



Food, Diet and Obesity Committee

Corrected oral evidence: Food, diet and obesity

Thursday 14 March 2024

10.45 am

Watch the meeting

Members present: Baroness Walmsley (The Chair); Baroness Boycott; Lord Brooke of Alverthorpe; Baroness Browning; The Earl of Caithness; Lord Colgrain; Baroness Goudie; Baroness Jenkin of Kennington; Lord Krebs; Lord McColl of Dulwich; Baroness Pitkeathley; Baroness Ritchie of Downpatrick.

Evidence Session No. 7

Heard in Public

Questions 77 - 89

Witnesses

[I](#): Nikita Sinclair, Interim Head, Children's Health and Food Programme, Impact on Urban Health; Julia Thrift, Director, Healthier Place-Making, Town and Country Planning Association; Alice Wiseman, Director, Public Health, Gateshead Council.

Examination of witnesses

Nikita Sinclair, Julia Thrift and Alice Wiseman.

Q77 The Chair: Good morning, everyone, and welcome to this public meeting of the House of Lords Food, Diet and Obesity Committee. Today, we are holding the seventh evidence session of the committee's inquiry exploring the role of foods such as ultra-processed foods and foods high in fat, salt and sugar in a healthy diet and in tackling obesity. The committee will continue taking oral evidence over the coming weeks in order to inform its detailed report to be published later this year. We have also published a call for written evidence, which is open until 8 April, and that can be accessed on the committee's website.

We will hear today from Nikita Sinclair, the interim head of the children's health and food programme at Impact on Urban Health, and Julia Thrift, director of healthier place-making at the Town and Country Planning Association, who are both joining us in person, and from Alice Wiseman, director of public health at Gateshead Council, who is joining us remotely. You are all very welcome and we are looking forward to your evidence this morning. I will ask you to briefly introduce yourselves the first time you speak to answer a question.

Today's meeting is being broadcast, and a written transcript will be sent to the witnesses prior to publication to check for any inaccuracies. I refer to the list of members' interests, including my own, which are published on the committee's website, and we set them all out in the committee's first evidence session on 8 February. I would like to repeat very briefly what I said at the start of the 7 March evidence session. It would be inconsistent with Lords committee procedure to compel our witnesses to declare any interests, so for the sake of transparency we will give our witnesses the opportunity to declare voluntarily any interests that they deem relevant to the work of the inquiry the first time they speak.

Having said all that, I would like to move to the first question. How do local environments affect diet and rates of obesity? What role does deprivation play in these?

Julia Thrift: I work at the Town and Country Planning Association, the TCPA. The TCPA is a charity that works nationally and beyond the UK. We campaign for a world that has homes, places and communities in which everyone can thrive. I have no other interests to declare.

My area of expertise is the built environment and the way it is planned, designed and managed. The Foresight report on obesity, which is now 17 years old, talks about obesity being caused by an imbalance between energy consumed and energy expended. There may be other factors. We are now hearing more about things like sleep being possibly connected to obesity, but I will stick with the idea that it is a fairly simple equation about calories in and energy expended.

The Foresight report talks about two ways in which the built environment might contribute to that. It is about places that make it easy and

attractive for everyone to be physically active. There is a lot that planning can do to shape places to make it easy for people to be active, but that is not what your committee is interested in. It also talks about the way planning shapes the food environment. There is a very famous diagram in the Foresight report of the many influences on obesity—the spaghetti diagram. Planning is perhaps two strands in that huge bowl of spaghetti. One is physical activity, and the other is diet and food.

Changing planning and the built environment is not the silver bullet to creating a better food environment, but it has a role to play. If you are going to take a whole-systems approach to tackling obesity, planning is something that needs to be considered, even though its role is perhaps fairly small.

Thinking about the role of the built environment in shaping the food that people eat, we could start by thinking about people's homes. The homes that are built in this country are some of the smallest in Europe. In 2019, the Royal Institute of British Architects' research suggested that more than half of new homes built today are too small for the needs of the people who move into them. We have a nationally described space standard, which is a modest standard for the size that new homes should be, but it is voluntary, not mandatory. Many councils, particularly in areas of low land values, would struggle to make it mandatory, because developers would be able to say, "We can't afford to do that".

One impact of that is that often nowadays the kitchen in a new home is a corner of the living room. In worst cases, it might just be a microwave in the corner of the living room. That will make it very difficult for people, if they are able to buy fresh vegetables, to cook from scratch, because if your kitchen is tiny you cannot store the fresh food or the utensils. If you batch cook and you do not have room for a freezer, you cannot freeze that food. So the homes that we live in are something to consider. At the TCPA, we are campaigning for all new homes to be of a quality that will support the health of the people who will live in them. The homes that we build today will be with us for decades, if not hundreds of years. Generations of people will live in them, so we can start with the home.

Moving out of the home, there is the local environment. Planning shapes things like whether there is space for food markets, whether people have gardens, or whether there are allotments or community gardens where they can grow food. Those things may not provide all the fresh fruit and vegetables that people need, but they normalise the idea of growing and eating fresh food, so they also help with cultural change.

One of the things that I would like to draw to the attention of the committee is the way the built environment is shaped is determined by the national planning policy framework. Food and health are not mentioned in that framework until paragraph 96. Planners have to balance all sorts of different things when making their decisions, and national planning policy reflects this—there is the economy, the environment, jobs, transport, schools and so on—but planning policy

should place a much higher priority on creating places where it is easy for everyone to live a healthy life.

There should be a statement at the beginning of planning policy that says that planning should create places where people can live a healthy life. It should also help to tackle health inequalities. It has a role to do that as well. English planning policy does not even mention health inequalities. Many other national planning policies, such as the Scottish and the Welsh ones, do, and they see that planning has a role in helping to tackle health inequalities. Although English planning policy mentions food, health and allotments, they are low priorities. That means that it is quite an uphill battle for councils that want to take a strong role in tackling public health issues such as obesity, because planning inspectors will say, "That's just one of many things. Why are you focusing on that?" That means that they have to provide an enormous amount of evidence, so it makes it an uphill battle.

The Chair: Thank you. Perhaps we could go to Alice next, given that local authorities have just been mentioned.

Alice Wiseman: I agree with everything that the previous speaker has just said. I will also go back to the fact that, as you will know from all your evidence-gathering sessions over the last few weeks, we have seen a massive increase in overweight and obesity across the population since the 1970s. My starting point is that it is not possible for a whole generation of people to lose willpower at the same time. We need to start thinking about the population measures that we can take to address this as an issue, rather than always thinking about individual interventions. That is a key point here.

We know that the environment around us influences the choices that we make. There is so much evidence that is emerging now about greater exposure to ultra-processed foods associated with higher levels of consumption. There are also some great examples of practice, such as Transport for London, which has reduced promotions, which has an impact in the reduction in household calorie consumptions. This needs to be addressed, as I said, as a population measure rather than focusing solely on individuals.

Inequality, as we know, is a significant issue in local authorities up and down the country. The most deprived parts of our communities experience the highest levels of overweight and obesity. This is largely driven by the price of food for these communities. Healthy foods are three times more expensive per calorie than less healthy foods. Energy-dense foods of poor nutritional value are much cheaper.

In spite of all the issues that we have in the cost of living crisis, we see that people in more deprived communities tend to spend about double the percentage of their income compared to those in more affluent communities, so price is an important issue when it comes to the availability of food. Data from our local national child measurement programme shows that this is absolutely the case. In some of our most

disadvantaged communities, up to half of our children are overweight by the time they leave primary school. This is not a case of families not caring about the food that they are providing them with. A group of families in Gateshead that we did a year-long piece of research with said, "We're more concerned about our children going to bed hungry than we are about what they are eating". So we cannot underestimate the impact of price.

Promotions are also another huge issue. We see that 40% of food sales come from promotions. We know that promotions are more likely to be for those unhealthy food choices. We know that people are using these during the cost of living crisis, with buy one, get one free offers, but the majority is consumed as additional calories rather than allowing people to manage their incomes and budgets.

We need to think about population measures, price and promotions, and the availability of healthy and unhealthy food if we are going to tackle this as an issue.

The Chair: Alice, you were so keen to get into the nitty gritty there that you did not tell us about your role with Gateshead Council. Would you mind, just for the record?

Alice Wiseman: Sorry about that. I am director of public health in Gateshead, and soon to be director of public health across Newcastle and Gateshead. I am also the vice-president of the Association of Directors of Public Health, which is a membership organisation, so I represent the members' views of this as an issue rather than just my own views as Alice in Gateshead.

The Chair: Thank you, Alice. Nikita, would you like to give us a brief introduction and then turn to the question?

Nikita Sinclair: First, I want to thank you for inviting me to speak with you today. I work at Impact on Urban Health, which is part of Guy's and St Thomas' Foundation, which is one of the largest health foundations in the UK. Our work focuses on making urban areas healthier places to live. I currently co-lead our programme looking at the relationship between children's health and food.

To answer your question about local food environments and deprivation, I will echo a lot of what has been said, in particular by Alice, but I want to focus on the fact that we have learned from our programme that what surrounds us shapes us. At the moment, children in many areas cannot access the food that they need to thrive. I will give you a tangible example from one of the boroughs we work in, Southwark, in south London. Two neighbourhoods—Camberwell and Dulwich Village—are less than two miles apart. A child growing up in Camberwell, which is a more deprived neighbourhood, is almost three times more likely to experience food-related ill health than their neighbour in Dulwich, which is the most affluent part of Southwark.

I want you guys to imagine what it is like for a child living in an area like Camberwell, which is more deprived. When you leave your house, you are genuinely up against a flood of unhealthy cheap food options, and there is barely a trickle of healthy affordable food. Whether you are on the food shop with your parent, going to a convenience store, which we know are disproportionately relied upon by low-income families, or in the supermarket, as Alice has mentioned, healthy food is much more expensive, but you are also seeing a saturation of cheap unhealthy food options. At the same time, you are being bombarded with advertising in your local area that is telling you that these products are made for you, that they are tasty and that you should be eating them. They are putting them centre stage in your mind.

We have done some analysis in our boroughs and, if you are on the way to school in a more deprived neighbourhood, you might pass up to 17 fast food takeaways. In the immediate walking vicinity of your school, there might be about seven. Taking you back to Dulwich Village, which is the most affluent part of the borough, you might pass seven takeaways, with none around your school. When you get into school, it is down to chance at the moment as to whether you will get a hot, nutritious meal.

All of this is to make clear what families living in low-income areas are up against. For the rest of the session, I am keen to focus on what government can do, because there are lots of solutions that you have heard previously and will hear today. I want to shine a light on those.

Q78 **Baroness Ritchie of Downpatrick:** You are all very welcome. In your view and the view of your association, what are the causes of unhealthy local food environments? What role does the food industry play? You can focus on costs, lack of culinary skills, access to cooking tools, cookers, fridges and refrigerators—Julia referred to the small house and the small space in which people sometimes have to cook in—as well as stress, time poverty, actual poverty, other types of inequality and anything else that you would like to say.

Alice Wiseman: Recognition has been emerging over the last few years of the commercial drivers of ill health, and unhealthy food is one of those commercial products, alongside tobacco, alcohol and gambling. When we are thinking about those things, the industry plays a significant role in shaping our environment. As the previous speaker said, we are bombarded by messaging from industry. We know that the vast majority of marketing material is on unhealthy, ultra-processed food, and we know that the billions of pounds spent on that is spent for a reason—it is in the commercial interests of private sector partnerships.

One significant issue is that there are around 10 top food manufacturers across the world, and the majority of their products involve us eating this unhealthy food, so it is in their interests, understandably, for them to maintain the status quo. We see these food producers promoting research that they have funded which is in conflict with their interests. We see evidence of public/private sector partnerships favouring commercial sector objectives, particularly the thinking on the focus on

the role of personal responsibility. A lot of that is supported by this industry narrative. We also know that food companies spend the majority of their marketing money promoting foods that are unhealthy. In 2022, the World Health Organization found that there was a link between the level and frequency of adolescents' exposure to food advertising and consumption.

We have all this evidence in front of us, and we know that the industry has a strong role in promoting the maintenance and increasing the availability of this unhealthy food. We know that unhealthy food is cheaper to produce, easier to transport and easier to keep and to sustain. We know that families in our most disadvantaged communities are often being pushed into a position where they cannot make some of the choices that some of our more affluent families can make.

I will refer to the research that we did in our most disadvantaged ward in Gateshead, where families said, "We know that the food that we're feeding our children is not necessarily the healthiest choice. We don't want our children to be overweight like we are, but we are concerned about them going to bed hungry". Poverty is a significant driver that is pushing people to use the products that are being promoted, made available and placed in terms of price availability. We also know that more disadvantaged communities have less access to good-quality, highly healthy foods, and that all of this is impacting on individuals and families and the choices that they can make.

In public health, we are just at the point where we are starting to think about those commercial drivers. It is different, but think about the work done on tobacco since the 1960s. The Royal College of Physicians published its first report linking tobacco and cancers in 1962, and there was a big push-back from industry. Over the last few decades, as we have restricted the marketing and promotion of those products, people have been able to make different choices. That is where we need to get to with all these commercial drivers of unhealthy products, particularly food. We want to make food more affordable for people in more disadvantaged communities, but we also need to ensure that the food we are providing them with is healthy and nutritious. It is not okay that we have kids who are overweight but malnourished at the same time.

On the economic drivers of doing something about this, it is costing our economy about £58 billion at the moment to address the issues of overweight and obesity, so there is a real economic driver in the broader sense in taking action on these issues. We need to protect health policy from the commercial interests of industry. We need to accept that where things have been done in a voluntary capacity, such as the voluntary codes, they are not effective, and that things have been effective where they have been regulated. With the soft drink levy, for example, we saw a massive reduction in sugar content, but that was because it was required and fiscal measures were put in place to ensure that industry adhered to it.

Q79 **Baroness Boycott:** I ran the London Food Board for a long time, and we

had a big problem with companies like Coca-Cola wanting to sponsor playing fields. On the whole, we tried to resist, but it was complicated, because you were up against a borough that had a zero budget. I feel very worried about the association of sport and health with Red Bull, Prime, and Coca-Cola at the Olympics. Do you get those kinds of pressures at your council?

Alice Wiseman: That is a massive issue, and that is why some of these things need to be tackled nationally rather than locally. You have a real challenge, when you are in a local authority with very limited resources, balancing the benefits of having the World Cup or something played in your area against the sponsorship of that particular thing. There is a balance that needs to be struck in local authorities at the moment: do the economic benefits of having something outweigh the potential challenges and risks?

We see this work in places where they have taken this on at a national level and looked at reducing subsidy and sponsorship, particularly of sports programmes. I absolutely agree with your comments. There was a big drive, particularly by Coca-Cola but by others too, to link themselves to sport and to say that we can have an energy balance: that we can eat all this food, and drink all these drinks, provided that we take exercise at the same time.

The evidence coming through now suggests that that is not the case. Although exercise is really important and good for your mental health and well-being, it is not a significant driver when it comes to overweight and obesity and it is our food environment that needs to be addressed. It would be great if there was stuff done at a national level to help us do this locally.

Q80 **Baroness Ritchie of Downpatrick:** Maybe Nikita could provide us with some information about the causes of local unhealthy food environments, and the role of the food industry. You are looking particularly at the impact on urban health, so could you give us something about that?

Nikita Sinclair: A lot of what I will say echoes what Alice is saying. The first important point to make is that this distinction between local and national food environments is a false one. We might have local independent convenience stores, but these are often stocked by national wholesalers. You might have a local supermarket, but the decisions are made nationally. Then you have global food and drink businesses that are, frankly, flooding these shelves with cheap, unhealthy food products. Our partner, Bite Back, did some research with Oxford University recently, which showed that these food and drink businesses are making the majority of their sales in the UK from unhealthy food products. In fact, for four of them, it is more than 75%.

I would encourage the committee to understand that, although we live in local areas, there are national and global interests that are shaping what we can access. The cause of this is a food system that does not incentivise the food industry to prioritise children's health. The good news

about that is that we can do things to redesign the food system and the incentives so that we can prioritise children's health.

One of the ideas that I would like to speak to you about today is about two roles that government can play. One is fostering innovation. We know that there is an issue with the flow of healthy, affordable food that is designed to meet families' needs, and particularly those living on low incomes. At the moment, there are 8,200 food and drink businesses in the UK. Since 2018, only 450 of them have been able to secure investment as there is a severe early-stage funding gap for food and drink businesses, so there is untapped potential and a role that government can play in encouraging that innovation by providing small grants to support and accelerate those products to scale. We have demonstrated how this can work through our Good Food Programme with Mission Ventures, where we've provided small grants of £15000 alongside expert support. When small-scale funding is combined with tailored business support, there is a decrease in failure of start-ups of 60%.

On the other side, super-important is regulation—Alice has talked about this already—signalling to businesses that children's health is important, either through taxes that support reformulation or through requirements for businesses to improve the proportion of their sales from healthier products. The big point is that government has a role in reshaping the incentives that the food industry is working with, and that will have a big impact on local environments.

Baroness Ritchie of Downpatrick: Julia, maybe you could concentrate on the areas that have not been referred to in relation to this question—the local food industry and the environment.

Julia Thrift: I have less to say about the food industry; other people have more expertise in that.

In terms of shaping the local environment, you can buy unhealthy food anywhere. You can buy it at the petrol station or in hot food takeaways—you can buy it all over the place. Planning and the built environment have a role to play, but they provide the stage, if you like. They do not say who the actors are or what the play is, if that makes sense. In a very crude way, planning can make decisions about hot food takeaways, but it does not say what food is going to be served anywhere. That is not the remit of planning. Planning can say, "This building might be a hotel. This one might be a school. This one might be a church". It cannot say, "Inside those buildings, these things will happen".

The role of planning in shaping the food environment is important but not all-encompassing, and it would be extremely helpful if more research was done into this. It is now 17 years since the Foresight report was published, and a lot has changed since then. We now have things like dark kitchens supplying food for takeaways. Some councils are introducing planning policies on dark kitchens, but that is much more about the nuisance that they might create to their neighbours rather than the food that they might be producing.

To make a significant change to the built environment, you need built environment professionals to be involved. At the moment, they are not very familiar with the concept of the food environment. Making it clear in planning policy that they have a role to play in shaping the food environment and that supporting good health and reducing health inequalities are important and legitimate parts of planning and should be prioritised in planning policy would be helpful.

The way people use built environments is complex. They have been described as systems of systems. We hear from teenagers, for example, that they hang around in fast-food outlets because they are warm, dry and welcoming for teenagers. In other parts of the public realm, teenagers often do not feel so welcome: "What are you doing? You're hanging around on the street. Why are you hanging around on the street?" Teenagers hanging around can be seen as threatening, so there is a question about where teenagers can go where they feel safe. We have heard a lot recently about perceptions of parks and green spaces and that young women often feel very unsafe there. Where are they supposed to go after school, particularly if they live in an overcrowded home?

These are very complex issues. The built environment has a role to play in them, and we need to understand more about that, but it also means joining up a lot of different policy agendas. Councils are well placed to do that. Oldham has a project called Northern Roots. It was initiated by the council, and it is an urban food-growing project about five minutes from the centre of Oldham. They grow food and provide skills. It is good for the climate. It does multiple things.

Part of the problem is that a lot of this involves multiple policy agendas and different departments, and a lot of joining up. In a whole-systems approach, the built environment has its role to play. Built environment professionals need to understand more about their role in shaping the food environment, but their role will always be one in a small system.

Q81 The Chair: Julia just mentioned dark kitchens. I wondered whether Alice and Nikita have any brief comment about them. It is a very recent development, I think.

Alice Wiseman: It is significantly concerning for us, because it is preventing us from taking the actions that we have potentially taken in the past. We are very lucky in Gateshead that we have some proactive and thoughtful planners. We have done quite a lot of work on our local plan and we have something on reducing the availability of unhealthy food as part of our health criteria. The emergence of these dark kitchens is preventing us from being able to take some of the action that we have taken on hot food takeaways, which I can comment on later in the discussion, if you are interested.

Nikita Sinclair: What is emerging for me, as Henry Dimbleby spoke about in his session, are the unintended consequences that can happen when you take one action that you think will create a positive impact on

food environments. The food industry will find a way to wriggle out of it, which speaks to the fact that we need comprehensive change that signals that we are prioritising and focusing on children's health here.

The Chair: Lord Colgrain's question follows on very nicely from what we have just heard.

Q82 **Lord Colgrain:** What role can local authorities and partner organisations play in developing healthier food environments? What are the barriers to effective action? Nikita, you talked about schools earlier. We have had comments directed towards us about the proximity of fast-food outlets to schools, the deliveries of fast food to schools, and ice cream vans being parked outside school gates at break time. What can local authorities do about this sort of thing?

Nikita Sinclair: I know that our partners, School Food Matters and Chefs in Schools, spoke a lot about that in their session. The main point that I want to focus on today is that there is loads of action that local authorities are taking to step up and prioritise children's health, but if we want to reduce inequalities and ensure that children's health is prioritised across the UK, national government needs to step up and play a role too.

It is good that you mentioned schools, because one way we can maximise the opportunity for children's health through schools is by increasing access to free school meals and the quality of food. Our partner, Southwark Council, is doing a lot of work locally to make school food amazing in Southwark in the absence of national action. For over a decade, Southwark Council has been funding universal primary free school meals. In the last year, they have extended free school meal eligibility to children on universal credit in secondary schools, and we have been working with them on a school food transformation programme where they have hired a school food improvement officer and are looking at a range of mechanisms to drive up the quality of school food in Southwark.

That includes training for school business managers to signal that they have an important role to play in school food and making sure that it is healthy, and supporting schools with procurement so that they have access to the skills and expertise to make sure that what they are procuring in school food is healthy, because it can be a real challenge for schools if their expertise is not in this area. Most importantly, they are thinking about monitoring and accountability to ensure that standards are met.

It is fantastic that Southwark can do that and that we, as a partner organisation, can support them to do that, but it is not right that children going to school in other areas of the country do not have access to that. It is important that government extends eligibility to free school meals immediately to universal credit. Ultimately, in the long term, universal free school meals are important, but that cannot happen without monitoring and accountability around school food standards.

Julia Thrift: I do not have a lot to add.

Alice Wiseman: I agree with everything that has been said. The focus in local authorities needs to be an approach that is health in all policies. Every policy decision that is made by a local authority should consider the health impacts. If they are positive health impacts, we can seek to maximise them. If they are negative, we can try to mitigate them. It is a foundation and a starting point that every decision needs to be considered against health and the impact that it has.

Gateshead was one of the first local authorities to restrict the availability of hot food takeaways, but it was in recognition of the fact that we already had more than most places in the country, so in some ways we were closing the stable door after the horse had bolted. In Gateshead, we said that it was not just about the availability around schools. We looked at where children and young people congregated and at where there were high levels of obesity. We looked at where there was an over-proliferation of hot food takeaways already, and at the clustering of hot food takeaways. Working alongside our planners, since 2015 we have not had a single new hot food takeaway agreed for Gateshead, and we have seen a reduction in the overall number of takeaways in the area.

There were issues with this, and I know that other colleagues who have done similar things elsewhere in the country have not been as successful, because there is a variation in the inspectors. We were challenged by one of the big companies that do not provide hot food takeaways. They are classed as restaurants, because they provide seating, but they have more money than we have at local authority level to challenge some of these things. We were lucky that the inspector who looked at our supplementary planning document upheld our position; I know that there are other parts of the country where this has not been the case. This variation for local authorities is unfair, because the work is exactly the same.

Loads of other good work is going on across the country. I have already mentioned work with Transport for London, and there are several local authorities in the country that are looking at restricting sponsorship and advertising on council-owned property. Again, we are starting to look at this in my local area, but we are limited, as one of the previous questioners asked earlier, given that local authorities are struggling financially at the moment. Any financial impact that that has on budgets is considered seriously, as you would expect, and it limits what people are prepared to do.

There are currently some loopholes in academies and free schools in relation to the 2010 to 2014 school food standards. Those need to be closed. We need to have another review of food standards in schools and to make sure that the children and young people who are receiving food in our schools, where we are responsible for them, are receiving the highest-quality food.

I absolutely agree with the point about the extension of free school meals. Again, that needs to be done nationally, because local authority budgets are so stretched at the moment.

The final point to make—there are probably many others—is about using a community development approach, whereby you look at the assets in a community and work with the community and voluntary sector partners that are already embedded in and trusted by those communities to understand the issues for people living in those places and to enable them to find the solutions themselves. Often, when we are flying into a community where we do not have an understanding of the context in which people are living, we provide solutions that we think would be right for us, when the people in the communities need to have a role in shaping the decisions that are made in their own communities and spaces. There are some great examples of work like that going on up and down the country.

Q83 **Baroness Boycott:** Nikita, what you have done in Southwark is brilliant, especially in extending it to secondary schools and universal credit. How are you paying for it? Do you get money from the Guy's and St Thomas' trust?

Nikita Sinclair: We are a charitable foundation. We have an almost £1 billion endowment, which we use to fund our charitable work. The extension to universal credit in Southwark is because the Mayor of London has extended funding for universal free school meals across the capital. Southwark has been able to use freed-up money to extend to universal credit as a result of that funding by the mayor. It is a choice by Southwark Council to invest in that.

Baroness Boycott: Alice, many councils do not have that choice because they do not have the money. Like loads of others, my council in Somerset is about to file a Section 114. Where would we get the money from? How would it work?

Alice Wiseman: That is an absolute issue. In Gateshead, it is about £1,000 per resident less than we had back in 2015, so we are grappling with significant challenges. Alongside that, we have the impact of the Covid-19 pandemic and the unfair way in which that landed in some of our most disadvantaged communities. We also have the cost of living crisis. Supporting people through the funding that we have from the household support fund and the extension that we have recently had on that for a further three months needs to be looked at in the longer term.

There are choices that we can make to do with the availability of resourcing. The £20 uplift that was given during the Covid-19 pandemic, which recognised the issue that families were facing, would need to be considered. I am interested in a piece of work written by a guy called Grant Ennis, and I would advise you to have a look at his book on subsidy. The Government provide an awful lot of subsidy to unhealthy food producers. We could reduce the subsidy that is provided for that food and use the money in a different way to do different things. He is

the expert in that, so I will not go any further than that on that particular point, but there are choices that could be made about how we tackle it.

Baroness Boycott: We will follow that up.

Q84 **The Earl of Caithness:** Following up on Alice's point, are the current controls on planning for on-street advertising fit for purpose, or do you, as a local authority, want more power to control advertising?

Alice Wiseman: We would love to have additional powers at a local authority level to take some of the action on this. At the moment, we can take action on council-owned land and properties, but we do not have the ability to take actions in other places. When we take action on our own council land, it just pushes the resources elsewhere, so it becomes a bit more of a challenge at a local authority level, where we are losing potential income and the exposure to the advertising is still seen by our communities. We are limited in what we can do at the moment about protecting people from this type of advertising and exposure.

The Earl of Caithness: Can you use it as a planning condition for a new billboard to say, "No ultra-processed food advertising"?

Alice Wiseman: I would have to pass this one to the expert in planning.

Julia Thrift: I would have to check that, but I do not think you can. This comes back to what I was saying earlier about planning being quite a crude tool in all of this. It can say where advertisements can go, but I do not think—I will have to check—that it can say what sorts of advertisements they are.

Q85 **Baroness Goudie:** Thank you for coming. I have found this morning so interesting. How effective are current local and national authorities in developing healthier food environments and reducing associated inequalities, including consultation with each other and joined-up policies, so that there is no duplication?

Nikita Sinclair: I will give one example of national policy and one example of some fantastic work that is happening locally. Nationally, we know that voluntary action by industry does not work. The most powerful thing over the last few years has been the soft drinks industry levy, which is proper regulation through the taxation system that has forced industry to make change. We have seen that, although sales of drinks increased by 15% in the four years after the introduction of the soft drinks industry levy, the amount of sugar that is being sold through those drinks has massively reduced, by 35%.

The takeaway here is the potential of tax, regulation and levies rather than the specifics. We are working with other partners such as Sustain and the Food Foundation on our Recipe for Change campaign, where we are looking at two options for a new levy on cheap unhealthy food. I can tell you more about that if you want the detail.¹

¹ Note from witness: The two potential models are an industry-wide levy on salt and

As for a local example, I would like to shine a light on our partner, Alexandra Rose Charity. I do not know whether you have spoken to them yet, but I think you should. We have been working with them since 2018 in Lambeth and Southwark. As an organisation, it provides vouchers for fruit and veg to families living on low incomes with young children. Those vouchers are used in local food markets, as Julia mentioned earlier, and in greengrocers. It is a fantastic example of how we create a positive incentive for a local food economy.

I was with a parent the other day who was telling me about how her daughter is now obsessed with fruit and veg. She loves going to the market, and she loves all the variety and the colour. They simply would not have been able to afford it before. We know from the evaluation that there is a similar impact across other families on the variety and amount of vegetables and fruit being eaten. When families start the programme, about 7% of children are having their five a day. Six months in, it is 64%.

Alexandra Rose is also piloting fruit and veg on prescription with another partner, AT Beacon, in Lambeth, and we are seeing positive results from that evaluation. I would just encourage you to reach out to Alexandra Rose, because it is a fantastic organisation.

The Chair: It is nice to hear such good things about a charity that one of our members, Baroness Boycott, was involved with. Is that right?

Baroness Boycott: I founded it.

The Chair: That is fantastic. Thank you.

Julia Thrift: I will come back to what Alice said about the need for health in all policies. We need to have health as a priority across a wide range of policies at a national and a local level. If we come back to planning policy, it needs to be clear that a central role of planning is to create places where people can live healthy lives, and that planning has a role in reducing health inequalities.

Without those strong statements, it becomes much harder at a local level to do things, because you are constantly having individual battles about individual places with individual bits of evidence, and then it comes down to the discretion of planning inspectors. My concern is that what is happening is that planning inspectors who are experts in the built environment but not in health and human behaviour are sometimes

sugar proposed in the National Food Strategy (NFS), and a category-based tax like SDIL (to include, for example, confectionary, but exclude staples like bread). Modelling commissioned by Recipe for Change and carried out by the London School of Hygiene and Tropical Medicine showed that the levy proposed by the NFS could prevent up to two million cases of disease and provide gains of around 3.7 million quality adjusted life years, with an economic value worth £77.9 billion over 25 years. In addition, the levy is modelled as raising £2.9 to 3.4bn for the Treasury annually. More information is available at <https://www.sustainweb.org/assets/recipe-for-change-launch-report-Sep23.pdf>.

ending up making decisions about how people might behave in particular situations, which is not their expertise.

We need to have very clear statements in planning that supporting good health is a central and important part of planning, otherwise it will come down to these individual things. Part of that has to be saying that obesity is a national problem that needs to be tackled in lots of different ways by lots of different people. Coming back to the discussions about hot food takeaways, it is possible at the moment for councils to limit their proliferation in places where there are already rather a lot of them. That is shutting the door after the horse has bolted. You have to say, "There's a particular problem in this place and a particularly vulnerable community". If we look across the national picture, it is a national problem, a problem for all communities, and that is not expressed strongly enough in policies, including planning policy.

Alice Wiseman: I agree completely with everything that has been said. On the restrictions in planning policy, we have been able to reduce the availability of hot food takeaways. This is defined by the proportion of food that is not consumed on-site. All people need to do is put a few tables and chairs out and it becomes a different planning requirement. It becomes a restaurant. I am sure that many of us would agree that lots of these places would not necessarily be seen as somewhere that you would particularly go to eat.

There are the bits to do with the environment and our hospitals and hospital sites, and not just the food they are feeding patients while they are in hospital. Hospitals have also looked at trying to draw in revenue by having commercial providers in hospital settings, and the obesogenic environment in some of our hospitals is concerning. People are looking at this, I understand, in terms of balancing the profits they can have to enable them to continue working in the hospital.

From an ADPH perspective, the current strategy is not comprehensive enough and does not go far enough in its ambitions for our food system. We welcome the targets made by Henry Dimbleby in the independent review, particularly the reformulation tax, the introduction of mandatory reporting for large food companies, extending the eligibility of free school meals, expanding the Healthy Start scheme, and setting clear targets that bring in legislation for that long-term change.

It is also important to recognise the reduction in budget from the reduction in public health grants at a local authority level. Just under £1 billion would need to be returned to the public health grant for us to be able to take all the action that we want to take at a local level. You often find yourself focusing on the more tactical things that you can do today, rather than on the long-term strategy that is needed to address this as a particular issue. I would make a real plea about reversing those cuts.

We have spoken about skills. There is something about skills across the whole of the council. Again, if we are thinking about health in all policies, there is an opportunity for us to think about how we ensure that public

health skills are embedded across all our directorates. We have a planner in Gateshead who is currently undertaking a master's in public health as an example of work that we are doing to try to cross-fertilise that skill development. That could be particularly interesting across other local authorities, and I know that other colleagues are doing similar things.

It is about being able to support that focus on health. Primarily, health is an asset to us from an economic, social and moral perspective, so I would advocate taking that broader view of the role of local authorities in improving health and well-being.

Q86 The Chair: On that last point, did you have difficulty finding the money from in the council to support the planning officer who is doing some public health training?

Alice Wiseman: We were one of the local authorities that was lucky enough to secure funding from NIHR on the health determinants research collaborations, where the idea is to build research capacity and capability across the council so that we can deliver on health in all policies. We were very fortunate in securing that funding, which has enabled us to take those steps. We do not just have a planner; we have six people across the council in other directorates who are doing their master's in public health so that they can ensure that health is considered in the work that they are doing in their directorate.

The Chair: Right. So there are pots of money available if only you can find them.

Alice Wiseman: Yes. Thirty local authorities have now secured funding.

Q87 Lord Brooke of Alverthorpe: My question is a follow-up to the Chair's question and is principally to you, Julia, as you are an independent organisation that can make representations to anybody you wish. You talked very interestingly about how people are not always geared to look at what is causing the problem, because their job description does not permit it as such, and you have to try to get them to work on a wider basis and to take into account the problem of health.

Do you ever make representations to the Treasury, given that it is the Treasury at heart that controls the purse strings at the end of the day—this is all about money at the end of the day—in order to try to make health a higher priority in the way it looks at spending? At the moment, health is the biggest spend for the Budget.

Julia Thrift: We recently presented evidence to the Health and Social Care Committee about the role of planning and the built environment in helping to prevent poor health.

Lord Brooke of Alverthorpe: Have you thought about the Treasury's role in it?

Julia Thrift: We perhaps should think more clearly about that. If you have a contact at the Treasury who you think we should speak to, we would be delighted to have that conversation.

Q88 Lord Krebs: In a way, you have covered the points that my question addresses, but perhaps I could ask each of you in turn to offer us advice on what you think the two most effective strategies for improving the local food environment and reducing inequalities would be. In offering those two suggestions, tell us what evidence supports them.

Julia Thrift: I find this one quite difficult, because a lot of it comes down to local resourcing, and we have heard from Alice about the problems of getting that. Health needs to be a priority across all departments, and I come back to the health in all policies view. It is very difficult, with public health having had very large cuts and planning having had disproportionately large cuts, to get people to do that joined-up, system-wide thinking that is vital.

Everybody is very focused on their own narrow workload, and we need a systemic change that will require lots of different things to be done, which requires people to step back from their day-to-day workload, to make cross-connections and links, and to think about the system as a whole and their role in it. It is extremely difficult to do that if you have your nose to the grindstone. It comes down to resources, I am afraid. There is policy, which I have already mentioned, but there is also capacity and resources.

Nikita Sinclair: The overarching point I want to make is that, whatever is done, you need to centre the lived experience of families living in low-income areas and think about what you can do to stem the tide of unhealthy cheap food that is flooding those areas and increase the flow of the good stuff.

Smoking has come up a lot, and rightly so, because it is an amazing example of what public health intervention can do, but there are inequalities in who still smokes, and we do not want that to happen when it comes to healthy affordable food.

If I can have only two, one that I really want to speak about is focusing on the convenience store sector. I mentioned that families living on low incomes are disproportionately reliant on this sector and are often left out of the conversation. Locally, we have been working with Rice Marketing and Southwark Council to look at how we can support independent convenience stores, working with wholesalers to increase the proportion of their sales from healthier products. We have seen that retailers can increase the availability of healthy options on the shelves by 22%. Working with Bestway, which was the wholesaler involved, they have increased their sales of healthy items by 18%. We are showing that it is possible at a local level, but resource is needed to do that locally, and things could be thought of nationally to incentivise that industry.

The second one—to repeat myself—is the power of school food. Kids spend so much time in schools and it is a really important environment for them. Currently, 900,000 children living in poverty across the UK do not get access to a hot nutritious lunch, so I would immediately uplift the eligibility criteria but with the ambition for it to be universal in order to

see the real benefits that can come from school food. That has to come alongside quality assurance, otherwise it will not have the benefits that we want.

Alice Wiseman: I will start again with health in all policies, at a national and a local level. A good example of cross-governmental departmental working is the Joint Combating Drugs Unit, which has brought together a range of colleagues from across government at a national level, and that is replicated again at a local level, which is asking everybody to consider addressing the issue from their perspective.

An approach like this would be helpful in ensuring that the Treasury is able to hear the evidence that has been provided by the Department of Health and Social Care, and that you have all the other departments that have an interest in the food environment and the food industry involved and sharing the same understanding of the problems, challenges and potential solutions.

Reiterating the point made by the previous speaker, there is real strength in community-led approaches and allowing our most disadvantaged communities that have a small amount of resource to find some of the solutions themselves. The project in Gateshead that I described earlier set up its own healthy pizza provision on a Friday night. It became established in the community and was sustainable and, with a bit of pump priming, it enabled the community to come together and solve some of the problems themselves.

If I had the money that we have lost over recent years, that is where I would put my investment in Gateshead. It would not just improve the offer around healthy food but would give communities the opportunity to solve the challenges they are facing themselves, rather than having those solutions imposed on them by well-meaning people like me.

Q89 **Lord Brooke of Alverthorpe:** Could we have a copy of the Gateshead report?

Alice Wiseman: Yes, certainly.

The Chair: You were restricted to two ideas, but if you have more, please do send them to us. Please do not feel limited to two. I would like to thank all three of you very much for an interesting session this morning. I would love to come up to Gateshead and see what you are doing up there, Alice, if we only had time.