

## Scottish Parliament Health, Social Care and Sport Committee Pre-budget scrutiny: call for views

### Response from Obesity Action Scotland Closing date: 25 August 2023

#### Question 8 - Is there any evidence of longer-term thinking in budgeting for health and social care, either in Scotland or elsewhere in the UK or abroad?

With regards to longer-term budgetary thinking, Scotland should adopt a preventative approach to health and social care spending. The importance of taking a preventative approach to public health was recognised by the Chief Medical Officer in their most recent annual report. The report calls for investment in prevention as a core necessary action needed to improve public health<sup>1</sup>. Prioritising prevention would help ease some of the significant and growing pressures facing the health service. Refocusing on prevention is the first step in helping to improve the overall health of the population as a whole and address deeply entrenched inequalities in our society

Obesity is a significant and growing public health concern in Scotland where an improved focus on prevention could have a significant impact. More than two-thirds (67%) of adults and 28% of children are living with overweight and obesity. When we look at obesity alone, the picture is even more stark – 30% of adults have obesity and 18% of children are at risk of obesity<sup>2</sup> – both of these figures are the highest ever recorded in the Scottish Health Survey. These increasing rates of obesity cost the NHS in Scotland alone around £600 million per year, with the total annual cost of obesity to the UK economy calculated as £58 billion<sup>3</sup>.

There are also a range of wider social and economic costs associated with obesity. Obesity significantly impacts on labour market productivity, with recently published data from the UK Office for Budget Responsibility highlighting long-term ill-health as the most commonly reported reason by working age people for not participating in the labour market, and has contributed to a significant rise in working age inactivity. They estimate that ill-health related inactivity has already added £6.8 billion to the UK's annual welfare costs<sup>4</sup>. This is a particularly acute issue for Scotland, as evidence shows that a greater proportion of economic inactivity can be attributed to ill-health than in the rest of the UK<sup>5</sup>.

Obesity is also a significant risk factor for many non-communicable diseases (NCDs), such as cancer and Type 2 diabetes. A total of 287,551 people in Scotland were living with Type 2 diabetes in 2021 –

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<sup>1</sup> Scottish Government & NHS Scotland (2023) Realistic Medicine: Doing the Right Thing. Chief Medical Officer Annual Report 2022-23 <https://www.gov.scot/binaries/content/documents/govscot/publications/advice-and-guidance/2023/06/realistic-medicine-doing-right-thing-cmo-annual-report-2022-2023/documents/chief-medical-officer-scotland-annual-report-20222023/chief-medical-officer-scotland-annual-report-20222023/govscot%3Adocument/chief-medical-officer-scotland-annual-report-20222023.pdf>

<sup>2</sup> Scottish Government (2022) Scottish Health Survey 2021 <https://www.gov.scot/publications/scottish-health-survey-2021-volume-1-main-report/>

<sup>3</sup> Obesity Action Scotland (2023) Obesity in Scotland: Prevalence, causes and impact 2021/22 data [https://www.obesityactionsotland.org/media/lludcxoy/obesity\\_prevalence\\_causes\\_impact\\_202122\\_data\\_f.pdf](https://www.obesityactionsotland.org/media/lludcxoy/obesity_prevalence_causes_impact_202122_data_f.pdf)

<sup>4</sup> Office for Budget Responsibility (2023) Fiscal risks and sustainability July 2023 [https://obr.uk/docs/dlm\\_uploads/Fiscal\\_risks\\_and\\_sustainability\\_report\\_July\\_2023.pdf](https://obr.uk/docs/dlm_uploads/Fiscal_risks_and_sustainability_report_July_2023.pdf)

<sup>5</sup> Fraser of Allander Institute Economic inactivity and ill-health in Scotland. 14<sup>th</sup> March 2023 - <https://fraserofallander.org/economic-inactivity-and-ill-health-in-scotland/>

6% of the total population<sup>6</sup>. These individuals are required to regularly monitor their weight, blood pressure, check their eyes and feet each year, get blood tests for control of several risk factors - sugar levels, cholesterol, kidney function - and could also potentially be required to take medications. The health service is required for all of these services, as well as treating the complications and additional risks that arise from diabetes.

There is clear evidence from several policy areas in Scotland that taking a preventative approach to healthcare is effective and can deliver improved public health outcomes. A recently published report from Public Health Scotland cites the examples of preventative policy interventions in tobacco, alcohol and cervical cancer and shows some significant improvements in public health outcomes. Looking specifically at alcohol, for example, the report outlines that the package of preventative measures introduced including minimum unit pricing (MUP), restrictions of multi-buys and location promotions have led to a population level reduction in alcohol consumption by more than 2 units per week per person since the policies were introduced, with MUP specifically contributing to a 4.1% drop in hospital admissions (wholly attributable to alcohol) and a 13.4% fall in deaths wholly attributable to alcohol<sup>7</sup>. This fall in both hospital admissions and deaths positively benefits the NHS through reduced treatment costs and also overall public health.

Evidence demonstrates that almost all obesity prevention interventions are highly cost effective to society i.e. that savings on health care costs and improved productivity, through reduced absenteeism for example, could outweigh the costs of direct investment required to deliver the interventions, and could save the NHS \$1.2bn per year<sup>8</sup>. A recently published report highlights significant net benefit to the UK economy of four obesity prevention policies which had either been recently implemented or are scheduled to be introduced by the UK government. These policies are the soft drinks industry levy (already implemented), in-store location promotion restrictions (implemented in October 2022) on products high in fat, salt and sugar (HFSS), restrictions on price promotions of HFSS products, and a 9pm watershed for advertising HFSS products on TV and a ban on paid-for online advertising. The report outlines that over a 25-year period, the combined net benefit of these policies is estimated to be over £76 billion<sup>9</sup>, demonstrating the significant cost that obesity has to the economy and the huge economic benefits that can be achieved when such policies are implemented.

All of this clearly highlights the importance of preventative spend and the need to apply a preventative approach in all health and social care budgeting. This needs to apply across the breadth of public health challenges including diet and obesity. Such an approach can protect and improve the health of the population and positively impact on NHS resources and the wider economy.

### **Question 10 - How can or should any additional health and social care funding be directed to support alternative models of service delivery?**

As outlined in response to question 8, we would like to see greater health and social funding being allocated to/focused on preventative spending. Taking a preventative spending focused approach is essential for both the long-term economic viability of the health and social care sector in Scotland, but also for improving the health of the population, to deliver a population that is economically productive and resilient.

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<sup>6</sup> NHS Scotland (2022) Scottish Diabetes Survey 2021 <https://www.diabetesinscotland.org.uk/wp-content/uploads/2023/02/Diabetes-Scottish-Diabetes-Survey-2021-final-version.pdf>

<sup>7</sup> Public Health Scotland (2023) The case for prevention and sustainability of health services. Prevention case studies <https://publichealthscotland.scot/media/20743/the-case-for-prevention-and-sustainability-of-health-services-english-july2023.pdf>

<sup>8</sup> Frontier Economics (2022) Estimating the full costs of obesity <https://www.frontier-economics.com/media/5094/the-full-cost-of-obesity-in-the-uk.pdf>

<sup>9</sup> The Behavioural Insights Team (2022) Putting health in the spotlight: quantifying the impact of obesity prevention policies in the UK [http://www.bi.team/wp-content/uploads/2022/11/Putting-health-in-the-spotlight\\_-quantifying-the-impact-of-obesity-prevention-policies-in-the-UK-1.pdf](http://www.bi.team/wp-content/uploads/2022/11/Putting-health-in-the-spotlight_-quantifying-the-impact-of-obesity-prevention-policies-in-the-UK-1.pdf)

## **Question 11 - How should health and social care budgets be prioritised in this landscape of multiple frameworks and targets and which targets or outcomes should take precedence?**

There are a number of ways health and social care budgets should be prioritised. This includes taking a health in all policies approach, a focus on reducing health harms, with a specific focus on the commercial determinants of health, and adopting a wellbeing economy approach.

### ***Health in All policies***

Health in All policies are defined by the World Health Organization as *“an approach to public policies across sectors that systematically takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts, in order to improve population health and health equity. It improves accountability of policymakers for health impacts at all levels of policy-making. It includes an emphasis on the consequences of public policies on health systems, determinants of health and well-being.”*<sup>10</sup> The Scottish CMO also advocates for a health in all policies approach as a key way to improve population health and the wider determinants of health<sup>11</sup>.

Taking this approach would ensure that budget and spending decisions across all government departments must consider the impact on health. It can also help to avoid unintended consequences of budget or spending decisions in one area undermining health outcomes in another, and ensures appropriate linkage and consideration in health in every budget and spending decision. We would like to see this prioritised and believe it is an essential component of delivering a prevention-focused to health and social care spending. Delivering a prevention focused policy agenda and budget requires action not just on health but across a whole range of policy areas, and taking a health in all policies approach is an effective way of achieving this.

### ***Reducing health harms – addressing the commercial determinants of health***

In their recently published report, the CMO identifies reducing health harms through addressing the commercial determinants of health as a further action that can be taken to improve population health. The report notes that addressing these commercial determinants has the potential to impact a wide range of risk factors which impact on health including reducing marketing and advertising of and access to food and drink products high in fat, salt and sugar (HFSS). Therefore, budgets should be prioritised towards spending which will deliver on this.

We are concerned that recent developments around the New Deal for Business appear contrary to the CMO’s position in addressing commercial determinants and achieving health in all policies.

One of the stated aims of the New Deal for Business group is *“improving the development and implementation of regulation – such as **public health restrictions on advertising and promotions** - and properly assessing its impact on particular sectors”*. This is a concerning development that indicates that the food and drink industry may have direct influence on the design and development of public health policy. Whilst it is important to acknowledge the role played by industry in the food and drink sector and the need to consult them, it is critical they are not involved in any policy decision making processes, which aim to improve public health.

The first report of the group has a recommendation for the group to have a *“full and deep dive into the Scottish Government policy development cycle”* to emphasise the need to *“undertake effective engagement at all stages wherever possible – including pre-policy – particularly when regulation is a potential outcome”*, as well as emphasising that voluntary regulations and codes of practice should

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<sup>10</sup> World Health Organization (2014) Health in all policies: Helsinki statement. Framework for country action <https://www.who.int/publications/i/item/9789241506908>

<sup>11</sup> Scottish Government & NHS Scotland (2023) Realistic Medicine: Doing the Right Thing. Chief Medical Officer Annual Report 2022-23 <https://www.gov.scot/binaries/content/documents/govscot/publications/advice-and-guidance/2023/06/realistic-medicine-doing-right-thing-cmo-annual-report-2022-2023/documents/chief-medical-officer-scotland-annual-report-20222023/chief-medical-officer-scotland-annual-report-20222023/govscot%3Adocument/chief-medical-officer-scotland-annual-report-20222023.pdf>

be pursued before regulation<sup>12</sup>. This is concerning as evidence shows that voluntary approaches do not work and mandatory interventions are required to address these commercial determinants and improve public health<sup>13</sup>.

Budgetary decisions and spending should be prioritised on delivering mandatory interventions which support delivery of a prevention-focused approach, which will have a greater longer-term impact and which places the needs of public health before that of business/industry.

### ***Wellbeing economy approach***

We are encouraged by the recent developments and commitments towards delivering a wellbeing economy in Scotland<sup>14</sup>. However, we would like to see that demonstrated clearly in policy, budgeting and spending.

In order to truly achieve prevention-focused health and social care spending, there needs to be a move beyond an economic system that prioritises economic growth above all other outcomes, including population health. It is no longer appropriate to measure economic prosperity solely by GDP and instead there needs to be a shift towards a wellbeing economy approach. Population health and wellbeing is a core component of the wellbeing economy and shifting towards this is necessary to achieve prevention-focused spending in health and social care. Budgetary and spending decisions across all policy areas should be premised on a wellbeing economy approach, with prevention-focused spending prioritised.

### ***Targets/outcomes to take precedence***

We would like to see the following targets/outcomes formalised and given precedence to shape budgeting processes:

- **Scottish Government's ambition to halve childhood by 2030.** Rates of child overweight and obesity are heading in completely the wrong direction, with prevalence continuing to rise.
- **Achieving the Scottish Dietary Goals,** delivered via changes to the food environment which promotes easy access to affordable healthy food.

Both of these targets will only be achieved if a prevention-focused approach to health and social care spending is taken.

### **About us**

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

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<sup>12</sup> Scottish Government (2023) New Deal for Business Group Report on progress and recommendations June 2023 <https://www.obesityactionsotland.org/media/xsbpz34g/oas-response-sg-mandatory-calorie-labelling-final.pdf>

<sup>13</sup> Boyland, E.J and Harris, J.L (2017) 'Regulation of food marketing to children: are statutory or industry self-governed systems effective?' Public Health Nutrition, 20(5); 761 -764 <https://www.cambridge.org/core/services/aop-cambridge-core/content/view/CE170577FDA4E00AD9B855BFE09D28B0/S1368980017000465a.pdf/regulation-of-food-marketing-to-children-are-statutory-or-industry-self-governed-systems-effective.pdf>

<sup>14</sup> Scottish Government (2022) The Wellbeing Economy Monitor <https://www.gov.scot/binaries/content/documents/govscot/publications/research-and-analysis/2022/06/wellbeing-economy-monitor/documents/wellbeing-economy-monitor/wellbeing-economy-monitor/govscot%3Adocument/wellbeing-economy-monitor.pdf>