Tackling inequalities in health and diet-related disease

Developing successful inter-agency partnerships to promote fruit and vegetable consumption particularly to low income groups.
Our Work
To represent around 100 national public interest organisations working at international, national, regional and local level.

Our Aim
To advocate food and agriculture policies and practices that enhance the health and welfare of people and animals, improve the working and living environment, promote equity and enrich society and culture.

This Report
Sustain: The alliance for better food and farming would like to thank the Department of Health for funding the seminar *Tackling Inequalities and Health and Diet-Related Disease: Developing successful inter-agency partnerships to promote fruit and vegetable consumption particularly to low income groups* and this seminar report.

Edited by Peta Cottee

On 1 April 1999 the National Food Alliance merged with the Sustainable Agriculture Food and Environment (SAFE) Alliance to become Sustain: The alliance for better food and farming.
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1) The policy context and why partnerships are important

Tessa Jowell MP, Minister for Public Health

The original concept behind the Department of Health funded project was to:
+ look at low income consumers’ knowledge, behaviour and attitudes towards fruit and vegetables;
+ see whether dietary behaviours amongst this group could be influenced by cook and taste sessions held within a retail environment.

By and large the project mirrored the findings from other surveys. That:
+ the five a day message is fairly well understood;
+ low income groups cannot afford to experiment with new recipes for fear of their families not eating the meal;
+ people believe that buying more fruit and vegetables would add more to their shopping bills as they would displace cheaper items or be additional to their “normal” shopping;
+ cook and taste sessions encourage more experimentation with different types of fruit and vegetables;
+ the sales of those ingredients used in the recipes were increased in the short term.

The project demonstrates that:
+ forging effective and collaborative partnerships across academic, voluntary, statutory and private sectors is possible;
+ the development of innovative partnerships, which is at the heart of the Government’s philosophy, is possible;
+ the use of partnerships to improve access to the foods that make up a health and balanced diet, especially to those on low incomes, can be successful and should be repeated.

There are other examples of effective partnership working, such as the Wandsworth Shopping Shuttle. The Shuttle:
+ has been running since April 1996;
+ offers a door to door service for elderly, disabled local residents;
+ has a dedicated drop-off and pick-up point close to Sainsbury’s;
+ was originally funded through the first wave of Single Regeneration Budget but is now funded jointly by Sainsbury’s and Wandsworth Challenge Partnership until 2000.

Sainsbury’s, which is now considering supporting other community transport initiatives, became involved with the Shuttle project because Wandsworth Community Transport who set up the scheme:
+ had a business-like approach and made it clear what they wanted from Sainsbury’s and what return Sainsbury’s could expect;
+ provided regular monitoring information which demonstrated the popularity of the service, its value to the community and the commercial benefits Sainsbury’s enjoyed.

The Department of Health wants to encourage more partnership working. It did this recently by funding the Health Education Authority and the National Food Alliance (NFA) to run a series of regional seminars to bring together those working on food and low income issues to exchange best practice in the development of community food initiatives. The seminars gave the NFA the chance to launch its new toolkit called Making Links which:
+ has been developed to help those wanting to start a local food project;
+ gives advice on how to get funding and drawing up a business plan;
+ explains the importance of evaluation of projects.
THE POLICY CONTEXT AND WHY PARTNERSHIPS ARE IMPORTANT

Tackling inequalities in health is an underlying theme of the Government’s policy. As a result is has:
- set up a Policy Action Team on improving shopping access for people living in deprived neighbourhoods;
- highlighted the need to improve shopping access for people living in poor neighbourhoods through Our Healthier Nation, A New Deal for Transport and the Social Exclusion Unit’s report on neighbourhood renewal.

The Policy Action Team on improving shopping access:
- is one of 18 teams which have been set up to develop integrated and sustainable approaches to the problems of most deprived neighbourhoods;
- consists of members drawn from a range of expertise from within and outside of Whitehall;
- has been charged with developing a strategy for improving shopping access by April 1999.

The team is currently gathering information about:
- barriers and opportunities to locating shops in deprived areas;
- how services might be successfully piggy-backed on to what may already be available, for example, healthy living centres.

The Our Healthier Nation White Paper:
- is likely to be published in spring 1999;
- will contain contracts for tackling coronary heart disease and cancer.

In response to questions the Minister said that:
- Government funds may be made available to part fund relevant initiatives developed through innovative partnerships. The National Lottery’s New Opportunities Fund will be used to fund healthy living centres which could incorporate projects that improve access to fresh fruit and vegetables provided that there is evidence that the initiative will work.
- The Policy Action Team on Shops would be reporting in April 1999 and information on the Social Exclusion Unit’s work is available on the web at http://www.opengov.uk
- The Government is looking at how food and cooking skills are taught in schools as a part of the National Curriculum. It is committed to ensuring children get clear messages about food, cooking, diet and health and is looking at how food skills can be developed as a part of school holiday activities.
2) **Health, income and diet**

**Dr Tim Lobstein, Co-Director of the Food Commission**

People on low incomes are more likely than their better off counterparts to:
+ suffer illnesses; and
+ die earlier (see Table 1).

**Table 1: The proportion of men aged 20 who die before age 65**

<table>
<thead>
<tr>
<th>Professional and executive</th>
<th>Unskilled</th>
<th>Semi-skilled</th>
<th>Skilled manual</th>
<th>Skilled non-manual</th>
<th>Intermediate managerial</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0%</td>
<td>5%</td>
<td>10%</td>
<td>15%</td>
<td>20%</td>
</tr>
</tbody>
</table>


The commonest cause of death in this age range is heart disease and stroke, which together account for 40% of the premature deaths, with cancers, accidents and suicide also contributing significantly.

Smoking is one of the main preventable factors, but diet is the other which:
+ affects a range of common diseases; and
+ is linked to a wide range of problems which are linked to income levels (see table 2).

**Table 2: Common diseases in the UK**

<table>
<thead>
<tr>
<th></th>
<th>HIGHER INCOME</th>
<th>LOWER INCOME</th>
<th>DIETARY PREVENTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart disease</td>
<td>+</td>
<td>++</td>
<td>Less fat. More fruit, veg, whole-grains</td>
</tr>
<tr>
<td>High blood pressure, stroke</td>
<td>+</td>
<td>++</td>
<td>Less salt. Less fat</td>
</tr>
<tr>
<td>Cancers</td>
<td>Colon</td>
<td>+</td>
<td>++</td>
</tr>
<tr>
<td></td>
<td>Breast</td>
<td>+ +</td>
<td>Less fat. More fruit, veg, whole-grains</td>
</tr>
<tr>
<td></td>
<td>Womb</td>
<td>+</td>
<td>++</td>
</tr>
<tr>
<td></td>
<td>Lung</td>
<td>+</td>
<td>++</td>
</tr>
<tr>
<td>Obesity-linked Diabetes</td>
<td>+</td>
<td>++</td>
<td>Less fat, refined starch, sugar</td>
</tr>
<tr>
<td>Gallstones</td>
<td>+</td>
<td>++</td>
<td>Less fat, refined starch, sugar</td>
</tr>
<tr>
<td>Tooth decay</td>
<td>+</td>
<td>++</td>
<td>Less sugar</td>
</tr>
</tbody>
</table>

Source: Food Commission. Key + lower risk ++ higher risk
Comparing the shopping patterns of higher and lower income families shows that higher income families tend to purchase healthier products than their lower income counterparts (see Table 3). Based on these patterns of food purchases, and by making estimates of what food is actually eaten, the government has estimated the nutritional intake of various vitamins and minerals, according to income bracket. The data show that those people on the lowest incomes have the lowest intakes of:

- vitamins (for the three vitamins measured) (see Graph 1);
- minerals (for iron and zinc, the trend was less pronounced for calcium, possibly due to the fortification of white bread with calcium) (see Graph 2).

### Table 3: Shopping preferences of the rich and poor

<table>
<thead>
<tr>
<th></th>
<th>Over £610/week</th>
<th>Grains per person per week</th>
<th>Under £150/week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yoghurt</td>
<td>165</td>
<td>95</td>
<td></td>
</tr>
<tr>
<td>Fresh fish</td>
<td>37</td>
<td>27</td>
<td></td>
</tr>
<tr>
<td>Fresh green veg</td>
<td>253</td>
<td>220</td>
<td></td>
</tr>
<tr>
<td>Fresh other veg</td>
<td>597</td>
<td>414</td>
<td></td>
</tr>
<tr>
<td>Fresh fruit</td>
<td>905</td>
<td>555</td>
<td></td>
</tr>
<tr>
<td>Fruit juices</td>
<td>477</td>
<td>187</td>
<td></td>
</tr>
<tr>
<td></td>
<td>459</td>
<td>947</td>
<td>Full fat milk</td>
</tr>
<tr>
<td></td>
<td>14</td>
<td>30</td>
<td>Marge</td>
</tr>
<tr>
<td></td>
<td>55</td>
<td>81</td>
<td>Spreads</td>
</tr>
<tr>
<td></td>
<td>40</td>
<td>63</td>
<td>Oils</td>
</tr>
<tr>
<td></td>
<td>8</td>
<td>17</td>
<td>Fats</td>
</tr>
<tr>
<td></td>
<td>60</td>
<td>179</td>
<td>Sugar</td>
</tr>
<tr>
<td></td>
<td>337</td>
<td>426</td>
<td>Meat products</td>
</tr>
<tr>
<td></td>
<td>30</td>
<td>55</td>
<td>Frozen fish, prods</td>
</tr>
<tr>
<td></td>
<td>69</td>
<td>107</td>
<td>Eggs</td>
</tr>
<tr>
<td></td>
<td>595</td>
<td>928</td>
<td>Potatoes</td>
</tr>
<tr>
<td></td>
<td>149</td>
<td>224</td>
<td>Frozen veg, prods</td>
</tr>
<tr>
<td></td>
<td>327</td>
<td>375</td>
<td>Other veg prods</td>
</tr>
<tr>
<td></td>
<td>182</td>
<td>365</td>
<td>White bread</td>
</tr>
<tr>
<td></td>
<td>27</td>
<td>71</td>
<td>Flour</td>
</tr>
<tr>
<td></td>
<td>117</td>
<td>133</td>
<td>Biscuits</td>
</tr>
<tr>
<td></td>
<td>20</td>
<td>44</td>
<td>Tea</td>
</tr>
<tr>
<td></td>
<td>451</td>
<td>503</td>
<td>Soft drinks</td>
</tr>
</tbody>
</table>

Source: National Food Survey 1997, MAFF.
Graph 1: Estimated intake of vitamins according to income levels (in bands of ten percent from lowest to highest income).

Graph 2: Estimated intake of minerals according to income levels (in bands of ten percent from lowest to highest income).

Source: National Food Survey 1997, MAFF.
Tim Lobstein noted that:

✦ people buy food, not vitamins and minerals;
✦ people on low incomes eat to prevent hunger so focus on adequate calorie intake;
✦ the price of calories influences food choices when shopping on a tight budget;

**Table 4: The price of calories (1)**

**Best calorie bargains**

- Sandwich cream biscuits, 200g, 18p ......................57 kcal/p
- White sugar, 1kg 49p.............................................78 kcal/p
- White sliced bread, 800g, 17p...............................109 kcal/p
- Soft spread, 250g, 18p..........................................110 kcal/p
- Lard, 500g, 23p ...................................................193 kcal/p

**In contrast...**

- Banana, 1lb, 38p ..................................................9 kcal/p
- Tomato, 1 lb, 35p .................................................2 kcal/p
- Lettuce, 1 head, 29p .............................................0.3 kcal/p

*Source: Food Commission.*

**Table 5: The price of calories (2)**

<table>
<thead>
<tr>
<th>kcalories per penny</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Bread</strong></td>
</tr>
<tr>
<td>Wholemeal .................27</td>
</tr>
<tr>
<td>White sliced ..............42</td>
</tr>
<tr>
<td><strong>Fish</strong></td>
</tr>
<tr>
<td>White fish fillets ........2</td>
</tr>
<tr>
<td>Frozen fish products .......6</td>
</tr>
<tr>
<td><strong>Meat</strong></td>
</tr>
<tr>
<td>Chicken ....................6</td>
</tr>
<tr>
<td>Lamb ........................6</td>
</tr>
<tr>
<td>Pork .......................5</td>
</tr>
<tr>
<td>Beef sausages ..........11</td>
</tr>
<tr>
<td>Pork sausages ..........11</td>
</tr>
<tr>
<td>Meat pies ...............12</td>
</tr>
<tr>
<td><strong>Potatoes</strong></td>
</tr>
<tr>
<td>Plain potatoes ...........23</td>
</tr>
<tr>
<td>Frozen chips .............25</td>
</tr>
<tr>
<td><strong>Fruit</strong></td>
</tr>
<tr>
<td>Apples, pears, oranges ...4</td>
</tr>
<tr>
<td>Tinned fruit .............8</td>
</tr>
<tr>
<td>Ice cream, mousse .......16</td>
</tr>
</tbody>
</table>

*Source: Food Commission.*
cheap calories are found in sweet or fatty foods (see Tables 4 and 5). Healthy eating guidelines encourage us to eat more fruit, vegetables, lean meats and wholegrain cereal foods but:
+ these are more expensive in terms of the calories they provide;
+ people are faced with conflicting choices, between health and price;
+ better bargains in terms of calories per penny spent are often the worst bargains in terms of improving health.

Food pricing policies do not help low income groups. Price changes:
+ over the last few years show that the trends have been against selecting the healthy options;

<table>
<thead>
<tr>
<th>Table 6: Changes in food prices</th>
</tr>
</thead>
<tbody>
<tr>
<td>Price changes</td>
</tr>
<tr>
<td>1982-1997</td>
</tr>
<tr>
<td><strong>Bread</strong></td>
</tr>
<tr>
<td>Wholemeal ...........................................................+ 37%</td>
</tr>
<tr>
<td>White sliced ..........................................................+ 20%</td>
</tr>
<tr>
<td><strong>Fish</strong></td>
</tr>
<tr>
<td>White fish fillets ....................................................+ 132%</td>
</tr>
<tr>
<td>Frozen fish products .................................................+ 81%</td>
</tr>
<tr>
<td><strong>Meat</strong></td>
</tr>
<tr>
<td>Chicken ...........................................................................+ 121%</td>
</tr>
<tr>
<td>Lamb .............................................................................+ 90%</td>
</tr>
<tr>
<td>Pork .............................................................................+ 76%</td>
</tr>
<tr>
<td>Beef sausages ................................................................+ 54%</td>
</tr>
<tr>
<td>Pork sausages ................................................................+ 73%</td>
</tr>
<tr>
<td>Meat pies ......................................................................+ 79%</td>
</tr>
<tr>
<td><strong>Potatoes</strong></td>
</tr>
<tr>
<td>Plain potatoes .......................................................+ 185%</td>
</tr>
<tr>
<td>Frozen chips ..........................................................+ 49%</td>
</tr>
<tr>
<td><strong>Fruit</strong></td>
</tr>
<tr>
<td>Apples, pears, oranges ...........................................+ 77%</td>
</tr>
<tr>
<td>Tinned fruit ...........................................................+ 56%</td>
</tr>
<tr>
<td>Ice cream, mousse ..................................................+ 30%</td>
</tr>
</tbody>
</table>

Source: National Food Surveys for 1982-1997, MAFF.

have been steeper for healthier options, making fatty, sugary cheap calories relatively cheaper (see Table 6). Individual choice is not the only determinant of people’s diets. Prices and pricing policies:
+ are an important factor for low income groups;
+ do not mirror healthy eating recommendations (see Chart 1).
If food pricing policies were directed towards better health, supermarkets would be:
- promoting fruit and vegetables, lean meats, low cost dairy foods and cereal foods possibly via their special low-cost ‘value’ and ‘super saver’ products;
- leaving sugary and fatty foods out of their low-cost bargain promotional ranges.

However, as Chart 2 shows, supermarkets have tended to do the opposite.
Supermarkets do little to offer low cost fruits and vegetables:
- an average saving of around 30% can be found by shopping in street markets (see Table 7) instead of in the leading supermarkets, but unfortunately street markets are declining;
- those supermarkets with higher income customers devote far more space to fruit and vegetables than to soft drinks, while the reverse is true of the supermarkets with lower-income customers (see Table 8).

### Table 7: Supermarket prices versus street market prices

<table>
<thead>
<tr>
<th>Fruit prices</th>
<th>Gala</th>
<th>G Smiths</th>
<th>Pears</th>
<th>Conference</th>
<th>Clementines</th>
<th>Citrus</th>
<th>2 navels</th>
<th>Bananas</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>M &amp; S</td>
<td>59</td>
<td>59</td>
<td>67</td>
<td>59</td>
<td>50</td>
<td>59</td>
<td>3.81</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Waitrose</td>
<td>47</td>
<td>49</td>
<td>49</td>
<td>69</td>
<td>38</td>
<td>55</td>
<td>3.07</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sainsbury</td>
<td>55</td>
<td>49</td>
<td>38</td>
<td>69</td>
<td>38</td>
<td>55</td>
<td>3.04</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Safeway</td>
<td>49</td>
<td>49</td>
<td>46</td>
<td>45</td>
<td>20</td>
<td>55</td>
<td>2.64</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tesco</td>
<td>49</td>
<td>39</td>
<td>39</td>
<td>60</td>
<td>38</td>
<td>55</td>
<td>2.80</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lidl</td>
<td>na</td>
<td>40</td>
<td>40</td>
<td>36</td>
<td>na</td>
<td>40</td>
<td>2.23</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kwik Save</td>
<td>na</td>
<td>39</td>
<td>40</td>
<td>72</td>
<td>23</td>
<td>na</td>
<td>2.56</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spar</td>
<td>na</td>
<td>49</td>
<td>49</td>
<td>59</td>
<td>na</td>
<td>59</td>
<td>2.83</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Market stalls</td>
<td>25-40</td>
<td>33-40</td>
<td>33-45</td>
<td>33-45</td>
<td>16-28</td>
<td>24-40</td>
<td>1.64-2.38</td>
<td>97p</td>
<td>30%</td>
</tr>
</tbody>
</table>

Typical saving: 20 12 15 15 18 17 97p 30%

na = Products not on sale. Prices of these are assumed to be the lowest of the others.
January 1999 prices in north London. Source: Food Commission

### Table 8: Floor space devoted to fresh fruit compared with soft drinks

<table>
<thead>
<tr>
<th></th>
<th>fruit</th>
<th>soft drinks</th>
<th>ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marks &amp; Spencer</td>
<td>30</td>
<td>14</td>
<td>0.46</td>
</tr>
<tr>
<td>Waitrose</td>
<td>70</td>
<td>46</td>
<td>0.66</td>
</tr>
<tr>
<td>Sainsbury</td>
<td>96</td>
<td>81</td>
<td>0.84</td>
</tr>
<tr>
<td>Safeway</td>
<td>86</td>
<td>106</td>
<td>1.23</td>
</tr>
<tr>
<td>Tesco</td>
<td>18</td>
<td>45</td>
<td>2.50</td>
</tr>
<tr>
<td>Lidl</td>
<td>26</td>
<td>82</td>
<td>3.15</td>
</tr>
<tr>
<td>KwikSave</td>
<td>5</td>
<td>31</td>
<td>6.20</td>
</tr>
<tr>
<td>Spar</td>
<td>4</td>
<td>26</td>
<td>6.50</td>
</tr>
</tbody>
</table>

January 1999 survey in north London. Source: Food Commission
There is remarkably little promotion of fruits and vegetables. When looking at Britain’s 25 leading products:
✦ eight are snack foods and confectionery which spend £30 million on their promotion;
✦ six products were soft drinks which spend £45 million on advertising.

Food manufacturers make more profit on processed foods than they can on fresh foods so spend far more advertising and promoting these products.

Advertisements in trade journals show how products will be promoted. For example, a biscuit (Jammy Dodgers) is promoted around the country using a variety of methods:
✦ appearances at family events;
✦ radio programmes and advertisements using famous personalities;
✦ bargain offers to appeal to parents and free gifts and puzzles to appeal to children which they know will harness ‘pester power’.

Products promoted this way tend to be:
✦ high in calories and low in micro-nutrients;
✦ be bargains in preventing hunger but not in promoting health.
3) The NFA project with Kwik Save

Peta Cottey, Deputy Co-ordinator of the National Food Alliance

This project:
• was done as a pilot to see if it was possible to develop an effective model for interagency working that could be replicated;
• built on MAFF funded work already undertaken by Leatherhead Food Research Association (LFRA) and Glasgow University and the Institute of Food Research (IFR).

LFRA found that live cookery demonstrations and tastings were effective in persuading “low vegetable consumers” to increase their fruit and vegetable intake and increase the variety of produce eaten. Recommended methods of increasing fruit and vegetable consumption included:
• tastings and cookery demonstrations at local retailers;
• providing tips on shopping, storage and preparation of fruit and vegetables.

The University of Glasgow and the IFR identified barriers to increasing fruit and vegetable consumption as being:
• lack of social support;
• shopping being difficult and fruit and vegetables being heavy to carry;
• obtaining value for money.

The aims and objectives of the NFA project with Kwik Save were to:
• build on the findings of previous research;
• determine fruit and vegetable intake amongst a small group of low income consumers;
• establish the knowledge, attitudes and behaviour of low income groups towards fruit and vegetables and see if they mirrored what Glasgow University and IFR found or if low income groups had particular problems which were different;
• use the retail environment to promote consumption of fruit and vegetables through cookery demonstrations, offer the opportunity to taste fruit and vegetable based dishes and distribute of an educational booklet designed specifically for low income groups;
• identify fruit and vegetable purchase and consumption amongst participants following exposure to the intervention;
• develop a replicatable strategy which could be adopted by all retailers to help promote fruit and vegetables;
• increase the intake of fruit and vegetables amongst participants;
• make recommendations to retailers on successful strategies for encouraging fruit and vegetable consumption.

The project provided and ideal opportunity for interagency working with five elements to get right:

The environment
The project was done in a flag ship Kwik Save store in Rugby with a customer base of mainly low income groups. It was an ideal location because:
• it was based in a small town with a significant population living on a low income;
• the only other food retailer in the town centre was a small Co-op;
• it was able to provide electronic point of sale (EPOS) data which was important for evaluation purposes.

The survey
A questionnaire was developed based on those already designed by Glasgow University/IFR and LFRA. The purpose was to establish what consumers:
• know about the health benefits of increasing fruit and vegetable consumption;
• think about increasing consumption and its importance;
• do in terms of buying and eating fruit and vegetables.
The questionnaire was used to collect baseline data during the week of the intervention and then again six weeks later, using a suitably amended version, to establish any reported behaviour change. The subjects were asked to keep a record of their daily fruit and vegetable intake during weeks 1, 4 and 6 post-intervention to see if any increase in consumption tailed off.

Subjects were encouraged to complete and return the post-intervention questionnaire by entering their reply form into a draw with a cash prize.

**Sales data**
Sales data for all fruit and vegetable lines were collected for six weeks prior to the intervention, during the intervention and 6 weeks post-intervention. In the absence of adequate numbers of returned questionnaires (which could be unreliable anyway) the intervention could be evaluated on sales data.

**Intervention**
The intervention consisted of cookery demonstrations twice daily for a week using a variety of produce used in different simple recipes. The recipes were based on those used by a number of community food initiatives, so they were known to be popular among the target group.

**Data analysis**
Data analysis was undertaken using Epi Info, a computerised statistical package. The project was a collaborative effort between:

- the National Food Alliance, which co-ordinated the research and all activities associated with it;
- the World Cancer Research Fund, which contributed expertise and considerable funding to the development of the educational booklet on fruit and vegetables;
- Rugby Health Promotion Unit which co-ordinated the cookery demonstrations and healthy eating advice in store. Chefs were supplied from the Rugby NHS Trust Hotel Services Department;
- the Public Health Department of Warwickshire Health Authority, which undertook the initial computerised analysis of questionnaires and assisted with the interpretation of the data. The data was collected by a small team of market researchers recruited through a local employment agency;
- Kwik Save Stores, which provided the NFA with the location to run the project and access to its customers (predominantly low income groups), as well as the ingredients for the cookery demonstrations.

Although the results are not statistically significant, we found:

- there was an increase in sales of fruit and vegetables while we were at Kwik Save, particularly for the ingredients used in the recipes;
- more customers brought fruit and vegetables during the week of the intervention than in any other week during the monitoring period;
- sales of fresh fruit and vegetables and kidney beans, which were used in the recipes, peaked in the week of the intervention;
- the health benefits of fruit and vegetable consumption could be better understood, even though knowledge doesn’t necessarily translate into action;
- people generally feel very positively about fruit and vegetables;
- people generally believed that buying more fruit and vegetables would make their food bills more expensive;
- much more work needs to be done on the concept of portion sizes. People tend grossly to over-estimate their fruit and vegetable intake.
Lessons learned:

- Interagency projects need a co-ordinating body and someone to take responsibility for the project as whole.
- Those who are aware of the policy context and dietary problems of low income groups are willing to become involved, but it is important to find the right people, particularly in the retail sector and particularly the part of the retail sector that is serving low income groups.
- “Cold calling” potential partners can work, but it is important to be clear about what you are asking for and what the benefits are for the organisation you are asking to become involved.
- Keep everything as local as possible as it makes communication easier.
- Keep things practical and simple - people want to see fruit and vegetables being used and be able to taste things. This also encourages the intake greater variety of produce.
- Funding is required unless all those involved can donate time and ingredients, but this may not be possible for longer term projects.
4) **What retailers can do - The CWS and its role**

**Wendy Wrigley, Head of Marketing at CWS**

Co-operative Wholesale Service (CWS) is different from the large, conventional retailers because it is a co-op and its roots were founded in the community. It also:

- undertakes conventional retailing, with its strategy fitting in with the aims of the Social Exclusion Unit;
- has a role in supporting the community because as well as being Europe’s largest consumer co-op it also has a number of small self-help local co-op stores.

The part of the social exclusion agenda most relevant to CWS is the work being undertaken by the action team on shops. CWS already:

- subsidises estate run food co-ops;
- has own brand products in small local shops;
- discounts “healthy” products to encourage healthy eating;
- runs home shopping schemes and special buses;
- encourages retailers to return to neighbourhoods, with 85% of its stores being in local shopping centres, the high street or suburban areas.

CWS is trading successfully in areas where there are high numbers of “strivers”, or those living on a low income:

- 20% of stores have at least twice the national average of “strivers”;
- 27% of store refits in 1998 were in places with more than twice the national average of “strivers”;
- the stores that closed in 1998 had a lower proportion of “strivers” than the CWS average.

CWS retail undertakes mainstream marketing activity with:

- over 100 “everyday value” core basic items of fruit and vegetables, fresh meat and dairy produce and packaged groceries;
- 5% dividend to co-op members on all lines;
- comprehensive labelling on all lines, including the value products, with fat, calories and salt levels on the front of the pack and full nutrition labelling on the back of the pack.

CWS is working in the community to overcome the barriers to a healthy diet caused by poverty by:

- working in partnership with community groups, local government, other parts of the retail sector and through the CWS membership;
- undertaking pilot projects, concentrated in Scotland, which it hopes to roll out UK wide;
- having 10 shop based community co-ops mainly in rural Scotland.

CWS believes local co-ops are:

- not only about poverty, or a direct route to healthy eating;
- about participation which is important for building self-esteem, developing networks and building skills.

CWS is involved with the Govan Healthy Eating Project (GHEP) in the Pam Pam Fruit Game which:

- is an urban aid project;
- aims to encourage healthy eating amongst the under fives, improve accessibility of fresh fruit in the area and take a multicultural approach;
- includes 540 children through 12 nursery units.

CWS has a store based nutritionist, funded by the Greater Glasgow Health Board working for a year:

- in Barrachnie, where 62% of the population are “strivers”;

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with the objectives of highlighting healthy eating options in store, providing information to help customers make healthy choices, promoting shopping/cooking skills, promoting the Co-op as a retailer committed to selling healthy foods at competitive prices.

CWS nutrition project in Glasgow’s East End
Joy McPheat, Nutritionist with the Scottish Co-op

The CWS nutrition project:
❖ was initiated and is funded solely by the Greater Glasgow Health Board (GGHB);
❖ is co-managed by the Member Relations Department of the Scottish Co-op and the GGHB;
❖ is based at the Eastbank Health Promotion Centre.

The project was borne out of the Scottish Diet Report 1993 which showed that:
❖ over half of Scottish middle-aged men and women are over-weight;
❖ Scotland has the highest premature mortality rate from coronary heart disease in the world;
❖ Scots have the lowest intake of fruit and vegetables in the western world.

The Scottish Diet Report 1993 set a number of dietary targets to:
❖ double fruit and vegetable intake to more than 400g per day;
❖ increase bread consumption by 45%;
❖ double intake of breakfast cereals;
❖ reduce fat intake from 40.7% to no more than 35% of total energy;
❖ reduce salt intake to 100mg per day;
❖ decrease children’s sugar intake by 50%;
❖ double consumption of oily fish.

The Scottish Diet Report 1993 recommended that retailers:
❖ look at how they could deliver healthier food products;
❖ develop innovative ways, including in-store activities, to market healthy products like fruit, at the checkouts;
❖ consider providing low cost/free transport along with other ways of getting healthy products to lower income communities;
❖ ensure that own brand goods provide easily understood and consistent compositional and nutritional information on the product label;
❖ use EPOS data for monitoring and evaluating initiatives undertaken to improve the Scottish diet.

The CWS nutrition project aims to increase awareness of healthy eating as an option for all Co-op customers and community members within the Barrachnie and Kingco areas of Glasgow by:
❖ highlighting healthy options in store;
❖ providing customer information to help understanding and selection of healthy choices;
❖ promoting cooking and shopping skills;
❖ promoting the co-op as a facilitator to healthy eating.

Programmes undertaken in the community included:
❖ promoting National Breakfast Week at toddler groups and in primary schools;
❖ promoting healthy eating in secondary schools;
❖ developing a healthy eating group;
❖ running Get Cooking/Get Shopping courses.
Proposals for continuing work in the community include:
✤ expanding the work undertaken in secondary schools to encourage the development of School Nutrition Action Groups and a schools resource pack;
✤ more Get Cooking/Get Shopping sessions for young mothers;
✤ providing fruit in nurseries as a part of the Pam Pam Fruit Game;
✤ funding a community kitchen.

Programmes proposed for instore include:
✤ highlighting promotional offers in healthier options;
✤ visits to stores by secondary school pupils and mothers from Get Cooking courses;
✤ promoting Food Safety Week;
✤ supplying fruit and vegetables to a health shop in Barlanark.

The CWS nutrition project is being evaluated by:
✤ establishing CWS customer profiles using a questionnaire;
✤ individual assessment of each programme or event;
✤ undertaking a major piece of research to establish the eating habits and nutritional knowledge of secondary school children;
✤ possibly using EPOS data to assess the whole project.

CWS believes that:
✤ retail has a role to play in providing healthier options at affordable prices;
✤ some of the larger issues (such as salt and fat reductions) need to be addressed by manufacturers;
✤ nutritionists could cover larger areas using similar ideas both in store and in communities;
✤ more consultation is needed with decision makers, such as marketing and buying managers at the planning stage.
The role of public health departments

Linda Lawton, Assistant Director of Public Health in Warwickshire Health Authority

Public health departments are working within the context of the health authority agenda at both national and local levels. The health authority agenda, in recent years, has been determined by:

- Health of the Nation, published by the last Conservative government in 1992 which provided a medical model of public health with an individualistic approach;
- The New NHS: Modern and dependable.
- Local Agenda 21 which focuses on environmental sustainability;
- Our Healthier Nation, the current Labour government’s public health strategy which promotes a more social approach to public health with a community development agenda;
- Bringing Britain Together, the national strategy for neighbourhood renewal;

Our Healthier Nation:

- sets targets for reducing deaths from cardiovascular disease and cancers, both of which can be achieved partly through dietary means. It also has targets for mental health and accidents;
- identifies three settings within which health promotion activity should be developed: neighbourhoods, schools and the workplace.

The strategy is to achieve the targets through the establishment of locally developed health improvement programmes (HImp) which will aim to:

- target disadvantaged communities;
- reduce inequalities;
- promote the development of local partnerships/alliances;
- increase the “health” focus of local authorities.

The improvement of public health is the responsibility of many people and organisations. Departments of public health have a role in:

- doing research and gathering information;
- undertaking needs assessments;
- providing the evidence base for developing interventions;
- analysing data;
- promoting networking.

The Chief Medical Officer, in the Report of Emerging Findings 1998 from the project to strengthen the public health function sees the public health function as “.....identifying needs, developing strategies for improving health and changing personal behaviour; independent monitoring, measurement and reporting of health and well being of communities and population groups; better communication and co-ordination of networks to share information and best practice involving the public...”

Warwickshire public health involvement in the NFA/Kwik Save project included input from the assistant director of public health and a research assistant who:

- helped with design of the pre- and post-intervention questionnaire which was used to collect information on fruit vegetable purchasing and consumption patterns, social and family information and knowledge about and attitudes towards fruit and vegetables;
- coded the questionnaire and data collected to help with the data analysis.

This can be daunting without access to statistical computer software and the skill to use it;

- assisted with the interpretation of the data.

The benefits of being involved in the NFA/Kwik Save project were that it:
enabled participation in an innovative partnership between the private/business, public and voluntary sectors. Working with the business sector in particular was a new approach;

allowed the public health department to demonstrate the type of support it can offer to community projects;

increased partners’ understanding of how each other operates, and the constraints, the timescales and funding issues.
Diana Kilshaw, Health Promotion Manager at Rugby and South Warwickshire Health Promotion Services

The role of health promotion specialists in the promotion of fruit and vegetable is to:
✤ provide and disseminate clear and accurate information;
✤ promote recognition that eating is more complex than merely consuming nutrients and that education and recommendations alone are not enough;
✤ work on initiatives which acknowledge, and try to address, some of the cultural, social, personal and environmental influences which make it more difficult for some individuals, families and groups to make healthy choices about what they eat.

In order to promote fruit and vegetables to low income groups, health promotion workers need to be involved in well designed interventions which take account of research, surveys and interview findings in relation to the buying and consumption of food by those on a low income. They need to acknowledge that for many of those on a low income:
✤ healthy foods are regarded as high status foods and limited by income;
✤ food is often the only item within the household budget where there is any flexibility. Expenditure on food is generally very low but it will be cut further if unexpected bills arise;
✤ frequent shopping maximises the amount of money available at any point to meet unexpected demands, so bulk buying is not appropriate;
✤ there will be reluctance to buy new or different foods for fear of wastage;
✤ purchasing the same foods regularly means food budgets can be more accurately estimated;
✤ mothers provide food they know their children will eat which means that low income children are often perceived as eating more of the foods they enjoy than their better off counterparts;
✤ fruit is not seen as filling or good value for money and so is often not purchased, even if it is liked.

Rugby Health Promotion Unit became involved in the NFA/Kwik Save project because:
✤ it represented a working alliance of interested parties, including those on a low income;
✤ it acknowledged some of the important and complex issues and tensions that people (usually women as “gatekeepers”) face when shopping for food;
✤ it was carried out where shoppers are;
✤ a formal survey was carried out which generated hard data for evaluation purposes;
✤ clear and accessible information and recipes were used and backed up with the opportunity to test out dishes on children and other family members without having to make any purchases;
✤ the ingredients used were easily obtainable, low cost and used in recipes which employed basic cooking skills and commonly found equipment;
✤ it was an informal opportunity for shoppers to ask questions, express their views and inform health promotion workers about their concerns and eating patterns.

The project also fulfilled the criteria of what health promotion should be aiming for:
✤ being involved in healthy alliances;
✤ involving the target group in a participatory way;
✤ based on research;
✤ addressing inequalities in health choices;
✤ delivering health promotion in a non-judgmental, fun way.
7) The role of the voluntary sector

Beverley Smith, Deputy Head of Education for the World Cancer Research Fund

The World Cancer Research Fund (WCRF) is a cancer charity:

✦ focusing entirely on cancer prevention;
✦ committed to increasing awareness and knowledge of the relationship between diet, lifestyle and cancer and of cancer as a preventable disease;
✦ which serves the public and health professionals with extensive education programmes and the scientific community with programmes of support for laboratory, applied and epidemiological research.

WCRF focuses on prevention because:

✦ more than a quarter of a million of the UK population are diagnosed with cancer every year;
✦ 25% of the British population die from cancer every year;
✦ environmental and lifestyle factors are a strong influence on the development of cancer.

WCRF’s global report *Food, Nutrition and the Prevention of Cancer* shows that:

✦ almost 100,000 cases of cancer could be prevented each year in the UK through healthy diet and lifestyle choices;
✦ WCRF’s recommended diet and lifestyle, together with not smoking, have the potential to reduce cancer risk by 60-70%;
✦ eating the recommended five portions of fruit and vegetables a day could reduce cancer rates by more than 20%.

WCRF became involved in the NFA/Kwik Save project for a number of reasons:

✦ the five a day message is consistent and uncontroversial and is relevant worldwide. It is positive, powerful and rewarding to work with;
✦ the aims of the project closely matched those of WCRF’s education programme which are to provide positive, motivating and practical messages for the individual designed to help make the move towards healthier eating easy and enjoyable;
✦ it offered WCRF the opportunity to work with experts in the low income field which is an area it has not worked in before;
✦ as a charity WCRF is always interested in pooling resources, whether they be ideas, money or knowledge.

WCRF is aware that in any collaborative project:

✦ there will be a need to make compromises;
✦ those involved will need to go into it with their eyes wide open;
✦ provided all organisations involved have the same objectives and have the time and money to put into the project it will have positive results.
8) Discussion and proposals

There was a great deal of lively debate and discussion from the floor and in workshops. The following attempts to summarise discussions by identifying what the different agencies/sectors can do to promote and improve accessibility and availability of fruit and vegetables. Four workshops were run in parallel and followed the same brief which was to brainstorm:

✦ the current situation in terms of fruit and vegetable consumption and promotion by asking participants to identify what the problems are and who is doing what to increase consumption;
✦ the ideal scenario in terms of fruit and veg consumption and promotion by asking participants to identify what they would like to see happening;
✦ solutions, by asking participants to identify how we could get from the current situation to the ideal scenario.

Accessibility, availability and affordability of fruit and vegetables

Access to and availability and affordability of fruit and vegetables for low income groups is compromised due to:
✦ the decline in small businesses, the high street and street markets;
✦ the growth and increasing concentration of out of town supermarkets;
✦ fruit and vegetables being expensive and not representing good value for money.

Retailers could:
✦ in the short term develop community transport schemes in collaboration with local authorities;
✦ make sure that those stores serving low income groups, particularly those in the discount market, make more floor space available for fruit and vegetables;
✦ empower their local store managers to become more involved in the community and partnership working to ensure that retailers are serving all of the community including low income groups.

Local authorities could:
✦ encourage more local food production by encouraging greater use of allotments and community gardens for growing fruit and vegetables;
✦ employ a dedicated officer devoted to promoting use of allotments and community gardens encouraging users to grow food for sale as well as home consumption;
✦ encourage the development of street markets and farmers’ markets;
✦ encourage schools to get involved in allotment schemes and other gardening initiatives which grow food;
✦ pursue local crime prevention measures to encourage food shops to remain open in deprived areas.

The Government could:
✦ review planning requirements to ensure that if any new out of town supermarkets are built, permission is only given if a new local store is also opened;
✦ ensure that benefit levels are set based on budget standards which will include the cost of a healthy diet that incorporates fruit and vegetables.
Lack of food skills

People are not developing food skills due to:
✦ home economics no longer being a part of the National Curriculum;
✦ many people living on a low income not having adequate storage or cooking facilities;
✦ processed foods, which require “assembling” or heating up rather than cooking often being cheaper, quicker and easier to prepare.

Retailers, particularly those serving low income groups could:
✦ routinely run cook and taste demonstrations to encourage shoppers to try a variety of produce and show them how easy cooking healthy, tasty meals can be.

Schools could:
✦ in the absence of home economics being re-introduced into the National Curriculum, ensure that cooking, shopping and budgeting skills are incorporated into relevant sections of the existing National Curriculum;
✦ establish School Nutrition Action Groups (SNAGs) to ensure whole school food policies are developed which incorporate fruit and vegetables in tuck shops and vending machines as well as in school meals;
✦ ensure that school meals are delivered to, at minimum, the Caroline Walker Trust Nutritional Guidelines;
✦ ensure that food skills include teaching children about how to choose fruit and vegetables and grow food. For older children other approaches that could be used are teaching them about Agenda 21 issues of agriculture, environment, 3rd world trade etc.

Government could:
✦ ensure that a range of food skills are re-introduced into the National Curriculum.

Quality, perishability and storage

Fruit and vegetables can have a poor “image” because:
✦ they may have a short shelf life, particularly if bought from market stalls;
✦ there is a lack of understanding about the meaning of the different EU quality and class standards.

Government could:
✦ look at reforming the quality and class standards of fruit and vegetables to ensure that a range of produce is available at a range of prices.

Retailers could:
✦ provide clear and prominent information on the differences between the existing quality and class standards to increase consumer knowledge and understanding of the different types of produce available.

Market traders and stall holders could:
✦ encourage customers to choose their own produce.

Advertising and promotion

Food advertising and promotion tend to focus on processed foods which means that fruit and vegetables:
✦ are not adequately advertised or promoted;
✦ are not seen as good value for money;
✦ are thought of as boring, difficult and time consuming to prepare.
DISCUSSIONS AND PROPOSALS

Large food retailers could:
- ensure that more fruit and vegetables are sold in their value ranges;
- promote fruit and vegetables with instore information on preparation and cooking and tasting demonstrations;
- print lottery numbers on oranges;
- sponsor annual fruit and vegetable awards;
- develop realistic in store recipe leaflets offering recipes using a variety of fruit and vegetables showing how to feed four people healthily for £5 without the need for a well stocked store cupboard;
- use their loyalty card database, which combines people’s addresses with their shopping patterns, in order to target those families which are buying low levels of fruit and vegetables with special discount offers;
- always have promotions on seasonal produce as it is cheaper and fresher than imported, unseasonal produce;
- sell snack fruit and vegetable items at the checkout instead of confectionery;
- ensure that consumers understand the difference between different classes of fruit and vegetables and make available more of the cheaper class II varieties.

Small high street stores could:
- be encouraged to stock fruit and vegetables to ensure they are as widely available as confectionery and savoury snacks are.

The Government could:
- fund national advertising campaigns to promote fruit and vegetables using the same techniques used by advertisers of processed foods;
- develop a form of tax on advertising or on “junk” foods which could be used to promote fruit and vegetables;
- ensure it promotes to schools how they can take advantage of free intervention stocks of fruit from the European Union.

Programme makers and broadcasters could:
- incorporate fruit and vegetables (product placement) in more television programmes showing, for example, soap opera characters actually eating fruit and vegetables as snacks and in meals;
- encourage food and cookery programmes to always have a focus on fruit and vegetables.

Schools could ensure they promote fruit and vegetables by:
- taking advantage of free intervention stocks of fruit from the European Union;
- taking a whole school approach when developing school food policies.

Voluntary organisations and community groups could:
- promote health messages and healthy eating through existing community groups;
- continue to establish more community food initiatives which promote and sell fruit and vegetables, for example through co-ops, community cafes and cook and taste sessions;
- encourage people to make more time for food and encourage greater use of the variety of cuisines available in our multicultural society.

Health benefits and portion size

The health benefits of eating five portions of fruit and vegetables a day:
- are moderately well known, but could be better understood, particularly with reference to cancer;
could be better understood, particularly by men as healthy eating is
often not seen as “macho”;
needs better promotion, particularly as there is lack of clarity on what a
portion is and many people over estimate their fruit and vegetable
intake.

Health professionals:
+ including doctors should all be trained in food and nutrition;
+ should develop a consistent method to help people assess their
consumption of portions in terms that are easy to understand eg. using
photographs or handfuls.

Development of partnerships
Partnerships are essential to help with the promotion of fruit and vegetables
and to ensure that consistent messages are used. Examples of productive
partnerships are:
+ linking retailers with community initiatives/cafes;
+ large retailers working with small local stores and providing, for
example, equipment
+ integration of corner shops into programmes involving schools, farmers
markets, family centres and the development of community initiative to
ensure corner shops are not put out of business;
+ local authorities working with retailers and community groups to
optimise all groups’ access to food. For example by working to extend
the special rate-relief allowances given to village shops could be
extended to other enterprises, such as shops on housing estates in urban
areas and in “food deserts”.

Partnerships can only be successful if adequate funding is made available from
sectors with budgets:
+ the Department of Health needs to ensure the NHS has more of a focus
on prevention as well as cure, ensuring funding for prevention via
community-based projects is available.
A sample of Government and other initiatives and research on healthier eating including increasing fruit and vegetable consumption

The Government’s Social Exclusion Unit has established a Policy Action Team on shops which aims to develop proposals to improve shopping access for people living in deprived neighbourhoods. Contact Heather White at the Department of Health on 0171 972 5012.

In February, as a part of the Healthy Schools Initiative, the Department of Health and the Department for Education and Employment launched Cooking for Kids. It aims to get children learning about food and cooking in the school holidays. Contact Cathy Thompson at the Department of Health on 0171 210 5435.

Focus on Food is run by the Royal Society of Arts and aims to raise the profile and highlight the importance of food education in primary and secondary schools. Contact Lucy Greetham on 01422 383191.

The British Dietetic Association runs Food Awareness Week. In 1999 the campaign for the week in May will be entitled Give Me 5 and will work to promote fruit and vegetables to children and young people. Contact 0121 633 9555.

The Government, through the Intervention Board, has informed schools about taking advantage of surplus fruit available through intervention stocks. It is also undertaking further work to establish how schools could obtain the fruit without incurring any transport costs. Contact the Intervention Board on 0118 3626.

MAFF funded projects on food choice which include research on fruit and vegetable consumption:
- In research on adults, strategies to help people eat 5 portions of fruit and vegetables a day resulted in them consuming significantly more than 400g a day. Practical cookery demonstrations were effective in improving vegetable consumption for main meals.
- A study of television and children’s food choice which found that fruit and vegetables appear in less than 2% of food depicted in adverts but more than 30% of the food depicted in programmes.
- A number of research projects to find effective interventions for encouraging more fruit and vegetable consumption in primary school children are still in progress. Contact Jenny Woolfe on 0171 238 6555.

The Government has published Eight Guidelines for a Healthy Diet which identifies the importance of fruit and vegetables and the concept of portion size. It is available from HEA Customer Services, Marston Books Services, PO Box 269, Abingdon, OX14 4YN.

The Institute of Grocery Distribution, with funding from the Horticultural Development Council, is working with Professor Fergus Lowe from Bangor University to promote fruit and vegetables to primary school children in Wales. Contact Richard Hutchins on 01923 851918.

The European Commission is finding a project called Info2000 on fruit and vegetables. A number of EU partners are producing a CD ROM and web site on fruit and vegetables. In the project aims to contribute to improving the diet of European citizens and in the UK is being co-ordinated by the Institute of Food Research. Contact Jenny Matthew on 01903 255161.
Tackling inequalities in health and diet-related disease

Developing successful inter-agency partnerships to promote fruit and vegetable consumption particularly to low income groups.

A report of a National Food Alliance seminar held on 20 January 1999 at The Royal United Services Institute, Whitehall, London

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