Sugar Tax Debate - UK Parliament

30th November 2015

Briefing for MPs

prepared by

Obesity Action Scotland
1.0 Background and Position

Sugar is constantly hitting the headlines due to recent developments in evidence and calls for new policies to reduce the levels of sugar consumption across the UK population. The recent support for Jamie Oliver’s petition to “Introduce a tax on sugary drinks in the UK to improve our children’s health” has led to UK Parliament holding this important debate on 30th November 2015. Outlined within this document are some important facts and figures related to this issue.

We face a significant challenge in the epidemic of obesity and overweight within Scotland and the UK. The NHS and economic costs are and will continue to be a significant burden unless new measures to tackle this epidemic are taken. We would call on the UK and Scottish Government to introduce new measures immediately.

Diet is complex – no single policy will solve the problem and we need to tackle more than sugar. However, we currently consume three times the amount of sugar that we should and we need to introduce a package of measures to reduce this intake. A sugar tax as part of a wider package of measures could be an important step in shifting the dietary patterns of the population. Educational messages alone will not achieve the level of reduction we need to see and fiscal and reformulation measures need to be introduced.

2.0 Obesity in Scotland – facts and figures

**Adult Obesity and Overweight.¹**

- In Scotland in 2014, 65% of adults were overweight, including 28% who were obese. That is two in three people are overweight or obese.
- Levels of overweight and obesity (measured by mean body mass index) have not changed significantly between 2008 and 2014, the picture has worsened since 1995.
- Whilst rates are not rising significantly, the prevalence within Scotland is unacceptably high.
- International comparisons indicate that Scotland has above average levels of adult overweight and obesity.
- Based on recent OECD figures Scotland has the second highest rate of obesity in adults in Europe, only Hungary has a higher rate.
Childhood Obesity and Overweight.

- In Scotland, in 2014, 31% of children were at risk of becoming overweight (including obesity) and 17% were at risk of becoming obese.
- Levels of obesity and overweight have been fairly stable in recent years but some years in the past have shown significant fluctuations.
- There is evidence that being obese in childhood increases the risk of becoming an obese adult.

Consequences

- Being obese or overweight can increase the risk of developing a range of serious diseases, including type 2 diabetes, hypertension, heart disease, some cancers and premature death.
- For example Type 2 diabetes is almost 13 times more likely to occur in obese women than in women of normal weight.
- Many of the diseases that arise in association with obesity shorten life expectancy by 2 to 4 years for those with class 1 obesity (BMI 30-35) and by 8 to 10 years for those with a BMI between 40 and 50.

How much sugar should we eat?

- According to the SACN (2015): free sugars should not exceed 5% of total dietary energy intake.
- Current Scottish Dietary Goal for sugar is less than 11% (this is likely to be revised to 5% in the light of SACN recommendation).
- Current free sugar intake in Scotland is 14.4% for adults and 15.6% for children.
- We currently consume three times the amount of sugar that we should.
Costs of Obesity

- It has been estimated that overweight and obesity may be responsible for NHS costs in Scotland of anything between £363 million and £600 million.
- Average NHS costs for people with a body mass index of 40 (severe obesity) are estimated to be twice those for people with a BMI of 20 (within normal weight range).
- The costs to the health service of obesity and its comorbidities may be comparable to that attributable to smoking.
- Healthcare expenditure is only part of the issue there are also indirect economic costs.
- The McKinsey Institute estimate that the cost to the UK is equivalent to 3% of gross domestic product.
- This analysis takes into account: loss of productivity attributable to loss of life or impaired life quality, direct health care costs, and investment to mitigate the impact of obesity.

3.0 The case for a Sugar Tax

It is recognised that there is no single solution to tackling obesity or achieving dietary goals. The Scottish Government Obesity Route Map, the recent ScotPHN review of the Obesity Route Map and the Public Health England evidence all recognise that a broad plan of action is required. No one action will solve the problem of sugar overconsumption, but we believe it is necessary to introduce taxation or a levy given the scale of the problem we face. A sugar tax is one of many important measures for consideration and would form a key element of a package of measures.

Sugar and obesity

Consuming too many foods and drinks high in sugar can lead to weight gain and related health problems. Research in adults shows that increased intake of sugar leads to an increase in total energy intake. Reduction in sugar intake can be achieved either through the substitution of other macronutrient or by replacing sugars with non-caloric sweeteners. Research in children and adolescents shows that consumption of sugar-sweetened beverages, as compared with non-calorically sweetened beverages, results in greater weight gain and increases in body mass index.

Sugar and dental caries

- A diet high in sugar causes tooth decay.
- The frequency and amount of sugar consumed are the key factors.
- One third of hospital elective procedures involving an anaesthetic for young Scottish Children (5-9 years old) in 2013/14 were for dental extractions.
- Evidence shows that limiting sugar intake will minimise the risk of dental caries.
The evidence for a sugar tax and the difference it would make

Modelling work undertaken by the University of Oxford concluded that a 20% tax on sugar sweetened drinks would lead to a reduction in the prevalence of obesity in the UK of 1.3%. This would equate to a reduction in number of obese people in Scotland by 15,200 and a reduction in those overweight and obese of 27,400.

The same study indicates that the greatest effects would occur in young people and that taxation of sugar sweetened drinks is a promising population measure to target obesity, particularly among young adults.

Public Health England have listed a sugar tax as part of their recommendations of measures necessary to help tackle obesity.

The evidence that PHE analysed to produce its report indicates that

- Increased prices on unhealthy food and drink results in a decrease in purchasing and sales
- Sales data from five countries indicate that existing taxes reduce purchases, although there are no official evaluations
- Taxation may be regressive, having a higher impact on those from lower income groups, but this is believed to be progressive if this strategy reduces sugar consumption

Sugar taxes have been introduced in various other countries including France, Hungary, Finland, Norway, Australia, USA, and Mexico. Whilst robust evaluations of these taxes are not available at this stage, there are indications of decreases in purchases of soft drinks/sugar sweetened beverages of between 4 and 10% in European countries following the implementation of taxes.

Who drinks sugary drinks?

- Sugary drinks are the top category of drinks purchased outside home in Scotland
- Adults in Scotland consume 3.3% of total energy from sugary drinks
- Sugary drinks contribute 23% of free sugar intake
- In comparison, confectionery and biscuits contribute 24% of free sugar intake

Who supports the calls for a sugar tax?

Obesity Action Scotland strongly support the calls for a sugar tax to be introduced as part of a wider package of initiatives to influence the obesogenic environment. A phased introduction starting with sugary drinks offers the most practical method of introducing a tax. Obesity Action Scotland is currently considering the most appropriate mechanisms for delivery of such a tax including excise duty, sales tax or adjusting the current VAT system.

Over 60 other health based organisations also support such a tax including the BMA, the Faculty of Public Health, British Heart Foundation and Academy of Medical Royal Colleges.

A recent survey by Pulse Magazine of GPs (November 2015) found that 67% supported a tax on food with high sugar content. A survey of public health professionals (October 2015) found that 70% supported a hypothecated sugar tax.
What do the public think?

A recent survey by Food Standards Scotland\(^{xiv}\) found that 54% of those surveyed would be very happy or quite happy if the price of unhealthy foods was increased (through putting a tax on them). Females and adults with children were significantly more likely to say they would be very/quite happy with this.

Other public surveys this year have demonstrated support for a sugar tax ranging from 37 – 45%.

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About Obesity Action Scotland

Obesity Action Scotland (OAS) is a new unit that was established in summer 2015 to provide clinical leadership and independent advocacy on preventing and reducing overweight and obesity in Scotland. It is funded by a grant from the Scottish Government and hosted by the Royal College of Physicians and Surgeons of Glasgow on behalf of the Academy of Medical Royal Colleges and Faculties.

The main aims of the Group are:

- To raise awareness and understanding of what drives obesity and the health problems associated with obesity and overweight with health practitioners, policy makers and the public
- To evaluate current research and identify strategies to prevent obesity and overweight based on the best available evidence
- To work with key organisations in Scotland, the rest of the UK and worldwide, to promote healthy weight and wellbeing

The Steering Group of OAS has members across various disciplines involved in preventing and tackling obesity and its consequences e.g. clinicians, public health experts, epidemiologists, nutritionists and dieticians, GPs and weight management experts. There are three members of staff for OAS.

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\(^{iv}\) UK National Audit Office.


\(^{viii}\) Scientific Advisory Committee on Nutrition, 2015, Carbohydrates and Health

\(^{ix}\) ISD website, accessed 25.11.2015 [http://www.isdscotland.org/Health-Topics/Hospital-Care/Inpatient-and-Day-Case-Activity/](http://www.isdscotland.org/Health-Topics/Hospital-Care/Inpatient-and-Day-Case-Activity/)


\(^{xiii}\) Sustain, 2013. A Children’s future fund: how food duties could provide the money to protect children’s health and the world they grow up in. [www.sustainweb.org/publications/?id=263](http://www.sustainweb.org/publications/?id=263)

\(^{xiv}\) Food Standards Scotland, 2015. Attitudes to diet and health in Scotland 2015.