

## The Obesity Health Alliance

### Response to Scottish Government Consultation: 'A Healthier Future – Action and Ambitions on Diet, Activity and Healthy Weight'

---

The Obesity Health Alliance (OHA) is a coalition of over 40 charities, medical royal colleges and campaign groups who have joined together to tackle high levels of overweight and obesity. A full list of our members is available here: [www.obesityhealthalliance.org.uk](http://www.obesityhealthalliance.org.uk)

- Being overweight or obese increases the risk of devastating preventable disease including Type 2 diabetes, cancer, heart and liver disease as well as associated mental health conditions.
- Scotland's levels of overweight and obesity are the worst in the UK.<sup>1</sup> The Scottish Health Survey 2016 identified that 36% of adults (aged 16+) were overweight and 29% were obese (65% total), and that 15% of children (aged 2-15) were overweight and 14% were obese (29% total).<sup>2</sup>
- ISD Scotland statistics show almost 23% of Primary 1 children (aged 4-5) in 2016/17 were at risk of being overweight or obese.<sup>3</sup> Data also show that overweight and obesity prevalence for children living in the most deprived areas of Scotland is greater than it is for those living in the least deprived areas, 25.1% compared to 17.1%.<sup>4</sup>
- Every year, excess weight is estimated to cost up to £600 million to NHS Scotland, and £4.6bn in wider economic impacts of lost productivity and absenteeism.<sup>5</sup>
- We applaud the Scottish Government's commitment to tackling levels of overweight and obesity in Scotland by changing the food culture. We strongly support the conclusion that a broad range of interventions is needed and that the focus should be on changes to the wider environment to help facilitate healthy choices over and above interventions that rely on individual choice.

#### **Question 1: Are there any other types of price promotion that should be considered in addition to those listed above?**

We are strongly supportive of the Scottish Government plans to take forward action to restrict price promotions on high salt, fat and sugar products (HFSS products). Our members support action to make healthier choices in the retail environment easier. In particular, we are strongly in favour of regulatory action in order to create a level playing field across retailers.

An analysis by Kantar, commissioned by Public Health England showed that 40% of food and drinks purchased in UK for home consumption are bought on promotion - the highest level in Europe.<sup>6</sup> The analysis found that higher sugar food and drinks (particularly discretionary products such as carbonated drinks, biscuits, cakes etc) are more likely to be promoted.<sup>6</sup>

Data on product purchases in Scotland show that around 50% of HFSS products are bought on promotion compared to 30% for healthier products. 39% of all saturated fat, 35% of all sugar and 31% of all sodium is purchased because of promotions.

**Question 2: How do we most efficiently and effectively define the types of food and drink that we will target with these measures?**

We believe that the UK Department of Health's current nutrient profiling model is the most efficient and effective way of defining the types of products restricted. This is because it is evidence-based, universally well-known and currently being used across the food industry.

We believe all relevant food bodies should adopt the UK Department of Health's updated nutrient profiling model across the UK, once it is published in early 2018. The updated model will reflect the latest scientific evidence on nutrition and health, notably the findings of the Scientific Committee on Nutrition's (SACN) 2015 report on carbohydrates and health.

**Question 3: To what extent do you agree with the actions we propose on non-broadcast advertising of products high in fat, salt and sugar?**

**Strongly agree**

We strongly agree with all the proposed actions on non-broadcast advertising of HFSS food and drink products. We support and endorse the Scottish Government's ambition to close loopholes in broadcast advertising rules for HFSS food and drink products. Reducing children's exposure to HFSS marketing is a priority for Obesity Health Alliance members.

HFSS advertising is a concern for a number of reasons. First, children are a vulnerable audience who need protection from advertising due to their limited ability to critically understand what is advertising.<sup>7</sup> Second, research shows there is a clear link between food promotion and children's food preferences, what they buy and what they eat.<sup>8</sup> Advertising also influences how much children eat,<sup>9</sup> and can lead to them 'pestering' parents to buy unhealthy products.<sup>10,11</sup> And finally, the impact of brand recognition influences children's behaviour from a very young age with research showing

that children as young as 18 months can recognise brands with preschool children demonstrating preferences for branded products.<sup>12</sup>

The current rules meant to protect children from exposure to HFSS adverts do not go far enough and are not protecting children or reflecting how or when children watch TV the most. Crucially, only 26% of children's viewing time is currently falling within programming that is covered by the existing regulations.<sup>13</sup>

Our recent report, 'A Watershed Moment' showed that almost 60% of food and drink adverts shown during peak family viewing time of 6-9pm during programmes watched by hundreds of thousands of children, were for HFSS food and drink products.<sup>14</sup> In the worst case examples, children were being exposed to nine HFSS adverts (including pizza, burgers and biscuits) in just a 30 minute period.<sup>14</sup>

Our members strongly support a 9pm watershed on HFSS marketing and are calling on the UK Government to introduce this as soon as possible.

We are particularly keen for the Scottish Government to take forward actions to monitor and review the impact of the CAP code on non-broadcast HFSS product advertising, as well as commission research to extend CAP restrictions to better protect children.

In 2017 CAP's brought in long awaited rules to protect children from junk food marketing across all types of media to bring the non-broadcast environment in line with broadcast. But we have significant concerns about the revised code. We are particularly concerned about the 'particular appeal test' which means restrictions only apply when it can be shown that at least 25% of the audience are children. This loophole means that a significant number of children could still be exposed to adverts for high fat, salt and sugary products.

We also have concerns about the challenges of enforcing the code in the complex digital environment. We encourage the Scottish Government should consider these concerns when monitoring reviewing the CAP code, and press for changes should it find the CAP code not sufficient for use in Scotland.

**Do you think any further or different action is required for the out of home sector?**

**Yes**

We agree that further action is required for the out of home sector. We support mandatory action across out of home sector as it creates a level playing field with all sectors compelled to act.

In addition, OHA members support traffic light nutrition labelling across all processed food including the out of home sector.

**Question 5: Do you think current labelling arrangements could be strengthened?**

**Yes**

We think that current labelling arrangements could be strengthened. We support mandatory front-of-pack labelling system for all processed foods including the out of home sector to provide a level playing field to both consumers and industry. In addition, we would like to see the Government explore options on how to help the public understand free sugars and how best to communicate free sugar content of foods.

**Question 6: What specific support do Scottish food and drink SMEs need most to reformulate and innovate to make their products healthier?**

We support the Scottish Government's plans to provide support for SMEs to reformulate their products. This should focus on reformulation to reduce sugar, saturated fat, salt and calories overall.

**General comments**

We are very pleased with the Scottish Government's ambition in this strategy.

As outlined in our response to question three, we are particularly pleased that the Scottish Government will strongly press the UK Government to ban the broadcast of HFSS products before the 9pm watershed. This is a priority area of focus for the Obesity Health Alliance and we have been extremely disappointed with lack of action in this area to date.

---

<sup>1</sup> Food Standards Scotland (2016) *Diet and Nutrition: Proposals for setting the direction for the Scottish diet* ([pdf](#))

<sup>2</sup> Scottish Government (2017) *Scottish Health Survey 2016: Supplementary Tables Part 13 – BMI* ([spreadsheet](#))

<sup>3</sup> ISD Scotland (2016) *Body Mass Index of Primary 1 Children in Scotland* ([pdf](#))

<sup>4</sup> Information Services Division Scotland. *Child weight and growth*. Available from <http://www.isdscotland.org/Health-Topics/Child-Health/Child-Weight-and-Growth/>

<sup>5</sup> SPICe. (2015). 'SPICe Briefing: Obesity in Scotland'. ([pdf](#))

---

<sup>6</sup> Public Health England (2016) Sugar Reduction: The evidence for action. Annexe 4: An analysis of the role of price promotions on the household purchases of food and drinks high in sugar ([pdf](#))

<sup>7</sup> EYoung B (2003). Does food advertising influence children's food choices? *International journal of Advertising*.

<sup>8</sup> Public Health England (October 2015). Sugar Reduction: the evidence for action

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/470179/Sugar\\_reduction\\_The\\_evidence\\_for\\_action.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/470179/Sugar_reduction_The_evidence_for_action.pdf)

<sup>9</sup> Boyland E, Nolan S, Kelly B (2016). Advertising as a cue to consume: a systematic review and meta-analysis of the effects of acute exposure to unhealthy food and nonalcoholic beverage advertising on intake in children and adults *Am J Clin Nutr*

<sup>10</sup> Hastings, G. (2006) The extent, nature and effects of food promotion to children: a review of the evidence. WHO 16.

<sup>11</sup> McDermott L et al. (2006). International food advertising, pester power and its effects. *International Journal of Advertising*.

<sup>12</sup> Robinson TN et al. (2007) Effects of fast food branding on young children's taste preferences. *Arch Pediatr Adolesc Med*.

<sup>13</sup> Ofcom (2017). Children and parents: media use and attitudes report 2017

<sup>14</sup> Obesity Health Alliance (2017). A Watershed Moment: Why it's Prime Time to Protect Children from Junk Food Adverts.