Action on Sugar

Cameron's Plan

A comprehensive approach to prevent obesity and type 2 diabetes in the UK

Six evidence-based essential actions:

1. **Reformulation of sugar and fat in foods and drinks***
    a. **50% reduction in sugar content within the next 5 years, starting immediately with sugar-sweetened soft drinks**
    b. **20% reduction in fat, especially saturated fat, within the next 5 years**
2. **Stop promotions of unhealthy food & drink***
3. **Prevent all types of marketing of unhealthy food and drink to children and adolescents**
4. **A 20% duty on all sugar-sweetened soft drinks and confectionary, to escalate thereafter if companies do not comply to reformulation targets**
5. **All public sector food must meet strict guidelines***
6. **Uniform colour-coded labelling to be present on all foods for retail and out-of-home, with stricter criteria for high salt, sugars, fat and calories.* (NB sugars as free sugars not total sugars)**

Establish an Independent Agency for Nutrition

*** Actions 1, 2, 5 and 6 can only be done by an independent agency e.g. the previous Food Standards Agency or similar. The Department of Health, with the Responsibility Deal, has failed both in its salt and calorie reduction policies.[1] [2] It is therefore essential to have an independent (but government-funded) agency who can carry out implementation, thorough monitoring with regulation and enforcement if necessary.**

Introduction

The food and drink we now consume is the biggest cause of premature death and disability in the UK[3] and represents a huge burden on the NHS.[4] Too much salt raises our blood pressure, which is the second cause of death after smoking. Too much saturated fat puts up our cholesterol which is another major cause of death, as is lack of fruit and vegetable consumption. In addition, the very large amounts of calories from fat and sugar in foods that only give a transient feeling of fullness or satiation not only cause tooth decay, but are also responsible for the worldwide obesity and type 2 diabetes pandemic. In the UK, 67% of men and 57% of women are either overweight or obese. More than a quarter of children are also overweight or obese – 26% of boys and 29% of girls.[5]

In the UK, apart from a successful initiative to reduce salt intake which has now stopped, little has been done to change the food environment. It is essential that an independent (but government-funded) agency is set up for nutrition which can work with, and regulate, the food and drink industry without government interference to ensure we have a healthier and more sustainable food supply. At the same time, it is vital that the food and soft drinks industry remains one of the leading industries in the UK. Indeed, the UK food and drink industry could lead the world in setting an example on how to make the same profits out of healthier food that does not cause premature death and disability, as they did for salt reduction.

David Cameron now has a unique opportunity to produce a coherent, structured evidence-based plan to prevent obesity, type 2 diabetes and tooth decay, as well as tackle raised blood pressure, cholesterol and the lack of fruit and vegetables consumed.

6 Essential Actions to Prevent Obesity

1. Reformulation of sugar and fat in food and drink

The UK was the first country to successfully reduce salt intake by setting progressive, incremental targets to slowly reduce the amount of salt being added to the food by the food industry. This was a voluntary programme that was enforced by a large media campaign by Consensus Action on Salt and Health (CASH) and the independent Food Standards Agency (FSA) which had strong enforcement powers in other areas in the food industry and robust reporting mechanisms. Salt intake was successfully reduced in the UK population by 15% by 2011, along with an associated fall in population blood pressure and large falls in strokes and heart attack deaths.[6] However the Conservative government disbanded the nutritional arm of the FSA and the salt reduction programme has now

stopped. Nevertheless this successful plan, when under the FSA, does illustrate that we can do the same for both sugar and fat reduction over the next five years, as well as revitalise the salt reduction programme.

Reformulation programmes are the most effective way of tackling these issues. The food and drink supply is slowly changed without the public being involved and they do not need to change the food and drink they normally consume (much as we would like them to). These changes to the food and drink supply will affect every single member of the population, particularly the most socially deprived. With the experience of the previously successful salt reduction programme we can do the same for sugar and fat with a 50% reduction in sugar in all foods and soft drinks,[7] and a 20% reduction in fat over the next 5 years. Both of these actions would reduce calorie intake on average by 100kcal/person/day making a total reduction of 200kcal/person/day. Fat has 2.5 times more calories per gram than sugar; therefore, it is essential to reduce fat as well as sugar. This reduction in fat should predominately be in saturated fat, particularly palm oil. This would also lower blood cholesterol levels; another major cause of death in the UK.

In order to give the food and drink industry the level playing field they need, individual, maximum and average targets for each food and drink group would be set (as was done for salt). The difference would be that these targets are regulated. Indeed, the British Retail Consortium that represents the UK supermarkets has already called for a regulated system to ensure that the branded companies are working towards the same targets as the supermarkets[8]. A major difference to salt reformulation is that the sugar and fat content does contribute to the weight or volume of the product (although not in liquids). Therefore a reduction in sugar and fat content in solid products can be achieved by reducing the portion size, although this does not mean people will necessarily eat less overall. However, it is possible to substitute sugars with polyols or insoluble fibres that are not metabolised or absorbed - which would help to meet another recommendation in the SACN report on carbohydrates that the UK population should increase its fibre intake.[9] Liquid products can have the sugar reduced without affecting the volume, e.g. sugar-sweetened drinks.

At the same time, products that use artificial sweeteners should have their sweetness decreased in parallel with the sugar reduction so that the UK population adjust to a less sweet taste and our taste preferences change, as they have done for salt. Portion size has increased over time and a cap on portion sizes for relevant foods in both retail and out-of-home sector would also be part of the reformulation programme. These reformulation programmes are very acceptable to the food and drink industry as if they are done slowly there is no loss of sales, yet sugar and fat intake is reduced across the population.

2. Stop promotions of unhealthy food & drink

Unhealthy foods are heavily promoted in British supermarkets as well as out-of-home, and increase the amount of unhealthy food and drink that people buy by 6% of total sugar purchases (i.e. 30kcal per person, per day), and this

could be prevented if promotions on high sugar did not occur. [10] This should not only apply to supermarkets, but convenience stores and the out-of-home sector (including restaurants, cafes and takeaways) too. These types of promotions should only be allowed on healthy food and drink.

3. Prevent all types of marketing of unhealthy food and drink to children and adolescents

All forms of advertising including media, digital platforms etc. to children and adolescents should not be allowed for unhealthy food and drink. There is no justification for banning the advertisements of tobacco when unhealthy food and drink are a much bigger cause of death and disability in the UK.[3] Furthermore, in-store food environments designed to entice unhealthy food choices, for example by having confectionary at till points, checkouts and at the end of aisle, including in non-food retail settings (e.g. clothes and stationery shops) should be prevented.

4. A 20% duty on all sugar-sweetened soft drinks and confectionary to escalate thereafter if companies do not comply to reformulation targets

There is clear evidence now that a duty on sugar-sweetened soft drinks does reduce consumption and encourages, particularly in the more socially deprived, switching to artificially sweetened drinks or even better to water.[11] This duty should be escalated year-on-year similar to alcohol and tobacco duties, and the rate of escalation should depend on how well the food and soft drink industry responds to the reformulation targets. Importantly, this tax is a progressive tax as it would not apply to artificially sweetened drinks thereby ensuring, particularly in the socially deprived,[11] that we switch from sugar-sweetened drinks to artificially sweetened drinks which contain less calories or preferably to water. The duty, as in Mexico, should be hypothecated. We estimate that this duty will raise around £1bn per year[12] and it could be spent firstly, on financing the independent nutrition agency and secondly, specific programmes on preventing obesity and type 2 diabetes, both in in the community and in the NHS.[13] This would have the further advantage of making the duty immensely popular amongst the public and would easily be accepted.[14] There would be no loss of profit to the soft drink industry as artificially sweetened soft drinks are 30% cheaper to produce and therefore are more profitable.[15]

5. All public sector food must meet strict guidelines

The public sector spends around £2.4bn each year – approximately 5.5% of UK food service sales – procuring food and catering services for our schools, hospitals, armed forces, central and local government, government agencies and prisons and courts[16]. This provides a large-scale opportunity, with significant purchasing power, to influence the diets of those that use these services whether they are visiting, working or living within these facilities, and the overall food chain to provide foods with far less sugar, fat and salt and more fruit and vegetables. In doing this the independent food agency must ensure that all government buying of foods, including catering, has stricter criteria

for salt, sugars, fat and calorie levels. School food should be a priority and all the strict standards must be made compulsory for all schools, including current exempt academies and free schools, and early-years provision. School food standards must also apply to all packed lunches consumed in school – ensuring that all food consumed in our schools is healthy and nutritious. This should all be inspected by Ofsted.

6. Uniform colour-coded labelling to be present on all foods for retail and out-of-home with stricter criteria for high salt, sugars, fat and calories.* (NB sugars as free sugars not total sugars)

Consistent front-of-pack labelling helps people to make informed and healthy choices.[17] Research shows the 'hybrid label', i.e. the colour-coded labels ('traffic lights') alongside percentage Reference Intakes, is one of the most effective ways to communicate nutrition information to all societal groups. Currently the recommendations are voluntary and this means that different foods are labelled in a chaotic way within supermarkets leaving customers in the dark. This labelling scheme should be made mandatory for both food retail and out-of-home sector, and again should be organised by the independent, but government-funded, nutrition agency. An additional benefit to colour-coded labelling is that manufacturers who want their products to be seen in the best possible light are more likely to reformulate products that would otherwise receive a red label. There needs to be stricter criteria for high salt, sugar, fat and calories as many unhealthy foods are rated as healthy under the current criteria. The sugars figure in the current nutrition label is the total amount of sugars in the food and this needs to be changed to the amount of free sugars that have been added to the food.[18]

Calorie Reduction

Table 1: Predicted reduction in calorie intake of UK diet

Policy		**Reduction in energy intake (kcal/person/day)**
Reformulation	50% reduction in sugar	**100**
	20% reduction in fat	**100**
Stop promotion		**50-100**
Stop marketing		
Sugar-sweetened soft drinks duty		
Improve public sector food		
Implement colour-coding labelling		
Total reduction		**250-300**

This will prevent obesity and type 2 diabetes in children and adults in the UK.[19]

Summary

Cameron has the opportunity to make the UK lead the world again in nutrition as it did for salt, and to be the first country in the world to reverse the obesity and type 2 diabetes epidemic. Obesity and type 2 diabetes are preventable if the food environment is changed. Current policies are ineffective and we now require policies that work, before these health issues bankrupt the NHS.

Cameron's Plan, as evidenced by the 6 essential actions that he must take, will do this. We need these policies to be adopted immediately with forceful leadership from Cameron and his government. It is vital that every single one of these actions is implemented if he is to succeed.

NB. throughout the document, 'sugar' refers to free sugars and 'drink' refers to non-alcoholic drinks.

Action on Sugar

Action on Sugar is a group of expert concerned with sugar and obesity and its effects on health. It is working to reach a consensus with the food industry and Government over the harmful effects of a high calorie diet, and bring about a reduction in the amount of sugar and fat in processed foods to prevent obesity and type 2 diabetes.

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