local authorities. Cancer, liver disease and heart disease are key contributors. Poor diet and obesity are key factors in the causes of these deaths. ² It has been estimated that malnutrition costs UK health services up to £7.4 billion a year. ³ Both the FPAP and the HAF contribute towards addressing this.

It is difficult to measure the exact number of people experiencing food poverty in the city as there is no fixed definition and food poverty can arise for different reasons. It is not just about money but may also be about food access, skills, equipment or be complicated by personal circumstances such as needing a special diet.

Food bank use is often used as a way to measure levels of food poverty but in practice only identifies the tip of the iceberg of people in crisis. The number of food banks in Brighton & Hove has more than doubled in the last two years. New research by BHFP shows there are now fifteen food banks in the city which together give out an average of 289 food parcels a week, an 8% increase compared to 2014. Two thirds of food banks (67%) say that they have noticed an increase in demand over the last year.

The Local Discretionary Social Fund (LDSF) provides payments for those on low income with an unforeseen emergency or financial crisis. In 2015-2016, Food related LDSF grants totalled over £60,000. 886 LDSF applications were made for 'food expenses' of which 372 were funded. Additionally 994 applications made for cooking equipment (kitchen ware, cooking facilities, fridges) of which 483 were funded.

The **Food Poverty Action Plan** (FPAP) principles are to:

¹ Indices of Multiple Deprivation 2015

² <http://www.bhconnected.org.uk/sites/bhconnected/files/jsna/jsna-6.4.6-Good-nutrition-&-food-poverty1.pdf>

³ <http://www.bapen.org.uk/pdfs/economic-report-short.pdf>



- reduce the impact of food poverty on the health and wellbeing of local people,
 - mitigate against the likely impact on future health and social care budgets if food poverty is not addressed,
 - focus the city's limited resources on the most effective solutions,
 - take a preventative approach by addressing the underlying causes of food poverty,
 - measure, monitor and understand food poverty levels in the city.
- b. The FPAP aims to:
- Tackle the underlying causes of food poverty in the city.
 - Ensure that every child, and every vulnerable adult, can eat one nutritious meal a day, as a bare minimum.
 - Make Brighton & Hove a city that cooks and eats together.
 - Ensure there is crisis and emergency support so that people do not go hungry, when prevention is not enough.
 - Commit to measuring levels of food poverty so we know if we are being effective.
- c. The FPAP was developed by Brighton & Hove Food Partnership & Brighton & Hove Connected. It is owned and delivered by over 50 partners, including the City Council, CCG and voluntary, community and faith groups and implementation is underway. It is included (as number 57) in the Fairness Commission recommendations report. There are a range of actions identified within the Action Plan addressing the needs of older people, adults, families and children. ⁴ Progress on implementation of the FPAP is being reviewed autumn 2016.

5. Healthy Ageing and Food – bringing a food focus to Brighton & Hove as an 'Age Friendly City' (HAF) scopes the existing work in the city around food and older people; and identifies what an 'Age Friendly City' might look like as regards food. The report was prepared by the Brighton & Hove Food Partnership for the city's Age Friendly Steering Group and Brighton & Hove Public Health as part of the Public Health Older Peoples Programme. It was developed in parallel with and relates to the FPAP for example, in promoting shared community meals for older people.

⁴ <http://bhfood.org.uk/reports-publications/food-poverty/32-food-poverty-action-plan-final/file>



There are currently 38,300 people aged 65 or over in Brighton & Hove, based on 2015 mid-year estimates. This is projected to increase to 40,400 people by 2020.⁵

a. It identifies key themes of:

- Access to tasty and nutritious meals - these can also be an opportunity to socialise, share and enjoy.
- Choice and taste are important when considering options for food provision.
- Innovation - There are opportunities especially for the voluntary and community sector to provide some of the options around food. For example, adding to existing lunch club provision with new models so that people feel they are 'for them'; or developing new methods of delivering cooked meals.
- The importance of a 'living well approach' – to prevent isolation, food poverty, dramatic changes in quality of diet in the first place. The limited support available should target times when people are especially vulnerable (e.g. following bereavement and hospital discharge).
- Recognising that older people are a community resource - opportunities for older people to cook/share meals and volunteering are essential.

b. The report makes a series of recommendations relevant to commissioning decisions across the city and for other healthy ageing preventative work streams.

It considers food issues for:

- those living independently at home, who shop and cook for themselves,
- those people supported in their own accommodation, any initiatives also need to include paid and 'informal' carers,
- people living in a residential care setting, nursing home or in hospital – and work in these setting needs to target staff in addition to the older residents.

5.3 The recommendations are grouped to cover:

⁵ Projecting Older People Population Information <http://www.poppi.org.uk/>

- Information - nutritional needs, equipment, ready meals, home delivery and shared meals outside the home, in a range of formats and media, for both public and workers.
- Training - on nutrition and cooking skills for family carers, paid care workers residential staff and older 'new' cooks and adapting to changed mobility or sensory impairment. Extend the Healthy Choice Award in residential accommodation
- Community meals - nutritious meals at home, training and time scheduled where cooking is offered via care package.
- Shared meals in the community - improve information about availability and options for eating outside the home. Consider the gaps e.g. In the East and North of the city and at weekends.
- Food poverty and access – food access increasingly associated with food poverty in older people. Retirement financial planning advice to include food/shopping/cooking issues.
- Isolation - Sensory impairment and 'entrenched' isolation are particular barriers to good nutrition. Befriending and targeted support at times of change or increased vulnerability e.g. bereavement, to help prevent isolation.
- Food and nutrition to be included in the Dementia Strategy.

The HAF report recommendations will be taken forward by the Age Friendly City Steering group – a partnership of statutory, community and voluntary sector organisations working with older people.

Both pieces of work have been recognised as national good practice and build on city's track record of pioneering food work including its silver Sustainable Food City Award.⁶

6. Important considerations and implications

a. Legal

There are no specific legal implications arising from the report recommendations. General issues relating to equality are addressed below.

Lawyer Consulted: Judith Fisher Date: 08/09/2016

b. Finance

⁶ <http://bhfood.org.uk/bhfp-case-studies/sustainable-food-cities/23-final-application-feb-2015/file>



There are no direct financial implications arising from the recommendations made in this report.

Finance Officer Consulted: Mike Bentley Date: 07/09/2016

c. Equalities

The Food Poverty Action Plan targets population groups in the city that are particularly vulnerable to food poverty so has equalities at its heart. These are;

- Disabled People (including people with learning disabilities) and people experiencing long term physical or mental ill health.
- Large families, single parent families and families with disabled Children.
- Working people on a low income, especially younger working age people.
- Vulnerable adults - including older people; those who are isolated; digitally excluded; or who are experiencing transition e.g. bereavement/ becoming ill/ leaving hospital and people moving from homelessness, offending or addiction.
- 16-25 year olds especially those who are unemployed, vulnerable and/or leaving care.
- Black and minority ethnic people and migrants who have limited recourse to funds.

As per BHCC guidance an Equalities Impact Assessment was carried out in 2015.

Look Inequality – the Annual report of the Director of Public Health 2014-2015 focusses on inequalities in the City and includes a chapter on food and hunger. ⁷

Healthy Ageing and Food - this considers specific needs and actions for certain groups of the older population with higher levels of vulnerability to malnutrition, food poverty such as those experiencing entrenched isolation⁸, financial poverty⁹, with sensory impairment or recently bereaved.

⁷ <http://www.brighton-hove.gov.uk/content/health/public-health-brighton-hove/annual-report-director-public-health-2014-15>

⁸ 6 - 13% of older people say they feel very or always lonely. Campaign to End Loneliness. https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/141895/uk-advisory-forum-230512-tackling-loneliness-isolation.pdf

⁹ See Older Peoples Locality Profiles; <http://www.bhconnected.org.uk/content/reports>



An Equalities Impact Assessment has been done for the overarching Public Health Older Peoples Programme.

d. Sustainability

Financial: These initiatives take a preventive approach which supports the delivery of sustainable health and social care provision.

Environmental: these two reports come under the umbrella of *Spade to Spoon*, the City's Food Strategy; and the *Brighton & Hove Sustainable Community Strategy*; which are both key sustainability strategies

e. Health, social care, children's services and public health
These are covered within the paper.

6. Supporting documents and information

The following two reports are included with this paper:

Brighton & Hove Food Poverty Action Plan
Healthy Ageing & Food Report

6.1. Additional information is also available from the lead officer or online:

- Case study on developing the Food Poverty Action Plan:
<http://bhfood.org.uk/case-studies>
- Brighton and Hove Food Strategy 'Spade to Spoon':
<http://bhfood.org.uk/food-strategy>
Director of Public Health's annual report, chapter 7 on food and hunger: <https://www.brighton-hove.gov.uk/content/health/public-health-brighton-hove/annual-report-director-public-health-2014-15>

