

Cross-Party Group on Improving Scotland's Health

Wednesday 1 March, 12:30-13:45, online

Summary

Present

MSPs

Emma Harper MSP (Chair)

Foyso Choudhury MSP

Brian Whittle MSP

Invited guests

Professor Jamie Pearce, co-Director of the Centre for Research on Environment, Society and Health (CRESH), University of Edinburgh

Tom Bennett, Rights in Recovery Development Officer at Scottish Recovery Consortium, AFS Board member, and person in recovery

Ewan Carmichael, youth advocate and member of the Young Scot Health Panel

Non-MSP Group Members (54)

Ross Barrow, Royal Pharmaceutical Society

Christina Buckton, Public Health Scotland

Garry Burns, Alcohol Focus Scotland

Hilda Campbell, COPE

Alan Dalziel, ASH Scotland

Elena Dimova, University of the West of Scotland

Alison Douglas, Alcohol Focus Scotland

Sheila Duffy, ASH Scotland

Sioned Ellis, Diabetes Scotland

Jennifer Forsyth, Obesity Action Scotland

Nick Harleigh-Bell, Alcohol Focus Scotland

Michael Heggie, Cancer Research UK

Claire Hislop, Public Health Scotland

Scott Hogg, NHS Scotland

Elinor Jayne, SHAAP

Gleny Jones, Association for Nutrition

Karen Keeley, Royal Environmental Health Institute of Scotland

Andrew MacGregor, ScotCen

Karen MacNee, Scottish Government

Sancha Martin, University of Edinburgh

Rebecca McColl, Alcohol Focus Scotland
Gary Meek, Glasgow Council on Alcohol
Nicola Merrin, Alcohol Focus Scotland
Jane Miller, Ladywell Medical Practice
Nicola Paul, ASH Scotland
Jamie Pearce, University of Edinburgh
Gillian Purdon, Food Standards Scotland
Jonathan Roden, British Heart Foundation
Elspeth Russel, NHS Scotland
Jonathan Sher, Queen's Nursing Institute Scotland
Rebecca Sibbett, Alcohol Focus Scotland
David Stewart, Fedcap Employment
Alexandra Taylor, Alcohol Focus Scotland
Yvonne Traynor, Public Health Scotland
Lorraine Tulloch, Obesity Action Scotland
Caroline Vaczy, University of Glasgow
Annafleur van Mourik Broekman, NHS Lothian
Laura Wilson, Food Standards Scotland
Michelle Wilson, Childrens Health Scotland
Kirstin Worsley, Breast Feeding Network
Stephen Young, Scottish Government

Apologies

Ruth Campbell, AAPCT
Harpreet Kohli
Carol Emslie, Glasgow Caledonian University
Shona Hilton, University of Glasgow
Helen Forrest, Children's Health Scotland
Linda Duthie, NHS Grampian
Dr Colwyn Jones, University of Glasgow
Ian McCall, Paths for All
Robert McGeachy, Food Standards Scotland

Agenda item 1: Welcome from co-convenor Emma Harper MSP:

Emma Harper MSP (EH) welcomed attendees and outlined the agenda.

Agenda item 2: Attending MSPs introduced and apologies noted in meeting minutes

EH welcomed **Foyso Choudhury MSP (FC)** and **Brian Whittle MSP (BW)** to the meeting. Apologies were noted in the meeting minutes, as above.

Agenda item 3: Approval of Wednesday 21/09/22 meeting minutes and any matters arising

EH asked for someone to propose and second approving the minutes. **FC** proposed approving the minutes, and **Lorraine Tulloch (LT)** seconded their approval. The group unanimously approved the previous meeting minutes with no amendments.

Agenda item 4: Topic discussion and presentations: “Shop ‘til You Drop”: the role of retail in promoting unhealthy consumption.

EH introduced **Professor Jamie Pearce (JP)**, Professor of Health Geography and co-Director of the Centre for Research on Environment, Society and Health (CRESH), at the University of Edinburgh.

JP highlighted that the commercial sector, unhealthy commodities, and non-communicable diseases are all linked, particularly tobacco and alcohol.

Availability has been overlooked in public health, but it is a critical element of understanding non-communicable diseases and health inequalities in Scotland, which public health advocates should arguably pay more attention to. The availability of unhealthy commodities impacts health behaviours, health outcomes, and health inequalities.

The availability of unhealthy commodities such as alcohol and tobacco is highly unequal and is much higher in the most disadvantaged parts of Scotland. A recent GPS study showed that Scottish children aged 10-11 from more disadvantaged neighbourhoods have around seven times more exposure to tobacco retailing, with similar results to alcohol, than their counterparts in more affluent neighbourhoods.

Research shows that adolescents in areas with high availability of tobacco products are more likely to have ever smoked and be current smokers, while adults in these areas are more likely to smoke for longer and be less likely to give up cigarettes. International evidence consistently shows that lower retail density and decreased proximity to tobacco retailing is associated with lower tobacco use.

Similar findings are available for alcohol, with alcohol’s availability clearly connected to behaviours and consumption patterns, particularly around binge drinking. It also seems to have a disproportionately bigger impact on people from more disadvantaged settings.

In Scotland, there will be a new Tobacco Control Strategy later this year. Various policies to address availability have been taken up internationally, which can be broadly grouped into five main areas:

1. Reducing availability around children's spaces such as schools and playgrounds
2. Limiting sales to particular types of retailers or prohibiting it in certain types of retailers, such as supermarkets
3. Limiting the hours of tobacco sales, such as by restricting sales around the beginning and end of the school day
4. Enforcing special restrictions or minimum distances between retailers to result in an overall reduction in provision
5. Implementing barrier conditions on the sale

Tom Bennett (TB), Rights in Recovery Development Officer at Scottish Recovery Consortium, AFS Board member, and person in recovery agreed that what **JP** was talking about from an academic perspective has been reflected in his own lived experience of alcohol addiction.

As someone who also stopped smoking, **TB** argued that the marketing restrictions on tobacco were a massive assistance, allowing him to sustain and maintain recovery from smoking. In early recovery from alcohol, going to the supermarket was an extremely high-risk situation, as essential items like toilet paper were on the other side of the aisle from spirits. Even today, he would rather avoid the alcohol aisle, but this is impossible in his local supermarket as beers and ciders are opposite sparkling water and soft drinks. This is a common set-up across Scotland.

Supermarkets also change their displays and layouts, meaning that you cannot always predict a safe route around a supermarket so that you avoid unhealthy commodities.

People in early recovery are very often told to stay away from high-risk places, but you cannot stay away from the shops. Even avoiding large supermarkets does not help, as local shops often have a wall of spirits behind the tills. It is a really high-risk situation for people with problematic alcohol use.

In recent years, displays of sweetie flavoured vapes have appeared, which seem more marketed for children than adults. The use of vapes also results in lots of litter, which is another separate but serious problem.

Ewan Carmichael (EC), youth advocate and member of the Young Scot Health Panel, spoke about children and young people's rights, including their right to health, which is being negatively influenced by the retail environment, which constantly advertises harmful products like alcohol and vapes. Children and young people are exposed to the products and to their marketing. In **EC's** local supermarket, fizzy drinks are displayed next to alcoholic products. This subliminally categorises these two products together, despite their clear differences.

EC also mentioned vapes, noting concerns around their usage by young people and their negative effect on the environment, highlighting that their marketing makes them

particularly attractive to young people through the use of bright colours. Similar effects have been seen with alcoholic products such as Dragon Soop, which in fact look very similar to energy drinks like Monster.

The visibility and availability of these unhealthy commodities just tell young people that they are acceptable, normal products. This is problematic for everyone, but especially for vulnerable groups like children and young people. **EC** mentioned the Scottish Government's consultation on restricting alcohol advertising which could have a really positive impact on people's lives, highlighting that public health actors must support the implementation of healthy environments and support people being targeted by marketing techniques.

Agenda item 5: Any Other Business:

There was no other business.

EH ended the meeting by thanking the speakers for their presentations and participants for their questions.

CPG members will be notified of the date of the next meeting by email.

END