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## Introduction

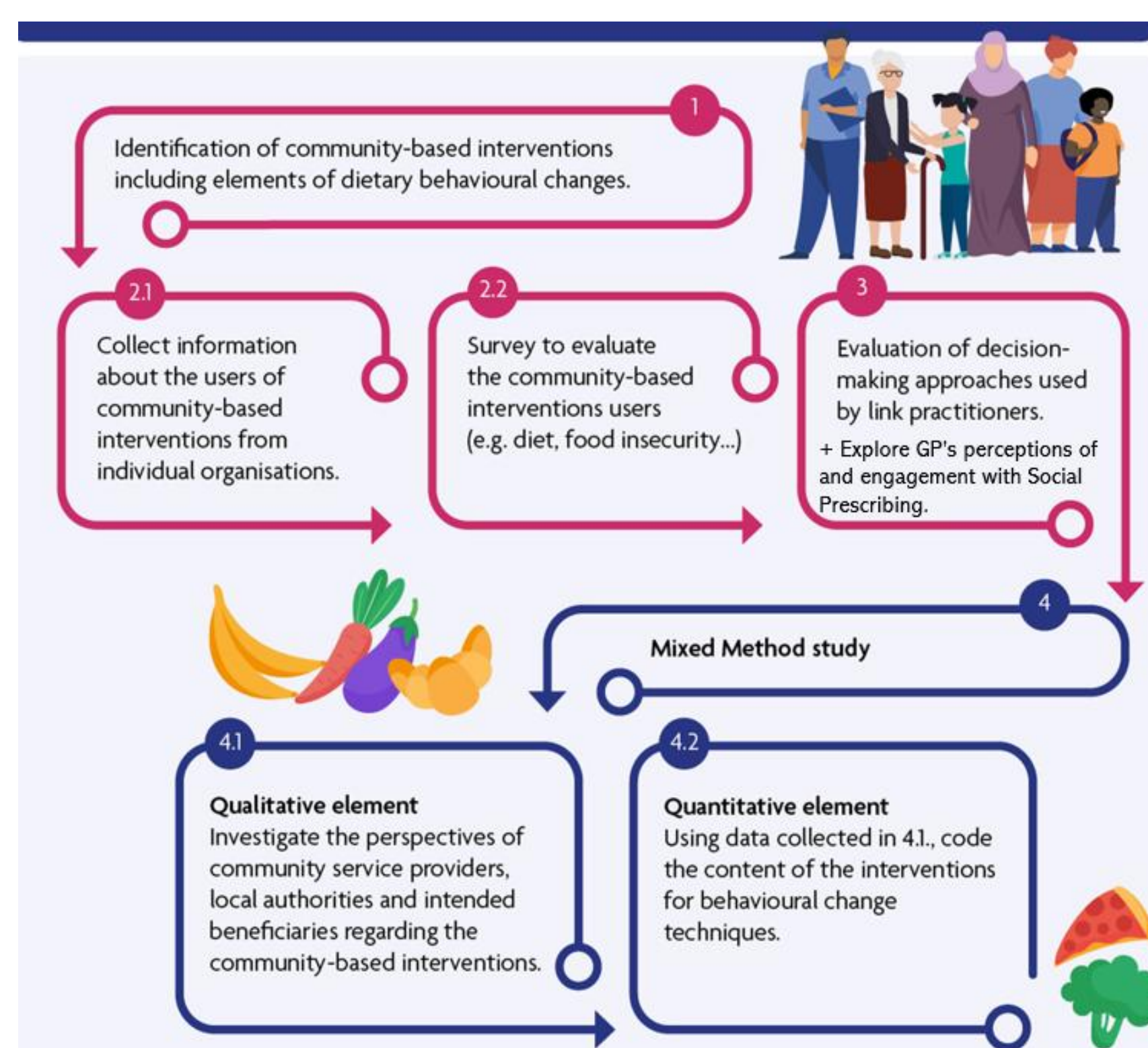
- People in the most deprived areas of Scotland are significantly more likely to develop diet-related chronic diseases. Practical, emotional, and systemic barriers significantly reduce their engagement in conventional dietary interventions.
- Social prescribing**, delivered by Link Practitioners (non-clinical staff based in GP practices), connects people to community support that addresses social, emotional, and practical needs.
- By building trusted relationships and taking time for meaningful conversations, LPs help individuals set goals, build motivation, and take control of their health, making social prescribing especially effective for supporting dietary change.

➤ The SPICE project aims to assess the feasibility of embedding dietary support into routine social prescribing practice.

## Co-Design Approach

- In the early stages of SPICE, we conducted interviews and workshops with LPs and service leads in Aberdeen City to understand the implementation process, identify challenges, and explore support needs.
- We also engaged GPs, community-based food organisations, and service users to map the wider referral and support ecosystem.

Figure 1. Evidence and Steps Informing the Co-Production of the SPICE Intervention



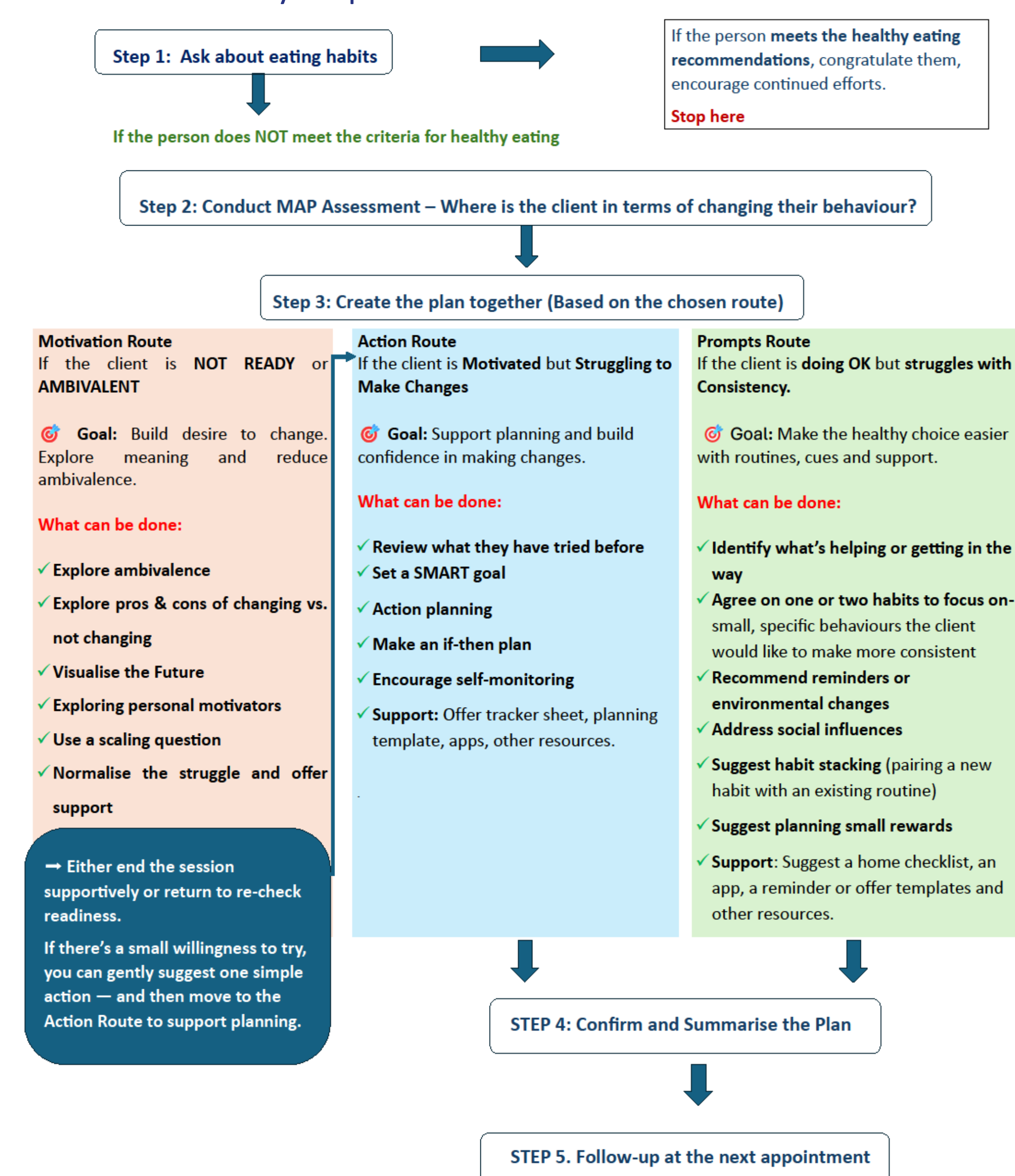
### Key insights from consultations:

- Relevance of diet:** LPs saw healthy eating as part of their role, and clients often raised it in conversations - usually indirectly through issues like stress, mood, financial pressure, or loneliness.
- Person-centred approach:** Support must be empathetic, flexible, and client-led, introduced at natural points in existing conversations.
- Gaps in support:** LPs lacked confidence, structured guidance, practical tools, and follow-up strategies to address dietary behaviour change effectively.
- Existing strengths:** LPs are skilled in motivational interviewing, brief interventions, and signposting to local support.
- Practical solutions needed:** Resources should be simple, flexible, non-burdensome, and responsive to complex client realities.

## Overview of the SPICE Intervention Study

- Insights from co-design shaped a **brief, structured healthy eating intervention** that builds on how LPs already work.
- It provides a **simple, person-centred framework** to support dietary change within routine appointments.

Figure 2. SPICE Brief Healthy Eating Intervention Flow: MAP-Informed Delivery Steps



### Delivery & Evaluation

- Client-centred:** Integrated naturally into conversations.
- Flexible:** Brief or extended, single or follow-up sessions.
- Post-discharge:** Feedback collected after support ends.
- Support tools:** Digital guide and booklet with prompts and resources.

## Conclusions & Next Steps

- By equipping LPs to deliver person-centred dietary support as part of routine appointments and strengthening links with community food initiatives, SPICE offers a promising model for tackling diet-related inequalities.
- It highlights the potential of social prescribing to extend the reach of dietary interventions to groups less responsive to conventional approaches, support long-term health improvements, and place communities at the heart of health creation.

### Next Steps

- Evaluate the feasibility, acceptability, and early outcomes of the intervention within Aberdeen's social prescribing service.
- Share findings with NHS, local government, and policy partners.
- Explore opportunities for wider scale-up across Scotland.

## Acknowledgements

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- Work is carried out in collaboration with the local authority and third sector partners.