

CHILDREN’S RIGHTS IMPACT ASSESSMENT

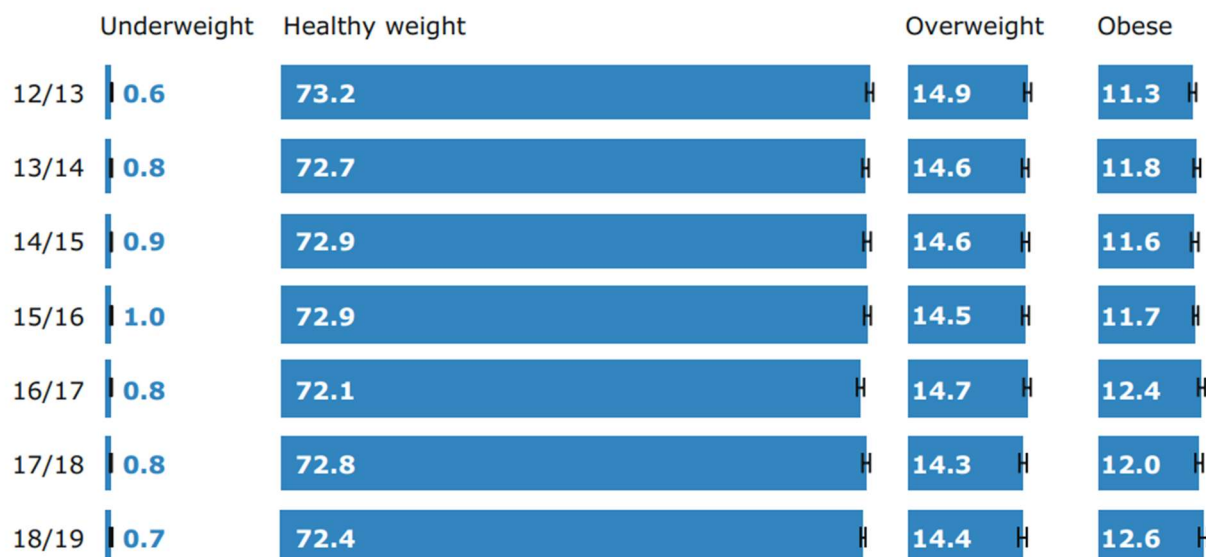
Describe and explain the impact of the proposal on children and young people.

The [Child Measurement Programme](#) from 2018/19, which relates to children attending reception class in a school in Wales, shows that over a seven year period there is not any statistically significant difference across the years in prevalence of healthy weight or overweight. However, there has been a small but statistically significant rise in obesity prevalence between 2012/13 and 2018/19. The drop in the proportion of children with a healthy weight is not statistically significant.

Figure 1 – summary of results at national level

Percentage of children aged 4 to 5 years who are underweight, healthy weight, overweight or obese, Child Measurement Programme for Wales, 2012/13 to 2018/19

Produced using CMP data (NWIS)



There are still 26.9% of children starting reception school who are overweight or obese, compared to 22.6% in England and 22.4% in Scotland in this age group. Furthermore, children are significantly more likely than the Welsh average to be obese, if they live in areas of higher deprivation. The gap between obesity prevalence in the most and least deprived quintiles has increased from 5.9% in 2017/18 to 6.9% in 2018/19.

We also know that COVID-19 has impacted on children’s health. Whilst data has not been collected in Wales for a two year period, we know that in England a representative sample through the [Child Measurement Programme](#) was collected. This shows that in reception, obesity prevalence has increased from 9.9% in 2019/20 to 14.4% in 2020/21 and in Year 6, obesity prevalence has increased from 21.0% in 2019/20 to 25.5% in 2020/21. This includes a further widening of the gap, including where children living in the most deprived areas were more than twice as likely to be obese, than those living in the least deprived areas.

The [Healthy Weight: Healthy Wales ten year strategy](#) sets out our ambitions to tackle obesity across Wales and highlights the multi-component approach which will be required to support a significant step change to impact positively upon the health of the nation. Data shows that children and adults in Wales are not eating balanced diets. 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.

Obesity tracks from [children into adulthood](#), where obese children and adolescents are around five times more likely to be obese in adulthood than those who were not obese. Over 60% of the adult population are overweight or obese and this has a direct impact upon a range of chronic diseases and in terms of years lived in disability. Obesity is a leading cause of preventable death and chronic disease. For many children or adults with obesity, the experience of weight stigma and bias contributes significantly to stress, anxiety and depression and can lower self-confidence, self-esteem, and self-worth.

Proposals and Impacts

The proposals set out in the consultation aim to consider four specific themes/ areas across children's health. This includes:

- Healthier Shopping Baskets – to restrict all prime location placement and; price, volume and multi buy promotions in healthier products in food and drink retailers.
- Healthier Eating out of our Homes – to mandate calorie labelling at the point of sale and restrict serving sizes of sugary soft drinks in the out of home sector.
- Healthier Local Food Environments – to seek views on what further support could be provided to help improve the availability of healthy food in local communities and, whether existing planning and licensing support should be reviewed including guidance to address the distribution of HFTs, particularly close to Secondary Schools and Colleges.
- Energy Drink Restrictions - to restrict the sale to under 16 year olds

The proposals intend to benefit the health of children and are not designed to increase disadvantage between individuals or groups. Voluntary action by industry to support the public to make healthier choices (reformation, nutrition labelling etc.) has not been delivered consistently nor have the desired impact on dietary shift. These proposals will ensure a level playing field, mandate the provision of information, restrict promotion of unhealthy food and incentivise healthy reformulation.

There is a range of evidence which sets out how each of these areas will have an impact.

- Healthier Shopping Baskets - Marketing and promotions in stores are extensive, deep and effective at influencing food preferences and purchases. Price promotions appeal to people from all demographic groups and frequently lead people to buy more of the promoted category than expected. However, [children are uniquely vulnerable](#) to the techniques used to promote sales. The proposal is intended to reduce children's high in fat, salt or sugar overconsumption and improve the wider food environment by making the healthy choice, the easy choice, this is intended to reduce health related inequalities for children in a positive way.

- Healthier Eating Out of the Home - it is regular overconsumption of a relatively small number of calories that leads to individuals becoming overweight or obese. 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. Prior to the Covid-19 pandemic around one in five meals were eaten outside of the home and portions are bigger and generally contain more calories, fat, sugar and salt. We also wish to build on measures introduced through the sugar levy to limit overconsumption of sugar sweetened drinks. The proposal aims to reduce the number of calories children consume and, in combination with a number of other interventions, reduce the prevalence of childhood obesity, which will have a positive impact.
- Healthier Local Food Environments - Our local food environment has a pivotal role to play in promoting a healthy diet and can strongly influence our purchasing behaviours. 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. A [UK-wide survey 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. The proposal aims to consider ways to improve the local food environment positively towards healthier options for children and to consider how measures could be introduced to limit exposure to hot food takeaways.
- Limiting the sale of energy drinks - Energy drinks are legally required to display warnings that they are not recommended for children due to their high caffeine content. Despite these warnings, we know that some children are regularly consuming these products with detrimental effects to their health. [Research shows](#) that up to a third of children in the UK are consuming at least one energy drink a week, with high levels of consumption linked to headaches, sleep problems, alcohol use, smoking, irritability and school exclusion. The proposal aims to improve children's health positively, by limiting the sale of energy drinks to over 16 years of age which will aim to improve a range of positive health outcomes.

[Analysis by Public Health England](#) suggests children with disabilities are more likely to be obese than those without disabilities. Overweight and obesity in children and young people has also been linked to a range of disabling conditions, including learning disabilities, physical activity limitations, spina bifida as well as audio-visual impairments. The policy is intended to have a positive impact on disability.

There is a significant inequality gap related to health inequalities, with the greatest obesity rates present in communities where there are higher deprivation levels. There are considerations in terms of the cost of the proposals, particularly in relation to price promotions. However, whilst promotions may make products cheaper, they also encourage people to buy 18% more food and drink than planned. It is not the intention or aim of this policy to increase the cost of food for consumers.

Engagement

The Healthy Weight: Healthy Wales strategy is overseen by a National Implementation Board, this includes representation from the Youth Parliament and the Children's Commissioner. The impact of obesity on children and young people has been considered throughout the development of both the strategy and the proposals set out within the consultation. We intend to consult directly with a range of children and young people during the consultation and intend to hold a range of specific focus groups to gather views. We have also appointed five Ambassadors (including a Children and Youth Ambassador) as part of the Healthy Weight: Healthy Wales strategy who will be undertaking direct engagement with children and families. We have produced an Easy Read version of the document which aims to increase access. We will work with the Welsh Network of Healthy Schools Scheme to encourage engagement on the issues with children and young people and work with a range of groups, including through the Sport Wales Youth Ambassadors programme.

Explain how the proposal is likely to impact on children's rights.

The proposals set out in the consultation support the following articles of the United Nations Convention on the Rights of the Child:

- Article 3 – all organisations concerned with children should work towards what is best for each child.
- Article 24 - children have the right to good quality health care and to clean water, nutritious food and a clean environment so that they will stay healthy.
- Article 27 - Children have a right to a standard of living that is good enough to meet their physical and mental needs.

The proposals in the consultation aim to maximise children's rights to access health and nutritious food which will help to support healthy growth. We know that obesity tracks with children throughout life and instilling healthy habits at a young age will help to mitigate a range of risk factors. There is also an increase in chronic illnesses amongst children, such as type II diabetes, which are attributed to dietary behaviours.

Changing the food environment is intended to increase the range of choice and availability of healthier products for children and young people. We want children to have the rights to access healthier foods and to reduce barriers for many families to help enable choices which promote better health. This will support positive changes alongside a range of other measures which are set out in the Healthy Weight: Healthy Wales strategy and supporting delivery plan.