

## MUNICIPAL YEAR 2015/2016

### MEETING TITLE AND DATE Health and Wellbeing Board 10 December 2015

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Regeneration and Environment

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Agenda - Part: 1	Item: 3
<b>Subject:</b> Recommendations on sugar consumption	
<b>Wards: All</b>	
<b>Cabinet Member consulted:</b>  <b>Cllr Daniel Anderson</b>	
<b>Approved by:</b>	

### 1. EXECUTIVE SUMMARY

Sugar consumption has been a controversial issue for a number of years but the Scientific Advisory Committee on Nutrition (SACN) has now made a number of recommendations which have been accepted by the Government. These are:

- no more than 19g/day of free\* sugars for children aged 4 to 6
- no more than 24g/day for 7 to 10-year olds
- no more than 30g/day for children from age 11 and adults

### 2. RECOMMENDATIONS

The Board is asked to note the recommendations made by SACN and consider how these recommendations may be implemented.

### 3. BACKGROUND

#### Introduction

In September 2015 the HWB asked for a paper to come to the Board on system leadership. Obesity represents a considerable cost to the health and social care economy (some £84m) and sugar consumption is associated with this. Equally Enfield has some of the worst dental public health figures in London. Sugar is an issue upon which the respective partners of the HWB have various levers and through which the HWB can demonstrate both internal and external leadership. This paper seeks to outline the rationale and options that the HWB might like to explore in this role.

#### Background

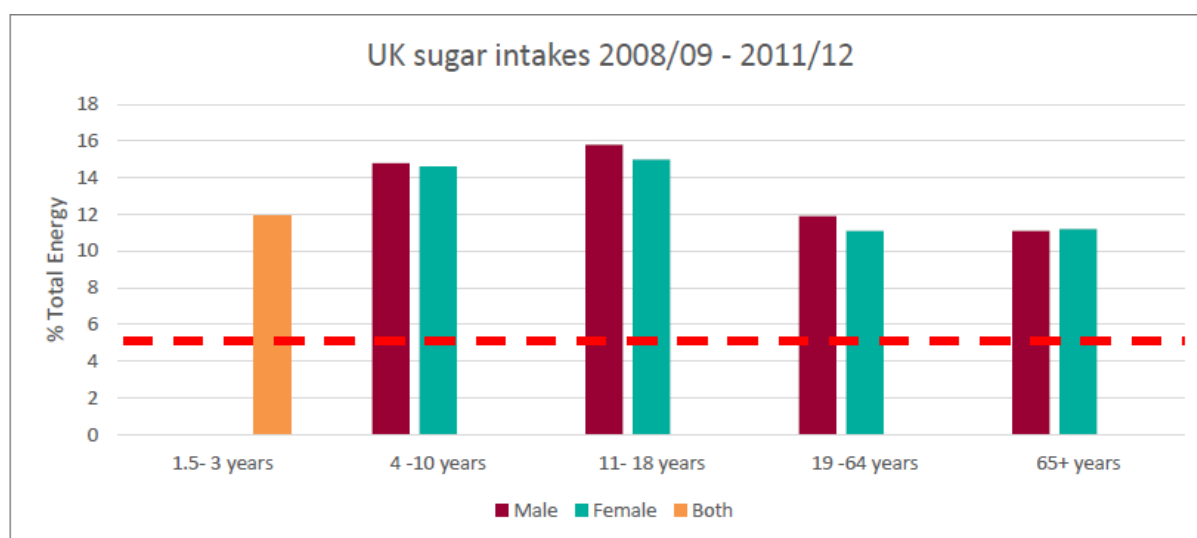
Sugar consumption has been a controversial issue for a number of years. The Scientific Advisory Committee on Nutrition (SACN) was asked by the

Government to examine the relationship between dietary carbohydrates (sugars, starches and fibre) and health. A draft report for consultation was produced in June 2014 and a final report in July 2015.

SACN found that a high intake of free sugars is detrimental to several health outcomes including tooth decay, obesity and type 2 diabetes. It also found that in adults consuming an unrestricted diet that increasing or decreasing the proportion of calories consumed as sugars leads to a corresponding increase or decrease in energy intake and that children and adolescents who drank sugar-sweetened drinks compared to low calorie drinks experienced greater weight gain and increases in Body Mass Index (BMI).

SACN therefore recommended that average sugar intake should not exceed 5% of total energy dietary intake in all age groups from 2 years of age. No quantitative recommendations are made for children under the age of 2 years due to the absence of information. But from about 6 months of age, gradual diversification of the diet to provide increasing amounts of whole grains, pulses, fruits and vegetables is encouraged. Current average dsugar intakes in all age groups are at least twice the new recommendations and three times higher in 11 to 18-year olds (Fig 1). The main sources are sugars-sweetened drinks (including carbonated drinks, juice drinks, energy drinks, squashes and cordials); cereal-based products (biscuits, cakes, pastries and sweetened breakfast cereals); table sugar and confectionery; and fruit juice.

Fig 1: UK sugar intake compared to the recommended maximum of 5% energy, by age.



The new dietary recommendation for free sugars is designed to minimise the health risks associated with high free sugars intakes and to result in improved management of energy intake, reducing this across the population by an average of 100kcal/day (418kJ/day). This is expected to beneficially influence the risk of obesity and also to improve dental health.

SACN therefore made the following recommendations:

- Free sugars should account for no more than 5% daily dietary energy intake.
- The term free sugars is adopted, replacing the terms Non Milk Extrinsic Sugars (NMES) and added sugars. Free sugars are those added to food or those naturally present in honey, syrups and unsweetened fruit juices, but exclude lactose in milk and milk products.
- The consumption of sugar-sweetened beverages (e.g. fizzy drinks, soft drinks and squash) should be minimised by both children and adults.

Public Health England (PHE) has translated the above recommendations into:

- no more than 19g/day of free sugars for children aged 4 to 6 (5 cubes / teaspoons of sugar)
- no more than 24g/day for 7 to 10-year olds (6 cubes / teaspoons of sugar)
- no more than 30g/day for children from age 11 and adults (7 cubes / teaspoons of sugar)

It is estimated that per year benefits of achieving a 5% energy intake from sugar would be to avert 4700 deaths, 242,000 dental caries and save the NHS £576 million.

### **How this might be implemented in Enfield.**

Whilst a number of national actions may or may not be implemented the following actions may be considered in Enfield:

- Distribute more widely the LBE poster indicating the amount of sugar in various drinks etc (Appendix 1)
- Promoting alternatives to sugary drinks such as water, milk, 'diet' and sugar-free alternatives
- Work with the Local Authority workforce to reduce the amount of sugary food that is brought in (for example – only bring in celebratory food on a Friday)
- These recommendations to be considered in future school catering contracts
- Ensure water fountains in parks
- Improving the food and drinks on offer in public buildings and spaces
- Building good food and drinks offers into contracts with local authority venues such as leisure centres, parks and swimming pools
- Implement government buying standards for food and catering services
- Support local food businesses, such as takeaways, to promote healthier eating through training as well as incentives and reward schemes
- Brighton and Hove has introduced a voluntary 10p sugar tax on all sugary soft drinks with the proceeds going to a children's health and food education Trust

- Action on vending machines in Local Authority and health care settings to provide healthy options
- Ensure that Voluntary and Community groups that receive funding through the Local Authority have a nutrition policy

### **Potential impact in Enfield**

Enfield has the 4<sup>th</sup> highest rate of adult excess weight in London (64.8%) and obesity doubles between Reception Year and Year 6 (from 12% to 24%). Sustain has estimated the potential impact of 5 - 20% sugary drinks duty at a local level. In Enfield it is estimated that a 20% levy would result in:

- 264 fewer cases of diabetes
- 180 fewer cases of CVD & Stroke
- 47 fewer cases of bowel cancer
- £1,608,894 in healthcare cost savings

#### **4. ALTERNATIVE OPTIONS CONSIDERED**

None

#### **5. REASONS FOR RECOMMENDATIONS**

The above are recommended to the Board for consideration.

#### **6. COMMENTS OF THE DIRECTOR OF FINANCE, RESOURCES AND CUSTOMER SERVICES AND OTHER DEPARTMENTS**

##### **6.1 Financial Implications**

None until any recommendations are implemented

##### **6.2 Legal Implications**

None until any recommendations are implemented

#### **7. KEY RISKS**

#### **8. IMPACT ON PRIORITIES OF THE HEALTH AND WELLBEING STRATEGY**

- 8.1** Ensuring the best start in life
- 8.2** Enabling people to be safe, independent and well and delivering high quality health and care services
- 8.3** Creating stronger, healthier communities
- 8.4** Reducing health inequalities – narrowing the gap in life expectancy
- 8.5** Promoting healthy lifestyles

The report from SACN indicates that all the above priorities will be positively impacted by a reduction in sugar consumption

## **9. EQUALITIES IMPACT IMPLICATIONS**

The worst rates of obesity and tooth decay are in wards and areas of health inequalities, a reduction in sugar consumption would impact positively on these.

# Appendix 1:



**Be part of a healthier Enfield:  
Cut out sugary drinks**

[www.enfield.gov.uk/meds](http://www.enfield.gov.uk/meds)

