

HEALTH IMPACT ASSESSMENT

Context and background of the Regulations

To address the challenge of rising rates of obesity and overweight, Welsh Government has announced the introduction of The Food (Promotion and Presentation) (Wales) Regulations 2025; new legislation to restrict the promotion and presentation of high fat, salt and sugar foods within the retail environment and sugary drinks refills that are typically offered by some out of home food businesses. These Regulations are intended to form the first in a package of measures under the 'healthy food environment' theme of Welsh Government's Healthy Weight: Healthy Wales Strategy.

Links to Organisational Wellbeing Goals

Both The Food (Promotion and Presentation) (Wales) Regulations 2025 and the wider Healthy Weight: Healthy Wales strategy of which they are a part of were developed in the context of and to support the wellbeing goals set out within The Wellbeing of Future Generations (Wales) Act 2015. Most notably, the Regulations aim to support the creation of 'A Healthier Wales' and 'A More Equal Wales' by making changes to the food environment so that the healthier choice becomes the easier choice for all Welsh consumers. In doing so, the aim of the Regulations and the overarching Healthy Weight: Healthy Wales strategy is to create the conditions for people to live healthier lives, free from obesity and diet-related conditions such as Type 2 diabetes.

Health Impact Assessment

A Health Impact Assessment (HIA) is a practical approach used to consider the potential health effects of a policy, programme or project on a population, particularly on vulnerable or disadvantaged groups. This assessment process produces recommendations for decision-makers and stakeholders, with the aim of maximising the proposed policy's positive health effects and minimising or even eliminating its negative health effects.

Welsh Government carried out a Health Impact Assessment of The Food (Promotion and Presentation) (Wales) Regulations 2025 prior to implementation as a means of understanding the potential impacts.

Stakeholders and Affected Groups Identified

Views on the Regulations, at various stages of their development, were gathered through consultation with stakeholders and relevant groups, including through two

public consultations. The Regulations will directly apply to medium-to-large food businesses and will be enforced by local authorities.

The impact of these proposals is intended to have an effect on the entire population of Wales. By making positive changes to retail food environments, the intention of the proposals is to make it easier for consumers to make healthier dietary choices and, over time, to sustain a healthy weight and remain free from diet-related ill health

Data, Evidence and Research

Poor diets are one of the most prominent public health challenges in Wales. Less than 1% of the GB population eat a diet reflective of government healthy eating advice, as shown in the Eatwell Guide, with profound consequences for the health of the population and the planet. As a result, around 60% of adults in Wales are now living with either overweight or obesity;¹ and living with a high body-mass index has been identified as the second biggest risk factor driving death and disability². In the most deprived areas of the country, premature mortality and years of life lost are around double those in the most affluent areas with poorer nutrition and higher rates of diet-related ill health amongst lower socio-economic groups contributing to these differences³. The inequality in health outcomes related to obesity can be seen across the life course with the Child Measurement Programme reporting that children residing in the least deprived '*deprivation fifth*' postcodes of residence are statistically significantly less likely to have obesity compared with all other deprivation fifths⁴.

Food environments have a significant impact on the dietary choices we make as consumers. In supermarkets, 40% of food and drink bought in UK stores is on promotion, the highest in Europe⁵, and research suggests that these promotions are most prevalent among products high in fat, sugar or salt for example, biscuits (33.9%) and confectionery (36.1%)⁶. Similarly, a recent UK survey showed that 43% of all food and drink products located in prominent areas, such as store entrances, checkouts, and aisle ends were for sugary foods and drinks⁷. 70% of these products in prominent areas were for food and drinks that contribute significantly to children's sugar and calorie intakes and less than 1% of food and drink products promoted in high profile locations were fruit or vegetables⁸. The importance of product location within stores is recognised by manufacturers, who are willing to pay retailers to ensure prominent positioning in-store⁹. Research shows that consumers' food purchasing behaviours are significantly influenced by in-store product placement,

¹ [Overweight and Obesity - Public Health Wales](#)

² [United Kingdom - Wales | Institute for Health Metrics and Evaluation](#)

³ [Years of Life Lost - Public Health Wales](#)

⁴ [CMP 2022-23 - Public Health Wales \(nhs.wales\)](#)

⁵ [Sugar reduction: from evidence into action - GOV.UK \(www.gov.uk\)](#)

⁶ Kantar Worldpanel Take Home Purchasing | 52we data to 29 Dec 19

⁷ The Obesity Health Alliance. (2018). Out of place – The extent of unhealthy foods in prime locations in supermarkets

⁸ Ibid.

⁹ [systematic review of the influences of food store product placement on dietary-related outcomes | Nutrition Reviews | Oxford Academic](#)

which can encourage overeating¹⁰. Regular overconsumption is one of the key factors contributing to weight gain and, over time, obesity¹¹. Although some HFSS products will be purchased as part of a balanced diet and may not contribute to excess consumption and obesity, they nevertheless represent the most focused group of products to reduce excess calorie consumption, as they are widely available and often overconsumed.

Research from Public Health England indicates that SSBs account for 29% of total free sugar consumption for teenagers 11-18 years and 16% for those aged between 4-10 years¹². Free refills of sugar-sweetened beverages (SSBs) can also encourage excess consumption¹³. Consumption of SSBs has been positively correlated with increased obesity, chronic diseases and greater risk of dental issues¹⁴. The calorie intake from SSBs contain little nutritional value, with high levels of free sugars, and tend to not satisfy hunger in comparison to solid food¹⁵. Total consumption of SSBs may therefore increase while consumption of foods with more nutritional calories decreases correspondingly, which may cause weight gain and increased obesity over time¹⁶.

Excessive consumption of foods high in fat, salt and sugar, as encouraged by promotional strategies can lead to a variety of health harms for individuals, alongside obesity itself. These include:

- Cancer
Based on current trajectories, the numbers of people diagnosed with cancer in Wales will rise from the almost 20,000 diagnosed per year between 2017-19 to almost 25,000 by 2040¹⁷. Overweight and obesity are the second biggest cause of cancer in the UK, causing more than 1 in 20 cancer cases¹⁸. Research also suggests that those who do develop cancer are less likely to recover from the disease if they are also living with obesity^{19,20,21}.
- Type 2 diabetes

¹⁰ Cargill, K. (2015) *The Psychology of Overeating: Food and the Culture of Consumerism*. London: Bloomsbury Academic

¹¹ [Calorie reduction: The scope and ambition for action](#)

¹² [Why 5%?](#)

¹³ [Psychologically Informed Implementations of Sugary-Drink Portion Limits - Leslie K. John, Grant E. Donnelly, Christina A. Roberto, 2017](#)

¹⁴ [Carbohydrates and Health](#)

¹⁵ [9789241549028_eng.pdf;jsessionid=6698D92F7C9A601EFD7B35FA684958C3](#)

¹⁶ Ibid.

¹⁷ [Shaping Our Health - Chief Medical Officer for Wales Annual Report 2023](#)

¹⁸ [The fraction of cancer attributable to modifiable risk factors in England, Wales, Scotland, Northern Ireland, and the United Kingdom in 2015 - PubMed](#)

¹⁹ [Association of BMI with overall and cause-specific mortality: a population-based cohort study of 3-6 million adults in the UK - PubMed](#)

²⁰ [Premorbid body mass index and mortality in patients with lung cancer: A systematic review and meta-analysis - PubMed](#)

²¹ [Obesity and Diabetes: The Increased Risk of Cancer and Cancer-Related Mortality - PubMed](#)

There has been a 40% increase in the number of adults living with all types of diabetes since 2009/10. Around 90% of those cases are Type 2 diabetes which is related to poor diet, an aging population and excess weight and obesity. If current trends continue, around 1 in 11 adults will be living with diabetes in Wales by 2035/36²².

- Cardiovascular disease

In Wales, ischaemic heart diseases (also called coronary heart disease) - damage to the heart caused by narrowing of the arteries - remained the leading cause of death in July 2023²³. Poor diet and obesity are widely recognised to increase an individual's risk of developing the condition. Researchers have estimated that by reducing population-level consumption of foods high in salt and trans fats by relatively conservative amounts (a 3g/day reduction in salt and a 0.5 reduction in industrial trans fats) across England and Wales, approximately 2700 deaths from health disease could be prevented annually²⁴.

- Poor dental health

In 2022/23, 32.4% of school year 1 children in Wales were affected by tooth decay. Across Wales, children from more deprived backgrounds experience higher levels of prevalence and severity of tooth decay²⁵. Free sugars in products such as sugary drinks, cakes and confectionary products are the main dietary factor contributing to the development of dental caries. As a result, the World Health Organisation recommends that free sugars should form no more than 10% of a person's overall energy intake.

- Muscular skeletal conditions

It is now estimated that musculoskeletal problems affect up to a third of Wales' population. The rise in the number of people affected by these conditions has been linked with increased levels of physical inactivity and obesity²⁶. These conditions are estimated to cost NHS Wales around £430 million per annum²⁷.

²² [Diabetes prevalence – trends, risk factors, and 10-year projection - Public Health Wales](#)

²³ [Monthly mortality analysis, England and Wales - Office for National Statistics](#)

²⁴ [Effectiveness and cost effectiveness of cardiovascular disease prevention in whole populations: modelling study | The BMJ](#)

²⁵ [Oral Health Intelligence - Public Health Wales](#)

²⁶ <https://publichealthwales.nhs.wales/about-us/board-and-executive-team/board-committees/committee-meetings/knowledge-research-and-information-committee/202425/5-september-2024/papers-5-september-2024/3-1b-kric-2024-09-05-promoting-health-behaviours-update-presentation/>

²⁷ <https://phw.nhs.wales/services-and-teams/healthy-working-wales/workplace-guidance/employees-with-health-needs/musculoskeletal-health/musculoskeletal-conditions-infographic/>

Wider Determinants of Health

The Regulations are designed to make it easier for people to make healthier dietary choices and avoid diet related harm. As part of the screening stage of this Health Impact Assessment, the impacts of the proposals on wider determinants of health were considered for all population groups, including children and young people; all income related groups and those with protected characteristics under the Equality Act 2010. Given the nature of these regulatory proposals, the most significant positive impacts identified related to the physical and mental health of individuals, which can be negatively affected by overweight and obesity.

The impact of the proposals on the wider determinants of health for lower socio-economic groups was considered in detail, concluding that the Regulations are expected to have an overall positive impact on this population group – especially given that individuals in lower socioeconomic groups are more likely to experience obesity or diet-related harm than those from wealthier backgrounds²⁸. More detail on the evidence that was reviewed as part of this assessment can be found in the ‘population groups’ section below.

Consultation

Key external stakeholders, the general public and cross-government policy officials have been fully engaged at each stage of the development and delivery of the proposals set out with The Food (Promotion and Presentation) (Wales) Regulations 2025.

In 2022, we undertook our first public consultation on the proposals and this consultation was accompanied by extensive stakeholder and public engagement. This included:

- stakeholder events aimed at the food industry and non-governmental organisation (NGOs)
- focus groups aimed at our public priority groups
- wider public engagement to include roadshow events.

The stakeholder engagement events aimed to capture in-depth stakeholder feedback and insight of food industry and NGO representatives. The focus groups were aimed at the following priority groups:

- older primary aged children (age 10 – 11)
- secondary aged children
- young people (age 16 – 25)
- parents and carers (from babies to teenagers)
- people from socio-economic groups C1, C2, D and E
- people on weight loss journeys
- people from black and minority ethnic backgrounds

²⁸ [Socioeconomic disadvantage is linked to obesity across generations, UK study finds | The BMJ](#)

- people aged 45 and over.

In 2024, Welsh Government consulted again on draft regulations and a proposed enforcement approach. The main audience for this consultation was comprised of industry and enforcement bodies with whom we engaged with informally alongside the consultation to seek their views and respond to queries. We also set up engagement groups with industry and enforcement groups to co-produce the guidance that will accompany the Regulations to ensure it is as helpful as possible for those who will need to comply or monitor compliance with restrictions.

We plan to continue this engagement throughout the 12-month implementation period to support businesses and enforcement bodies to prepare for the Regulations coming into force. We will also be engaging with a broad range of external and Welsh Government stakeholders to design and implement a programme of evaluation for the Regulations to assess their impacts, including any unintended impacts.

Population Groups

As part of the standard Welsh Government consultation process, both consultations for these proposals asked respondents to consider the potential impact of the Regulations on particular population groups via the following question:

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

The majority of respondents to both consultations agreed that the Regulations would have an overall positive impact on the health of all population groups by enabling and supporting them to make healthier dietary choices. Respondents most commonly noted the benefits of the measures for children – especially restrictions on free refills which they felt were primarily targeted at children, leading to excess free sugar intake. We did, however, receive a number of consultation responses which raised concerns about the impact of the Regulations on the price of a food shop for lower-socioeconomic groups.

As a result of these comments received, we carried out further analysis of the possible impacts of the Regulations on lower socio-economic groups, which included discussions at our Health Impact Assessment steering group meetings. Although price promotions appear to be mechanisms to help consumers save money, data shows that they increase consumer spending by encouraging people to buy more

than they intended to buy in the first place. Price promotions appeal to people from all demographic groups and increase the amount of food and drink people buy by around 20%²⁹. Multibuy promotions result in £75 additional spending per year for an average household. This, in turn, is offset by £61 of non-incremental purchasing, therefore the total impact of multibuy promotions is an overall additional expenditure of £14³⁰.

While people may purchase promoted items on the assumption that the additional quantity bought will be offset by reduced purchases later (having long-term cost savings), this does not consider people's subconscious motivations in the food choices they make³¹. This can lead to increases in consumption frequency and the quantity eaten which could lead to excess calorie consumption³². Moreover, research by Kantar on the food and drink market indicates that as inflation has increased in recent years, shoppers have sought to reduce their spend through trading down to supermarket own brand products³³, which are less likely to be offered as part of a promotional offer³⁴. These own-brand products also tend to be a healthier option for consumers compared to their branded counterparts³⁵.

Our assessment at this stage is that the Regulations will have an overall positive impact on lower-socioeconomic groups and help to reduce the significant health inequalities surrounding obesity and diet-related ill health, which currently contributes to a significant gap in life expectancy between the most and least deprived communities³⁶. These health inequalities come at both a huge personal cost to individuals and families and also a substantial cost to our health system³⁷. Given the complexity of these considerations, however, we will be continuing to monitor these impacts as part of our evaluation program for the Regulations and considering what additional actions can be taken alongside the Regulations to directly increase the affordability and accessibility of healthier foods.

Conclusions

The evidence reviewed as part of the development of this Health Impact Assessment supports the need for action to improve food environments and, in doing so, adopt

²⁹ [Sugar reduction: from evidence into action - GOV.UK](#)

³⁰ Hill, R. et al. Kantar. An analysis of the role of price promotions on the household purchases of food and drinks high in sugar. 2019

³¹ [Improving the effectiveness of nutritional information policies: assessment of unconscious pleasure mechanisms involved in food-choice decisions | Nutrition Reviews | Oxford Academic](#)

³² Chandon P, Wansink B. (2002) When are stockpiled products consumed faster? A convenience-salience framework of post-purchase consumption incidence and quantity. J. Mark. Res. 39:321–35

³³ [UK grocery price inflation hits record 14.7% and still too early to call the ceiling](#)

³⁴ [Investigating the healthiness of food products on promotion: market brands and own brands | Emerald Insight](#)

³⁵ Ibid.

³⁶ [Wellbeing of Wales, 2023: a healthier Wales \[HTML\] | GOV.WALES](#)

³⁷ <https://phw.nhs.wales/publications/publications1/cost-of-health-inequality-to-the-nhs-in-wales/>

healthier diets. Whilst the positive impacts of the Regulations will take time to emerge at a population level, they are expected to include a reduction in levels of obesity and diet-related disease and, as a result, a reduction in pressures on NHS and social care services. These impacts, including unintended effects on different groups, will need to be carefully monitored over time to ensure that the expected benefits of the Regulations for public health are realised.