

MRC/CSO Social and Public Health Sciences Unit Consultation Response

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| **Title of consultation** |
| Restricting promotions of food and drink high in fat, sugar or salt |
| **Name of the consulting body** |
| Scottish Government |
| **Link to consultation** |
| https://consult.gov.scot/population-health/restricting-price-and-location-promotions-on-foods/ |
| **Why did the MRC/CSO Social and Public Health Sciences Unit contribute to this consultation?** |
| Excessive consumption of high in fat, sugar and salt (HFSS) foods has been linked to increases in rates of obesity as well as a range of other non-communicable diseases. Reducing these health harms is considered to be a priority by the MRC/CSO Social and Public Health Sciences Unit, particularly as these health harms are associated with socioeconomic inequalities. |
| **Our consultation response** |
| **Section 1. Foods that would be subject to restrictions Question 1****Which food categories should foods promotion restrictions target?**Option 2: Discretionary foods + ice-cream and dairy desserts (paragraph 62)**Question 2****Should nutrient profiling be used within all targeted food categories to identify non-HFSS foods?**No. We believe that if option 2 is chosen there is no need to target non-HFSS foods using nutrient profiling and a whole category restriction should apply.**Question 3****If nutrient profiling were used, do you agree with the proposal to only target pre-packed products and non-pre-packed soft drinks with added sugar in respect of unlimited refills for a fixed charge?**No. Paragraph 74 in the consultation document states that non-pre-packed items are out with the scope of the proposal because businesses “may not be able to determine whether these products can or cannot be promoted due to relevant nutritional information not being available”. We do not support this given the manufacturer would likely know nutritional composition if the retailer does not. Similarly, if ingredients are known to identify allergens information, then nutritional information would be known or could be identified/calculated. |

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| **Section 2. Price promotions****Question 4****What are your views on the proposal to include the following within the scope of multi-buy restrictions:**Extra-free – Agree Meal deals – AgreeResearch has shown that meal deals account for a large proportion of supermarket front of store offerings and have the highest proportion of trips on promotion [1]. Therefore, it is important that the consultation includes them in this proposal. Policymakers should consider that HFSS/ less health foods included in the meal deal (e.g., crisps) are not on promotion out with the meal deal. As this could result in individuals still purchasing these items at a discounted/ reduced price.[1] Quirk S, Crowther H, Stewart C. The Out of Home Environment in Scotland. 2019.**Question 5****What are your views on the proposal to restrict unlimited refills for a fixed charge on targeted soft drinks with added sugar?**Agree. It is good that the consultation includes these. However, there is no mention of diet soft drinks. Research has shown that in Scotland between 2014 and 2018, there has been a 20% increase in diet drinks sold, with over 40% of diet drinks sold on promotion in 2018 [1].[1] Food Standards Scotland. Monitoring retail purchase and price promotions in Scotland (2014 – 2018). Food Standards Scotland; 2020.**Question 6****Should other targeted foods be included in restrictions on unlimited amounts for a fixed charge?**Yes. All restriction proposed in the consultation should apply to all targeted foods. As mentioned in response to Q5, diet soft drinks are not mentioned in consultation. We think unlimited refills should also apply to diet products as research has shown that in Scotland between 2014 and 2018, there has been a 20% increase in diet drinks sold, with over 40% of diet drinks sold on promotion in 2018 [1].[1] Food Standards Scotland. Monitoring retail purchase and price promotions in Scotland (2014 – 2018). Food Standards Scotland; 2020.**Question 7****What are your views on the proposal to restrict temporary price reductions (TPRs)?**Agree. We think it is important that the Scottish Government are now considering restricting TPR’s as this wasn’t included in the 2018/2019 consultation. We argue that TPR’s were not restricted this would limit the success of the policy. Research has shown that TPR’s is the most common type of price promotion and has resulted in consumers impulse buying [1]. In addition, TPRs the most common type of price promotions used online, accounts for 57% of price promotions and feature more regularly online than in store [2].[1] Obesity Action Scotland. Obesity and Promotion of HFSS Products. Obesity Action Scotland; 2021. |

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| [2] Obesity Action Scotland. Survey of Food and Drink Promotions in an Online Retail Environment. Obesity Action Scotland; 2021.**Question 8****Are there any other forms of price promotion that should be within scope of this policy?**Yes. Multi-packs were not mentioned in the consultation we believe that they should be included in the policy. Research has shown that multipacks (e.g., of crisps and snacks) are more frequently bought on promotion compared to smaller sized single packs, therefore encouraging overconsumption of HFSS products [1]. In addition, we think store loyalty prices (e.g., Tesco Clubcard, Boots advantage card) should also be included in this policy, as research has shown that loyalty promotions to have an impact on sales [2].1. Obesity Action Scotland. Obesity and Promotion of HFSS Products. Obesity Action Scotland; 2021.
2. Felgate M, Fearne A, DiFalco S, Martinez MG. Using Supermarket Loyalty Card Data to Analyse the Impact of Promotions. International Journal of Market Research. 2012;54(2):221-40.

**Section 3. Location and other non-price promotions Question 9****Should the location of targeted foods in-store be restricted at:**Checkout areas, including self-service – Yes End of aisle – YesFront of store, including store entrances and covered outside areas connected to the main shopping area - YesIsland/bin displays – YesIt is important to restrict promotions in the key areas that attract impulse buying as listed above. Research has shown that increasing visibility of unhealthy products at key locations throughout a store (e.g., front of store and at checkout areas) leads to an increase in the sales of the products featured at that location [1]. The 2018 Obesity Health Alliance report [2] shows that 43% of products in prominent in-store locations/areas were high in sugar and less than 1% of products in high profile locations were fruit or vegetables.Removing promotions from checkout area here would possibly results in a decrease in purchases. Research has found that removing discretionary foods (e.g., confectionary) from supermarket checkouts can lead to a dramatic fall in the amount of unhealthy snacks purchased [3]. In addition, Ejlerskov et al. [3] found that there was a 76% reduction in purchases of confectionary, chocolate and crisps from supermarkets that had checkout location restrictions for HFSS products compared to those that did not. Furthermore, the study found there in to be a 17% reduction in purchases of confectionery in supermarkets with checkout policies [3].Front of store – The 2018 Obesity Health Alliance report [4] shows 86% of food and drink products located at store entrances were products high in sugar and calories.Removing promotions from end of aisle and island/bin displays would possibly result in a decrease in purchases, as research has shown promotions in these positions have a positive effect on sale [5]. |

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| 1. Cohen DA, Lesser LI. Obesity prevention at the point of purchase. Obesity Reviews. 2016;17(5):389-96.
2. Obesity Health Alliance. Out of place: The extent of unhealthy foods in prime locations in supermarkets. Obesity Health Alliance; 2018.
3. Ejlerskov KT, Sharp SJ, Stead M, Adamson AJ, White M, Adams J. Supermarket policies on less-healthy food at checkouts: Natural experimental evaluation using interrupted time series analyses of purchases. PLoS Medicine. 2018;15(12):e1002712.
4. Obesity Health Alliance. Out of place: The extent of unhealthy foods in prime locations in supermarkets. Obesity Health Alliance; 2018.
5. Garrido-Morgado Á, González-Benito Ó. Merchandising at the point of sale: differential effect of end of aisle and islands. BRQ Business Research Quarterly. 2015;18(1):57-67. doi:10.1016/j.brq.2013.11.004

**Question 10****Should any other types of in-store locations be included in restrictions?**Yes. Although is it good to see the locations listed in Q9, there are other locations that could be included such as coupons, free samples, upselling, seasonal aisles/displays and branded chillers (e.g., Krispy Kreme) [1]. Research has shown that branded chillers promoting carbonated soft drink was associated with an increase in consumers visual attention, compared to standard unbranded shelf labelling [2]. The global COVID-19 pandemic has resulted in queuing areas being extended to allow for social distancing and promotions would often been seen in these areas. Although social distancing is no longer mandatory it is worth considering promotions in extended queuing areas should restrictions be reintroduced.1. Whitehead R, Greci S, Thomson H, Armour G, Angus K, Martin L. The Impact of Non-Price In-premise Marketing on Food and Beverage Purchasing and Consumer Behaviour: A Systematic Review. medRxiv. 2021:2021.09.13.21258115.
2. Hurley RA, Rice JC, Koefelda J, Congdon R, Ouzts A. The role of secondary packaging on brand awareness: analysis of 2 L carbonated soft drinks reusable shells using eye tracking technology. Packag Technol Sci.900 2017;30(11):711-722. doi:10.1002/pts.2316

**Question 11****If included, should the location of targeted foods online be restricted on:**Home page – YesFavourite products page – YesPop-ups and similar pages not intentionally opened by user – Yes Shopping basket – YesCheckout page – YesWe support the proposed restrictions being applied to targeted products online. Online location restrictions should match physical in-store locations, and this would result in a consistent approach and impact in the success of the policy. It would prevent costumers moving to online shopping to access promotions. The COVID-19 pandemic and mandatory lockdown resulted in an increase in online shopping [1]. It possible that this has become a new normal for people for various reasons, therefore we argue that online location restrictions should match physical in- store locations.1. Obesity Health Alliance. Online Grocery Shopping: Factsheet. Obesity Health Alliance; 2021.
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| **Question 12****Should any other online locations be included in restrictions?**Yes. Supermarket apps or other apps such as Just Eat, Deliveroo and Uber Eats. This is important given that research has shown there to be an increase in food order apps during the COVID-19 pandemic and now account for 70% of takeaway delivery orders and these platforms predominantly promote unhealthy HFSS products [1,2].1. Obesity Action Scotland. Survey of Food and Drink Promotions in an Online Retail Environment. Obesity Action Scotland; 2021.
2. Yau A, Adams J, Boyland EJ, Burgoine T, Cornelsen L, de Vocht F, et al. Sociodemographic differences in self- reported exposure to high fat, salt and sugar food and drink advertising: a cross-sectional analysis of 2019 UK panel data. BMJ Open. 2021;11(4):e048139.

**Question 13****Are there other types of promotions (in-store or online) not covered by our proposals for restricting price and location promotions that should be within scope?**Yes. In the current consultation paragraph 113 it states that they are not going to include any restrictions on promotion of value because “there were too few comments” in the 2018/19 consultation but in that consultation in Table 7.3 (see https://[www.gov.scot/publications/reducing-](http://www.gov.scot/publications/reducing-) health-harms-foods-high-fat-sugar-salt-consultation-analysis/pages/8/) it clearly states there was a total of 726 responses (632 from individuals and 94 from organisations)[1]. We question what would be the threshold for ‘enough comments’? Upselling was included in the previous consultation but not this one. In 2018, Food Standards Scotland ran a campaign on upsizing called #NoToUpsizing, highlighted the problem of upsizing or upselling [1]. 45% of people in Scotland do not consider the extra calories from upsizing i.e., going large, buying a meal deal or adding sides or extras [2]. This suggests up sizing is a problem and could be considered in these restrictions on promotions bill.As discussed in our response to Q10, there are other locations that could be included such as coupons, free samples, upselling, seasonal aisles/displays and branded chillers (e.g., Krispy Kreme) [3]. Branded chillers are often located near the entrance of stores. These should either at minimum be moved away from this prime location or totally removed Research has shown that branded chillers promoting carbonated soft drink was associated with an increase in consumers visual attention, compared to standard unbranded shelf labelling [3].1. Scottish Government. Reducing health harms of foods high in fat, sugar, or salt: consultation analysis. Scottish Government; 2019.
2. Food Standards Scotland. Upsizing habit could lead to upsized waistlines says Food Standards Scotland as it launches a new healthy eating campaign 2018 [updated 01 June 2018. Available from: https://[www.foodstandards.gov.scot/news-and-alerts/upsizing-habit-could-lead-to-upsized-waistlines-says-food-](http://www.foodstandards.gov.scot/news-and-alerts/upsizing-habit-could-lead-to-upsized-waistlines-says-food-) standards-scotlan.
3. Whitehead R, Greci S, Thomson H, Armour G, Angus K, Martin L. The Impact of Non-Price In-premise Marketing on Food and Beverage Purchasing and Consumer Behaviour: A Systematic Review. medRxiv. 2021:2021.09.13.21258115.
4. Hurley RA, Rice JC, Koefelda J, Congdon R, Ouzts A. The role of secondary packaging on brand awareness: analysis of 2 L carbonated soft drinks reusable shells using eye tracking technology. Packag Technol Sci.900 2017;30(11):711-722. doi:10.1002/pts.2316

**Section 4. Places that would be subject to restrictions Question 14****Which places, where targeted foods are sold to the public, should promotions restrictions** |

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| **apply to?**Retail – YesOut of home – Yes Wholesale – Yes Other outlets – Yes**Question 15****Are there other places/ types of business to which the restrictions should apply?**Yes. The restrictions should also apply to advertising on the entire public transport network and areas around parks, other areas that children frequent. Recent research found that “children who resided within more deprived areas had greater contact with the transport network and also greater exposure to unhealthy food and drink product advertising, compared to those living in less deprived areas.” [1, p.1]. The evidence also found location specific advertising around schools was effective in reducing advertising but children were exposed to advertising at public transport locations.[1] Olsen JR, Patterson C, Caryl FM, Robertson T, Mooney SJ, Rundle AG, et al. Exposure to unhealthy product advertising: Spatial proximity analysis to schools and socio-economic inequalities in daily exposure measured using Scottish Children's individual-level GPS data. Health Place. 2021;68:102535.**Question 16****Are there other places/ types of business which should not be within the scope of the restrictions?**No. There should be no exemptions to the restrictions.**Section 5. Exemptions to restrictions Question 17****Do you agree with our proposal to exempt specialist businesses that mainly sell one type of food product category, such as chocolatiers and sweet shops, from location restrictions?**Yes. Specialist businesses (such as chocolatiers) should be exempt. It would not be possible for specialist businesses to implement several of these restrictions due to their stores content.However, they should be required to adhere to price promotion restrictions, and restrictions on checkout locations.**Question 18****If exemptions are extended beyond our proposal to exempt specialist businesses that mainly sell one type of food product category, should exemptions be applied on the basis of:**Number of employees – No |

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| Floor space – No**Section 6. Enforcement and implementation Question 22****Do you agree with the proposal that local authorities are best placed to enforce the policy?**Don’t know. This could be implemented at a national level but enforced by local authorities.**Question 23****If local authorities were to enforce the policy, what resources (for example staffing/ funding) do you think would be required to support enforcement?**This could be implemented at a national level but enforced by local authorities who require adequate staffing and funding to allow successful implementation.**Question 24****What do you think would be an appropriate lead-in time to allow preparation for enforcement and implementation of the policy?**18 months.**Question 25****Are there any further considerations, for example as a result of the coronavirus pandemic, EU exit or rise in cost of living, that need to be taken into account in relation to enforcement?**See previous responses for considerations relating to the coronavirus pandemic.**Section 7: Legislative framework Question 26****Do you agree that Scottish Ministers should be able to make provision in secondary legislation, following consultation, to regulate in relation to specified less healthy food and drink and to arrange for enforcement (including the setting of offences and the issuing of compliance notices and fixed penalty notices)?**Yes. It is important to see that the legislation is flexible and able to adapt to future research, evidence etc.**Section 8. Impact Assessments Question 27****What impacts, if any, do you think the proposed policy would have on people on the basis of their: age, sex, race, religion, sexual orientation, pregnancy and maternity, disability, gender reassignment and marriage/civil partnership?**It could help to reduce consumption of HFSS products in younger and poorer populations that have the highest risk of diet related NCDs [1,2].[1] Akseer N, Mehta S, Wigle J, Chera R, Brickman ZJ, Al-Gashm S, et al. Non-communicable diseases among |

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| adolescents: current status, determinants, interventions and policies. BMC Public Health. 2020;20(1):1908.[2] Horton M, Perman-Howe PR, Angus C, Bishop J, Bogdanovica I, Brennan A, et al. The SPECTRUM Consortium: a new UK Prevention Research Partnership consortium focussed on the commercial determinants of health, the prevention of non-communicable diseases, and the reduction of health inequalities. Wellcome Open Res. 2021;6:6.**Question 28****What impacts, if any, do you think the proposed policy would have on people living with socio-economic disadvantage? Please consider both potentially positive and negative impacts and provide evidence where available.**It could help to reduce consumption of HFSS products in people from more socio-economic disadvantaged backgrounds that have the highest risk of diet related NCDs [1,2].1. Horton M, Perman-Howe PR, Angus C, Bishop J, Bogdanovica I, Brennan A, et al. The SPECTRUM Consortium: a new UK Prevention Research Partnership consortium focussed on the commercial determinants of health, the prevention of non-communicable diseases, and the reduction of health inequalities. Wellcome Open Res. 2021;6:6.
2. Backholer K, Gupta A, Zorbas C, Bennett R, Huse O, Chung A, et al. Differential exposure to and potential impact of, unhealthy advertising to children by socio-economic and ethnic groups: A systematic review of the evidence. Obesity Reviews. 2021;22(3):e13144.

**Question 29****Please use this space to identify other communities or population groups who you consider may be differentially impacted by this policy proposal. Please consider both potentially positive and negative impacts and provide evidence where available.**It could help to reduce consumption of HFSS products in younger populations that are vulnerable to the marketing of HFSS [1-5].1. Backholer K, Gupta A, Zorbas C, Bennett R, Huse O, Chung A, et al. Differential exposure to and potential impact of, unhealthy advertising to children by socio-economic and ethnic groups: A systematic review of the evidence. Obesity Reviews. 2021;22(3):e13144.
2. Moodie R, Stuckler D, Monteiro C, Sheron N, Neal B, Thamarangsi T, et al. Profits and pandemics: prevention of harmful effects of tobacco, alcohol, and ultra-processed food and drink industries. The Lancet. 2013;381:670-9.
3. Carters-White L, Chambers S, Skivington K, Hilton S. Whose rights deserve protection? Framing analysis of responses to the 2016 Committee of Advertising Practice consultation on the non-broadcast advertising of foods and soft drinks to children. Food Policy. 2021;104:102139.
4. Bartlett O, Garde A. Time to seize the (red) bull by the horns : the EU's failure to protect children from alcohol and unhealthy food marketing. European Law Review. 2013:498-520.
5. Packer J, Russell SJ, McLaren K, Siovolgyi G, Stansfield C, Viner RM, et al. The impact on dietary outcomes of licensed and brand equity characters in marketing unhealthy foods to children: A systematic review and meta-analysis. Obesity Reviews. 2022;23(7):e13443.
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| **When was the response submitted?** |
| 23rd September 2022. |
| **Find out more about our research in this area** |
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