

Action on Sugar Submission to the 2023 HSCSC Inquiry: Prevention in health and social care

Action on Sugar is a group of experts concerned with sugar and obesity and their 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, type 2 diabetes and tooth decay.

For more information, please contact Mhairi Brown RNutr, Policy and Public Affairs Lead
mhairi.brown@qmul.ac.uk

Proposal: Improving the Nutritional Profile of Commercial Baby and Toddler Food and Drinks

Why this should be considered

Childhood is a crucial time to shape food preference. A diet high in nutrient-dense, minimally processed foods helps children develop a healthy relationship with food, grow to their full potential and thrive in school. Such a diet can also help to prevent tooth decay, overweight, obesity and related illnesses (e.g. hypertension, type 2 diabetes) later in lifeⁱ.

The latest National Diet and Nutrition Survey (2018/2019) revealed children aged 1.5-3 years had a mean energy intake of 9.7% free sugars, more than the recommended maximum of 5% for those aged 2 years and olderⁱⁱ. A high sugar intake is linked to an increased calorie intake and therefore obesity; the prevalence of children living with obesity doubles from when they start reception (10.1%) to when they leave Year 6 (23.4%)ⁱⁱⁱ.

The main contributor for free sugars for children aged 4-9 months is commercial baby and toddler foods, particularly fruit-based and cereal based foods.

Why now

In 2017, the Government promised to address sugar levels in baby, weaning and toddler foods^{iv}. It was not until the 2019 *Advancing our health: prevention in the 2020s* Green Paper where the Government committed to publish nutrition guidelines for the food industry in 2020, introducing other levers if there was poor progress towards those guidelines, and improving the marketing and labelling of products targeted to young children^v.

Public Health England (PHE) published draft commercial baby food and drink guidelines in 2020 for consultation with limited stakeholders, but to date, these guidelines have not been released^{vi}. In 2022, the Scientific Advisory Committee on Nutrition (SACN) *Feeding young children aged 1 to 5 years* report highlighted again that commercial baby food and drinks are a key contributor of sugar. The Government has failed to take action to encourage companies to improve the nutritional profile of their products^{vii}.

Why scrutiny is needed

The Government's 2019 review of the commercial baby food and drink market found that many products contain added sugar and salt – or salty/sugary ingredients, displayed inappropriate age guidance or misleading health and nutrition claims, and product names did not accurately reflect the balance of ingredients^{viii}.

Our research builds upon these findings. In 2021, our cross-sectional survey of baby and toddler sweet snacks (e.g. biscuits, rusks) found some contained 2 teaspoons of sugar/serving, and all products had a healthy-sounding claim on pack e.g. 'made with real fruit' despite containing free

sugars^{ix}. These products do not have to display ‘traffic light’ front of pack nutrition labels, as these labels are based on adult recommendations, but if they did then all products surveyed would have a red label for sugar. Our 2022 survey on baby and toddler breakfast foods, such as flavoured baby rice and porridge, had similar findings i.e. some contained up to 4 teaspoons of sugar/serving and more than 75% featured ‘healthy’ claims despite containing free sugars^x.

Our polling has found the majority (77%) of parents offer their child commercial baby and toddler food and drinks several times a week, highlighting convenience and the perception that they contain no added sugar as key reasons for offering them. 91% of parents would support the government in ensuring all food and drinks available in the baby aisle are nutritionally appropriate according to NHS recommendations^{xi}.

PHE’s proposed nutrition guidelines for these products were weaker than the international benchmark set by the World Health Organization^{xii}. As their consultation was closed, with many food manufacturers invited to comment, it is likely that the final guidelines will have been weakened further. Even once released, they would likely be voluntary which has been highlighted as a key issue with the Government’s ongoing salt, sugar and calorie reduction programmes. Commercial baby and toddler food and drinks are trusted by parents as a convenient choice, but all parents should have access to convenient, affordable and healthy options with no concerns of the impact of these products on their child’s health.

Action Needed

We call on the Committee to address the Government’s lack of action in improving the nutritional content of commercial baby and toddler food and drinks, and their wider inaction on ensuring all children have a healthy start to life. We intend to submit evidence regarding policy solutions that would lead to progress and reduce diet-related ill health experienced by young children in the UK.

ⁱ Sahoo K, Sahoo B, Choudhury AK, Sofi NY, Kumar R, Bhadoria AS. Childhood obesity: causes and consequences. *J Family Med Prim Care*. 2015 Apr-Jun;4(2):187-92. doi: 10.4103/2249-4863.154628. PMID: 25949965; PMCID: PMC4408699.

ⁱⁱ NDNS: results from years 9 to 11 (2016 to 2017 and 2018 to 2019) <https://www.gov.uk/government/statistics/ndns-results-from-years-9-to-11-2016-to-2017-and-2018-to-2019>

ⁱⁱⁱ National Child Measurement Programme, England, 2021/22 school year <https://digital.nhs.uk/data-and-information/publications/statistical/national-child-measurement-programme/2021-22-school-year>

^{iv} Public Health England 2017. Sugar Reduction: Achieving the 20% A technical report outlining progress to date, guidelines for industry, 2015 baseline levels in key foods and next steps https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/604336/Sugar_reduction_achieving_the_20_.pdf

^v Department of Health & Social Care. 2019. Advancing our health: prevention in the 2020s – consultation document <https://www.gov.uk/government/consultations/advancing-our-health-prevention-in-the-2020s/advancing-our-health-prevention-in-the-2020s-consultation-document>

^{vi} Public Health England. 2020. DRAFT PROPOSALS: Commercial baby food and drink guidelines <http://www.babymilkaction.org/wp-content/uploads/2020/11/DRAFT-PHE-proposals-for-2023-commercial-baby-foodand-drink-guidelines.pdf>

^{vii} Office for Health Improvement & Disparities. Summary of draft report: Feeding young children aged 1 to 5 years <https://www.gov.uk/government/consultations/feeding-young-children-aged-1-to-5-years-draft-sacn-report/summaryof-draft-report-feeding-young-children-aged-1-to-5-years>

^{viii} Public Health England. 2019. Foods and drinks aimed at infants and young children: evidence and opportunities for action https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/812204/Foods_and_drinks_aimed_at_infants_and_young_children_June_2019.pdf

^{ix} Action on Sugar, 2021 <https://www.actiononsugar.org/surveys/2021/baby--toddler-sweet-snacks/#d.en.929872>

^x Action on Sugar, 2022 <https://www.actiononsugar.org/surveys/2022/baby--toddler-breakfasts/>

^{xi} The research was conducted by Censuswide with 1004 UK Parents of children ages 6-36 months between 02.11.2022 - 03.11.2022. Censuswide abide by and employ members of the Market Research Society which is based on the ESOMAR principles and are members of The British Polling Council

^{xii} WHO Europe, 2019 https://www.euro.who.int/data/assets/pdf_file/0008/407564/Improving-Nutritional-Quality-LowRes.pdf