

## Labour National Policy Forum – CASSH Submissions

[From National Policy Forum Website:](#) Labour is a democratic socialist party. Our policy development process is designed to involve members, local parties, trade unions, socialist societies, elected representatives as well as the wider community. Policy is developed through the National Policy Forum (NPF). This is a body of around 200 representatives from all the major groups of the Labour Party, from constituency parties and regions to affiliated trade unions, socialist societies, MPs and councillors. Its role is to shape the Party's policy agenda, drawing up policy documents for agreement. NPF representatives are placed onto one of six policy commissions that examine specific policy areas; each commission is co-convened by a Shadow Secretary of State and an NEC member. These Commissions consider the policy submissions which come in from across the Labour Party, and develop detailed positions which are then discussed at Annual Conference. The current commissions are:

- **A green and digital future** – We want a country that takes on the climate crisis and seizes the opportunities of the digital revolution, not one whose leaders duck the big challenges. This includes climate, energy, the environment, transport infrastructure, food and rural affairs, and science and digital.
- **Better jobs and better work** – We want a country that works for working people, with decent, well-paid jobs no matter where you live and where good businesses can thrive. This includes employment rights, the future of work, business, tax, skills and industrial strategy.
- **Safe and secure communities** – We want a country where people feel happy, safe and part of a close-knit community, with low levels of crime and proper support for victims. This includes police and crime, the criminal justice system, online safety, local government, local transport, high streets, the Constitution and civil rights.
- **Public services that work from the start** – We want a country with world-class public services that work for everyone right from the start, from the NHS and social care to schools, children's and youth services. This includes the NHS, healthcare, social care, education and youth services.
- **A future where families come first** – We want a country where families come first, in all of their wonderful diversity, and where all people are treated with the dignity and respect they deserve, regardless of their background. This includes social security, pensions, childcare, early years, housing and homelessness, and women and equalities.
- **Britain in the world** – We want a country that is self-confident on the world stage, with an international role that delivers for the British people while making our world safer. This includes foreign affairs, international development, defence and trade.

CASSH submissions:

- Salt reduction
  - 'A green and digital future' – link to food issues, improving healthiness of food available or
  - 'Public services that work from the start'
- Sugar/calorie reduction
  - 'A green and digital future' – link to food issues, improving healthiness of food available and reducing levels of sugar beet grown or
  - 'Public services that work from the start'
- Early years
  - 'A future where families come first'

## **Reducing Population Salt Intake to Save Lives and Protect the NHS**

In the early 2000's, under the previous Labour government, England introduced a world leading health policy: salt reduction. Successive Conservative governments have since weakened the policy, but with strong leadership England could once again lead the world in reducing population salt intake, avoiding preventable causes of death and saving the NHS billions per year.

### The Issue

We currently eat too much salt (8.4g/day), 40% more than the recommended limit of 6g. Most people are eating more salt than they realise, with around 80% coming from processed (i.e. manufactured, packaged food) and prepared food (i.e. food prepared for consumption outside the home in restaurants, takeaways or cafes). This is out of the control of individuals; individual action alone will not solve this issue.

There is a direct, linear relationship between salt intake and blood pressure. Raised blood pressure (the 'silent killer') is the leading risk factor for cardiovascular disease (CVD), responsible for one in four deaths in the UK. Excess salt intake is also linked with chronic kidney disease, osteoporosis and stomach cancer. Raised blood pressure alone costs the NHS £2.1 billion a year; CVD-related healthcare costs a further £7.4 billion a year and in 2022, more than 345,000 people were on cardiac waiting lists in England. Health inequalities in the UK are also exacerbated as those on lower incomes eat more food containing added salt, increasing the risk of developing CVD.

### The Solution

Encouraging the food industry to remove excess salt from their products is a brilliant public health intervention, and championed by the World Health Organization as a 'best buy' for health, based on the UK's model which was established under the previous Labour government by the Food Standards Agency in the early 2000's. The FSA's salt reduction programme put the onus on the food industry to work towards gradual, sustained decreases in levels of salt in products via reformulation. They set voluntary salt targets for more than 80 categories of foods which have since been reset to lower levels several times to guide this gradual reduction. By 2011, the salt reduction programme had led to decreases of 20-40% in salt levels across most categories; this was accompanied by reductions in population salt intake, average blood pressure and CVD mortality.

Despite this early success under the FSA's strict monitoring and accountability, responsibility for salt reduction has moved several times, from the FSA to DHSC and their widely criticised Public Health Responsibility Deal, to Public Health England, and back to DHSC. Partnership with industry has been prioritised over accountability mechanisms that could have ensured continued progress in salt reduction.

If strengthened by a future Labour government, with appropriate food industry accountability and transparency, the salt reduction programme could have an even greater impact on population health and the NHS. DHSC's own figures suggest that a fall in population salt intake of just 1g per day could prevent more than 4,000 premature CVD deaths per year, but we cannot rely on voluntary guidelines anymore. CEO's of major retailers in the UK told the National Food Strategy team that they wouldn't take action without legislation for fear of being undercut by competitors who don't commit to reformulation.

More than 50 countries are following the UK's salt reduction model with voluntary salt targets; 19 countries have mandated the salt reduction targets in order to achieve greater impact. Yet England's 'world leading' programme has stalled, as highlighted in a recent report from the WHO. We urge Labour to champion this simple, cost-effective policy to protect health and reduce the burden on the NHS.

## **Reducing Population Sugar and Excess Calorie Intakes to Protect Health**

### **The Issue**

In England, more than half of men and women are living with overweight or obesity, and more than one in three children in England are overweight or obese when they leave primary school. Children from deprived areas are more than twice as likely to be living with obesity than affluent counterparts, and economically deprived areas have the highest rates of obesity. Excess weight leads to type 2 diabetes, cardiovascular disease, cancer, musculoskeletal conditions, liver and kidney disease, and poor mental health. The NHS spends at least £6.5 billion annually on treating obesity-related ill health, with a total economic impact of £58 billion, accounting for NHS and care costs, lost productivity, workforce inactivity and welfare payments.

### **Evidence**

There is evidence of a link between consuming too much sugar and obesity; the strongest evidence exists for sugar-sweetened beverages and type 2 diabetes. Sugar intake is much higher than recommended across all age groups. Reducing intake to the recommended level could prevent 3,500 deaths and avoid 173,000 dental caries cases annually (the leading reason for child hospital admissions), whilst also saving the NHS £396m each year. However, individual action will not solve this issue: the majority of sugar eaten by the population comes from processed (i.e. manufactured, packaged food) and prepared food (i.e. food prepared for consumption outside the home in restaurants, takeaways or cafes).

### **Progress to Date**

England's sugar reduction programme aimed to reduce sales-weighted average sugar content in categories contributing the most sugar to children's diets by 20% by 2020. The final progress report showed that there had only been a 3.5% reduction, but also highlighted the feasibility of sugar reduction even in the most challenging categories, suggesting a mandatory approach would have led to more success, e.g. Co-op achieved a 15% reduction in chocolate confectionery (category average = 0.9%), Tesco achieved a 15% reduction in sweet confectionery (category average = 2.8%). Due to the programme structure, many companies developed '30% less sugar' products and marketed this product alongside full-sugar products but if the Government had provided strong leadership and guidance, companies could have used this technology across all products, leading to greater health and economic benefits.

A calorie reduction programme was also introduced in 2020, in recognition that obesity is linked to more than just sugar, and that children living with obesity consume up to 500 extra calories per day. Worryingly, the Government did not release a monitoring report of the calorie reduction programme in 2022 as promised.

In contrast, the Soft Drinks Industry Levy (SDIL) was implemented in 2018 and has achieved a 34% reduction in total sugar sales from soft drinks (46,372 tonnes). Despite concerns from the soft drinks industry, sales have increased by 21% and research indicates there has been an impact on obesity in year 6 girls, and a greater impact in girls from deprived areas.

### **Protecting Health and the Environment**

Sugar reduction is not just a health issue – there are associated environmental issues too, which aligns with Labour's 'A green and digital future' commission. The process of harvesting sugar beet, the UK's domestic source of sugar, is causing irreversible damage to our soils, lifting an estimated

489,000 tonnes of topsoil from UK fields every year, and relies on harmful neonicotinoid pesticides to maintain productivity. Sugar cane cultivation is similarly problematic due to high levels of chemical and water use.

### Solution

We urge Labour to commit to comprehensive and mandatory sugar and calorie reduction measures, to benefit health, reduce the burden on the NHS and help protect the environment.

## **Commercial Baby Food and Drink: A Factor in the Current Obesity Crisis**

### The Issue

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 life.

However, few children have access to such a diet. The latest National Diet and Nutrition Survey (2018/2019) revealed children aged 1.5-3 years had a mean energy intake of 9.7% from free sugars, more than the recommended maximum of 5% for those aged 2 years and older. 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.

### Evidence

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.

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. 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.

### Public Support

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. 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. In addition, 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.

### Solution

In 2020, Public Health England (PHE) published draft commercial baby food and drink guidelines for consultation with limited stakeholders. To date, these guidelines have not been released but they were weaker than the international benchmark set by the World Health Organization. As it was a closed consultation, with many food manufacturers invited to comment, it is likely that the final

guidelines will have been weakened further. However, 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.

By improving the nutritional quality of food and drink currently available on the market, with strict guidelines or legislation, the next government can help protect the health of vulnerable children in the UK, prevent diet-related ill health before it begins, and have a beneficial impact on the NHS and the wider economy in the long term.