

Let's Be Heard: Scottish Covid-19 Inquiry

Response from Obesity Action Scotland Closing date: 20 December 2023

We are answering the questions in this inquiry as an organisation, rather than as an individual. Our response looks at the impacts on the wider population in areas relative to our work during the pandemic period. It will discuss the impact of the pandemic and associated lockdowns on diet and weight outcomes in Scotland.

Each of our reports referenced in our answers below have also been submitted to the inquiry via the submit a report function.

Question 2 – Which of these topics from our Terms of Reference do you want to tell us about?

- Lockdown and other restrictions and their impacts
- Health and social care services

Question 3 – With these topics in mind, what would you like to tell us about your experiences during the Covid-19 pandemic?

(1st January 2020 to 31st December 2022)

Our answer to this question relates to the experiences of people we surveyed during the above time period (1st January 2020 to 31st December 2022) to gain an understanding of the impacts of the pandemic on dietary patterns and weight outcomes in Scotland. We will summarise the main findings from each of our reports in turn below, outlining why we undertook each survey and why the results are important. We've also included a summary of our *Obesity and Covid-19 briefings and Health, Healthy Weight and Resilience briefing* which we published during the pandemic period.

Lifestyle of Scotland's People Since the Coronavirus Outbreak¹ report

We were initially concerned about anecdotal reports of people eating more and reaching for comfort foods during the pandemic and we were seeking quantifiable, representative data to tell us the true story. We also knew that the main public sector agencies such as Public Health Scotland and Food Standards Scotland had had their workforce redirected to emergency pandemic response and may not be gathering this type of data.

We undertook polling between 7th and 13th May 2020 on a sample of 2,079 adults (age 16+) in Scotland which asked people how their lifestyle changed since the coronavirus outbreak began, with the survey timed around 7 weeks after the first lockdown began. The polling survey was particularly interested in changes to diet and physical activity, as important markers for weight, and also asked about mental health. The results of the polling clearly indicated that the Covid-19 pandemic changed the lifestyles of adults in Scotland in both positive and negative ways. These outcomes are important as they demonstrate how quickly a modified environment can change people's behaviours.

¹ Obesity Action Scotland (2020) Lifestyle of Scotland's People Since the Coronavirus Outbreak. Summary report <https://www.obesityactionscotland.org/media/zbbhowc3/polling-summary-report-2805.pdf>

Findings from the survey highlight a range of favourable outcomes, including an increase in the number of people reporting cooking from scratch (43% more). This is accompanied by 44% reporting eating fewer takeaways. Just over a fifth of people (21%) reported eating as a family more and 29% reported eating more fruit and vegetables. A third of people also reported an increase in the amount of physical activity they did. However, these favourable outcomes were not experienced equally for all groups. For example, women, people from younger age groups, and those living in urban areas reported cooking more from scratch than other groups, indicating the experiences and associated impacts of the pandemic were not the same for everyone.

The survey also highlighted some less favourable outcomes, however, including more than half of people in the survey (54%) reporting they ate more out of boredom. When this is broken down further, the categories of food which they ate more of were unhealthy, discretionary foods like cakes and biscuits (49% reported eating more), confectionary (47% reported eating more), and savoury snacks (38% reported eating more). Just over a third (34%) also reported drinking more alcohol.

Again, these less favourable outcomes were not experienced equally, and younger age groups reported making more unfavourable changes to their diets than older age groups. The differences identified in the polling survey between the two groups are quite stark – nearly two-thirds (65%) of people aged 16-24 reported eating more confectionary compared to only 34% of those aged 65 and over. This further demonstrates that the experiences and associated impact of the pandemic were not the same for everyone, with younger adults experiencing more negative impacts.

In terms of overall lifestyles, the polling survey identified that a considerable proportion of people in Scotland felt that important aspects of their lifestyle had worsened since the onset of the pandemic - 51% reported worse mental health, 41% reported lower levels of physical activity, and 35% reported their diets to be worse. Whilst for some people no changes were reported, the proportion reporting positive improvements in these areas was significantly lower, indicating a net negative experience of the pandemic on the lifestyles of people in Scotland.

Impact of Coronavirus control measures on a selection of health determinants in Scotland - One year on² report

Following on from the research presented above, we carried out a further polling study in March 2021, to understand the continued effects of the Covid-19 pandemic on a selection of health determinants a year after the first pandemic control measures were introduced. The polling was carried out from 24th-26th March 2021 on 2,244 adults (aged 16+) in Scotland.

The polling survey asked people how their health-related behaviours had changed since the start of the pandemic, with a particular focus on diet, body weight, shopping habits and mental health. The results of the polling survey presented below clearly indicate a longer-term impact from the pandemic on health-related behaviours.

Findings from the survey indicate important changes to dietary patterns and behaviours. There was a notable increase in the number of people eating more takeaways, with nearly a third of survey respondents reporting they ate more takeaways at the time of the survey than before the pandemic. This is likely to have a negative health impact, as research shows that the majority of takeaway food purchased in Scotland is unhealthy³. However, there were also some more positive changes to dietary behaviours reported in the survey including increased consumption of fruit and vegetables, as compared to the previous survey in 2020, and there has also been a reduction in the number of people who reported eating confectionary and cakes and biscuits between the two surveys.

² Obesity Action Scotland (2021) Impact of Coronavirus Control Measures on a Selection of Health Determinants in Scotland - One Year On <https://www.obesityactionsotland.org/media/wndbvr4u/polling-summary-report-2104-final-v2.pdf>

³ Food Standards Scotland (2022) Out of Home – Scotland 2021 https://www.foodstandards.gov.scot/downloads/FSS_-_NSP_-_Kantar_OOH_2021_slide_deck_-_PDF_copy_-_FINAL_-_29th_November_2022.pdf

As with the 2020 polling, this survey found that dietary impacts tended to be unevenly experienced in different population groups. Females reported more negative eating habits than males including eating more confectionary, cakes and biscuits, eating to cheer themselves up, and eating more out of boredom. Also, young people reported more negative changes to their diets, compared to older age groups. For example, 54% of people aged 16-24 reported consuming more takeaways since the outbreak of the virus while only 13% of those over 65 reported such a change. Similarly, 24% of 16-24-year-olds say they are now (at the time of the survey) eating to cheer themselves up compared to 8% of those aged over 65. These patterns largely mirror the findings from the 2020 polling survey, with the dietary outcomes of women and young people more negatively impacted, indicating a possible longer-term impact of the pandemic on dietary patterns and behaviours on these groups in particular.

In terms of overall lifestyles, the polling indicates, as with the 2020 survey, a large proportion of people feel that important aspects of their health and wellbeing have worsened since the start of the pandemic – 60% reported worse mental wellbeing, 47% lower levels of physical activity, and 40% that their diets had gotten worse. Across each of the three areas, this represents a worsening since the 2020 survey and indicated a concerning negative long-term impact of the pandemic on health and wellbeing across the population.

The survey also looked at shopping patterns for groceries and how these have changed during the pandemic. The survey found that 40% of respondents stated they shopped in person at supermarkets less often, and more than a quarter (26%) reported using online supermarket delivery services more often, indicating a clear shift in grocery shopping patterns.

Obesity and Covid-19 briefings – original briefing (May 2020)⁴, and updated version (August 2020)⁵

In 2020, we published two briefings which each provided an overview of the latest evidence on the association between obesity and Covid-19. Evidence shows there is a link between obesity and Covid-19 severity and mortality. There are multiple reasons for this which arise from obesity including immune system frailty, increased risk of co-morbidities, and increased state of inflammation.

The briefings also highlighted evidence linking Covid-19 severity to particular societal groups, including by ethnicity and deprivation, with both of these populations more likely to get Covid-19 and experience more severe outcomes as a result, including increased risk of hospitalisation, including ICU admissions, and mortality. This highlights a link to inequality and a worsening of inequalities arising from the pandemic. It is important to stress that the pandemic did not cause the inequalities experienced by these different societal groups, they already existed but have been exacerbated and further entrenched by the pandemic.

The evidence presented in both briefings highlighted an emerging link between obesity and Covid-19 severity, which we now know has played out in reality. They are important as they provide a comprehensive overview of the evidence available and acknowledge the now well-established link between weight status and Covid-19 severity.

⁴ Obesity Action Scotland (2020) Obesity and COVID-19 briefing <https://www.obesityactionsotland.org/media/yztlh0pp/obesity-covid-august-update.pdf>

⁵ Obesity Action Scotland (2020) Obesity and COVID-19 briefing – updated <https://www.obesityactionsotland.org/media/agmixbqq/obesity-covid-august-update.pdf>

Healthy Diet, Healthy Weight and Resilience briefing⁶

In August 2020, we published a briefing which built on the Obesity and Covid-19 briefings outlined above. This resilience briefing outlined the evidence with regards to healthy diet and weight in Scotland, and how these contribute to the overall resilience of the population in response to a pandemic.

The briefing highlights that Scotland's diet is currently poor and that this is driving increasing rates of overweight and obesity in the population. We have consistently failed to meet the Scottish Dietary Goals and the Scottish diet is too high in foods high in fat, salt and sugar (HFSS) and too low in fibre, oily fish, fruit and vegetables, and other key nutrients. This poor diet is driven by an unhealthy food environment where unhealthy HFSS products are heavily promoted and advertised, making it difficult to easily and affordably access fresh, healthy food, which is often more expensive and less readily available.

The briefing highlights that the pandemic exposed our lack of resilience due to our poor population health, exacerbated by the current food system and unhealthy food environments. It has highlighted the critical importance of the need to focus on improving population diet and weight in order to create a healthy population that is ready and more resilient to respond to any future pandemics.

Question 4 – What were the impacts of these experiences on you and people you know?

There have been a number of impacts on diet and weight outcomes from the pandemic for the population in general and also for people living with overweight and obesity. These impacts are outlined in our response to question 3 above, where we discuss the main findings from each of the reports we have submitted to the inquiry.

As has been demonstrated in our response to question 3, there is a sound evidence base showing a link between obesity and Covid-19 severity and mortality, and also of a range of outcomes experienced as a result of pandemic control measures, which have had varying impacts on different population groups.

The data on overweight and obesity shows a worsening picture since pre-pandemic (we're classing 2019 as the last pre-pandemic year). When comparing 2021 with 2019, adult overweight and obesity prevalence has grown from 66% to 67% and for just obesity from 29% to 30%. More significantly, the data shows worsening and widening inequalities between the most and least deprived people in our society. In 2019, 36% of adults in the most deprived fifth of the population had obesity, compared to 23% of the least deprived 20%⁷. By 2021, however, the proportion of people living with obesity in the most deprived fifth of the population had increased to 38%, while the proportion living with obesity in the least deprived fifth of the population had declined to 22%⁸ (although still a significant figure). The gap between the most and least deprived individuals in terms of obesity has risen from 13% in 2019 to 16% in 2021, clearly illustrating worsening inequalities between our most and least deprived citizens, which have been exacerbated by the pandemic.

This pattern is also replicated for children. Data from the P1 Body Mass Index (BMI) measurement programme⁹ shows an increase in the proportion of primary 1 children at risk of obesity from 2019

⁶ Obesity Action Scotland (2020) Healthy Diet, Healthy Weight and Resilience briefing

<https://www.obesityactionscotland.org/media/dezdwn3w/resilience-oas-final.pdf>

⁷ Scottish Health Survey 2019 Supplementary tables. Chapter 13 BMI. Table 707 <https://www.gov.scot/publications/scottish-health-survey-2019-supplementary-tables/>

⁸ Scottish Health Survey 2021 Supplementary tables. Chapter 14 BMI. Table N11 <https://www.gov.scot/publications/scottish-health-survey-2021-supplementary-tables/>

⁹ Public Health Scotland (2022) Primary 1 Body Mass Index (BMI) statistics Scotland. School year 2021/22

<https://publichealthscotland.scot/publications/primary-1-body-mass-index-bmi-statistics-scotland/primary-1-body-mass-index-bmi-statistics-scotland-school-year-2021-to-2022/>

(pre-pandemic) to 2021. In academic year 2019/20, the proportion of primary 1 children at risk of obesity was 10.4%; by 2021/22 academic year, this had risen to 11.7%. As with adults, there are marked inequalities, with primary 1 age children in the most deprived population quintile more than twice as likely to be at risk of obesity than their least deprived peers. This is evident across both years, however, as with adults, the gap between the least and most deprived children has increased since pre-pandemic. In 2019, 13.4% of primary children in the most deprived quintile were at risk of obesity, compared to 6.3% in the least deprived. By 2021, this had risen to 15.5% of primary 1 children in the most deprived quintile, and 7.3% in the least deprived. Although there has been a rise in both the least and most deprived, the overall gap between the two quintiles has risen from 7.1% in 2019, to 8.2% in 2021, indicating a clear worsening of inequalities with regards to child weight.

The data presented here for both adults and primary 1 children paints a worrying picture of rising levels of obesity and growing levels of inequality in weight outcomes between our most and least deprived citizens. These outcomes have been both accelerated and exacerbated by the pandemic, and are likely to continue moving forward, unless comprehensive, bold and urgent policy action is taken.

Question 5 – What lessons do you think should be learned from your experiences?

Findings from our polling and research point to a number of implications and learnings.

- Evidence from our polling shows how quickly a modified environment can change behaviour. This offers important learning on the likely impact policies to improve the food environment can have on population diets and associated health and weight outcomes
- There is an urgent need to improve population diet and health, to improve resilience for future pandemics/disease outbreaks
- Urgent and bold policy action is needed to improve the food environment to deliver a healthier, more resilient population
- Inequalities have been exacerbated and have widened during and since the pandemic, with varying impacts for different population groups. It is important to understand what these mean for dietary patterns and health outcomes going forward, and to recognise that a one size fits all approach may not be appropriate
- Younger adults have been particularly negatively impacted by the pandemic restrictions and control measures. There could be possible longer-term impacts from this which need to be considered going forward
- The impact of lockdowns and other pandemic control measures on wider public health issues such as diet, physical activity and mental health needs greater future consideration
- The pandemic lockdowns have had a significant impact on mental health, physical activity and dietary outcomes across the population, and these impacts have been predominantly negative, resulting in worsening health outcomes

The recovery from COVID-19 presents us with an important opportunity to reprioritise and rebuild a healthy food system and social environment and to address the inequality that underlies so many health issues in Scotland and the UK, including obesity prevalence. The Covid-19 pandemic has changed how we value food as a society, and we need to grasp the opportunity surrounding this.

About us

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

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