

Consultation on the Global NCD Action Plan 2013-2030 - Appendix 3
Response from Obesity Action Scotland
Closing date: 24th June 2022

We welcome this opportunity to comment and share our thoughts on the Unhealthy Diets section of Appendix 3 of the Global NCD Action Plan 2013-2030.

We are pleased to see the inclusion of many upstream policy approaches which span various sectors. Interventions aimed at addressing causes of unhealthy weight gain over the life course are crucial, and so the policy proposal H5 to support breastfeeding in early years is encouraging to see.

We also believe it is important to continue that support throughout the rest of the life course. There are some significant omissions in this regard, such as universal free and nutritious school meals to ensure healthy development of children throughout childhood and adolescence.¹ At the other end of the spectrum, more support also needs to be offered to older adults and we would like to see a policy area aimed at improving dietary and physical activity outcomes specifically for people in this age group, as is outlined in the WHO European Regional Obesity Report 2022.¹ Discussion of policy interventions across the life course should follow the correct definition of malnutrition. We welcome the WHO's definition of this term which includes all of undernutrition, micro-nutrient malnutrition, and overweight and obesity.² We would like to see this used consistently and explained in all communications to prevent confusion and unnecessary conflicts in policy action.

Another area that demands greater attention is that of advertising and specifically its impact on children and their food preferences. Although this may be implicit in intervention H7, we feel this description is too vague and that advertising of unhealthy foods should be a priority intervention in itself. There is now an abundance of evidence indicating the negative effects of advertising on children, including children's likeability of unhealthy brands and increased intake of foods high in fat, salt and sugar (HFSS) as a result of exposure to adverts.^{3,4,5} The WHO has previously published multiple policy recommendations to help protect children from marketing, including developing nutrient-profile models to determine whether foods can be marketed or not,⁶ and these should all be encompassed within a separate intervention in Appendix 3. The European Public Health Alliance also recently published an extensive list of evidence-based interventions to protect children from health-harming marketing which should be considered.⁷ Policymakers in some countries are now starting to act to regulate in this area^{8,9} and it would be useful if the Unhealthy Weight section included an explicit intervention to ban all advertising of HFSS food and drink aimed at children to encourage others to follow suit.

The WHO European Regional Obesity Report 2022 also emphasises the need to focus on groups who are most socioeconomically disadvantaged as they tend to have higher rates of obesity and poor health as a result of diet.¹ Targeted policy interventions are missing from the current list and it could be improved by including special initiatives to help the most vulnerable in society. These might

include limiting the number of unhealthy takeaway outlets in low-income areas, and provision of food vouchers for healthy food options.¹

Finally, national sugar taxes (H6) should extend beyond only sugar-sweetened beverages (SSBs) to include all added sugar in processed foods. There is evidence that taxes are effective at guiding industry towards healthier practices, such as the UK Soft Drinks Industry Levy in the UK.¹⁰ However, a more expansive policy would encourage reformulation towards healthier recipes across all food groups which would likely have a greater impact at a population level.¹¹

References

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