



HOUSE OF LORDS

Food, Diet and Obesity Committee

Corrected oral evidence: Food, diet and obesity

Monday 29 April 2024

4 pm

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; Baroness Suttie.

Evidence Session No. 15

Heard in Public

Questions 203 - 225

Witness

[I](#): Professor Ian Young, Chair, Scientific Advisory Committee on Nutrition (SACN).

Examination of witness

Professor Ian Young.

Q203 **The Chair:** Good afternoon, and welcome back to this public meeting of the House of Lords Food, Diet and Obesity Committee. We continue our meeting with the 15th evidence session of the committee's inquiry exploring the role of food such as ultra-processed food and foods high in fat, salt and sugar, in a healthy diet and in tackling obesity.

Having heard evidence earlier this afternoon and at our previous meeting from representatives of the food industry, we now change our focus, commencing a series of evidence sessions with Ministers, departments and agencies, and advisory bodies. We are about to hear now from Professor Ian Young, who, as well as being clinical professor at the School of Medicine, Dentistry and Biomedical Sciences at Queen's University Belfast, is also the chair of the Scientific Advisory Committee on Nutrition, known as SACN.

Professor Young is appearing for us today in his capacity as SACN chair and is joining us in person. You are very welcome, and we very much look forward to your evidence. I will ask you to introduce yourself briefly the first time you speak in answer to the first question. Today's meeting is being broadcast and a written transcript will be made available for subsequent publication, which will be sent to you to check for accuracy.

I refer to the list of members' interests, including my own, as published on the committee's website and as set out in the committee's first evidence session, which was on 8 February. I also repeat for the record what I said at the beginning of the earlier evidence session today: that, while it would be inconsistent with Lords committee procedure to compel our witnesses to do so, we will, for the sake of transparency, be giving all our witnesses the opportunity voluntarily to declare any interests they deem relevant to the work of the inquiry the first time they speak.

Could you tell us, Professor Young, about the role of SACN and the relationship between SACN, the Government and the food industry? What is your response to arguments that the food industry has undue influence over SACN and the Government? Some witnesses have suggested that SACN should be free of conflicts of interest within five years. What is your response to this?

Professor Ian Young: Thank you, first, for the opportunity to give evidence on behalf of SACN. That is quite a long and complex question, so if you are agreeable I will address parts of it and then perhaps you could bring me back to parts that I have missed.

As you indicated, I am a medical professional. I am a professor of medicine at Queen's University Belfast, and the other half of my job presently is as Chief Scientific Adviser to the Northern Ireland Department of Health and director of research and development in Northern Ireland. My other main interests have been in laboratory medicine and nutrition. I chair the ICHCLR, the International Consortium for Harmonization of Clinical Laboratory Results—that is a bit of a

mouthful—which looks to globally ensure that laboratory results are delivered in the same way. I am also deputy editor of the journal of the Association for Diagnostics & Laboratory Medicine and editor of the leading textbook in laboratory medicine.

SACN is a committee of OHID in the DHSC and provides advice on nutritional and scientific issues to the four departments of health in the UK and to other government departments where relevant. The role of SACN is in providing the scientific assessment of risks associated with nutrition. That SACN advice goes to government departments, which consider it along with a range of other considerations and come to policy decisions on the types of issues that you are discussing. Those policy decisions themselves lie outside SACN's remit, although occasionally SACN is asked to comment on some technical aspect of a potential policy decision, which we are happy to do.

On SACN's relationship with the food industry, SACN operates in an open and transparent way and publishes a register of interests of all its members. No SACN members are appointed based on links to the food industry, although we have one member appointed based on industry expertise, and no members are employed by industry.

Right from the beginning of the SACN processes, careful consideration is given to potential conflicts of interest in relation to industry, so SACN members are appointed through public appointment. There is an independent assessor as part of that who considers any potential conflicts of interest. All members operate under the Nolan principles, and historically there have been occasions when applicants have not been appointed to SACN based on perceived conflicts of interest which might interfere with their work with SACN.

SACN meetings occur as much as possible in open session. Any member of the public, which includes individuals from industry, trade bodies, et cetera, is welcome to attend SACN open sessions and can ask questions at the end of those sessions. When SACN operates in closed session, the minutes are published as soon as possible after the completion of the meeting and are available.

The SACN work programme is developed in two main ways. First, we will respond to policy questions, which can originate from a variety of places, including any of the UK departments of health. In addition, SACN conducts an horizon-scanning session once every two years where members of SACN bring forward proposals on areas where they think there is significant emerging evidence for consideration. We also recently published a report, which I am sure we will return to, on processed foods; that was back in July 2023.

Whenever we have a proposal to look at a particular topic, that is published and is open for comment and consultation. Whenever we have a draft report, it is published for consultation. We publish all the responses and comments that we get back on that, along with our response to them, as part of our approach to openness and transparency.

Individual SACN members will, in some cases, have a relationship with industry, most commonly through receiving funding for research that they are engaged in. All of that is published and is available on the SACN register of interests. If we consider that an individual member has too much of a conflict of interest on a particular topic, I, as chair, in consultation with the secretariat, will exclude that individual from participation in the SACN discussion on that topic. So a wide range of measures seeking to describe and be open and transparent about any relationship of SACN with the food industry are in place.

The third part of the question was on the Government's relationship with the food industry, and I cannot really comment on that. I can comment only on the relationship between SACN and the food industry, which is as I have described.

Q204 The Chair: Thank you. The concerns expressed to the committee were about this issue of people on the advisory board having done research funded by the food industry—or even still doing so, as I understand it—but I think you mentioned in your written evidence that if the BBSRC is going to provide funding for research, it requires researchers to have a relationship with industry. Is that the case? If you were to take away those relationships, would it be helpful if the BBSRC changed its parameters?

Professor Ian Young: SACN members are leading experts on nutrition. Many of them, although not all, have relationships with the food industry in that they are in receipt of funding. I think those are entirely reasonable, open and transparent relationships. If we want the best individuals to be members of SACN, it is important that we open membership to them but are open and transparent about it and exclude them from consideration of issues where there may be too much conflict of interest.

You are correct that the BBSRC and, on occasion, other major public funders of research issue calls that are specifically focused on collaboration between the food industry and academia. There are certainly examples of that. It is an important source of funding and, yes, it would create a problem if members of SACN were not able to apply for that.

I should say that conflicts of interest and SACN's approach to them extend much more broadly than just the potential for receiving funding from industry for research. They include speaking at conferences and writing or editing books related to food, nutrition and a wide range of other areas, all of which constitute legitimate conflicts that might impact on somebody's decision-making in specific circumstances and would be considered by SACN on that basis.

The Chair: Do you have an open protocol on this issue?

Professor Ian Young: We do, yes.

Q205 Baroness Browning: Welcome, Professor Young. How frequently would

SACN expect to meet with the relevant Minister?

Professor Ian Young: SACN does not meet with any of the relevant Ministers—that is, any of the four Health Ministers in the UK. SACN does not meet with them. In my role as chair of SACN, I have not met any of the Ministers.

Baroness Browning: I understand that you value your independence, but you were asked about the relationship between SACN, industry and Ministers. Where do Ministers fit into this triangle?

Professor Ian Young: That question would be better answered by some of your subsequent witnesses in future sessions. All I can say is that SACN provides independent advice that goes to government departments—and, I am sure, makes its way to Ministers, ultimately—but I cannot comment at all. I have no insight into the broader relationships that you are asking about.

Baroness Browning: Okay. Thank you.

Q206 **Baroness Boycott:** So how do you decide what reports and what things you are going to investigate? Is it completely up to SACN, or is it guided from somewhere else?

Professor Ian Young: As I indicated, there are two main factors that influence our programme of work. First, we will respond to policy questions.

Baroness Boycott: From the Government?

Professor Ian Young: From government, or from Food Standards Scotland, for example, as in a recent case, or potentially from other areas. We also develop our own work programme through the horizon-scanning process. So it is a combination of the two.

Baroness Boycott: Can you tell us what your most recent investigations have been?

Professor Ian Young: We list on our website the full list of ongoing and current investigations. Recently, we have looked in particular at the nutrition of one to five year-olds and have issued a position statement on processed foods. We have a number of ongoing programmes of work.

The Chair: Thank you. Bearing in mind that you advise but do not make policy, Lord Caithness would like to ask the final part of that question.

Q207 **The Earl of Caithness:** Could I just follow up on what the chair was asking? Can you reassure the committee that a situation such as that which happened in the USA in the 1970s and 1980s, when the scientists behaved appallingly, will not happen in this country?

Professor Ian Young: I think I can provide you with that assurance. I hope I can. Certainly in my role as the chair of SACN, I take my responsibilities very seriously. All members of SACN are signed up to

adhering fully to the Nolan principles and to transparency about any potential interests.

Q208 **The Earl of Caithness:** That is helpful, thank you. Can I turn now to the implementation of your recommendations? To what extent do Governments implement your recommendations?

Professor Ian Young: SACN recommendations historically have been implemented to a variable extent. My understanding is that our recommendations go to government and are considered alongside a wide range of other policy considerations when coming to a final policy decision. There are examples of SACN recommendations that have been taken on board and examples of recommendations that have taken a long time. In the case of the latter, our historic recommendation to consider the fortification of flour with folic acid is an example of one that has been running for many years, but which will, I think, eventually lead—now and hopefully in the not-too-distant future—to an action to fortify flour.

There are other examples more recently of recommendations that have led to fairly rapid policy changes. Vitamin D is an example of that; 10 micrograms of vitamin D per day were recommended via SACN, which led fairly quickly to a UK policy decision about recommending the use of supplements.

The Earl of Caithness: Can the four Governments implement your policies differently?

Professor Ian Young: Health is a devolved issue, so it is conceivable that there could be differential implementation of some SACN policies in practice, because the UK is a fairly integrated system, particularly in terms of food and nutrition marketing. Generally, the four Governments try to work together to do UK-wide implementation.

The Earl of Caithness: Could you provide us with a list of all your recommendations that have not been implemented by the various Governments? That would be very useful.

The Chair: Especially if you know why they have not been implemented.

Professor Ian Young: Off the top of my head, I could not provide you with such evidence.

The Earl of Caithness: Sorry, I meant write to us with it.

Professor Ian Young: I am sure we can go back to look at that and write to you about it, certainly on recommendations that have been only partially recommended or not at all. On the reason why, we may not be able to answer that question.

Q209 **The Earl of Caithness:** I notice that in your horizon report, you wanted to do a report urgently on iodine. That was in 2022. Have you done that report?

Professor Ian Young: No, we have not done the report on iodine as yet. It will be considered again at our next horizon-scanning session, which is in June this year. Unfortunately, the work of SACN is constrained by the resources available to us. We cannot always take forward everything we would like to in as timely a way as we would like.

The Earl of Caithness: Who resources you, then?

Professor Ian Young: At the moment, the secretariat is resourced through OHID—the Office for Health Improvement and Disparities—in DHSC. Obviously, the SACN members themselves operate in a capacity whereby they also have full-time jobs in other domains.

The Earl of Caithness: So you are a tiger that roars, but you have no teeth.

Professor Ian Young: We are not a tiger of any kind. We are a committee that provides advice, and I think we do that in an effective and clear way. If the implication is that we cannot force people to follow it, you are absolutely correct, but there are probably many committees and individuals who feel in the same position.

The Earl of Caithness: But given your importance, should you not be a committee that publishes a report as to how the Governments are implementing your recommendations?

Professor Ian Young: At the moment, that is not part of our remit. It is an interesting suggestion which I think would require some direction from government, ultimately, on SACN's ways of working.

The Chair: Thank you. Our next question follows on nicely from what you have just said.

Q210 **Baroness Ritchie of Downpatrick:** You are very welcome, Professor Young. You were better known on our TV screens in Northern Ireland during Covid, when you were in your chief scientific officer role, but this is about the nutrient profiling model. As far as I can see, that was set up by the Food Standards Agency in 2007. An updated version was produced in 2018, but it has not yet been implemented. Why is this? Is it to do with resourcing, or what is the real reason? Has government intervened, and what would be the benefits of the 2018 version?

Professor Ian Young: Thank you for that reminder of Covid.

Baroness Ritchie of Downpatrick: You gave us a daily broadcast.

Professor Ian Young: I am not sorry that is finished. Anyway, to go on to the more important question, SACN has not been involved with the 2018 version of the nutrient profiling model. The original model was in 2005, and certainly predates my involvement. SACN was involved in its development and commented on it at that time, but SACN has not asked to comment on the 2018 version.

Baroness Ritchie of Downpatrick: Why would that be?

Professor Ian Young: I cannot answer that. I know that a couple of members of SACN were involved in a personal capacity in discussions on it, but it did not come to SACN at that time. On why it has not been implemented, again, I cannot answer that. It would be best directed to some of your future witnesses. I can say that SACN absolutely welcomes anything that improves the implementation of its recommendations. I know that the 2018 model was intended to look at some of SACN's more recent recommendations in particular, so we would strongly welcome its implementation.

Q211 **Baroness Ritchie of Downpatrick:** One final question. Do you think that the Government attempt to act independently of SACN in the way they bring forward their recommendations, or do they try to ignore the recommendations from SACN?

Professor Ian Young: I know that the Government are in receipt of SACN recommendations, and my expectation is that the Government consider those recommendations, alongside other policy considerations. It is a bit like Covid, if you like: not every piece of advice I gave necessarily led to a decision by government because, entirely appropriately, government was taking account of a range of other matters. I expect that is the case with SACN; SACN gives advice about the nutritional aspects of risk, and the Government, in coming to policy decisions, need to take account of a range of other matters. I think that is appropriate and I have no reason at all to think that the Government do not receive and consider SACN recommendations.

Baroness Ritchie of Downpatrick: If you do not meet Ministers from the UK, right across the nations and regions, do you meet the Permanent Secretaries of the departments or the appropriate senior health officials who deal with nutritional issues?

Professor Ian Young: We work closely with officials in DHSC. The senior responsible officer there is one of the deputy chief medical officers who I meet with regularly and who assures me that our advice is being passed on appropriately.

The Chair: I think we have a question to ask the Minister then.

Q212 **Baroness Suttie:** The UK currently bases its dietary guidelines on nutritional intake. Do you think that is the right approach, and what are its strengths and weaknesses? Can you say a little about the evidence base for this approach?

Professor Ian Young: I think it is not entirely true to say that the UK bases its dietary advice on nutritional intakes, but that is one major component that leads to the nutritional advice. In SACN's terms, we are particularly focused on nutritional intakes, because that is where the vast majority of high-quality evidence currently lies around nutrition and health. We do that in common with and on the same basis as the vast majority of nutritional advisory bodies globally, because that is where most of the evidence lies. If you like, that is the strength of the approach, although evidence in nutritional science is not nearly as clear-cut or easy

to interpret as in pharmaceutical trials, for example. There are a lot more complex factors which come into play.

On guidelines, where there is a basis for making a food-based recommendation, SACN has historically done that. We recommended, for example, a limitation on processed meats, and we made recommendations about the minimum consumption of oily fish and on fruit and vegetables. We are quite content to make food-based recommendations where we think that is justified by the evidence base, but in the majority of cases it is nutritional intake where the strong evidence lies.

At the policy end of things, although it is not our responsibility, the Eatwell guide, which seeks to interpret SACN's nutritional advice, is effectively a food-based dietary guideline, and we hope that people will follow it as a way of implementing our nutritional advice.

Baroness Suttie: Do you think the Eatwell guide should have been updated?

Professor Ian Young: The Eatwell guide, I know, remains under review. On the question of updating it, again, that is best reserved for another witness, because it is outside SACN's remit.

Q213 **Baroness Boycott:** My question was about how the Eatwell plate came to be and how your recommendations adhere to it. Have you recommended its update?

Professor Ian Young: I know this is difficult. At times, SACN members find slightly frustrating where the divide is between risk assessment and risk management. SACN's role is in risk assessment. The Eatwell Guide and the plate are very much part of risk management and outside SACN's remit. We continue to update our nutritional advice depending on the evidence that we consider. Our expectation is that, when appropriate, this would lead to the updating of the Eatwell Guide as part of the implementation process of risk management.

Q214 **Lord Krebs:** Before I come to my question, which I will do in a moment, I want to ask you about the nutritional advice in different countries. A few minutes ago, you said that there are similar processes in different countries. Are there significant discrepancies in the advice, whether it is expressed through the Eatwell plate or through other mechanisms, between different countries that have a nutritional advisory system?

Professor Ian Young: By and large, and probably unsurprisingly, the advice is largely the same. There are some differences, however, but they tend to be relatively minor. The WHO, for example, talks about 30% fat intake. Our advice is currently sitting at 35% fat intake, and some other countries might go as high as 40% dietary energy from fat sources. So there are some differences, but by and large the advice is largely the same. At SACN, as part of our considerations we look at advice and guidelines from other bodies that follow a robust evidenced assessment process in considering the evidence.

Q215 **Lord Krebs:** Thank you. I now want to move on and introduce the notion of ultra-processed food. I refer back to your report, which you have already mentioned and which was published last summer. In the report, you said that the descriptive evidence, the epidemiological evidence, consistently reported that the increased consumption of ultra-processed food was associated with increased risks of adverse health outcomes, but you also pointed out that correlation is not the same as causation and that, therefore, it would be too preliminary to jump to the conclusion that UPF causes ill-health outcomes. Nevertheless, some witnesses have suggested to us that the government guidelines should include guidance against the consumption of UPF on the basis of invoking a precautionary principle—that even though the evidence is not there, there might be a suggestion that it could arise. What is your view on that?

Professor Ian Young: SACN considered the processing of foods and health and, as you say, published its report in July last year. The decision to look at that was taken by SACN members in the horizon-scanning process the year before. We were subsequently asked from a policy perspective whether we could accelerate that piece of work, because it was viewed as potentially important.

We looked at the evidence in, I think, a fairly comprehensive way. Members will have had an opportunity to see the report and, I hope, to read it. We considered eight separate classifications of food based on processing, which had been used in the literature, but we thought that only one—the Nova classification—had potential at the moment to be applied here. It is the classification that by far carries the greatest weight in the published literature and which is used most widely.

When we looked at the evidence, we highlighted what were from our perspective some significant concerns with the Nova classification. You have heard some of that outlined and discussed in previous sessions. Clearly, not every food that falls into the Nova 4 category, which covers ultra-processed foods, is equally unhealthy. Some foodstuffs in there, by virtue of their nutritional content and composition, may even be beneficial as part of a healthy and balanced diet. Similarly, there are foodstuffs in the lower levels of Nova classification—for example, processed red meats—about which we have previously expressed significant concerns about the health consequences. They are not part of the Nova 4 ultra-processed group.

The majority of foods in the Nova 4 category are high in calories, saturated fats, salt and sugar. They are low in fibre and have many characteristics that would lead to us not considering them as a good component in a healthy, balanced diet. Therefore, it is unsurprising that there are associations between Nova and adverse health outcomes. We had expected that, and we found that, based on what we know to be the nutritional characteristics of most of the foodstuffs in the Nova 4 category, there was insufficient evidence to separate out the harmful effects of foods high in calories, saturated fats, salt and sugar from foods that were highly processed. So we could not find enough evidence to say

that processing is a separate or greater problem than the nutritional content of those foods.

Might there be an added problem with processing above and beyond nutritional content? Yes, that is possible. We outlined and described additional evidence that we thought would help to begin to tease out some of that question, but at the moment we cannot find sufficient basis to say that there is a separate and additional effect of ultra-processed foods once their nutritional content was considered.

In terms of a government policy response to our report, entirely consistent with our advice, if people were to reduce their consumption of ultra-processed foods, that would be beneficial, but it would be beneficial based on the nutritional composition of those foods. In effect, it would achieve our current advice, which is to reduce the consumption of foods high in saturated fats, salt and sugars, rather than anything specific about a benefit of reducing ultra-processed foods.

Q216 The Chair: Thank you. Did you consider the energy density and the hyperpalatability of those foods? There is some evidence that that makes people eat more.

Professor Ian Young: We did. We outlined a number of plausible mechanisms by which foods falling into the ultra-processed category might have additional adverse associations. Palatability and increased energy density are important ones. There absolutely is some evidence, based on one clinical trial in particular, suggesting that those are important factors. You will have heard about that trial in detail. We considered that trial, and we think it is a useful and important study. There are some issues with it—again, I suspect you have probably heard about those—but we do think that it is an important area for future research.

There are also other plausible mechanisms and areas of concern—for example, the use of emulsifiers and non-sugar sweeteners, which are on our work plan for consideration again in June. There are a number of other plausible mechanisms, which, again, are outlined in our report. SACN did not say that there is no problem with ultra-processed foods. We expressed concern about the associations and said that we need to keep looking at this, but that we need more evidence to make any independent determination of the risk of ultra-processed foods as opposed to foods high in calories, saturated fats, salts and sugars.

Q217 Baroness Jenkin of Kennington: As you mentioned, the science of all this is evolving. I do not know when you started on the report, but if you reported last summer you had probably been working on it for a year or two.

Professor Ian Young: For about a year.

Baroness Jenkin of Kennington: Okay. During that period, or sometime around then, the food strategy from Henry Dimbleby came in, and, of course, there was also the work that Chris van Tulleken was

doing, and other studies are ongoing at the moment. As the science evolves and becomes clearer, is there an opportunity to update the report? Can you say, "We now know more about it than we knew when we published"?

Professor Ian Young: Absolutely. It very much remains on our agenda. We will consider it again at our next meeting in June, with a particular focus on any additional evidence that may have emerged in the last two years. We will definitely continue to keep this on our agenda—for the foreseeable future, I would have thought.

Q218 **Baroness Jenkin of Kennington:** Let us hope that our report will help to do that. That is certainly our hope. You have partly answered this question, but what is SACN's assessment of the mechanisms by which UPF may cause adverse health outcomes? We have mentioned hyperpalatability, energy density and additives. What potential mechanisms should be prioritised for further research?

Professor Ian Young: Whenever SACN looked at it, we talked about higher palatability and energy density, and about the promotion of a faster eating rate, which might be due to the textures of the foodstuffs.

Baroness Jenkin of Kennington: Softness, yes.

Professor Ian Young: Or it might be due to changes in how the foods are being presented. Palatability relates to how nice something tastes, I guess. That was alluded to in the previous session. We talked about the possible effects of specific additives or groups of additives, such as emulsifiers and low-calorie or non-calorie sweeteners, and about the possibility of contaminants from packaging. We also talked about the possibility that some of this is related to marketing and retail.

Baroness Jenkin of Kennington: We did too.

Professor Ian Young: That is the range of potential mechanisms that we discussed and considered, but, as I say, we felt overall that there was insufficient evidence to say that UPF has a greater impact than high-calorie, high-salt, high-sugars, high-saturated-fat foods.

Q219 **Baroness Boycott:** In a way, this question is a follow-up to Baroness Jenkin's question. Have you done any research into sports drinks and sports marketing? Baroness Jenkin made the point about the advertising component. Obviously, with sports drinks, that is absolutely massive because of the connection with sport. Every time you watch a rugby match, you see Red Bull and all the rest of it. Is this on your radar?

Professor Ian Young: Again, that falls more into the risk management category than the risk assessment category. SACN previously issued a report on carbohydrates, which included assessment of free sugars—this would include the sugar content of sporting drinks—and recommended what was at the time, and may well still be, the strictest nutritional guidance on reducing intake of free sugars. The report said that, as a percentage of total dietary energy intake, they should be less than 5%.

Baroness Boycott: When did you make that recommendation?

Professor Ian Young: Around 2015, I think.

Baroness Boycott: So the reality is miles away from your recommendation.

Professor Ian Young: The NDNS, which is our nutritional survey data, does suggest that consumption of free sugars remains significantly above the target level—the recommended level—from the SACN carbohydrate report.

Baroness Boycott: Did you make any recommendations on the association between sport and energy drinks and the way in which they are advertised, especially to young people—for instance, with cartoons at rugby matches?

Professor Ian Young: No. That would have been outside SACN's remit. SACN's remit was to look at the association between sugars intake and health outcomes. When it comes to specific marketing, et cetera, that would be outside our remit.

Q220 **The Earl of Caithness:** Given your review of ultra-processed food, would it be possible and feasible to alter the nutrient profiling model to include fibre and/or calories?

Professor Ian Young: I will speak now not on behalf of SACN but in an entirely individual capacity. Yes, the nutrient profiling model is something that I hope would change in order to implement SACN recommendations more effectively.

The Earl of Caithness: How would you like it to change? Can you be more specific?

Professor Ian Young: I cannot be more specific, unfortunately, because I have not been involved in the detailed discussions on it. There was discussion earlier about limiting portion size and calorie intake. That is an important question. Whenever I looked after patients living with obesity who were looking to lose weight—I did that for many years—one of the many things that I used to talk to them about was using smaller plates with a view to limiting portion size through that mechanism. I do not think there is any single, simple solution to this problem—it needs to be multifactorial—but things to reduce portion size are helpful.

The Earl of Caithness: Would you put that on your work programme in June?

Professor Ian Young: Unfortunately, that is outside our remit. I know that you are probably tired of me saying those words.

The Earl of Caithness: Whose remit is it?

Professor Ian Young: Our remit is to provide scientific and nutritional—

The Earl of Caithness: Sorry. I asked whose remit it is. If it is outside your remit, who should we approach?

Professor Ian Young: Dietary guidelines reside in government, I think. I believe you will be hearing from OHID, perhaps in a subsequent session, or DHSC. Some of those questions would be better directed to them.

Q221 **Lord Colgrain:** My question relates to the very young. Some witnesses have raised particular concerns with the committee about infants' and young children's intake of unhealthy and ultra-processed foods, and have argued that minimally processed foods should be recommended for under-threes. What is your view?

Professor Ian Young: SACN recently published a report on nutrition for one to five year-olds, so we have looked at this recently. We highlighted that the current diets of young children between the ages of one and five do not meet our recommendations for several nutrients; that young children's total intake of calories, sugars, protein and salt all currently exceed our recommendations; and that commercial baby foods are one of the main contributors to energy and sugar intakes in that age group, with their consumption of sweet and savoury snack foods tending to increase with age above current levels.

We also reported that higher protein intake in young children is associated with increased body mass index in later childhood, and it is similar for higher consumption of sugar-sweetened beverages. This is also associated with risk of overweight and obesity in childhood. Children who have higher BMIs are more likely to become overweight or obese adults. So there are strong linkages between the diet of this age group in particular and lifetime risk of obesity.

We made several recommendations in relation to that. First, on the UK recommendations on average intake of free sugars, as I have said before, we recommend that sugars should not exceed 5% of total dietary energy intake and that this should apply from the age of one—that is, for all one, two and three year-olds. Secondly, children aged one to five should not be given sugar-sweetened beverages at all. Thirdly, dairy products given to children aged one to five, such as yoghurts and fromage frais, should ideally be unsweetened. Fourthly, formula milks—these include infant formula, follow-on formula and, growing up, other toddler-type milks—are not required by children aged one to five years.

We also recommended that snack foods that are energy dense and high in saturated fat, salt and free sugars should be limited in children aged one to five. That really means giving as little as possible to children in that age group, recognising that it is probably not realistic that they should not be given them at all. Also, we said that commercially manufactured foods and drinks marketed specifically for infants and young children are not needed to meet nutritional requirements.

So I think we made some fairly clear recommendations in relation to one to three year-olds. Our hope would be that those would be taken forward and measures sought to implement them in respect of risk management.

Q222 **Lord Colgrain:** That is extremely helpful and extremely clear. If I could ask you to take off your SACN hat for a moment and put on your personal hat, which of those would you emphasise the most?

Professor Ian Young: To me, it has to be a package. There is no single one that I would pick out. Obviously, some might be easier to do than others. In a personal capacity I think it is critical that children are introduced early to a wide range of foodstuffs, and, in particular, not introduced to sugary foodstuffs in early life, because that develops a whole association of sugary, sweet foods. It alters the whole approach to diet in later life and has all sorts of consequences. I would like to see sugars removed as much as possible from products aimed at those age groups.

Q223 **The Chair:** Thank you. We have talked a lot about guidelines and recommendations, but we have been hearing that regulation of foods for young children is very weak. What would you do about that?

Professor Ian Young: Again, speaking in a personal capacity now and in no way on behalf of SACN, I think we need a multifactorial approach to getting improved diets. Regulation has an important role to play in that, as do the behaviours of manufacturers, retailers and those involved in marketing and advertising.

Education, and what is done in schools et cetera, plays an important role, but education and knowledge unfortunately are not enough. When people encounter an obesogenic environment as a result of advertising, marketing, availability and convenience, it is largely unhealthy foodstuffs that are available. It is relatively easy, if you are educated, committed, affluent and have time, to adhere to a diet that is very low in foods high in saturated fat, salt and sugars, or ultra-processed foods.

It worries me that we run the risk of increasing inequality if we approach this in the wrong way, whereby one part of our population finds their diets becoming even better, while large parts of our population who are living in more difficult circumstances find it more difficult. Then, the divide will increase further.

Those are all things I worry about on a personal level.

Q224 **Lord Krebs:** Would it be a good idea if the Government—all four Governments, if appropriate—published a response to SACN advice? In other words, it would not just disappear into a black hole. Within six months, say, the Government would have to say, “Here’s what we think of it and how we’re going to respond to it”.

Professor Ian Young: Again, speaking in a personal capacity, I would welcome a more formal government response to SACN advice. Over the years, we have on occasion had such a response, and sometimes more

than one response, in the case of folic acid, for example. Certainly, I would welcome a response to SACN recommendations.

Q225 **Baroness Boycott:** Thank you for what you said about the two-tier world of food. All of us around this table have to learn that. What has happened to the recommendations that you have given to the Government about children's food? It is not their fault: you cannot do fat-shaming about children. Have the recommendations just disappeared into nowhere? Which department deals with this? What happens to it?

Professor Ian Young: Our recommendations on one-to-fives are recent. Our understanding is that they are being actively considered and will be incorporated into guidance. I have no knowledge beyond that, but I am sure that the guidance will take account of our recommendations.

Baroness Boycott: Do you think that guidance is much use in the current world we live in? There is lots of guidance saying, "Don't do this, don't do that".

Professor Ian Young: In a personal capacity, as I have indicated, my view is that guidance on its own is generally not sufficient and that there needs to be a much broader approach.

The Chair: Professor Young, thank you very much for answering all our questions. We are most grateful to you. I remind you that a written transcript will be sent to you for any corrections you wish to make. We are grateful to you for coming this afternoon.