

Response from the Obesity Alliance Cymru

This is a response on behalf of the Obesity Alliance Cymru. The OAC is an Alliance of charities, health organisations and Royal Colleges with an interest in preventing and reducing obesity in Wales. Together we are a strong voice with a comprehensive evidence base. Current members are:

Cancer Research UK, Royal College of Paediatrics and Child Health, Diabetes UK, British Dietetic Association and dietitians from LHB's, British Medical Association, British Heart Foundation, Royal College of Physicians, Bowel Cancer UK, Tenovus, Welsh NHS Confederation, Chartered Society of Physiotherapy, Royal College of Surgeons of England, Nesta, Royal College of Nursing, Royal College of Occupational Therapists, Royal College of Podiatry, British Psychological Society, Royal College of Psychiatrists.

Proposal to end the sale of energy drinks to children under 16

Consultation questions

Q.1 Do you agree with the proposal to ban the sale of energy drinks to children under 16?

- Yes
- No – the mandatory age limit should be 18
- No – there should be no mandatory age restrictions
- Not sure
- Other (please specify)

Yes

We support a complete ban on businesses selling energy drinks to children. A mandatory ban will create a level playing field for retailers who have already taken voluntary action, ensuring that they are not penalised for acting in the interest of public health. Sugar levels in some energy drinks exceeds a children's maximum daily recommendation.ⁱ A 2011 study identifying that children in the UK consume more energy drinks than many other EU nations,ⁱⁱ with energy drinks often sometimes cheaper than bottled water.

Q.2 Should the ban be widened to consider other drinks typically high in caffeine such as tea and coffee?

- Yes
- No
- Not sure

Please explain

Q.3 Do you agree that the ban should cover all shops, including through online environments?

- Yes
- No
- Not sure

Please explain

Yes

We agree that the restrictions should also apply to online shopping, to reflect the increasing trend of people shopping online and to ensure a level playing field with retailers that only operate online.

Q.4 If children are prevented from buying energy drinks from vending machines, how should this be done?

Please explain

Q.5 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

If yes, which and please explain

Q.6 We would like to know your views on the effects the consultation would have on the Welsh language, specifically on opportunities for people to use Welsh and on treating the Welsh language no less favourably than English. What effects do you think there would be? How could positive effects be increased, or negative effects be mitigated?

Please explain

Q.7 If there are any further matters that you would like to raise or any further information that you would like to provide in relation to this consultation, please give details here.

Many of the member organisations of Obesity Alliance Cymru endorsed the recent Welsh NHS Confederation and Royal College of Physicians paper, Mind the gap: What's stopping change? The cost-of-living crisis and the rise in inequalities in Wales. This calls for a cross-government approach to tackling health inequalities by consolidating commitments on inequality in one delivery plan to improve accountability, introducing health impact assessment regulations as a priority, providing more detailed guidance on implementation to local delivery bodies and improving access to prevention programmes, especially for those living in poverty.

Wider social determinants of health include access to healthy food and drink: this is why we need to shift the focus from the NHS to addressing factors such as poor housing, transport and food quality. Addressing the factors that cause ill-health in the first place should be a central focus for the Welsh Government. After all, "deprived areas have on average nine times less access to green space, higher concentrations of fast-food outlets and more limited availability of affordable healthy food," The King's Fund. This is why we need to bring all commitments, targets and measures on inequalities and poverty into one overarching delivery plan so that we can ensure that everyone is working to the same end goal.

ⁱ Hashem KM, He FJ, MacGregor GA, Cross-sectional surveys of the amount of sugar, energy and caffeine in sugar-sweetened drinks marketed and consumed as energy drinks in the UK between 2015 and 2017: monitoring reformulation progress. *BMJ Open* 2018;**7**:e018136. doi: 10.1136/bmjopen-2017-018136 ([website](#))

ⁱⁱ Zucconi S., Volpato C., Adinolfi F., Gandini E., Gentile E., Loi A., Fioriti L.; 2013. "Gathering consumption data on specific consumer groups of energy drinks". *Supporting Publications* 2013; 10(3):EN-394. [190 pp.]. doi: 10.2903/sp.efsa.2013.EN-394 ([website](#))