

Childhood obesity follow-up 2019:

Royal Society for Public Health submission to the inquiry of the Health and Social Care Select Committee.

- 1 The Royal Society for Public Health (RSPH) is an independent health education charity, dedicated to protecting and promoting the public's health and wellbeing. We are the world's longest-established public health body with over 6,500 members drawn from the public health community both in the UK and internationally. We have published policy papers and reports on obesity, and RSPH has played a proactive role in advocating for a public health-based approach to overweight and obesity in the UK.
- 2 **Assessments of the Government's progress in introducing measures to tackle childhood obesity**
- 3 We welcomed the publication of the government's plan to reduce childhood obesity, 'Childhood obesity: a plan for action'ⁱ in 2016, followed by 'Chapter 2'ⁱⁱ in 2018. It was a step in the right direction that these documents outlined the actions the government planned to take towards achieving its goal of halving childhood obesity and reducing the gap in obesity between children from the most and least deprived areas by 2030.
- 4 For the purposes of this inquiry, we have assessed the progress of the initiatives outlined in Chapters 1 and 2 most relevant to our work to date on this issue.
- 5 *Chapter 1 – Introducing a soft drinks industry levy*
- 6 The soft drinks industry levy (SDIL) is the standout success from Chapter 1. RSPH welcomed the implementation of the tax, which came into force on 6th April 2018. The levy has proven effective in its key goal of encouraging manufacturer reformulation, with the then Public Health Minister Steve Brine reporting at the time of its launch that nearly half of the soft drinks market had been proactive in reducing sugar in their products to avoid charges.ⁱⁱⁱ
- 7 This has been reflected in the revenue expected from the levy falling by almost half, from £500m a year when it was first announced to £275m at the end of 2017. There is overwhelming public support for reformulation, with 9 in 10 people surveyed by Public Health England supporting the government to work with the food industry to reformulate products to make them healthier.^{iv} The sugar levy itself has also raised around £340 million since its launch to support sport and physical activity in schools. The success of fiscal measures in supporting the public's health has been demonstrated in other areas such as tobacco and alcohol taxation, and now sugary drinks.
- 8 We were frustrated when Boris Johnson announced a review of the SDIL, considering the overwhelming evidence that it is a positive measure towards addressing childhood obesity. This is particularly disappointing as Chapter 2 included a proposal to extend the tax to include sugary milk drinks, which has not been implemented yet.
- 9 The recent progress report on sugar reduction between 2015 and 2018 published by Public Health England (PHE) showed that the SDIL is working – sugar has been

reduced in drinks by nearly 29%.^v We urge the Prime Minister to carefully consider his stance on the matter.

10 *Chapter 1 - Continuing to provide support with the cost of healthy food for those who need it most*

11 The Healthy Start scheme is an invaluable source of nutrition for those most in need. The vouchers have the potential to have a significant positive impact by providing low income families access to fruit, vegetables and cow's milk, all of which are necessary for healthy development.

12 Earlier this year it was revealed that because the vouchers are not being promoted, more than 130,000 eligible households have missed out.^{vi} It has been estimated that in 2018 this was equivalent to £26.8 million. Alongside a number of charities and health groups, we called for the government to better promote the scheme to make full use of it.

13 If implemented properly, the scheme has great potential to help combat the rising rates of childhood obesity. We know that healthy food is three times more expensive than unhealthy food;^{vii} the scheme can help those at the greatest disadvantage in the most deprived areas, and therefore begin to address the gap in obesity between children from the most affluent and poorest backgrounds. It establishes eating patterns, forms healthy habits for life and shows children what food is good for them. It must be utilised to equip parents to safeguard the health of their children and the next generation – this is not happening at present.

14 In a similar vein, free school meals for all Key Stage 1 children, regardless of household income, is an untapped resource for tackling childhood obesity. The initiative launched in 2014,^{viii} but five years on the buzz has died down and many parents are not aware that their child is entitled to a free school meal. It is up to school caterers to promote the initiative to parents, but schools may allocate the funding to different areas according to their own priorities. For many children the only vegetables they eat are at school, yet many are missing out due to a lack of public awareness. In addition to having vegetables, eating together and trying new foods helps establish lifelong eating habits that are vital for maintaining a healthy weight.

15 *Chapter 1 – Enabling health professionals to support families*

16 We backed the PHE consensus statement, released in September 2019, to support professionals to have healthier weight conversations.^{ix}

17 We welcomed this statement, as it is vital that the public health workforce is properly trained to have these sometimes difficult conversations with parents and children. Obesity is a multifaceted issue, and by starting to have healthier weight conversations we can begin to address some of the underlying causes.^x

18 This builds on the existing resource already provided by Health Education England, Making Every Contact Count, which we endorsed.^{xi} We are pleased to see that measures have been introduced in this area, such as the Whole Systems Approach to Obesity.^{xii}

19 *Chapter 2 – Calorie reduction*

- 20 Progress has been slow on calorie reduction. We responded to the consultation on mandating calorie labelling in the out-of-home sector at the end of 2018,^{xiii} and nearly one year on we are still waiting for the government's response. We are a long way off legislation being introduced, which is not acceptable given the continually high rates of childhood obesity.^{xiv}
- 21 Although some food outlets have voluntarily introduced calorie labelling, it is often not displayed in a clear format, and there is no consistency.
- 22 We looked into the practice of upselling, when someone is persuaded to buy something additional or more expensive than they otherwise would have bought, in our 2017 report, *Size Matters*.^{xv} Our research showed that the drip-drip effect of regular upselling means the average person who is upsold to will consume more than 17,000 extra calories per year as a result of the upselling of unhealthy high calorie food and drink.
- 23 Therefore we need to take action now to not only reduce the number of calories in food, but to make customers more aware of the calorie content of what they consume. It is disappointing that we are still waiting for an outcome on this, and it was concerning to hear leaked proposals earlier this year that the policy may be watered down by exempting businesses with fewer than 250 employees, meaning out of home calorie labelling would only apply to 0.3% of businesses.^{xvi}
- 24 *Chapter 2 – Advertising and promotions*
- 25 Although the consultations on introducing an advertising watershed and price and location based promotions were a positive development, we are still waiting to hear the outcome of both.
- 26 We were in favour of introducing advertising restrictions to address the loopholes present in television and online broadcast, and for these to be extended further to other locations where there are high levels of child exposure, such as sports facilities.^{xvii}
- 27 Our recent report, *Routing Out Childhood Obesity*, called for limits on the reach of junk food advertising. The majority (80%) of the public we polled on this issue supported a ban on advertising of unhealthy food products across all council-owned advertising sites.^{xviii} There is clearly an appetite for this, yet we have not heard what the government plans to do next.
- 28 We also supported proposals to restrict promotions by price and location in the retail environment.^{xix} We explored this issue in our report *Health on the Shelf*, and found that over one in three people purchase unhealthy products because they are on special offer.^{xx} To accompany the report, we opened a pop-up supermarket designed by public health professionals, to showcase how the retail environment could be a health promoting space. There were no price or location based promotions in the pop-up, demonstrating that it is possible for a business to viably do this. We hope this example adds to the body of evidence to help move the government's proposals forwards.
- 29 **Views on the next steps that the Government should take**
- 30 We believe the government should rapidly respond to the consultations from Chapters 1 and 2. We need bold action now if we want to reverse the trend in

childhood obesity. The World Obesity Federation's Global Childhood Obesity Atlas predicted a 60% increase in global childhood obesity rates by 2030, citing risk factors such as food marketing and the slow response governments around the world have made to restrict this.^{xxi} If deemed appropriate from the consultation responses, the government must swiftly implement the outlined measures.

- 31 The government should also continue to build on the success of the SDIL. The tax should initially be expanded to include sugary milk drinks, as recommended in the outgoing Chief Medical Officer's report on childhood obesity. Following this, an extension to food should be considered. A recent study reported that a 20% tax on sugary foods such as sweets and cakes could reduce annual energy intake by roughly 8,900 calories, with the greatest effects on lowest income households, where levels of obesity are highest.^{xxii} Not only could a sugar tax on food products help address childhood obesity, it also has the potential to reduce health inequalities. The revenue generated by the tax should continue to be earmarked for schools to invest in physical activity and healthier food.
- 32 We would also like to see more promotion of the Healthy Start vouchers and free school meals for Key Stage 1, along with continual development of resources for health professionals on childhood obesity. Sustain has produced a toolkit for local authorities to increase voucher uptake, which should be utilised and used as an example for other resources to be developed.^{xxiii} HC3S Education Catering promotes free school meals and lunch menus on Facebook;^{xxiv} this could act as a model for publicising the initiative to parents to increase uptake.
- 33 Given our work on the obesogenic environment, we think altering this landscape should be a priority. Our report, *Routing Out Childhood Obesity*, identified four key aspects of the street environment that could be disrupted to give children a healthier route home from school; addressing the junk food offer around schools; building better places to go, such as parks; transforming active travel; and limiting the reach of junk food adverts. These recommendations were backed by public support.
- 34 We strongly urge the government to seriously consider the recommendations Professor Dame Sally Davies made in her report 'Time to Solve Childhood Obesity'.^{xxv} Many of her recommendations aim to improve the environment and stem the tide of unhealthy food and drink, and we welcome this as a positive step in the right direction.
- 35 Finally, it was promising to see the inclusion of obesity in the Prevention Green Paper released earlier this year.^{xxvi} Although we need bold new action, we must ensure that Chapter 2 policies must be driven forwards. We strongly encourage the government to uphold this intention in order to reach the target of halving childhood obesity by 2030.
- 36 In summary, we recommend the following should be priorities:
 - Respond to all consultations from Chapters 1 and 2.
 - Build on the success of the SDIL by extending the tax to sugary milk drinks.
 - Promote Healthy Start vouchers and free school meals for Key Stage 1.
 - Mandate and build on out of home calorie labelling.
 - Close loopholes that allow children to be exposed to junk food advertising, such as in public venues.
 - Incentivise physical activity, such as by providing free sports facilities.
 - Develop clear and consistent food labelling that is easy to understand.

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- i <https://www.gov.uk/government/publications/childhood-obesity-a-plan-for-action>
- ii <https://www.gov.uk/government/publications/childhood-obesity-a-plan-for-action-chapter-2>
- iii <https://www.bbc.co.uk/news/health-43659124>
- iv <https://www.gov.uk/government/news/overwhelming-public-support-for-sugar-and-calorie-reduction>
- v <https://www.gov.uk/government/publications/sugar-reduction-progress-between-2015-and-2018>
- vi https://www.huffingtonpost.co.uk/entry/exclusive-coalition-of-charities-warn-free-food-scheme-failing-low-income-families_uk_5cf1308be4b0e8085e38b490?utm_hp_ref=uk-homepage
- vii <https://foodfoundation.org.uk/wp-content/uploads/2019/02/The-Broken-Plate.pdf>
- viii <https://www.gov.uk/government/news/deputy-prime-minister-launches-free-school-meals>
- ix <https://www.gov.uk/government/publications/healthier-weight-conversations-support-for-professionals>
- x <https://www.rsph.org.uk/about-us/news/rsph-supports-phe-statement-for-professionals-to-have-healthier-weight-conversations.html>
- xi <https://www.makingeverycontactcount.co.uk/>
- xii <https://www.local.gov.uk/sites/default/files/documents/15.6%20Obesity-05.pdf>
- xiii <https://www.rsph.org.uk/uploads/assets/uploaded/3bd9bf2a-c39e-4b9f-a89969a2de4b6f8c.pdf>
- xiv <https://www.gov.uk/government/statistics/statistics-on-obesity-physical-activity-and-diet-england-2019>
- xv <https://www.rsph.org.uk/our-work/policy/obesity/size-matters.html>
- xvi <https://www.thesun.co.uk/news/9041657/takeaways-greasy-spoons-spared-nanny-state-calories/>
- xvii <https://www.rsph.org.uk/uploads/assets/uploaded/41ac8703-5612-4be2-8334d41e3c9e34a0.pdf>
- xviii <https://www.rsph.org.uk/our-work/policy/obesity/routing-out-childhood-obesity.html>
- xix <https://www.rsph.org.uk/uploads/assets/uploaded/75ab3628-58c7-4973-a8bdbbbb1937ce12.pdf>
- xx <https://www.rsph.org.uk/our-work/policy/obesity/health-on-the-shelf.html>
- xxi <https://www.worldobesity.org/news/press-release>
- xxii <https://www.theguardian.com/society/2019/sep/05/tax-on-snacks-would-have-huge-impact-on-obesity-say-experts>
- xxiii https://www.sustainweb.org/publications/making_the_most_of_healthy_start/
- xxiv <https://www.facebook.com/hc3seducation/>
- xxv <https://www.gov.uk/government/publications/time-to-solve-childhood-obesity-cmo-special-report>
- xxvi <https://www.gov.uk/government/consultations/advancing-our-health-prevention-in-the-2020s/advancing-our-health-prevention-in-the-2020s-consultation-document>