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Consultation Document

Healthy Food Environment

Exploring proposals to make the food environment in Wales healthier

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Action required: Responses by 1 September 2022

Mae'r ddogfen hon ar gael yn Gymraeg hefyd /
This document is also available in Welsh

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Overview

This consultation explores what action could be taken to improve the food environment in Wales and help make the healthy choice, the easy choice. It is an action from the Healthy Weight: Healthy Wales Strategy.

This consultation includes proposals under three themes;

- Healthier Shopping Baskets – for promotions and marketing to be rebalanced towards healthier choices to increase the affordability of healthier options.
- Healthier Eating out of our Homes – to improve the information available to us when eating out of the home and to build on the success of the Sugar Levy on soft drinks.
- Healthier Local Food Environments – to shift the balance, so that our daily journeys through the places we live can help to promote positive choices, including to explore the role of Hot Food Takeaways around schools.

How to respond

Submit your comments by 1 September 2022, in any of the following ways:

- complete our online form
- download, complete our response form and email or post to addresses below.

Further information and related documents

Large print, Braille and alternative language versions of this document are available on request.

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This document is also available in Welsh: <https://llyw.cymru/amgylchedd-bwyd-iach>

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Ministerial Foreword

This consultation marks an important step towards delivering our ambitions set out within our ten year strategy, Healthy Weight: Healthy Wales. Obesity is one of our most significant generational challenges as a population, but we know that to make a real impact we have to explore many different ways to influence behaviours. This includes shifting our food environment to one which encourages us to make positive choices for our health. We want to use this consultation as an opportunity to discuss measures to make the healthy choice the easy choice.

I firmly believe that achieving and sustaining a healthy weight is not solely about willpower. Choosing a healthy diet has been made increasingly more difficult as our lives and ways of living have changed to suit modern living. Our food offers have evolved in a way which has meant that we are exposed to foods which are cheap, convenient and difficult to resist. Much of this food is high in fat, sugar or salt, and we know that as a nation we consume too much food which is damaging our health. Many of these foods provide empty calories and are driving us towards eating in a way which is not sustainable. I want us to consider how we can reset this dynamic.

I am not willing to accept that 28% of our children are already starting school being overweight or obese, when we know that this has life limiting impacts for a whole range of both physical and mental health issues. I want to make it easier for parents or carers to make positive choices. However, I want to carefully consider the cost of living crisis as an important factor in this consultation. I want these measures to help support industry to make healthier food more readily available at a cheaper price and I want to focus upon reducing the health inequalities gap linked to our dietary choices. For example, we know that price promotions can actually increase household spend, so we will be listening carefully to a range of views to ensure that we can get the balance right.

The response to the COVID-19 pandemic has highlighted the urgent need to take tougher action to help reduce and prevent obesity. The pandemic has shown a link to worse outcomes for people with higher body mass index and we know that there continues to be a significant link to a number of chronic diseases which leads to lives lived in disability and early death. These are preventable.

I want us to reimagine the food environment and make the right decisions for our current and future generations. This includes working with industry in a positive and proactive way to develop these proposals, to ensure that we can maximise impact. This also means taking a close look at the links between health inequalities, food insecurity and poverty. I want these measures to ultimately increase access and affordability of healthier foods.

There are three themes set out in the consultation: healthier shopping baskets, healthier eating out of the home and healthier local food environments. Separately we are also consulting on proposals to stop the sale energy drinks to children.

These are potentially a first suite of measures which will be monitored for impact over time, alongside a number of approaches and actions set out in our national strategy. For example, we will also be looking into taxation powers in Wales to consider further ways we could make a difference.

During the consultation we will engage with people and stakeholders across Wales. We want to listen to a range of ideas and views. In particular I am very keen that children and young people have a voice. I look forward to engaging proactively during the consultation and listening to a range of views.

Executive Summary

The consultation sets out proposals under three themes which we hope will help create a food environment where the healthy choice is the easy choice.

We are working closely with a range of partners to consider the evidence that we already hold, but this consultation will help us shape and refine our thinking and gather opinions on specific proposals we have set out under three themes: healthier shopping baskets, healthier eating out of the home and healthier local food environments.

Healthier Shopping Baskets

As a nation the food choices we make tend to contain too many calories and are too high in fat, sugar and salt. We want to support individuals to make healthier choices by restricting the promotion of food and drink which is high in fat, sugar and salt - the biggest dietary contributors to obesity, and by encouraging the promotion of healthier products.

To achieve this we are proposing to introduce legislation to set rules for what products can be sold on promotion such as temporary price reductions, multi-buy and volume offers or in prime positions such as store entrances and end of aisles.

As part of this work, we need to consider which products fall within the restrictions, what types of promotions should be restricted, and which locations within stores should be included.

In parallel to this, we want to encourage industry to use their vast experience and tools available to entice customers to buy healthier food and drink.

Healthier Eating Out of the Home

Eating out and buying takeaways is no longer an occasional treat but is an increasingly common part of our everyday lives. We want to consider what measures can be adapted at a national level to help us in our ambition to be a healthier weight.

The options being considered within this consultation are:

- the introduction of mandatory calorie labelling at the point of choice;
- the size and refill restrictions for sugary drinks.

As part of this work we want to consider possible exemptions to where proposals would apply and to consider how information is displayed.

We also wish to consider the impact of people who have eating disorders and any mitigations which can be put in place to support them.

Healthier Local Food Environments

Alongside placing a focus upon calorie labelling and supporting food businesses, we want to utilise existing mechanisms to improve our local food environments and make healthier choices easier.

We want to consider how we could support informed decisions around such things as new hot food takeaways close to schools and colleges by ensuring information such as existing saturation, local obesity rates and social demographics is considered and reflected.

Business Support

In undertaking this consultation, we also want to consider ways in which we can support businesses to deliver these proposed changes and to develop healthier options. We have published a range of Impact Assessments alongside this consultation and will consider any views or additional evidence. There are specific questions relevant to businesses at Chapter 5.

Next Steps

This consultation will run from 9 June 2022 to 1 September 2022 and during this time we are planning a range of engagement with members of the public, industry and key stakeholders. We will publish a consultation response by autumn 2022.

We will be consulting on enforcement of the proposed options by winter 2022/23.

Introduction

[Healthy Weight: Healthy Wales¹](#) sets out our 10 year strategy and vision to prevent and reduce obesity across Wales. The strategy recognises the challenges, but most importantly, the opportunities we can make to empower people across Wales to make healthier choices which are easy, affordable and are sustainable.

Preventing obesity is a complex challenge, with many contributing factors acting at individual, community, societal and global levels. However, our food environment has developed in a way which prioritises convenience over health. This includes a focus on easy, quick foods that will often be energy dense and high in fat, salt or sugar and are sometimes more affordable. Healthy Weight: Healthy Wales sets out our commitment to shift the food environment towards making the healthy choice, the easy choice.

There are approximately 1.6m adults who are overweight and 655,000 who are obese in Wales. More than one in four of our children are overweight or obese when they start primary school. Data shows that children and adults in Wales are not eating balanced diets. The latest [National Diet and Nutrition Survey²](#) shows we consume too much sugar, saturated fat and salt and too many calories, but not enough fibre, fruit and vegetables. For example, children between 11 to 18 years old consume up to three times the recommended maximum amount of sugar. The need for action is clear.

Overweight and obesity are long term health problems that are not amenable to rapid change. That is why we want to build a long-term approach, which brings together a range of multi-component actions. This includes improving our food environment, so that the healthy choice can be the easy choice. The action we need to take to prevent and reduce obesity has to be about the way we can change and influence behaviours. We know that influencing individual action to impact personal responsibility is not enough. Our environment plays a significant role to nudge us towards making unhealthy choices.

The proposals set out in this consultation are crucial for both the immediate and the long-term health and wellbeing of our population. We know that if current trends continue, more people in Wales will die prematurely due to cancer, heart disease, liver disease and type 2 diabetes. More lives will be adversely affected by disability and ill health. Obesity also impacts negatively on our mental health which in many cases tracks with us from a young age and has life-long consequences and impacts.

The pandemic has also had a significant impact on our diets and had demonstrated the negative impact upon our health. [Global research³](#) suggests that obesity increases the risk of death from COVID-19 by 48%; admission to intensive care by 74% and increased risk of hospitalisation by 113%. Diet-related illness is one of the top three risk factors of COVID-19 related death and is the main preventable cause. There is a risk that the pandemic will have exacerbated existing inequalities and we know that individuals with existing health problems are more likely to have been inactive and had restricted access to food during the pandemic.

The Food Environment

Our food environment plays a central role in what we choose to eat and drink. We are never far away from calorie dense, sugary or fat-rich temptation. In our everyday lives we are exposed to advertising, promotions and pricing which push us further towards making unhealthy choices. We have created an environment where the healthy choice is not always the easy choice. We are striving to change this for the better.

Our eating patterns have also changed. We 'eat out' and 'order in' more frequently and snack more often. Food is available 24 hours a day and we rely less on cooking from scratch or having three set meals a day. Portion sizes have become bigger and generally contain more calories, fat, sugar and salt. Statistics gathered before COVID-19 showed that around one in five meals were eaten outside of the home.

There are no quick wins. We know that the triggers for obesity are complicated and have evolved over generations.

What do we want to consider?

We are working closely with a range of partners to consider the evidence and this consultation will help us assess the likely impact of the proposals we have set out. Through these proposals we are aiming to significantly improve the health of our current and future generations. We want our children to grow up in an environment which positively supports our physical and mental wellbeing.

We want to think about the food and drink people across Wales purchase and consume within the course of a typical week. We want to take action across the food environment to consider changes which will reimagine how our food choices can shift towards enable better dietary health. Central to these considerations will be the role which poverty plays on our food choices and how we can use our powers to help narrow the inequality gap based on dietary and nutritional outcomes.

We are therefore consulting upon proposals across three key themes:

- Healthier Shopping Baskets – for promotions and marketing to be rebalanced towards healthier choices to increase the affordability of healthier options.
- Healthier Eating out of our Homes – to improve the information available to us when eating out of the home and to build on the success of the Sugar Levy on soft drinks.
- Healthier Local Food Environments – to shift the balance, so that our daily journeys through the places we live can help to promote positive choices, including to explore the role of Hot Food Takeaways around schools.

These proposals are interconnected and support wider action on food sustainability and climate change and, align with our [Net Zero strategy](#)⁴. They are intended to be part of an initial set of measures to improve our food environment. We will monitor their impact in parallel with a range of other measures which are set out in Healthy Weight: Healthy Wales, and will review our actions accordingly. For example, we are exploring the future use of Welsh taxation powers on foods high in calories, fat, and sugar to consider further measures.

Theme 1: Healthier Shopping Baskets - Making the Healthy Choice the Easy Choice

We all make daily food choices - our weekly shop at a supermarket, picking up grab and go food on the way to work, preparing our children's school lunchboxes or shopping in our local convenience stores. However, we know that the [food choices we make](#)⁵ as a nation tend to be too high in fat, sugar and salt, and that adults [underestimate the calories](#)⁶ they consume by up to 50%. [Adults consume](#)⁷ approximately 195 excess calories per day, and overweight and obese adults approximately 320 excess calories per day. Unsurprisingly this is having an impact on our ability to achieve and maintain a healthy weight.

Our weight cannot be put down to self-control, or lack of it alone. Not all choices we make, including when choosing food, are conscious. Many are made at a subconscious level, influenced by emotional triggers and the perception of getting value for money, saving time, instant gratification, brand loyalty or familiarity.

Retail marketing and promotional strategies put in place are sophisticated, are impossible to miss and hard to resist. Furthermore [evidence shows](#)⁸ that our weight can influence how likely we are to succumb to these marketing techniques.

We want to shift the use of promotions towards healthier options. We know that the cost of living crisis and affordability of food is going to be a bigger driver towards the types of foods which many of us may purchase. However, we do not want people on lower incomes to have no choice but to increase purchasing of foods which are ultimately poor for their health. We would not want to see a further widening of the health inequality gap. Alongside a range of other policies such as Healthy Start and Free School Meals, we wish to consider how we can support healthier dietary behaviours from the early years of life.

Making the Healthy Choice the Easy Choice

In recent years, action has been taken to encourage industry to make the food it sells healthier and less calorific (UK Government's calorie, sugar and salt reduction programmes) and to label products to help people make more informed, healthier choices (front-of-pack nutrition labelling). This action has been introduced across the UK on a voluntary basis. Although the food industry has made some progress in reformulation and providing healthier options this has not been consistently delivered or maintained.

With the exception of front of pack nutrition labelling where uptake is high (on around two thirds of prepacked food), voluntary approaches in this area have not delivered the change required. For example, manufacturers and retailers met only 52% of all average targets set in the [2014-2017 salt reduction programme](#)⁹.

There are many reasons voluntary action doesn't always work or deliver the change required, not least because inconsistent adoption leads to an uneven playing field. Legislation in this area will build upon voluntary action, deliver consistency, provide clarity and support a healthier shopping environment for the consumer. It will also help to maintain a level playing field for the food industry, ensuring that those who are making efforts to increase availability and promotion of healthier options are not disadvantaged by those who are not.

Consumers having access to easy information about the food they are buying is essential. We have consulted alongside the UK Government and the other devolved administrations on views and evidence to help inform any future improvements to the [UK's front of pack nutrition labelling approach](#)¹⁰. This will ensure that the UK's label remains the most effective at informing healthier choices. We will consider and reflect on the outcome of this consultation and work across other nations to develop next steps.

Promotion of Food and Drink

Marketing and promotions tactics in stores are very effective at influencing food purchases. [40% of food and drink](#)¹¹ bought in UK stores is on promotion, the highest in Europe. And when you look at the most recent pre-COVID figures for Wales¹² these promotion tactics are most prevalent among products high in fat, sugar or salt for example, biscuits (33.9%) and confectionary (36.1%).

Promotions are so effective, that retailers choose to sell some commonly bought products (known as [key value items](#))¹³ at a cost loss in order to entice us into their stores. This is in the hope we will complete our weekly or monthly grocery shop there and thereby increase their share of the grocery market.

Although promotions appear to save consumers money, data shows that they can actually [increase consumer spending](#)¹⁴ by around 20%. These products encourage people to buy more than they intended to purchase in the first place. Research also shows that up to 83% of purchases made on price promotion are impulse purchases, with only 17% planned. Those on lower incomes or with children are most likely to purchase food and drink high in fat, sugar or salt (HFSS) on promotion. For example, around half of chocolate purchased is on promotion. Although they may intend to, [consumers do not typically stock pile food](#)¹⁵, and additional purchases generally lead to increased consumption and calorie intake.

Welsh consumers recognise the influence such promotions have on their buying habits with a [Cancer Research poll](#)¹⁶ finding 86% of respondents believed that deals that offer extra have an effect on how much unhealthy food they buy. In a [Which poll of 2016](#)¹⁷ the top ask of retailers from consumers was for more healthy food to be offered on promotion.

We want to restrict the promotion of food and drink which is high in fat, sugar and salt (HFSS), which sits outside the [Eatwell Guide](#)¹⁸ (the government's advice on a balanced diet) and to make achieving a healthy balanced diet easier and cheaper. The current retail environment does not always align or support with these healthy eating guidelines. This makes it much more difficult for families across the population to make healthier choices.

Except for potential exemptions (set out later) we propose to cover all retail which serve food (physical and online). Our proposals will look at:

- value promotions (which include price reductions, multi buys and extra value offers); and
- location-based promotions (store entrances, end of aisle etc.).

In parallel to restricting the promotion of HFSS food, we want to encourage (or incentivise) industry to use their vast experience, and the promotion and marketing tools available to them, to entice customers to buy healthier food and drink. In

essence, we want to shift the balance of promotions in the retail environment from less healthy to healthier, making the healthy choice more accessible and affordable. We want industry to ensure that healthier food is more easily accessible and more visible in shops.

Responses to this consultation will help inform a further technical consultation which focus on the delivery of the proposals and enforcement of them.

Proposal 1: Restrict value-based promotion of HFSS products

[Promotions in stores are extensive, deep and effective at influencing food preferences and purchases](#)¹⁹. Value-based promotion in the retail environment can take many forms but most commonly used are multi-buy (2 for £1) deals, three for the price of two etc.) and temporary price reductions. The promise of a bargain often entices consumers to these deals and particularly in the case of multi-buys can lead to bulk buying. Although the intention may be to put aside the extra bought to cover a longer period, once in the cupboard most find it difficult to resist and consume the food bought on promotion quicker than intended.

For the purposes of this consultation we have defined value-based promotions (promotions which suggest extra value for the consumer) as follows:

- “temporary price reductions,” where the normal price of an item is discounted for the duration of the promotional period;
- multi-buy offers, where a discount is offered if a specific quantity of the item is purchased at once (includes buy one get one free deals); and
- “volume offers”, such as free items, larger packaging volumes for the same price, and “meal deal” type offers where different products are cheaper when purchased together.

Unlike the approach in England, we wish to include temporary price reductions in the proposed restrictions. In 2019 over a quarter of all food and drink bought in Wales was on promotion. Temporary price reductions dominated (19.3% of volume), followed by Y for £X deals (7.3%)²⁰. By implementing the proposals set out in this chapter we hope to achieve a decrease in the purchase of HFSS products in Wales.

Q1. Should we introduce legislation to restrict the following types of promotion of High Fat Salt or Sugar products?

- **temporary price reductions**
- **multi-buy offers**
- **volume offers**

Yes/no/not sure

Please explain

Proposal 2: Restrict the placement of HFSS products at locations that encourage purchasing

The [2018 Obesity Alliance study found²¹](#) that 43% of all food and drink products located in prominent areas, such as displays at store entrances, checkouts, aisle ends, or free-standing display units were for sugary foods and drinks. This type of marketing is used widely in the UK to promote high fat, salt and sugar foods, and is particularly influential for [children and young people²²](#). It encourages impulse [purchasing²³](#) which represents between 45% and 70% of food purchase, and 80% of purchases in some categories.

Some supermarkets had a higher proportion of sugary food and/or drinks at checkout than others, ranging from 30% in one major supermarket to 73% in another. The Obesity Alliance study also found that less than 1% of food and drink products promoted in high profile locations were fruit or vegetables.

[Evidence²⁴](#) also suggests that prime location positioning of products increases consumer purchasing independent of any price reductions, signifying that increasing visibility of a product can lead the consumer to wrongly assume it represents better value. Food manufacturers pay a premium to place their products in these locations.

Q2. Should we introduce legislation to restrict the placement of HFSS products in the following retail areas?

- store entrance
- at the till
- end of aisle
- free standing display units

Are there any other locations you think we should consider?

Yes/no/not sure

Please explain

How we propose to determine which products are HFSS

In line with England, we propose to use [The Nutrient Profiling Model \(NPM\)²⁵](#) developed by the Food Standards Agency in 2004- 2005 to determine which products fall within the restrictions. NPM was originally developed to provide Ofcom, the broadcast regulator, with a tool to differentiate foods for the context of television advertising to children.

The NPM model uses a scoring system to determine whether a food or drink is classed as 'less healthy'. For each product a score is given to four 'negative' factors (energy, total sugars, saturated fat and sodium) and three 'beneficial' factors (fruit, vegetables and nuts, fibre and protein). A formula is then applied to determine whether the food or drink should be categorised as 'HFSS'.

The UK Government has committed to using the NPM model to determine which products should be restricted from promotions of less healthy food in England, and

adopting the same approach would provide consistency for the food industry, as well as for consumers. An [NHS Health Scotland rapid evidence review²⁶](#) of approaches to classifying unhealthy food and drinks identified that the UK NPM has the strongest body of validation evidence of all available models.

However, the NPM was developed fifteen years and has not been updated to reflect the latest UK recommendations for sugar (which are half that previously) or fibre (which increased to 30g). There are therefore some products such as sugary children's cereals where the NPM would not score as 'less healthy' despite containing what is now classified as high levels of sugar. A modified Nutrient Profiling Model was published for consultation on 24 March 2018. This has not yet been published and is not available for use. If published in time the Welsh Government would consider the use of a revised NPM.

How we propose to determine which categories of food should be caught by the restrictions

We propose to use the same categorisation as the UK Government that being those products which sit within the Public Health England (now the Office for Health Improvement and Disparities) Calorie Reduction Programme, Sugar Reduction Programme and Soft Drinks Industry Levy, streamlined to reflect those products of particular concern for childhood obesity.

The Welsh Government is fully supportive of the calorie and sugar reduction programmes which use UK data, refer to UK dietary advice and reflect scientific assessment conducted by the UK Scientific Advisory Committee. The Soft Drinks Industry Levy applies to the whole of the UK, Welsh Government are fully supportive of the levy. Taking this approach in line with the UK Government will provide broad consistency (aside from the inclusion of temporary price promotion restrictions in Wales) for retail businesses which operate across the England/Wales border.

We wish to consider if this should apply to a streamlined list of products which are of most concern to childhood obesity or for all categories to be captured by the programme. Both options presented below would end temporary price reductions, multi buy offers and volume offers (value promotions) on HFSS products included in the Sugar Reduction Programme, Calorie Reduction Programme and Soft Drink Industry Levy (SDIL). The NPM would determine whether the product is HFSS.

Option A – Categories that are of most concern for childhood obesity

- Soft drinks
- Chocolate confectionery
- Sugar confectionery
- Cakes
- Ice cream
- Morning goods
- Puddings and dairy desserts
- Sweet biscuits
- Breakfast cereals

- Yoghurts
- Milk based drinks with added sugar
- Juice based drinks with added sugar
- Pizza
- Crisps and savoury snacks
- Ready meals and meal centres including breaded and battered products
- Chips and potato products

Option B – All products captured by the programmes

All products listed above and additionally;

- Garlic bread
- Pies and quiches
- Bread with additions
- Savoury biscuits crackers and crispbreads
- Cooking sauces and pastes
- Table sauces and dressings
- Processed meat products
- Pasta /rice/ noodles with added ingredients and flavours
- Prepared dips and composite salads as meal accompaniments
- Egg products /dishes
- Sweet spreads

Q3. How should we determine which categories of food should be caught by proposal 1 and 2 restrictions?

Option A – Products high in fat, sugar or salt which are of most concern to childhood obesity

Option B – All Products high in fat, sugar or salt

[both options to restrict the promotion of HFSS products captured by the Sugar Reduction Programme, Calorie Reduction Programme and Soft Drink Industry Levy based on the Nutrient Profiling Model]

Other- please give details

Please explain

Encouraging Purchasing of Healthier Products

At the same time as removing incentives to buy less healthy foods, we want to encourage the purchase of more healthy products. We know there is an imbalance between the value promotions of healthier versus less healthy foods. Evidence from [Scotland²⁷](#) in 2018 identified that of all food that is high in fat, salt and sugar, 43% (HFSS) is bought on promotion, compared to 27% for healthier products. We need to redress this imbalance and increase the number of healthy products being placed on promotion.

Both options A and B would allow the continued promotion of products within the pre-determined category providing they meet the necessary NPM score. As such this option will enable and hopefully encourage the reformulation of products to improve their 'healthy' status and permit their promotion.

Online purchases

The Welsh Government proposes that these restrictions also apply to online shopping in response to the growing trend to shop online and in order to ensure a level playing field with retailers that mainly or only operate online. We also intend to mirror the location restrictions for online equivalents (for example, the pop-up page prompting shoppers to purchase HFSS products before the online checkout stage).

Q4. Should restrictions for both proposal 1- value promotions and proposal 2- location promotions cover online purchasing?

Yes/no/not sure

Please explain

Proposed Exemptions for Proposals 1 and Proposal 2

When exploring exemptions we have considered the following:

- Size of business (number of employees); and
- Available selling space (location restrictions).
- Possible food and drink product exemptions

Size of business (Number of employees)

We propose to follow the same approach taken by the UK Government and apply both the value promotion and location restrictions to retail businesses which employ 50 or more employees and thereby classified as medium or large by [section 172 of the Taxation \(International and Other Provisions\) Act 2010²⁸](#) and [EU Recommendation 2003/361²⁹](#) that sell food or drink in Wales.

.A symbol group is a form of franchise where independent stores trade under a common banner. Small independent retailers which are part of symbol groups will be captured by the restrictions if the symbol group collectively employs more than 50 people.

We propose retailers with less than 50 employees be exempt from both proposal 1- the value promotion restrictions and proposal 2- the location promotion restrictions.

Physical size of stores (available sale space)

A [report³⁰](#) conducted by the Association of Convenience Store showed that over half of all independently run stores are under 1000 square feet. We recognise that the proposed location-based restrictions could pose a challenge to many smaller retailers. On this basis we propose to follow the approach taken in England to apply the HFSS location restrictions to stores 185.8 square metres (2,000 square feet). Using the 185.8 square metre (2,000 square feet) size threshold also means that retailers that operate on Sundays that are just under 3,000 square ft (as required in the Sunday Trading Act) will be in scope of the location restrictions.

Ultimately, although the smaller convenience sector has grown sharply during the pandemic (from 1.7% to 2.1% of the total grocery till roll), it still only makes up a very small proportion of the overall retail market compared to the major retailers. An exemption for stores with very limited floor space will therefore not impact significantly upon the intended outcome of this proposal.

Regardless of the number of employees or whether they are part of larger symbol group retailers with shop floor space of less than 2000 square feet will not be required to comply with proposal 2- the location restrictions.

Specialist retail

Some specialist retailers only sell in their stores the products within scope of the restrictions such as chocolatiers or American themed sweet shops. We propose that these specialist retailers be exempt from the proposal 2- the location restrictions.

Food and drink product exemptions

We propose to exempt non pre-packed foods and close to use-by-date price reductions for both the value promotion restrictions and location promotion restrictions.

Q5. Should the following exemptions apply for value promotion restrictions (proposal 1)?

- **micro and small businesses (unless they are part of a symbol group with 50+ employees)**
- **close to use-by-date price reductions**
- **non-pre-packed products**
- **other**

Yes/no/not sure

Please explain

Q6. Should the following exemptions apply for location promotion restrictions (proposal 2)?

- **micro and small businesses (unless they are part of a symbol group with 50+ employees)**
- **stores that are smaller than 185.8 square metres (2,000 square feet) (even if they employ more than 50 employees or are part of a symbol group which does)**
- **specialist retailers that sell one type of food product category, for example, chocolatiers or sweet shops**
- **other**

Yes/no/not sure

Please explain

Theme 2: Healthier Eating Out of the Home – Understanding how it contributes to your weight

Eating out and buying takeaways is no longer an occasional treat, but is an increasingly common part of our everyday lives. This is especially true for families and, pre-COVID-19, over 40% of us did so at least once a week³¹.

Research suggests that food we eat outside the home makes up [20 to 25% of adult calorie intake](#)³². A [number of studies](#)³³ indicate that more frequent consumption of restaurant or takeaway meals place a person at increased risk of a higher body weight, most likely due to the higher energy density of food served outside of the [home](#)³⁴. A further issue with restaurant and takeaway food is that customers tend to underestimate the number of calories in large portions and calorie dense [meals](#)³⁵. Portions of food or drink eaten out or as takeaway meals typically contain twice as many calories as their equivalent bought in a shop. It is likely that eating out frequently, including takeaway meals, contributes to an overconsumption of calories.

The out of home sector has been one of the hardest hit by the fallout of the COVID-19 pandemic. However, as our out of home food sector starts to recover, it is a good opportunity to consider what measures can be adopted at a national level so this sector can help us in our goal to be a healthy weight.

The out of home sector in Wales³⁶ is dominated by fast food outlets and pubs and bars, each accounting for around one fifth of the market. Wales has seen a rise of 48% in fast food outlets from 2010 to 2018, ahead of the UK average increase of 34%, followed by coffee shops and restaurants which each have around 13% of the market. The five companies with the biggest share of the market are UK-wide or global, with around 17%³⁷ of the market. However, there are also a significant number of smaller, independent outlets, which are more likely to dominate the out of home sector in smaller towns and villages.

Of the 8,500 food catering business units³⁸ in Wales in 2019, over three quarters were classed as 'micro / zero' - so having less than 10 employees. With the closure over time of traditional stores such as bakers, green grocers and butchers, and the growth in out of town sites for larger retailers, these have been seen as a means of retaining footfall and vibrancy away from the high street.

There are many opportunities for improving the healthiness and calorie density of food and drinks consumed outside of the home. During the consultation process for Healthy Weight: Healthy Wales, support was expressed for the introduction of mandatory calorie labelling. This will be the main proposal in the first phase of action targeted at the out of home sector. We are also considering, if a legislative approach is taken, whether this should be extended to cover some of the additional measures called for in the consultation responses such as free refills and limits on drink sizes for sugary drinks.

Responses to this consultation will help inform a further technical consultation which focus on the delivery of the proposals and enforcement of them.

Proposal 3: Mandatory calorie labelling at the point of choice in the out of home sector

It can be difficult to know how many calories are in some foods and drinks, and to appreciate the significance of larger portion sizes, which may lead to overconsumption. By making clear and accurate calorie labelling compulsory in any outlet where food or drink is prepared and sold for immediate consumption, people in Wales will be able to make informed choices for themselves and their families. As the frequency at which individuals dine out or get takeaways increases, it is more and more important that people are aware of the calorie content of the foods they consume. We want to reduce overall calories purchased and consumed and support businesses to reformulate their offerings to healthier options.

We know nutritional information can help people when making food and drink choices, making them feel more informed. We also know that while consumers may look at labels, they may not necessarily restrict their intake of unhealthy foods. There are lots of factors at play in influencing behaviour, including attitude, social norms and how capable someone feels of changing. However, [evidence reviews](#)³⁹ have found that where calorie labelling is available at the point of choice when eating out, it can help consumers lower their calorie intake, particularly when provided alongside contextual information on recommended daily calorific intakes. There is also increasing evidence that population-wide measures to improve the food environment are more likely to be equally or more effective among disadvantaged groups.

This is a measure that many consumers would welcome; a survey by [Diabetes UK](#)⁴⁰ reported a high level of public support for calorie labelling on menus. Displaying calories at point of choice may also encourage the sector to adapt recipes and reduce portions sizes to lower the amount of calories in the foods and drinks provided. This has been [self-reported](#)⁴¹ by those in the sector already trialling it.

Many larger companies publish calorie and other nutritional information online. Some cafes, restaurants and takeaways have provided calorie information in store for some time, however its use is not widespread or consistent. There have been previous voluntary initiatives at a UK level, but these did not result in the substantive level of calorie labelling needed in our food environment to support lower calorie choices.

Q7. Should we agree to mandate calorie labelling in all out of home settings regardless of the size of business?

Yes/no/not sure

Please explain

How calorie information should be displayed.

We are proposing that calories should be displayed at point of choice (physical and online). In some cases, items are displayed at several locations, so consideration will need to be given if calorie information should be provided at each point. In order for consumers to make use of calorie information, we would suggest it needs to be clearly visible at the point they are making their choice of food or drink. We also want the legislation to be far reaching - for it to have maximum impact it should apply to as many out of home food outlets as practicable.

We want energy content to be displayed as calories (Kcal) only (and not in conjunction with kilojoules (KJ) as specified in EU labelling rules). This unit is better understood by UK consumers.

We would like to focus on calorie labelling and not include additional nutrients for several reasons. One is practicality. It would add complexity for businesses, and particularly small businesses. It may also be unfeasible to display on menus/display boards and retain legibility without substantially affecting how businesses currently display information. We are also aware that less than half of people living in the lowest income households find food labelling easy to read. This suggests information which is simple and easy to understand is less likely to exacerbate existing inequalities in food label use.

Displaying calorie information alongside recommended daily calorie intake has been found to be more effective at encouraging consumers to purchase fewer calories than displaying calorie totals alone. We are therefore proposing that a reference to recommended daily calorie intakes could be displayed alongside calorie labels. In keeping with other UK labelling, this would be an adult woman's daily reference intake.

Q8. Should energy labelling be limited to calories (Kcals)?
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Yes/no/not sure

Please explain

Children's menus

We are considering whether we should mandate calorie labelling on children's menus. There is no doubt meals eaten by children out of the home or purchased ready to eat in the home contribute to childhood obesity rates, not least because they tend to be larger portions and contain more calories than meals we prepare for our children at home. Children's menus tend to offer limited (if any) healthy options or sides and tend to be prepared using unhealthy cooking practices such as frying.

There is however a number of issues with displaying calories on children's menus. Firstly menus designed specifically for children tend to cover a broad age range (typically 2-12 years) during which the energy and nutritional needs of the child vary considerably. It would therefore be very difficult for the business to reflect these varying needs on their menus and indeed for parents to understand this information without accompanying explanation.

Q9. Should menus marketed specifically at children be exempt from calorie labelling?

Yes/no/not sure

If no how do you think this information should be presented?

Impact of eating disorders

Whilst we believe that the provision of calorie information would help to place a focus upon supporting people to make healthier food choices, we also recognise that this may pose difficulties for people with an eating disorder. We would like to hear what mitigations could be put in place, including allowing or mandating for businesses to provide menus without calories on request.

Q10. Should we mandate businesses to make menus without calorie labelling available at request?

Yes/ no/not Sure

Are there other mitigations we could put in place for people with eating disorders?

Please explain

Online sales

We also wish for this requirement to extend to online sales from businesses. In 2019, there was a 54% increase⁴² in the delivery of takeaway meals. It would be the responsibility of the business selling the food to supply this information to be displayed on the online platform used by the consumer to make their choice of food, and to ensure that it is displayed appropriately.

Where a business sells takeaway dishes through a third party business, such as an online takeaway platform, the responsibility for calculating the calorie content of the food or drink rests with the business making and selling it, and responsibility for displaying the calorie information at the point of choice rests with the business through which the consumer buys the food or drink.

Q11. Should the requirement to display calorie labelling extend to online sales?

Yes/no/not sure

Please explain

Proposal 4: Place restrictions on the servings of sugary soft drink

In addition to calorie labelling, there are many other opportunities for improving the healthiness and calorie density of food and drinks consumed outside of the home. Not all these measures will require or be best implemented by a mandatory approach.

We are proposing to introduce legislation to mandate calorie labelling and we wish to consider whether this legislation should be extended to cover additional measures. The proposals below were raised during the consultation process for Healthy Weight: Healthy Wales.

In 2015, the Scientific Advisory Committee on Nutrition (SACN) published a report on carbohydrates and health⁴³, which recommended the amount of sugars people consume as part of their daily calorie intake should be halved from 10% to 5%, and consumption of sugar sweetened drinks minimised. The report found consuming sugary drinks is leading to unhealthy weight gain in children and young people, and is linked with a greater risk of tooth decay, with 28% of children suffering from tooth decay by the time they turn five. In adults, too much sugar leads to excess calorie intake, weight gain and obesity.

Figures from the national diet and nutrition survey⁴⁴, as referenced in the SACN report, found sugary drinks to be the highest contributor (30%) of sugars to the diet of 4 to 10 year olds. When compared with the new SACN recommendation, children and young people were consuming around 3 times more sugar than recommended, with much of it coming from high-sugar drinks. Every time someone drinks a 500ml bottle of classic cola instead of a diet cola they consume around 200kcal more and in a typical 330ml can of classic cola, there is 35g sugar – which would instantly take children above their recommended maximum for the day.

A 2019 Public Health England report⁴⁵ found that the average sugar content of drinks subject to SDIL had decreased by nearly 30% between 2015 and 2018. Although there was a 10% increase in the sales of drinks subject to the levy, they contained 22% less sugar and resulted in a decrease in total sugar purchased per household from drinks subject to SDIL, which was seen across all socio-economic groups. A shift in the volume of sales towards levy-free drinks was also seen. The calorie content of drinks subject to the levy likely to be consumed on a single occasion fell by 20.5%, and by 22% for drinks consumed out of home.

The SDIL is strongly supported by the Welsh Government as an excellent example of the positive impact taxation measures can have.

Restriction of free refills of sugary soft drinks

Bottomless soft drinks are a feature of some restaurant and pub chains. They are typically priced to appear as a good value option compared to the purchase of a single serving, such as a bottle of soft drink, which is likely to incentivise purchase. Children may also be incentivised by the novelty of self-service drinks and the choice of

varieties and flavours. It is reasonable to assume that such provision may increase the consumption of sugary soft drinks, and so increase calorie consumption, whilst providing few or no additional nutrients.

However, we are aware that this is not the case in all out of home sector outlets providing this option. There is good practice in some outlets where free refills are only available for sugar-free varieties.

Other countries that have seen success with soft drinks taxes have also considered additional measures:

- In France, further to the introduction of a soda tax, it is now illegal to sell unlimited soft drinks at a fixed price or offer them unlimited for free. In January 2017, the French Government banned unlimited soft drinks in restaurants and other spaces catering to the public in France in an effort to reduce obesity;
- In 2013, the New York City Board of Health intended to prohibit the sale of sweetened drinks in portion sizes of more than 16 fluid ounces (470ml). However it was judged to have exceeded the scale of its regulatory authority.

Restriction of larger portion sizes for sugary soft drinks

The SDIL has had great success in taking sugar out of the soft drinks market through manufacturers reformulating products and increasing the UK market size of sugar free/lower sugar drinks. However, there has been [little change in the product sizes](#)⁴⁶ available to consumers. The most commonly sold manufactured single serving sizes of soft drinks in the UK are 330ml cans and 500ml bottles.

People who eat out of home more are more likely to be exposed to larger sized drinks portions, with some single serving cups containing over 900ml. The [trend](#) toward larger portion sizes has occurred in parallel⁴⁷ with increases in the prevalence of obesity and people being overweight.

Larger portion sizes may also be appealing because they appear better value for money – with larger portions providing economies of scale and more volume/calories for your pound.

Q12. Should we prohibit free refills of sugary soft drinks in the out of home sector?

Yes/no/not sure

Please explain

Q13. Should we restrict larger portion sizes of sugary soft drinks in the out of home sector?

Yes/no/not sure

Please explain

If yes, do you think this should be limited to 1 pint (0.57 litres)?

Please explain

Proposed exemptions for Proposals 3 and Proposal 4

When exploring exemptions we have considered the following:

- Type and size of business (number of employees); and
- Possible food and drink product exemptions

Type and size of business

In addition to restaurants, cafes, coffee shops, takeaways and other caterers, we propose this policy could also cover other venues that sell food/drink in scope, such as workplaces, hospitals (excluding in-patient food), prisons, supermarket cafes, train and bus station cafes and entertainment venues e.g. cinemas and bowling alleys.

However, these proposals would not include schools, colleges or early years and childcare settings as these already have regulatory standards or guidance for food in place. We would also be looking to exclude hospital in-patient food and care homes and settings given the varying nutritional needs of these patients and residents.

We also wish to exempt charities in the course of its activities (whether that be free or for a price that is less than the cost of providing that food). Also which are offered for sale by or on behalf of a charity, at a single event, to raise funds for its charitable activities.

Small and Medium Businesses

We are not proposing an exemption for small or medium businesses given the proportion of the market these make up in Wales. Recognising the burden and limited support available for such businesses we want to consider and gather views on what additional advice and support could be made available.

To summarise we are proposing to exempt schools, colleges, early years, childcare settings, hospital in-patient food and care homes from proposal 3- mandatory calorie labelling and proposal 4- sugary soft drink restrictions. We are not proposing to exempt small and medium size businesses.

Q14. Should the following settings be excluded from both the calorie labelling and soft drink restriction requirements?

- **schools and colleges**
- **early years and childcare settings**
- **hospital in-patients**
- **care homes and settings**
- **charity sales**
- **other**

Yes/no/not sure

Please explain

Q15. Should small and medium out of home businesses be covered by both the calorie labelling and soft drink restriction requirements?

Yes/no/not Sure

Please explain

Food and drink product exemptions

We propose that foods that are prepacked off premises such as confectionery, crisps or bottled soft drinks be exempt where the product is available to pick up and view prior to purchase. [Existing legislation⁴⁸](#) already requires prepacked foods to display nutrition information (including calories per 100g/ml). Calorie labelling on alcoholic drinks is subject to another consultation which is expected to be launched shortly. We also propose to exempt any condiments added by the consumer after food preparation is complete and loose fruit and vegetables. We recognise that calorie labelling could prove a challenge for businesses who regularly change their menu options, or provide specials for a short period. We therefore propose to exempt menu items for sale 30 days or less (either consecutively or in a 12 month period).

Q16. Should the following products be exempt from the calorie labelling requirement?

- **menu items for sale for 30 days or less items prepacked off premises (which already displayed nutrition information)**
- **condiments added by the customer**
- **loose fruit or vegetables**
- **other**

Yes/no/not sure

Please explain

Theme 3: Healthier Local Food Environments – Shifting the Balance

Alongside providing calorie labelling at the point of choice, we want to consider ways to support the development of healthy food environments. This includes how we can support local authorities and partners to utilise existing planning and licensing laws and consider the impact of Hot Food Takeaways. We want to consider how we can increase access to the availability of healthy foods, particularly to children within our local communities.

Our local food environment has a pivotal role to play in promoting a healthy diet and can strongly influence our purchasing behaviours. Our local high streets are often the hub of our communities and play a crucial role in the local and national economy. This was never more apparent than during the pandemic when many of us relied more than usual on our local shops. As well as influencing our eating habits our local food environments are well placed to play a significant role in reducing waste, tackling climate change, increasing biodiversity, as well as supporting food insecurity and social isolation.

However, unfortunately our local food environments can often drive us towards making unhealthy choices. Whilst on the one hand people aspire to eat more healthily, the amount and choice of fast, convenient and affordable food is often impossible to resist. The demand for convenience and meals eaten outside the home and takeaways make up an increasingly significant proportion of our diet.

In many restaurants and takeaways it is often difficult to make nutritious food choices when healthy choices are not available or are limited and expensive. In particular the impact on our most deprived communities is significant, with price and availability being key to purchasing choices. We want to work with partners and local communities to make healthier choices available and affordable.

Planning Healthy Weight Environments

There has been a growing momentum in Wales that recognises the need to establish healthy environments in order to enable and promote healthy behaviours. We should create sustainable places which are attractive, sociable, positive, secure, welcoming, healthy and friendly. Development proposals should bring people together. They should make us want to live, work and play in areas with an unmistakable sense of place, community and well-being, creating prosperity and opportunities for all. [Planning Policy Wales](#)⁴⁹ sets out the importance of placemaking.

“Placemaking is a holistic approach to the planning and design of development and spaces, focused on positive outcomes. It draws upon an area’s potential to create high quality development and public spaces that promote people’s prosperity, health, happiness, and well-being in the widest sense.” *Planning Policy Wales, Edition 10*

We have placed a significant focus on promoting health and well-being through regional and local spatial planning. These seek to shape the social, economic, environmental and cultural factors which determine health and which promote or impact on well-being in line with the Healthier Wales goal of the Well-being of Future Generations Act. The Public Health (Wales) Act seeks funding, planning and policy

decisions of public bodies to consider positive health and wellbeing outcomes for individuals and communities, helped by the use of Health Impact Assessment.

The Town and Country Planning Association (TCPA) '[Planning Healthy-Weight Environments](#)'⁵⁰, highlight six areas where interventions in our built environments which contribute to healthy-weight of the population. These include movement and access, open spaces, food, neighbourhood spaces, building design and local economy. It is clear that there is not one action which will have a direct impact upon obesity levels, instead it is about bringing together a range of approaches, which if delivered at pace and sustained over time will begin to shift attitudes and behaviours.

The challenge is to bring together all the different sectors involved necessary to create a healthy food environment. In the public sector, multi-disciplinary working will be required involving town centre managers, public health, regeneration, transport and planning professionals. Businesses will also have a key role shaping and investment in healthy choices across our towns and cities.

Proposal 5: Supporting Local Action – what tools and support will be required to support change

In the Healthy Weight: Healthy Wales 2022-2024 Delivery Plan we set out a range of non-legislative approaches, which aim to improve the local food environment and recognise that meaningful change requires collaboration and partnerships across the food and drink industry, the public sector, the voluntary sector and with communities themselves. Through our Healthy Weight: Healthy Wales strategy, we have set a range of proposals which will help to support change, including:

- Community and public places such as transport links, tourist attractions, schools, leisure centres, hospitals or workplaces offer and promote healthier options;
- Procurement and contracting in the public sector supports the purchasing and selling of healthier food and drink options;
- Wales becomes a Refill Nation, ensuring access to free drinking water is common place in our cities, towns and communities; and
- More local food growing opportunities are made available to local people, which will promote positive physical and mental health, mitigate against climate change and help restore nature.

These measures will help to embed healthier options and practices at a national level and across communities. However, we want to consider ways in which we can support partnership working at a local level for communities to develop local solutions. This includes carefully thinking about food insecurity and poverty to explore how we can increase access, availability and promotion of healthy food.

Supporting local authorities

At the local level local authorities and national park authorities have the opportunity to influence how places work and operate, which can have an impact on the choices people make in their everyday lives. For example, Cardiff have established a [Food Strategy](#)⁵¹ to enable everyone in Cardiff to have access to affordable good food, and to understand where their food comes from. This is built upon a partnership approach and sets out five key areas for action, each of which are intended to stimulate action on sustainable food and lead towards a more sustainable food city. This includes: fostering food partnerships, tackling food inequalities, increasing local food production, eating out well and food as a driver for prosperity.

To support the planning system, in 2021 Public Health Wales published [Planning and Enabling Healthy Environments](#).⁵² This provides guidance for planners to follow to equip them with the knowledge and thereby ability to respond to potential societal and environmental impacts. We want to champion the use of this guidance and template as an evidence based process which will help local planners to deliver planning decisions which respond to the needs of the community and support rather than hinder people's health and well-being.

We want to consider what additional support will local authorities and national park authorities develop coherent policies across all their functions, to deliver healthy food environments in their areas.

Supporting Businesses

We also want to consider how best to support food businesses to maximise the availability of healthy menu options. This could include the use of information, training and advice as well as promotion of awards and schemes such as the Healthier Catering Award scheme, a scheme designed to support businesses to make it easier for customers to make healthier choices. In particular we want to help businesses to increase the healthier menu options available and reduce the calorie content of food such as by reducing portion sizes.

Q17. What support and measures could we put in place to help improve the availability of healthier options within local areas?

Please explain

Proposal 6: Limiting Hot Food Takeaways – considering saturation limits, existing licensing powers and environments around Schools and Colleges

Picking up a meal at a local takeaway or ordering a delivery service to deliver a meal to our door is something that many of us enjoy. However, eating out and buying takeaways is now a daily or weekly occurrence for many of us. Not all fast food is unhealthy but it is often high in calories, saturated fat and salt, plus low in fibre, fruit and vegetables.

Wales has the [highest density of Hot Food Takeaways](#)⁵³ (HFTs) when compared to the UK average, at 65 per 100,000 people, compared to 61 per 100,000 on average for the UK, with significant variations in density across some local authorities. Research suggests a link between obesity and the saturation levels of HFTs.

A high proportion of local planning authorities across the UK have policies in place to address the proliferation or clustering of HFTs. Some local authorities in Wales already utilise existing planning powers and have put processes in place to restrict the location or number of HFTs. [Wrexham County Borough Council](#)⁵⁴ has implemented a policy that routinely excludes HFTs being opened within 400 metres of school premises. 400 metres is the standard exclusion zone that is applied because it is the equivalent of a 5 to 10 minute walk.

Although the relationship between HFTs and unhealthy weight may seem an obvious link, it is not clear cut. There is reasonably strong evidence of a relationship between HFTs and cardiovascular disease, but when it comes to weight, there is frequently contradictory evidence. However, this may be because it is an underdeveloped area of research and that clearer links may emerge as it evolves. This measure can also not be viewed in isolation, there are a number of other policies and approaches which will need to come together to enable change.

School and College Environments

A [Cancer Research UK poll](#)⁵⁵ of over 1,000 adults in Wales found that almost two-thirds expressed an opinion supporting limiting the number of hot food takeaways near schools.

The school years are a critical time for children and young people's health and wellbeing, when both healthy and unhealthy habits and behaviours can be embedded. However, it is clear that foods in the out of school environment, such as on the way to school, during lunchbreaks or coming home from school can promote poor dietary habits. In some cases these can reverse the positive work undertaken in schools or hinder parental efforts to support healthy eating.

A [UK-wide survey](#)⁵⁶ by the Royal Society of Public Health in 2016 found that teens have very easy access to hot food takeaways. 42% of teens could walk within two minutes from their school to somewhere selling unhealthy food, and that 25% have ordered a takeaway on their way to school. A [review by the Scottish Government](#)⁵⁷ on the effect of the food environment around schools on obesity levels in children and young people reported mixed findings. Access to outlets selling healthy food was viewed as decreasing the odds of being overweight or obese. It was also noted that the balance of outlets selling healthy and unhealthy foods has an impact on dietary quality in children and young people.

Reducing accessibility and removing temptations can help to shift towards a more inclusive food environment which does not target or promote unhealthy foods to children and young people. Walking past outlets selling foods high in calories, fat, sugar and salt can provide a significant temptation and promote pester power.

We would wish for there to be a consideration of consistent policies across local authority functions. We have limited our focus on proximity of HFT to secondary schools and colleges as it is at this age children and young people tend to start exercising their autonomy regarding food choices.

Children and young people who eat school meals tend to consume a healthier diet than those who eat packed lunches or takeaway meals. Whilst there have been many initiatives to improve standards of school meals, including nutrient-based standards. Uptake of school meals decreases when children move from primary to secondary school, and in many cases secondary school pupils are allowed to leave the school premises at lunchtime. They are also more likely than primary school age pupils to walk to and from school without a guardian. Furthermore, secondary school and college students are likely to have more independence and control over the choices they make. Basing the focus on secondary schools rather than all schools is also considered to be more proportionate and pragmatic.

Saturation Limits

We want to consider how town centre management, through planning policies, rental policies and grant funding can address over saturation of HFTs selling only unhealthy options. This will help to tackle the high density of current establishments and ensure public health is properly considered through future planning applications. The approach should take into account data linked to obesity rates in the area and consider the types of foods which hot food takeaways would be looking to sell.

Licensing

We recognise there is a limit to what we can achieve utilising the existing planning process. For example, there is currently no distinction between the food which is served in HFT beyond hot and cold. For this reason we also wish to consider after this consultation if there are wider licensing measures which could be taken forward to help regulate how existing HFTs operate to limit access to unhealthy food. These could include:

- Street trading policies to restrict trading from fast food vans near schools or colleges
- Policies to ensure that menus provide healthier options
- Enforcement on other issues such as disposal of fat, storage of waste, and litter
- Food safety controls and compliance
- Restrictions on opening times
- Limiting advertising around schools aimed at children and young people

Q18. Should we review existing planning and licensing support, including guidance, to address the distribution of Hot Food Takeaways, particularly close to secondary schools and colleges?

Yes/no/not sure

Please explain

Respondent information

Q19. Are you responding as an individual, or on behalf of an organisation or business? (select only one option)

- Individual
- On behalf of an organisation
- On behalf of a business
- Other, please specific

Q20. If answering on behalf of a business, what is the size of the business? (select only one option)

- Micro business (0-9 employees)
- Small business (10 – 49 employees)
- Medium business (50 – 249 employees)
- Large business (250 employees or more)
- Don't know

Other potential measures and wider impacts

Other potential measures

Beyond what we have proposed in this consultation we also want to consider other measures we could explore to further improve the food environment in Wales.

Q21. Please provide details of other options you feel could help drive positive change in the food environment, and support people in Wales to make healthier choices.

Are there any other matters you would like to raise?

Equality Questions

In order for us to assess how these proposals could impact specific sections of the population could you consider and provide your views of the following questions.

Q22. Do you think the proposals in this consultation document might have an effect on the following?

- Those living in rural areas
- Specific socio-economic groups
- Children and young people
- Equality in relation to;
 - Age
 - Sex
 - Race
 - Religion
 - Sexual orientation
 - Pregnancy and maternity
 - Disability
 - Gender reassignment
 - Marriage/civil partnership

Q23. We would like to know your views on the effects the consultation would have on the Welsh language, specifically on opportunities for people to use Welsh and on treating the Welsh language no less favourably than English.

What effects do you think there would be? How could positive effects be increased, or negative effects be mitigated?

Q24. Are there any other groups within society not already referenced you think any of the proposals would have an impact on?

Business Support and Impact

Support for Businesses

We want to consider ways in which we can support businesses both to make changes to the way they work to comply with the proposed requirements and offer and promote healthier options.

For example, we appreciate the burden to introduce calorie labelling will be greater for small businesses without the support of a franchise to implement. For this reason we are keen to look at ways we can support all businesses to prepare and adapt in readiness for the changes. We would appreciate your thoughts on what information, training and advice and initiatives such as award schemes could be put in place to support your business not only to comply but also to improve the healthiness of the food you offer and where possible make cost efficiency savings.

We could, for example, introduce a scheme similar to the Food Standards Agency in Northern Ireland [‘Calorie Wise’⁵⁸](#) scheme. This scheme provides Businesses with a free tool - MenuCal – which allows them to calculate energy values and supports the tailoring of food and drink offered through changing portion sizes or using alternative ingredients to provide healthier and more profitable choices about the food served.

Q25. What support could be provided to help your business prepare for the following proposals;

- **promotion restrictions (Theme 1- proposals 1 and 2)**
- **mandatory display of calories (Theme 2-proposal 3)**
- **place restrictions of the servings of sugary soft drink (Theme 2-proposal 4)**
- **limits on hot food takeaways near schools and colleges (Theme 3-proposal 6)**

Please explain

Impact on businesses

We have produced a number of Impact Assessments (IA) to assess the potential impact of the proposed policies. The IAs include modelling of a range of options against each proposal. Through this modelling we have established the best options to pursue and seek stakeholders' views on. As a result, we are not consulting on all the options that were modelled in the IAs. The following questions will help us gather further evidence and gain insight into the issues raised in the impact assessments.

Q26. We have calculated illustrative transition costs in both impact assessments. Do these calculations reflect a fair assessment of the costs that would be faced by your organisation/business?

Yes/No

If no, please provide any further evidence which could be used to improve our estimates. If you are referring to a specific calculation in one of the IAs, please state which one(s).

Q27. Do you have any further evidence or data you wish to submit for us to consider for our final impact assessment or any specific comments on the methodology or assumptions made?

Yes/No.

If yes, please provide further evidence which could be used to improve our estimates. If you are referring to a specific IA question or calculation, please state which one(s).

Glossary

National Diet and Nutrition Survey

The National Diet and Nutrition Survey (NDNS) rolling programme is a continuous, cross-sectional survey. It is designed to collect detailed, quantitative information on the food consumption, nutrient intake and nutritional status of the general population aged 1.5 years and over living in private households in the UK. The survey covers a representative sample of around 1000 people per year. Fieldwork began in 2008 and is now in its eleventh year.

Net Zero Wales Plan

The Net Zero Wales plan is a five-year plan of action that shapes the next stage of the country's pathway to net zero by 2050.

The plan responds to the latest advice from the Climate Change Committee (CCC), the UK's independent adviser on tackling climate change, which set out a credible, affordable path for Wales to achieve net zero greenhouse gas emissions by 2050. It also focuses on creating a greener, stronger, fairer Wales.

Eatwell Guide

The Eatwell Guide is a policy tool used to define government recommendations on eating healthily and achieving a balanced diet.

UK Scientific advisory committee

SACN advises on nutrition and related health matters. It advises the Office for Health Improvement and Disparities (OHID) and other UK government organisations.

Nutrient Profiling Model

The Nutrient Profiling Model (NPM) was developed by the Food Standards Agency in 2004- 2005 to provide Ofcom, the broadcast regulator, with a tool to differentiate foods on the basis of their nutritional composition, in the context of television advertising foods to children. This model covers foods and drinks on a 100g basis and uses a scoring system based on four 'negative' factors (energy, total sugars, saturated fat and sodium) versus three 'beneficial' factors (fruit, vegetables and nuts, fibre and protein). Scores related to each of these are calculated and the total score from the 'beneficial' factors subtracted from the total score of the 'negative' factors. A food or drink scoring above a certain threshold is classed as 'less healthy'. The thresholds are four for a food and two for a drink.

This is the approach the UK Government has proposed to use to restrict promotions of less healthy food in England, and adopting the same approach would provide consistency for the food industry, as well as for consumers. An NHS Health Scotland rapid [evidence review⁵⁹](#) of approaches to classifying unhealthy food and drinks identified that the UK NPM has the strongest body of validation evidence of all available models.

However, it was developed fifteen years and has not been updated to reflect the latest UK Government recommendations for sugar (which are half that previously) or

fibre (which increased to 30g). There are therefore some products such as sugary children's cereals which the NPM would not score as 'less healthy' despite containing what is now classified as high levels of sugar.

UK Government asked Public Health England to review the model in 2016, and a modified Nutrient Profiling Model was published for consultation on 24 March 2018. This has not yet been signed off by UK Government and is not available for use.

This option would see all products that score in line with the NPM requirements not permitted for the specified promotional offers.

Front of pack nutrition labelling

The UK front of pack nutrition labelling scheme was developed for pre-packed foods and drinks sold through retail outlets. It attributes a banding of red/high, amber/medium or green/low to fat, saturated fat, sugar and salt. There are separate criteria for food and drinks. In the main they are determined on a per 100g/ml basis, but there are also 'per portion' criteria for red which are applied to food products sold in portion sizes greater than 100g and drinks served in portion sizes over 150 ml. These additional criteria ensure that products which contribute more than 30% (for food) and 15% (for drinks) of an adult's recommended daily maximum intake for a particular nutrient are labelled as red/high for the respective nutrient, regardless of their content per 100g/ml.

The low cut off is based on the "low" nutrition claim for fat, saturates, total sugars and salt in the EU Nutrition & Health Claims Regulation legislation (EC) 1924/2006. The high band is set at 25% of the RI for that nutrient as specified in EU Regulation No. 1169/2011 on the provision of food information to consumers (EU FIC) (for food, 12.5% RI for drinks).

This option would see all products which would qualify for 1 or more red lights under the front of pack nutrition labelling scheme not permitted for the specified promotional offers.

Soft Drinks Industry Levy

In 2016, the UK Government announced the introduction of the Soft Drinks Industry Levy to help reduce children's sugar intakes by encouraging manufacturers to reformulate their drinks. The levy came into effect on the 6th of April 2018.

A drink is liable for the Soft Drinks Industry Levy if it meets all of the following conditions:

- It has had sugar added during production, or anything (other than fruit juice, vegetable juice and milk) that contains sugar, such as honey
- It contains at least 5 grams (g) of sugar per 100 millilitres (ml) in its ready to drink or diluted form
- It is either ready to drink, or to be drunk it must be diluted with water, mixed with crushed ice or processed to make crushed ice, mixed with carbon dioxide, or a combination of these
- It is bottled, canned or otherwise packaged so it is ready to drink or be diluted

- It has a content of 1.2% alcohol by volume (ABV) or less

A detailed list of what is classed as sugar for the purposes of the levy can be found in the guidance published by [HM Revenue & Customs](#)⁶⁰.

The levy doesn't apply to drinks that are:

- At least 75% milk
- A milk replacement, like soya or almond milk
- An alcohol replacement, like de-alcoholised beer or wine
- Made with fruit juice or vegetable juice and don't have any other added sugar
- Liquid drink flavouring that's added to food or drinks like coffee or cocktails
- Infant formula, follow on formula or baby foods
- Formulated food intended as a total diet replacement, or dietary food used for special medical purposes

Again, a more detailed explanation of the products excluded from the levy can be found in the guidance published by HM Revenue & Customs.

Calorie Reduction Programme

On average, both children and adults are consuming too many calories on a regular basis. Amongst the government's commitments in the *Childhood obesity: a plan for action* was for Public Health England to lead a structured and closely monitored programme to improve every day food and drink. As part of this Public Health England developed the calorie Reduction Programme to encourage manufacturers to revise and reformulate their products to lower the number of calories they contain.

The list of product categories to be included within the calorie reduction programme will be confirmed after engagement with stakeholders. However, Public Health England have indicated that the following product categories will be included in the programme:

- Bread with additions (e.g. olives, cheese etc.)
- Crisps and savoury snacks
- Savoury biscuits, crackers and crispbreads
- Potato Products (e.g. chips, croquettes, mashed potato etc.)
- Sausages (raw and cooked) and sausage meat products, frankfurters, hotdogs and burgers
- Meat, fish and vegetarian pastry pies and other pastry products
- Cooking sauces and pastes
- Table sauces and dressings
- Pasta/ rice/ noodles with added ingredients and flavours
- Ready meals with carbohydrate accompaniment (potato, rice, noodles, pasta, etc.) – fish, meat and meat alternatives
- Meal centres without carbohydrate accompaniment (potato, rice, noodles, pasta, etc.) – fish, meat and meat alternatives

- Prepared dips and composite salads as meal accompaniments (e.g. coleslaw, potato salad, guacamole, salsa etc.)
- Pizza
- Egg products/ dishes (e.g. quiche)
- Food to go e.g. sandwiches boxed main meal salads etc.

These products have been included because they contribute significantly to children's calorie intakes and there is scope for substantial reformulation and/ or portion size reduction. A more detailed list of products and the reformulation targets can be found in the guidance published by Public Health England⁶¹.

Sugar Reduction Programme

A further commitment in the *Childhood obesity: a plan for action* was to launch a broad structured sugar reduction programme to remove sugar from everyday products. All groups of the population, particularly children, are consuming far too much sugar. This increases the risk of excess calorie consumption and weight gain, which, over time, can lead to obesity.

The sugar reduction programme challenges manufacturers to revise and reformulate their products to reduce the amount of sugar they contain. A list of product categories included in the programme is below:

- Breakfast cereals
- Yoghurt and fromage frais
- Biscuits
- Cakes
- Morning goods
- Puddings
- Ice cream
- Sweet confectionary
- Chocolate confectionary
- Sweet spreads
- Milk based drinks and fruit juices

These products have been included because they contribute significantly to children's sugar intakes. Again, a more detailed list of the products included in the scheme and the reformulation targets can be found in the guidance published by Public Health England⁶².

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