



Reducing Health Harms of Foods High in Fat, Sugar and Salt

Children in Scotland

Giving all children in Scotland an equal chance to flourish is at the heart of everything we do. By bringing together a network of people working with and for children, alongside children and young people themselves, we offer a broad, balanced and independent voice. We create solutions, provide support and develop positive change across all areas affecting children in Scotland. We do this by listening, gathering evidence, and applying and sharing our learning, while always working to uphold children's rights. Our range of knowledge and expertise means we can provide trusted support on issues as diverse as the people we work with and the varied lives of children and families in Scotland.

Children in Scotland is pleased to respond to the Scottish Government consultation on reducing health harms of foods high in fat, sugar, salt. Challenging inequalities through food is a key strategic focus for Children in Scotland. To achieve this aim we conduct a range of policy and project work as well as providing learning opportunities to practitioners from across the sector.

General Comments

For ease of reference and to avoid repetition, we attach our earlier contributions to the *Children's Future Food Inquiry* and *Healthier Future: Actions and Ambitions on Diet, Activity and Healthy Weight* consultations.



Future Food
Inquiry_Final.docx



Diet&Obesity_Resp
onse_Final.docx

In these responses we highlight the established body of evidence which links poverty and deprivation with health inequalities and the impact of poor or inadequate diet on health, preventable health issues and longevity. These links are worth restating here. We do not see reducing the consumption of health harming foods as an individual problem that can be solved by individual behaviour change. We firmly believe that patterns of dietary consumption are socially driven. That is, the experience of people in more deprived backgrounds influences the choices that they are able to make.

As we will discuss in Q16, measures to tackle consumption through price or marketing alone may increase health inequalities. Wider work must be done to tackle the underlying social causes of unhealthy food consumption. A specific focus must be given to tackling poverty and inequality. The reasons why children, young people and families with lower incomes are more likely to consume foods high in salt, fat and sugar are complex and not purely driven by income. Poverty influences the choices people make through the income they have, the food purchasing options available to them, and how they feel about themselves. Poverty reduction measures would support families by giving them more income to buy food and also reduce the impact of other issues, such as poor mental health and wellbeing, that can come with the experience of poverty.

Our response should be considered through this lens. While we believe that many of the proposals outlined in the consultation paper have merit, measures outside the scope of this consultation to tackle the underlying causes of poverty are essential to ensure significant and lasting progress in this area.

Children in Scotland supports the evidence-based foundations on which the consultation is constructed e.g. the impact which promotion, marketing, pricing, positioning etc have on purchase and consumption of unhealthy foods and beverages, particularly by children and young people.

We note the intention to engage expert advice on the categorisation of restricted foods. We strongly recommend that part of this process should include engagement with children and young people, who can provide valuable insights into what foods and beverages attract them most, modes of advertising and promotion that are most likely to appeal to them and how best to communicate more positive and healthy messages. Children in Scotland has several established fora for engaging children and young people and we would be happy to support any future developments in this area.

We envisage that manufacturers, distributors and retailers will have concerns about these proposals in terms of the potential risks to the operation of their business. Children in Scotland believes that reducing the health harms of unhealthy foods high in salt, fat and sugar should remain the key concern of the Scottish Government. For this reason we believe that while there is a role for industry in commenting on regulations we do not feel they should have active role in forming regulations. An article by Gilmore, Savell and Collin has shown the range of ways in which the food, drink and tobacco industries have influenced regulatory processes, and provides a range of links to evidence in this area that we would encourage the Scottish Government to consider in while developing these restrictions¹.

Question 1 - To what degree do you agree or disagree that mandatory measures should be introduced to restrict the promotion and marketing of

¹ <https://academic.oup.com/jpubhealth/article/33/1/2/1548658>

foods high in fat, sugar or salt to reduce health harms associated with their excessive consumption?

Children in Scotland strongly agree that mandatory measures should be introduced to restrict the promotion and marketing of foods high in fat, sugar or salt to reduce health harms associated with excessive consumption.

We believe the Scottish Government must take wider action to tackle the health problems Scotland faces. 65% of people in Scotland are either overweight or obese, with 28.8% of children at risk of being overweight or becoming obese².

We also know these health issues are more common among children, young people and families from more deprived backgrounds. Children from more deprived backgrounds are more likely to enter school as overweight or obese³. Being overweight or obese in school is also linked to experience of obesity later in life⁴.

We have particular concerns about the impact consumption of such food has on the life-long health of children and young people. *Growing Up in Scotland* data has shown the consumption of unhealthy food at the earliest stages of life was linked to an increased likelihood of being overweight or obese in later childhood years⁵.

We are clear that poverty and other aspects of the wider social determinants of health drive the diet (and in particular consumption of foods high in salt, fat and sugar) that can contribute to these health issues. A lack of material income makes families more susceptible to price promotions that make unhealthy products cheaper - the Scottish Government must tackle this. Reducing the price of healthy products which are currently thought to be as much as 3x more expensive may form part of this⁶.

Question 2 - Should this policy only target discretionary foods? [confectionery, sweet biscuits, crisps, savoury snacks, cakes, pastries, puddings and soft drinks with added sugar]

We support the categories proposed in the consultation. However, we suggest that consideration must also be given to low-priced, highly processed foods that are high in trans fats and saturated fats, which contribute to several serious health issues.

We note the intention to exempt products which are not sweetened with sugar. As we have previously argued we believe that more research is needed into the effects on health of artificial sweeteners, such as aspartame. The Scottish Government should then consider whether to add such products

² Brown L, Christie S, Gill V et al The Scottish Health Survey 2014 Volume 1 Main Report 2015

³ https://www.rcpch.ac.uk/sites/default/files/2018-05/state_of_child_health_2017report_updated_29.05.18.pdf

⁴ https://www.rcpch.ac.uk/sites/default/files/2018-05/state_of_child_health_2017report_updated_29.05.18.pdf

⁵ http://dera.ioe.ac.uk/14308/13/00392688_Redacted.pdf

⁶ <https://foodfoundation.org.uk/food-system-challenges/>

to the “restricted” categories. A more comprehensive approach would also help retailers who would avoid the prospect of having to separate sugar and non-sugar based products. It would also likely benefit consumers, particularly children and young people who may struggle to differentiate between sweetened with sugar and sweetened with artificial sweeteners.

Question 3 - Should this policy treat ice-cream and dairy desserts as discretionary foods?

Yes, however there should be caveats. We do not wish to see natural yoghurt desserts which have high nutritional value (e.g. calcium) or other health benefits (e.g. pro-biotics) face restrictions on their promotion and marketing. Children in Scotland would favour a more nuanced system that provides exemptions to the restrictions based on proven nutritional value in this area i.e. products must prove they have nutritional value to avoid restrictions.

We believe this system provides a more comprehensive approach that will have a positive effect on consumption habits. We know that branding and marketing can have a strong impact on the decisions children and young people make about food – this system should limit that⁷. Restricting products until they can prove nutritional value should mean that children and young people have less opportunity to build up positive associations with new unhealthy products before they are restricted.

Question 4: Please comment on our approach to defining categories and exclusions of particular foods/products from those definitions (paragraphs 9-11)?

We note the intention to engage expert advice to help with categorisation, and we support the use of the best independent scientific and nutritional advice to underpin this element of the proposals. Children in Scotland firmly believes that in evidence-driven policy decisions, engaging independent advice is essential for ensuring that the correct products face restrictions and maximising their public health value.

We appreciate that there will need to be a role for manufacturers, distributors and retailers in these processes. However, we are clear that they should not be involved in developing the categories and exclusions as there is a clear conflict of interest.

We do not underestimate that there will be potential hurdles in securing “buy in” from the food and drink industry. However, the Scottish Government must retain a clear focus on the purpose of the restrictions; namely to reduce the health harms associated with the products to be restricted. While industry certainly has a part to play, commercial and profitability aspects must not cloud scientific/nutritional-based decisions on the foods/beverages that

⁷ <http://www.obesityactionsotland.org/briefings/> Obesity And Price Promotions

should be restricted and must not trump the health of children and young people.

As we indicate earlier, we advocate engaging children and young people on all aspects of this consultation to gain their insights and to ensure maximum value and impact of the proposals set out in the consultation.

Question 5: Temporary price reductions, multi-buys, multi-packs, sales of unlimited amounts for a fixed price etc.

This section of the consultation set out what is a challenging and potentially confusing range of mechanisms and techniques used to attract buyers and to increase purchasing and consumption. We noted the evidence that temporary price reductions generate significant increases in consumption of unhealthy foods, yet it is proposed that this mechanism is not included in the proposed restrictions. The overall aim of **all** these mechanisms is clearly to increase purchasing of food and drink products, and we are not convinced that a clear rationale has been set out in the consultation document for the inclusion of some and not others.

While we appreciate the attempts in the consultation to differentiate among these mechanisms, we consider the proposed distinctions between what promotional/marketing techniques will be restricted and will not, will cause confusion to manufacturers, retailers and most importantly consumers. We feel this would be particularly true for children and young people who are unlikely to differentiate between the different types of price reductions. As such creating arbitrary distinctions between the types of price reduction that will be restricted seems unnecessary and counter-productive to Children in Scotland.

Evidence internationally from previous public health efforts to regulate the sale of alcohol, food and tobacco has shown that the most appropriate method to ensure compliance is tight public regulation and market intervention⁸. Children in Scotland urges the Scottish Government to learn from this evidence and we believe that a clear, comprehensive approach that restricts all the mechanisms/techniques described in this section is required.

This would provide a greater degree of clarity for industry and consumers, and limit the scope for industry to shift promotion and marketing approaches to non-restricted mechanisms/techniques. The evidence highlighted above suggests that looser regulation, and in this instance, opportunities to move to different types of promotion will likely be utilised by industry and will likely impact on the aims of improving health.

These proposed restrictions must also be supported by a shift towards affordable high quality and low-cost healthy alternatives to support children, young people and families to buy healthier products.

⁸ <https://www.sciencedirect.com/science/article/pii/S0140673612620893>

Question 6 : Please comment on the approach we are proposing to take to restricting other forms of promotion and marketing outlined in section 5.

We support the proposed restrictions and those other restrictions outlined in this section which Scottish Government is still considering. The various mechanisms described in this section are designed to attract customers and to increase purchasing of products and will have been introduced after assessment/observation of customer behaviours, trends, part of wider advertising campaigns etc.

Children in Scotland is clear that these forms of promotion all contribute to an increasing consumption of unhealthy foods and that reducing levels of consumption in these areas is paramount. If the Scottish Government wishes to make serious progress in reducing the health harms of foods high in fat, salt and sugar it must take the bold steps proposed.

This should be supported by moves to shift the overall approach to positive promotion and marketing of affordable healthy options. Not only would this further the aims of the policy in terms of reducing health harms and tackling health inequalities by supporting consumption of healthier diets, it could also mitigate some potential concerns from industry in relation to financial loss.

However, implementation would have to be carefully monitored to ensure that customers do not face significantly increased food bills as retailers and others seek to recover revenue/profit lost through reduced sales of unhealthy products.

Question 7: Places subject to restrictions.

We support the inclusion of all retailers, whether the major supermarket players or small local retailers. We are also pleased to see the Out of Home sector considered here. Evidence shows that fast food outlets and smaller retailers that sell less healthy products are more prevalent in deprived communities⁹¹⁰¹¹.

We also know anecdotally that many small retailers and fast food restaurants operate close to schools, colleges and other areas that have dense populations of children and young people. Often these retailers supply cheap lunch time deals of unhealthy products. We support their inclusion in the proposed restrictions as this is likely to be where many children and young people purchase unhealthy food products and therefore it should maximise the impact of this policy on children and young people's purchasing behaviours. We suggest that particular attention around compliance should be given to this sector to maximise the public health benefits of the restrictions, particularly for children and young people.

⁹ <https://ijbnpa.biomedcentral.com/articles/10.1186/1479-5868-6-52>

¹⁰ <https://www.ncbi.nlm.nih.gov/pubmed/16242594>

¹¹ <https://www.ncbi.nlm.nih.gov/pubmed/17189662>

We would also suggest that the highly processed and unhealthy products used in vending machines in and out of school settings should be included as potential restricted foods/drinks. Children in Scotland would also support school canteens being restricted in the products that they provide to ensure that healthy food is provided to children and young people in Scotland's schools.

We understand the rationale in extending restrictions on promotion and marketing of restricted foods beyond the retail sector (i.e. shops). However, the proposals could be far clearer. It appears to Children in Scotland that restrictions would be placed on unlimited banquets/drinks, 2 for 1 deals, use of vouchers, front window advertising of restricted foods etc. We are unsure how this would apply where restricted foods form part of main meals, e.g. crisps (not to be restricted). Some clarity of how restrictions will apply in this area would be helpful.

Question 8: To what extent should restrictions be applied online.

We support the proposal that online restrictions of the marketing and promotion of foods high in fat, salt and sugar should be explored further. There is a particular concern with the huge growth in online food/drink shopping, and increasing use by children and young people of online and other social media.

There are two separate issues to be tackled in this regard. Firstly, we believe that online shopping for food should face the same restrictions as physical shopping outlets. This ensures consistency and means that retailers cannot get around restrictions with online offers.

It is also important to ensure that appropriate restrictions are placed on promotion and marketing on the wider online and social media space. As we have previously articulated, Children in Scotland would support specific restrictions on the advertising of unhealthy foods in online spaces that are accessed by high numbers of children and young people.

We would also strongly recommend that children and young people are involved in further exploration and development of these proposals – they will be able to advise on their preferences, influences, what messages will attract them, alienate them in an online context etc. Children in Scotland would be happy to support such engagement.

Question 9: Exemptions where there is no alternative spaces to display targeted goods.

We realise that exemptions where there is no alternative space to display targeted goods is intended to help small retailers. However, Children in Scotland would remind the Scottish Government of the intention of the policy proposals, namely to reduce health harms associated with foods high in fat, salt and sugar.

As we identified previously, small retailers are more likely to be found in areas of high deprivation. Including them in restrictions may therefore have particular benefits for those children and young people who experience poorer health outcomes as a consequence of poverty. If the Scottish Government wishes to encourage healthier food consumption in children and young people these small retailers must be held to the same level of accountability.

We also have concerns about the implementation of the exemption system. We assume it would fall to a local authority to judge whether a retailer has alternative space for display. We suggest that a clear system where the intended restrictions would apply in all cases would support the policy intentions and reduce scope for disputes and lack of clarity for retailers.

We do not want to add unnecessary burden for small retailers, who have an important role to play in local communities, however our primary concern is the health outcomes of children and young people. We would point the Scottish Government in the direction of the new National Performance Framework, that has wellbeing at its heart¹². This should be central to the Scottish Government policy focus and as such we would encourage you to explore alternative solutions to support retailers to deal with the consequences of the policy.

Question 10: Exemptions for food close to expiry.

We appreciate the view that we should all try to minimise food waste and that discounting such products might help hard-pressed families. On the other hand, the foods in question are still fundamentally unhealthy, whether close to expiry or not. On balance, we consider that exemptions should not be applied in order to support behaviour change and to fulfil the policy objectives.

Fundamentally Children in Scotland do not see short term price reduction as an appropriate way of ensuring that all children, young people and families have access to affordable food. The Scottish Government should ensure that families have enough income to enable them to have a healthy diet. Sustained poverty reduction, including topping up child benefit by £5, would lift tens of thousands of families out of poverty and make them less reliant on reduced price food¹³. We have explored other potential measures to reduce poverty in our previous responses that are attached, and would encourage the Scottish Government to consider all of these in its joined up approach to public health.

We also do not see selling unhealthy food products cheaply as the most effective way to reduce food waste, which we agree is an important and necessary policy. We believe there is more to be gained by retailers

¹² <https://nationalperformance.gov.scot>

¹³ <https://twitter.com/GM5Scot>

developing more effective systems for buying and managing stock to minimise waste, for example.

Question 11: Other exemptions.

As we have articulated throughout our response we do not think exemptions should be considered.

Question 12: Enforcement and implementation.

As indicated earlier, we suggest that particular attention should be paid to monitoring compliance close to and within schools, colleges and areas with higher densities of retailers selling unhealthy foods. This includes online retail.

We feel that local authorities are well placed to deal with the enforcement side of the new restrictions. However, they must be adequately resourced to carry out this function.

We also appreciate that clear guidance will be needed to support industry with implementation of any new restrictions. However, this must be supported by clear rules laid out in statute about the thresholds products must meet and the fines for failure to comply.

Question 13: Legislative Framework.

N/A

Question 14 : If you sell, distribute or manufacture discretionary foods, please comment on how the restrictions in this consultation paper would impact you?

N/A

Question 15 : What support do sellers, distributors and manufacturers need to implement the restrictions effectively?

As we indicate earlier, the proposals need to be balanced by a comprehensive programme of support to help industry promote, market and sell affordable healthy alternatives to the products that are to be restricted. However, this must be clearly framed as supporting the over-arching aims of the proposals to reduce the health harms related to unhealthy food products high in salt, fat and sugar rather than as a primary concern.

Question 16 : How would the proposed restrictions impact on the people of Scotland with respect to age, disability, gender reassignment, pregnancy and maternity, ethnicity, religion or belief, sex, sexual orientation or socioeconomic disadvantage?

We would refer to our comments in the 2 attachments to this consultation around the disproportionate purchase and consumption of unhealthy foods by those Scots living in poverty in deprived communities.

While Children in Scotland supports most of the proposals in this consultation, we must increase our collective efforts to tackle the root causes of health inequalities, poor diet and associated ill health.

There is evidence to suggest that people from more deprived backgrounds are less likely to respond to public health measures that are aimed at the general population and subsequently these can contribute to a widening of health inequalities as the behaviour of those most affected remains the same¹⁴. We echo calls made previously by partners such as Voluntary Health Scotland in arguing for focused work with families from deprived backgrounds to support them to respond positively to the interventions proposed by the Scottish Government¹⁵.

We also call for a wider suite of interventions to tackle the underlying causes of why people make the choices they do about diet. The actions proposed in the consultation will certainly contribute to improvement, but more action is needed to tackle Scotland's social infrastructure and to break the inter-generational cycles of poverty, poor life chances and employability that drive ongoing health disparities if we are to succeed. As we have articulated throughout this response, we believe there needs to be a sustained approach to poverty reduction and a narrowing of inequalities of income.

Question 17

We strongly recommend that the Scottish Government works with its UK counterpart to look at the impact of TV, radio, social media and written media advertising and promotion of unhealthy foods and beverages. We regard this as a crucial and fundamental element in influencing behaviours and purchasing choices among the public, including children and young people.

Unless media advertising of unhealthy foods is addressed, we fear that the benefits of what is proposed in this consultation, and wider efforts by the Scottish Government to tackle Scotland's deeply embedded health inequalities, will fall short of what we would all like to see.

¹⁴ Voluntary Health Scotland. Living in the Gap: A voluntary sector perspective on health inequalities in Scotland. 2015

¹⁵ <https://vhscotland.org.uk/wp-content/uploads/2018/01/Voluntary-Health-Scotland-response-to-A-healthier-Future-1.pdf>