

UK government delays restriction of promotions on less-healthy foods: Serious implications for tackling obesity

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Abstract

Regulations ensuring that the promotion and advertising of foods high in fat, sugar, and salt were restricted from October 2022 are now to be delayed by the UK Government. The delay of this policy is to be condemned because it will set back the anticipated improvement to population diets and obesity levels by postponing the expected transformation of retail food environments in-store and online. Governmental justifications for delaying these policies, the implementation of which was the responsibility of the UK food industry, can be perceived to reflect a short-sighted willingness to use the current economic circumstances to push the responsibility for obesity and dietary choices back into the court of the consumer. Delaying these policies will, yet again, leave public health and clinical practitioners tackling obesity with less-effective approaches focused on individual willpower and information provision.

We are disappointed about the UK Government's decision to delay the implementation of regulations [1] restricting "multi-buy" (i.e., buy-one-get-one-free) promotions on products that are considered less healthy or "high fat, sugar, and salt" (HFSS). The delay is a step back on progress tackling obesity amid rising and record levels in UK adults and children [2]. Also among the planned approaches within the UK Childhood Obesity plan [3] were additional restrictions banning HFSS advertising on television before 9 p.m. and paid-for advertising online, which are now similarly delayed. This means that children are now directly impacted and that they will continue to be exposed to this advertising. These young people include those that the Government has described as "uniquely vulnerable to the techniques used to promote sales" [3].

The ambition of these obesity policies, a "first" for the UK food industry, was to fundamentally change those retail food environments that are promoting less-healthy products more than those considered healthier. Without regulation, commercial retail food environments will be difficult to change. Implications of the delays therefore include a lost opportunity to help improve diets by transforming those "obesogenic" (in-store and online) retail food environments via the removal of their HFSS product advertising and promotions. To be implemented by the

food industry, the delayed regulations required scrutiny of each product's nutritional composition in order to establish whether specific product types were permitted to be promoted or advertised. Restricted products are classified as HFSS according to their content of energy (calories) and certain nutrients of "public health concern" while recognizing contributions from components (i.e., fruit and vegetables, fiber). It is exactly this self-scrutiny by the industry that is needed in order to meet the requirements of a retained policy element, i.e., to restrict HFSS products from prominent in-store and online locations such as checkouts (implementation of which will go ahead as planned this year). This leads us to question one of the Government's explanations for their delays, which was to give the industry more "time to prepare" [1]. There is disappointment that the governmental brakes appear to have been applied to policies that will encourage widespread industrial action to create and price-promote foods with a healthier nutritional profile.


A clear implication of the delay is that the anticipated reductions in population calorie intakes [4] that were previously modeled on the policy implementation will now be far less than expected. The delays are also expected to worsen the growing inequalities in dietary quality and obesity levels that are associated with socioeconomic status [3].

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Therefore, it is a concern that when rationalizing the delay the UK Government cited the current “unprecedented global economic” situation [1], implying that HFSS product multi-buy price promotions are required in order to enable people to buy food. The situation with the rising cost of food and fuel is a huge concern for health and nutrition professionals, reflecting the increasing number of people who are at risk of food insecurity [5]. There is an urgent need to address this equitably and ethically, by reducing socioeconomic disparities and levels of poverty. On the issue of costs, we recall the Government’s recent acknowledgement that “although promotions appear to be mechanisms to help consumers save money, data shows that they increase consumer spending by encouraging people to buy more than they intended to buy in the first place” [3,6]. We emphasize that one of the anticipated impacts of the (delayed) policy was to incentivize retailers to nutritionally “rebalance” which products were on promotion to help people move away from HFSS products and toward healthier choices.

In stepping back from years of planning and publishing the detail on the implementation of the regulations, the Government appears to have retreated to the well-trodden ground of tackling obesity via emphasis on individual willpower, not the food industry. This cannot be fair in the context of current retail food environments, which can undermine consumers’ efforts to manage their weight [7]. Willpower alone cannot explain successful weight management. The efficacy of pharmacological interventions to overcome some of the biological factors that underlie obesity, including appetite [8], highlights this and also emphasizes that supporting clinically significant weight loss requires additional behavioral modifications and psychological support [9]. Having come so close to the implementation of the published regulations, both health professionals and consumers alike are forgiven for feeling like they have been “led up the garden path” toward a formal role for industry action on obesity. In trying to mitigate the impact of the delays on patients’ health, practitioners might wonder whether the Government now expects them to warn patients who are undertaking “enabling” lifestyle intervention programs of the dangers of product promotions and their potential health implications. A lack of comprehensive action, including restrictions to advertising and food promotions, is an unacceptable approach to reducing rates of both adult and childhood obesity and is, therefore, doomed to fail.

Condemnation of the Government delays has resulted in a consensus that these policies are an important first step toward the industry actively promoting healthier food choices and meaningfully enabling consumers to eat according to the principles of food-based dietary recommendations. The policies are also now an important milestone because they reflect a governmental acknowledgement that the current situation of retail food environments is unacceptable. However, we should not forget that the policies are a starting point and not the perfect solution to the obesity crisis raging in the UK. For example, the focus on only HFSS products is not without criticism. This classification does not recognize level of processing, which can also be associated with highly palatable, appetite-stimulating foods as well as risk of obesity [10]. Overall, the policy delays serve to highlight what could have been achieved through the transformation of retail food environments as part of a whole-systems approach to prevent and treat obesity. 

CONFLICT OF INTEREST

Sally Moore is the Chair of the British Dietetic Association (BDA) Public Health Specialist Group pro bono. She has previously provided consultancy for the BDA’s Corporate Strategic Partners, including UK food industry organizations. Tom Butler is a Committee Member of the BDA Public Health Specialist Group and Scientific Officer for the British Association for Cardiovascular Prevention and Rehabilitation.

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