

# Nutrition Facts

Serving Size 1/2 cup (114g)

Servings Per Container 4

Amount Per Serving

Calories 90

Calories from Fat 30

	% Daily Value
Total Fat 3g	5%
Saturated Fat 0g	0%
Cholesterol 0mg	0%
Sodium 300mg	13%
Total Carbohydrate 13g	4%
Dietary Fiber 3g	12%

**Labour's  
Policy  
Review**

## Children, food and obesity

# Labour's Policy Review:

## Children, food and obesity

Nothing is more important to any parent than their child's health, and ensuring a healthy diet is a critical part of that. Yet the pressures of modern life - including consumer pressures, peer pressures and time pressures - can make this seem a challenge for parents at the best of times. Whether it is families being bombarded with advertising for unhealthy foods, or the high sugar and salt content of popular children's snacks, too often the system seems stacked against parents who want to make the right decisions for their children.

Recent Organisation for Economic Cooperation and Development (OECD) research shows that the UK has the fattest adult population in Western Europe with more than 26 per cent of UK adults being classed as obese, twice that in France (12.9 per cent) and with only Hungary outranking Britain with an obesity rate of 28.5 per cent<sup>1</sup>.

We know that the problem of obesity starts early. In December 2012 the National Child Measurement Programme reported that one-third of children in England are either overweight or obese by the time they leave primary school<sup>2</sup>. The level of obesity in today's school children puts them at greater risk of developing diabetes and cancer.

Labour is clear that it is parents who are primarily responsible for ensuring their children eat healthily. But government also has a crucial role to play in supporting parents to succeed in this important task. That means shaping the rules of the system in a way that helps parents who are trying to do the right thing. And it means ensuring that public institutions like schools play their part in providing a healthy food 'offer' to children.

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"The continued rise in childhood obesity is an urgent call to action and must not be ignored. I applaud the Labour Party for tackling the issue of the foodstuffs filling our children with the empty calories that fuel obesity. Helping parents protect and promote the future health of our children is exactly what we need to be doing."

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<sup>1</sup><http://www.oecd.org/els/healthpoliciesanddata/HealthAtAGlanceEurope2012.pdf>

<sup>2</sup><https://catalogue.ic.nhs.uk/publications/public-health/obesity/nati-chil-meas-prog-eng-2011-2012/nati-chil-meas-prog-eng-2011-2012-rep.pdf>

## Children's diets in the UK

Surveys suggest that children are on average eating more than the recommended amount of sugar and many are not eating enough fruit and vegetables. Labour introduced the School Fruit and Vegetable Scheme<sup>3</sup> as part of the "5 A Day" programme to increase fruit and vegetable consumption among four to six year olds.

The Scientific Advisory Committee on Nutrition recently found that one in five children aged four to 18 years did not consume any fruit (excluding fruit juice) during the week. While, in respect of sugar, on average all age groups exceeded the recommendation (up to 11 per cent of food energy intake), with average intakes up to 19 per cent of food energy – the main source of the sugar being soft drinks. And the most recent report of the national diet and nutrition survey, published in 2011, showed that only 13 per cent of boys and 7 per cent of girls aged between 11 and 18 met the five-a-day recommendation for fruit and vegetable intake.

This evidence can be seen in the context of changing patterns of consumption over the years. For example, the changing pattern of consumption of sugars has been studied in Northumbrian children over a 20 year period, showing a steady decrease in the consumption of table sugar, but significant growth in the amount of sugar that is obtained from sweet soft drinks and confectionary. Alongside changing patterns of consumption there have been important changes in patterns of eating, too, with more meals consumed outside the home and a growth in takeaway restaurants.

## The health consequences of unhealthy diets

Unhealthy diets have important consequences for child health. Data is collected annually on the height and weight of school children in England in reception year and also in year six. This allows us to see the proportion of children who are overweight and obese. The latest data (for the school year 2011-12) shows that the percentage of English children who are either overweight or obese is 22.6 per cent at reception stage and 33.9 per cent in year six.

The level of obesity in our school children means that our children are at a greater risk than ever before of developing serious problems such as diabetes and cancer, due to their diet.

Diabetes is a metabolic disorder of the body's ability to deal with blood sugar. It substantially increases the risk of stroke and of heart disease. It also is an important cause of blindness due to long-term damage to the small blood vessels

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<sup>3</sup> [http://webarchive.nationalarchives.gov.uk/+/www.dh.gov.uk/en/Publichealth/Healthimprovement/FiveADay/FiveADaygeneralinformation/DH\\_4002149](http://webarchive.nationalarchives.gov.uk/+/www.dh.gov.uk/en/Publichealth/Healthimprovement/FiveADay/FiveADaygeneralinformation/DH_4002149)

in the night. The Wellcome Trust in the UK has highlighted the link between obesity and diabetes, saying, "There is a very clear link between diabetes and obesity - 80 per cent of people with type 2 diabetes are obese."

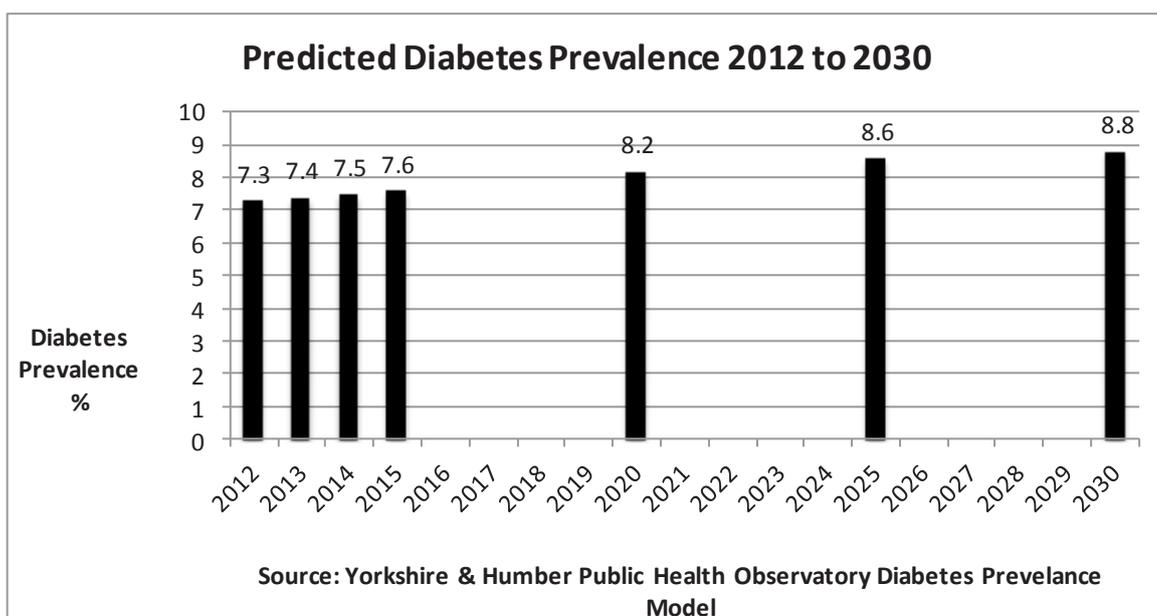
The most recent data for 2011/12 on child obesity show<sup>4</sup>:

In Year 6, the proportion of obese children (19.2%) was higher than in 2010/11 (19.0%). The proportion of overweight and obese children combined (33.9%) was also higher than in 2010/11 (33.4%).

This confirms that the trend over time is upwards in year six children for both overweight and obesity.

A study published in 2009 used data provided by general practitioners and concluded that the prevalence of doctor diagnosed diabetes increased in the UK from 2.8 per cent in 1996 to 4.3 per cent in 2005. The authors concluded that this increase can be mainly explained by the increase in Type 2 diabetes and its probable association with obesity.

The modelling of diabetes predicts enormous increases in numbers of people affected in the coming decades if it continues growing at the present rate. The total number of people aged 16 years and older with diabetes (diagnosed and undiagnosed) in England in 2012 is estimated to be 3.1 million. If diabetes continues to grow at the current rate it is estimated that the number who will have diabetes by 2030 is 4.2 million.



<sup>4</sup><https://catalogue.ic.nhs.uk/publications/public-health/obesity/nati-chil-meas-prog-eng-2011-2012/nati-chil-meas-prog-eng-2011-2012-rep.pdf>

Health economists from the University of York<sup>5</sup> have estimated that unless firm action is taken to halt the rise in diabetes, the proportion of the total NHS budget spent on treating the condition and its complications is likely to rise from approximately 10 per cent at the present time to around 17 per cent by 2035/6. So action to help prevent obesity and diabetes is not only important in its own right, but will increasingly be crucial to ensure the NHS remains sustainable for the future.

It isn't just the cost to the NHS that is important however it is also the indirect costs from diabetes such as inability to work and the costs of caring. According to the same study the total direct and indirect cost of diabetes to the UK is set to rise from £23.7bn in 2010/1 to £39.8bn in 2035/6.

The conclusion that has been drawn by organisations involved in child health is that intakes of nutrient-rich foods should increase in order to promote good vitamin and mineral levels, whilst intakes of energy-dense foods should be kept within reasonable levels in order to prevent and combat obesity. The World Health Organization states that<sup>6</sup>:

*"The risks presented by unhealthy diets start in childhood and build up throughout life. In order to reduce future risk of non-communicable diseases children should maintain a healthy weight and consume foods that are low in saturated fat, trans-fatty acids, free sugars, and salt."*

## **Better food: improving the content of children's food**

One key focus should be looking at the content of food aimed and marketed for children.

The UN definition of children is under 18 years but there is no accepted age range across nation states. In the UK Ofcom has restrictions on the advertising of HFSS (high in fat, sugar or salt) food products in programmes likely to appeal to children aged four to 15, while the industry's voluntary 'EU Pledge' scheme is based on children of 11 and under. The usual approach is to act in response to marketing to children of HFSS foods.

According to the National Heart Forum, food and drink aimed and marketed at children is dominated by products that are high in fat, sugar and/or salt. Most of these products fall within what are termed the 'Big Five' categories: pre-sugared

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<sup>5</sup><http://www.ncbi.nlm.nih.gov/pubmed/22537247>

<sup>6</sup>[http://whqlibdoc.who.int/publications/2010/9789241500210\\_eng.pdf](http://whqlibdoc.who.int/publications/2010/9789241500210_eng.pdf)

breakfast cereals, soft drinks, confectionary, savoury snacks and the products of fast food outlets.

A good example is breakfast cereals, which are widely consumed by children and are of nutritional interest on two grounds. On the one hand, they are a food that is often fortified with vitamins and iron in order to reduce the level of deficiency in these important elements. On the other, some breakfast cereals contain excessive levels of sugar and salt.

A Which? report in early 2012<sup>7</sup> found that sugar levels in 32 out of the 50 breakfast cereals they examined were extremely high and they were particularly concerned about the sugar levels in cereals that were marketed to children. Kellogg's Frosties topped the table for sugar content at 37 per cent. They also found that some high sugar cereals were being marketed as healthy. On the other hand, there are plenty of popular breakfast cereals that are more responsible: Kellogg's Rice Krispies have sugar levels of 10g/100g, and Sainsbury's Corn Flakes have 7.2g.

The Which? Report identifies the following top twelve breakfast cereals with the highest sugar levels:

Breakfast Cereal <sup>7</sup>	Sugar per 100g
Kellogg's Frosties	37.0g
Asda Cocco Snaps	36.1g
Tesco Choco Snaps	36.1g
Morrisons Choco Crackles	36.0g
Sainsbury's Choco Rice Pops	36.0g
Honey Monster Sugar Puffs	35.0g
Kellogg's Coco Pops	35.0g
Kellogg's Crunchy Nut Cornflakes	35.0g
Asda Honey Nut Cornflakes	33.6g
Morrisons Honey Nut Cornflakes Sainsbury's	33.6g
Honey Nut Cornflakes	33.6g
Tesco Honey Nut Cornflakes	33.6g

Although we have focused on breakfast cereals targeted at children, it is worth noting that another important issue for children's health is the salt content of savoury snacks. For example, a 85g bag of Walker's Monster Munch roast beef flavour snacks contains 1.47g of salt, representing 37% of a child's (5 to 10 yrs) guideline amount of salt, while a 55g 'grab bag' of Doritos Cool Original contains 1g of salt, which is 25% of a child's guideline amount. The UK is the biggest market for salty snacks in Europe and the demand is mostly amongst the young.

<sup>7</sup><http://www.which.co.uk/documents/pdf/cereals-report-whats-in-your-bowl-which-report-279051.pdf>

There are guideline amounts of salt set for children and these are lower than for adults, but there is evidence that some children are consuming even more than the adult recommended maximum.

One key set of measures to look at here is action by manufacturers. In the report mentioned above, *Which?* calls for cereal manufacturers to take action by reducing sugar and salt levels, not promoting high sugar products as healthy, applying traffic light colours to nutrient labelling, and developing and marketing healthier cereals aimed at children.

But there are also questions about the adequacy of purely voluntary approaches - and about putting the food industry in charge of setting standards, as with the current Government's Responsibility Deal. For example, there is evidence from the minutes of Responsibility Deal meetings that some very large high street chains are refusing to engage in the task of reducing salt content in their meals<sup>8,9</sup>.

We know from a report by Consumers International the composition of some of the leading breakfast cereals marketed at children varies from country to country<sup>10</sup>. For example, in 2008 the sugar content of Kellogg's Frosties varied from 32 per cent to 48 per cent. The same levels of variation have also been shown to apply to salt in breakfast cereals. The major multinationals clearly have no difficulty varying composition in the interests of increasing sales.

So faced with increasing childhood obesity and the inadequacy of relying on industry to make the changes that are needed, it is time to ask what else can be done to limit the sugar, salt and fat content of food that is aimed at children. It has been suggested that maximum permitted levels of sugar, salt and fat in foods aimed at children should be introduced.

- **Is a legal limit on sugar, salt and fat content in food aimed at children desirable?**
- **If so, at what level should it be set for different products? For instance, would it be feasible to have a 30 per cent maximum sugar content limit in cereals aimed at children?**

We would welcome views on these questions and suggestions for other effective initiatives that would aid parents in ensuring that their children can eat a healthy diet.

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<sup>8</sup><https://www.wp.dh.gov.uk/responsibilitydeal/files/2012/12/Salt-Paper.pdf>

<sup>9</sup><http://responsibilitydeal.dh.gov.uk/2012/12/20/high-level-steering-group-11-december-2012-meeting/>

<sup>10</sup><http://www.consumersinternational.org/news-and-media/publications/cereal-offences>

## Labelling of food for children

Consumers wish to see easily and quickly whether the products they are considering buying to feed their children are healthy or not. Children's snacks and breakfast cereals are prime examples of areas where clear, honest and informative labeling about content are vital. The Government has taken a long time to achieve progress on food-labelling and the final details of the proposed voluntary scheme have still to be revealed, however this alone may not be enough. It is vital that there is a strong mechanism, independent of the food industry, for the setting of the criteria used and for monitoring adherence<sup>11</sup>.

### A better food offer: improving the promotion of food to children

As well as the content of food, another source of pressure on parents and children can be the way food is promoted to them.

Promotion of children's food has in recent decades been dominated by television advertising, aimed at promoting the 'Big Five' group of food products. The evidence shows that this does influence children's food preferences and behaviour.

Research amongst parents in 2010 for the National Heart Forum showed that they feel that marketing techniques can have a strong influence on their children's choice of types of food. In the same research parents, children and young people called for restrictions in the marketing of less healthy foods. TV is an important influence on children but the marketing world is changing fast as children and young people embrace social media. **We are interested in looking at whether and how parents and children could be empowered through restrictions to the marketing to children of foods with high contents of sugars, salt and fats.**

There are many questions to be asked here. For example, the Royal College of Paediatrics and Child Health has recently argued there should be restrictions on TV advertising of junk food before the 9pm watershed<sup>12</sup>, while Sustain have called for better regulation of internet advertising of junk food aimed at children<sup>13</sup>.

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<sup>11</sup> <http://www.consumersinternational.org/news-and-media/publications/cereal-offences>

<sup>12</sup> <http://www.rcpch.ac.uk/news/ban-tv-junk-food-ads-9pm-watershed-says-rcpch>

<sup>13</sup> [http://www.sustainweb.org/resources/files/reports/The\\_21st\\_century\\_gingerbread\\_house.pdf](http://www.sustainweb.org/resources/files/reports/The_21st_century_gingerbread_house.pdf)

In tandem with this, we need to look at how access to healthy food choices can be increased. In 2006, a report by the Soil Association on food at family restaurants and attractions suggested a series of measures that could play a role here, including promoting healthy options to children on the menu, enabling children to have half-portions of adult dishes, incorporating vegetables in the main dish rather than as a side order, and always providing free water<sup>14</sup>.

As well as food on the high street, another critical area for children's food is in schools. Under the last Labour government there was substantial progress in improving school food, as well as the education on the importance of healthy eating following campaigning by Jamie Oliver and others. Significant factors were the 'Healthy Schools' program, the nutritional standards for schools (alongside which the School Lunch Grant was established to help schools adapt to cooking with healthy, fresh ingredients), and the Big Lottery funded 'Food for Life' programme. Labour also introduced specific funding to help schools set up breakfast clubs, to ensure children - particularly those from disadvantaged families - got a healthy start to the day.

The Conservative-led Government wound up the highly successful 'Healthy Schools' programme and has released academies and free schools from the requirements to provide food to meet the nutritional standards, as well as ending the School Lunch Grant - and we are seeing the return of junk food in canteens and vending machines as a result. That is why Labour has said that schools should remain bound by nutritional standards. Chef and food campaigner Jamie Oliver recently said, "[Michael] Gove does not understand food in schools. Taking away those nutritional standards is an incredible abuse of policy."<sup>15</sup>

Breakfast clubs have also been cut back in nearly half of all council areas as the specific funding has ended. A survey by the Children's Society revealed that nearly half of teachers (45 per cent) said that children are often, or very often, hungry during the school day and two thirds (66 per cent) reported that teachers were providing pupils with food or money for meals because they turn up for lessons hungry

The 'Food for Life' programme, run by a coalition of four food and school NGOs continues to be successful and independent. It aims to alter food culture in the school and in families and has more than 4,400 schools participating.

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<sup>14</sup> <http://www.soilassociation.org/LinkClick.aspx?fileticket=kMIZNL/Jn8M=&tabid=388>

<sup>15</sup> <http://www.itv.com/news/story/2012-11-27/oliver-blasts-gove-on-school-meals/>

## The Food for Life Partnership

The Food for Life programme was established by a partnership of four food-related not-for-profit organisations led by the Soil Association. It works with schools and their communities across the country to help them change their food culture. The partnership started work in 2006 with the help of a grant for five years from the Big Lottery Fund.

Food for Life seeks not just to improve school meals, important though that is, but to help children and their families adopt a food culture that will support health and wellbeing. Food production and cooking is thus woven into the fabric of the school and the curricula.

The program now works with more than 4,400 schools and communities and the results have been impressive. Free school meal take-up increased by an average of 13 per cent in Food for Life schools and children eating five or more portions of fruit and vegetable increased by 28 per cent. The positive story also extended to 45 per cent of parents reporting that they were eating more fruit and vegetables as a result of the programme.

The success showed that a well-conceived national programme that was properly funded can produce real change for the better in eating habits of children. The programme has been recognised by a number of awards, including winning a BBC Food and Farming Award.

## Supermarkets

Despite promises from David Cameron in opposition, an area that has not been tackled successfully to date is the positioning of confectionary close to tills in shops and supermarkets.

Parents know very well that the checkout in a supermarket is stressful when you have small children. They also know that it is even more stressful if they have to queue alongside an array of confectionary and unhealthy snacks.

The Government's 'Responsibility Deal' continues with the voluntary approach. But while some supermarkets have acted responsibly, others have not responded at all. Labour believes the time has come when the voice of the consumer, and parents in particular, must not be ignored.

If this does not change, further action will be needed that will see unhealthy goods removed from close proximity to checkouts.

## Conclusion

This document highlights an issue of growing concern, the increasing levels of obesity in children and the adult population in England. The fact that levels of obesity continue to increase rather than reduce demonstrates the need for new approaches to tackle this problem. If no action is taken we will see increases in avoidable illness, harm and life reduction putting greater strain on families as well as the NHS.

This document begins the debate about the kind of measures that should be considered and the methods of implementation. We want to hear from parents, the industry and others about what role government might play in providing any regulatory framework and support to help reduce the levels of obesity we are currently seeing.

There is no simple or quick answer to improving the diets of children and thus improving their health. But we can and will look at how we can make life easier for children and parents, both reducing unwanted pressures to consume unhealthy food and ensuring healthier options are available. If we don't rise to this challenge, there will be dangerous consequences for our nation's health, and it will mean a huge strain on the NHS in decades to come.