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Llywodraeth Cymru  
Welsh Government

Welsh Government

Consultation Document

# Healthy Weight: Healthy Wales

**Our national ambitions to prevent and reduce obesity in Wales**

Date of issue: 17 January 2019

Action required: Responses by 12 April 2019

Mae'r ddogfen yma hefyd ar gael yn Gymraeg.

This document is also available in Welsh.

**Overview**

The Welsh Government is committed to helping people to achieve and maintain a healthy weight. This consultation paper provides a draft plan for how that could be achieved and seeks views on those proposals.

**How to respond**

Please complete the consultation response form and send it to:

[HealthyWeightHealthyWales@gov.wales](mailto:HealthyWeightHealthyWales@gov.wales)

**Further information and related documents**

**Large print, Braille and alternative language versions of this document are available on request.**

**Contact details**

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## Foreword



In Wales, as across most of the developed world, many of us are struggling to maintain a healthy weight. We are now in a position where six out of ten adults and one in four of our reception aged children are overweight or obese. Obesity rates are predicted to continue rising across the population. We know that obesity is already one of the most preventable causes of ill health and premature death, which is a direct cause of some cancers and cardiovascular disease. We are even seeing a significant impact on our younger population, as Type 2 diabetes levels continue to increase. We are at a point in time where we need to take direct action to improve life opportunities for both our current and future generations.

We cannot underestimate the scale of the challenge. There are no single solutions or simple ways in which we can make change. We are talking about habits relating to our consumption of food and decline in levels of physical activity which have built up over decades and over a generation. However, this government is not prepared to let a poor diet or physical inactivity to be defining features in the lives of our children and young people. We should not tolerate that our next generation will grow up with the normality of regularly eating highly processed foods, having no concept about where their food comes from, or not having enough movement in their daily lives. We must not be fazed by this challenge - obesity is preventable and is not inevitable. We can enable change.

I am delighted to launch this consultation on '*Healthy Weight: Healthy Wales*' which sets out our national ambitions to prevent and reduce obesity in Wales. The consultation has been developed across a number of key themes, including enabling leadership and change, healthy environments, healthy settings and healthy people. We want to think, as a nation, about how we can really help to make a step change to prevent and reduce obesity levels in Wales.

There are some fantastic examples across the world, in towns and cities where there are declining levels of childhood obesity which we have already been learning from. There is also good practice already taking place across Wales, which we can build upon. A defining feature of places which have had success is strong leadership and a system in place to co-ordinate and drive change. Leadership needs to take place at a national, local and a community level and I want us to really think about how we can enable and make this happen.

We know that many of us want to eat healthier or do more exercise. However, fitting this into our busy lives can appear to be an overwhelming challenge. Creating an environment where it is normal and easy for us all to eat well and be physically active can make a significant difference and nudge us to change our daily routines. This starts in the places where we live, shop, socialise, commute, and in our settings, such as schools or workplaces. We want to support making the healthy choice the easy choice.

We want to empower and enable people to think about their own and their family's health to support achieving or maintaining a healthy weight. This can be about encouraging some small, but potentially lifestyle changing decisions to improve positive health outcomes. This is more challenging where there are greater health inequalities and in particular we want to consider how we can support those on lower incomes. We also want to consider ways to support those who are already overweight or obese. This includes thinking about early intervention, through community based support and specialist weight management for those who may require more intensive support.

In this consultation we have suggested a series of 'What matters?' statements which we would like you to consider so we can prioritise the actions we need to take. I want to hear views from across Wales. To enable this we will be running a range of regional events, focus groups and engagements in town centres, linking with schools, colleges, universities and workplaces to ensure we can hear as many voices as possible on this vital issue. I encourage you to share your experience and knowledge with us and I look forward to receiving your responses.

A handwritten signature in black ink that reads "Vaughan Gething". The signature is written in a cursive, flowing style.

**Vaughan Gething AM**  
**Minister for Health and Social Services**

## Introduction

The World Health Organisation (WHO) regards obesity as one of the most serious global public health challenges for the 21st century. The UK has one of the highest levels of obesity in Western Europe. In Wales over a quarter of our four to five year olds are overweight or obese, with more than one in every ten classified as obese<sup>1</sup>. This gets worse as we move into adulthood, with six in ten adults overweight or obese and one in four obese<sup>2</sup>. We also know that more men than women are overweight or obese and that those in our most disadvantaged communities are more likely to be obese than those in the more affluent areas.

Being overweight has now become normal in Wales. Evidence gathered by Public Health Wales demonstrates that as being overweight and obese has become more common, our ability to recognise what is a healthy weight has reduced<sup>3</sup>. Parents may not be able to recognise when their child is overweight and therefore may not consider making any changes even though they are well motivated to do so. Furthermore, as being overweight or obese in the adult population has become normal, it is clear that many people are finding it difficult to take steps to lose weight, or maintain a healthy weight.

## The Impact

Obesity is the leading cause of several major conditions including type 2 diabetes, cardiovascular disease and some cancers. There are also links with orthopaedic problems, poor mental health and depression.

- Recent estimates by Cancer Research UK<sup>4</sup> show that obesity is the second greatest preventable cause of cancer, after smoking. It is projected that 25 years from now, obesity will become the main cause of cancer in women if we continue with our current lifestyles.

Children who are overweight or obese are at a greater risk of poor health in adolescence as well as in adulthood. We know that 80% of people who are obese at age four to five remain obese<sup>5</sup>. Overweight children are developing conditions and illnesses normally associated with adults, such as type 2 diabetes.

- Diabetes UK<sup>6</sup> reported that 6,836 people under the age of 25 have Type 2 diabetes in England and Wales, which includes around 1,500 people under the age of 19 being treated for the illness. Type 2 diabetes is commonly associated with obesity and poor lifestyle and can be more aggressive in young people.

There are also risks of psychological harm of childhood obesity, which include bullying and discrimination by peers, low self-esteem, anxiety and depression. Psychological impacts can continue into adulthood and decrease quality of life. Obesity also impacts on our quality of life. We know that having a high Body Mass Index (BMI) is the leading contributor in Wales for increased Years Lived with Disability<sup>7</sup>.

The financial cost to the economy is considerable. Illnesses associated with obesity projected to cost the Welsh NHS more than £465 million per year by 2050, with a cost to society and the economy of £2.4 billion<sup>8</sup>.

## The causes

The causes and drivers of obesity are complicated, we know that the widespread availability of energy-dense, relatively cheap convenience food, and a decline in the need or desire to be physically active, has contributed significantly to increasing levels of overweight or obesity in Wales. We also know that there are barriers to reaching and maintaining a healthy weight which can vary by ethnicity, poverty and age. Alongside this consultation, Public Health Wales have produced a 'Case for Action'<sup>9</sup> that highlights a number of factors which have been considered in the development of this consultation.

There is no quick fix. Achieving and maintaining a healthy weight is a personal challenge for us all. However, creating the right conditions can help people to support healthy choices. This includes developing an environment to enable healthy food and activity choices. This includes where we live, shop, socialise, commute or in settings where we are educated or work. We want to support people to take responsibility for their own health and those they care for, whilst empowering the wider community to drive change.

The Welsh public support change. The Stay Well in Wales survey<sup>10</sup> found that 70% of the Welsh public agree that advertising of unhealthy foods to children should be banned, 88% agree that schools should teach children more about how to live a healthy life and 82% agree that healthy foods should cost a bit less and unhealthy foods a bit more. Healthy eating and physical activity were identified as the two most important areas where preventative funding should be focussed.

## What we would like to achieve

***'Our vision is that the people of Wales should have longer, healthier and happier lives, able to remain active and independent, in their own homes for as long as possible'. (A Healthier Wales: Our Plan for Health and Social Care, 2018).***

To achieve this vision, we need to shift our focus and resources to prevention and early intervention, reducing the number of children and adults who become overweight or obese each year. We want to halt and ultimately reverse current trends.

This consultation reflects a key commitment in the Public Health (Wales) Act 2017<sup>11</sup>, to produce a strategy which will aim to prevent and reduce obesity. This contributes to '*A Healthier Wales: Our Plan for Health and Social Care*<sup>12</sup>, which sets out a vision for the future of health and social care services in Wales. This includes placing a greater role on prevention.

This plan will be consistent with our Well-being of Future Generations (Wales) Act 2015<sup>13</sup>, taking account of the long-term impact of decisions, and recognising the importance of collaborative working to the prevention of persistent problems related to health inequalities. It will support the five ways of working and contribute across the seven well-being goals. Given the complexity of the issue, we need to take a long-term approach, which will bring together a range of partners and communities across Wales. This will require co-ordinated action and integration to develop approaches across sectors including health, social care, planning, housing, transport



and business to bring about major change to combating obesity, making better use of resources and improving wellbeing.

### **What matters?**

The consultation has been developed across four key themes:

1. Leadership and Enabling Change
2. Healthy Environments
3. Healthy Settings
4. Healthy People

These themes have been designed to drive and shape behavioural change. This takes into account the range of factors which we know shape our daily choices. Under each theme there are 'What Matters?' proposals, which are areas and actions that we want to test during the consultation. We need your views to ensure we capture the range of actions necessary to shape a comprehensive plan for obesity prevention and reduction in Wales.

## 1. Leadership and Enabling Change

**We aim to drive improved leadership and accountability to deliver Healthy Weight: Healthy Wales across all sectors**



### **The challenge**

The causes of obesity are complex and the journey to becoming overweight is a highly personal one. For some there may be a biological susceptibility to weight gain, but for all of us a crucial factor is our environment and how far that helps or hinders us to make healthy food choices and build activity into our everyday lives. What this means is that achieving a healthy weight is not just the responsibility of the individual, and to make a difference at a population level we will require a collaborative approach that creates system wide change. Whilst there have been examples of good practice taking place at a local level in Wales, previous approaches have tended to focus on single initiatives on a small scale.

Rising obesity rates are not inevitable and the positive news is that there are emerging examples of communities, states and cities that have managed to reverse the trend<sup>14</sup>. We can draw on a growing body of knowledge in Wales to help us with our efforts. The links between individual behaviour and the environment are well established<sup>15</sup> and our key challenges will be to reshape the wider environment in which individuals go about their daily lives, and transform the growing interest in maintaining good health into an achievable goal for all.

The international examples which have achieved change, and those which appear promising, have taken a long term commitment with strong national and local leadership from the outset. We know that there are a number of opportunities for intervention during an individual's life course which have been identified as possible stages to influence behaviour. These relate to critical periods where lifestyles can be shaped (early life, pregnancy), times linked to spontaneous change in behaviour (leaving home, parenting) or periods of significant shifts in attitude (peer group pressure, ill health).

### **What action could we take?**

The need for a whole system approach is critical. This will require a broad set of policies including both population and targeted measures which will bring together action by government, both central and local, across a range of partners. Wales already has a supportive policy environment for taking this work forward. The Wellbeing of Future Generations (Wales) Act 2015<sup>16</sup> sets the scene for both the ambition and goals of our future approach and the ways of working that will be necessary to deliver.



**Long-Term**

**Prevention**

**Integration**

**Collaboration**

**Involvement**

In seeking to tackle obesity, we are addressing changes in the way that we live our lives that have evolved over decades. There are no quick wins. To stop the rise in obesity we will require collaborative effort from across the public, private and voluntary sectors and amongst individuals, families and communities.

Public Service Boards are well placed to test the needs in their local communities as part of their assessment of local wellbeing in their area. Engagement with local communities and stakeholders is essential to ensure actions and improvements address local requirements and reduce inequalities in health. This will need to take account of individual motivations and barriers, alongside the need to draw upon local assets to enable change. Local Health Boards will play a key role in mobilising actions across their areas and we wish to build greater accountability into delivery to drive forward change.

### **What Matters?**

LEC1. Developing a long term, whole system approach to **address obesity** based upon the core principles of :

1. Delivery of the 'Healthy Weight: Healthy Wales' plan to be led by a **national implementation board** which will be accountable to Ministers.
2. Create a **strengthened role for public health leaders** in Local Health Boards so that they can work with Public Service Boards to develop regionally based approaches to implementing the plan.
3. **Prioritise and focus resources** to make sure that current investments are delivering and where resources are available they are used in a sustainable way. Support must be focussed on enabling the system to act.
4. Higher priority for early intervention as well as the **prevention of overweight and obesity**. This will include clearer leadership, accountability, strategy and management structures. We will ensure that obesity is a tier 1 target for Local Health Boards. This aligns with '*A Healthier Wales: Our Plan for Health and Social Care*' to shift resources to focus upon prevention.
5. **Engagement with stakeholders**, including a multi-level stakeholder engagement and communication programme which will ensure that we can engage all sectors of welsh society in achieving our goal and maintain that engagement and commitment over time.

6. **Long-term, sustained interventions** which will build on international learning. Public Health Wales and the Public Health Directors Leadership Group, with clinical and allied health leaders will agree a 'menu' of effective strategies based on the review of evidence, which will drive local delivery. Local action will be determined and prioritised according to local need, assets and opportunities and will recognise that each area of Wales starts in a different place.
7. **Ongoing evaluation and a focus on continuous improvement**, which will enable us to learn from our work, adapt and change. This will include a review of the data from the **Child Measurement Programme, including to develop a second measurement** to consider how we can measure change effectively.

We know that making change is a challenge and influencing attitudes is very difficult. Enabling change at the individual level requires an understanding of people's lives and specifically their capabilities, opportunities and motivations before tailoring interventions to their specific needs and interests. There is good work already being done through programmes across Wales which aim to enable people, including parents and children, to make healthier choices, cook basic meals, to budget for food, and to be able to achieve or maintain a healthy weight. However, much of this activity has not been rigorously evaluated.

### **What matters?**

**LEC2. Understanding what works. We want to review the impact and scale of delivery of community based programmes** to determine which have the greatest merit and work with partners to scale programmes as part of a systems based approach.

**Question :** Do you agree that a whole system approach could enable change to take place? If not, why? What are the opportunities, risks and barriers to effective leadership?

**Question :** Are you aware of any good practice locally? How can we build upon and maximise existing practice and resources to support population change across Wales?

## 2. Healthy Environments

**We aim to create an environment which supports everyone to make healthier food and activity choices**



### **The challenge**

The ways in which society and our environment have developed over the years is often at odds with our efforts to maintain a healthy lifestyle.

We now have the convenience of almost non-stop access to a variety of foods which are relatively cheap but often energy dense and high in fat, salt or sugar. Our high streets are increasingly populated with fast food outlets, and online ordering means we don't need to leave our armchairs to access it. We are exposed to sophisticated advertising and promotions which nudge us to make unhealthy choices.

From childhood we are encouraged to clear our plates, and when we are served more, we eat more. This is not good news when our food servings are growing - portions, pack sizes and tableware have substantially increased over the last 50 years. A Cochrane review in 2015 found some ready meals had almost doubled in size and family packs of crisps increased by 50% between 1993 and 2013<sup>17</sup>.

We know that we are continuing to eat too much sugar, salt and saturated fat and not enough fruit, vegetables and fibre<sup>18</sup>. For instance, the mean intake of sugar in Wales is around three times higher than the recommended maximum in school-age children and young people and around twice higher in adults. We know the majority of people in Wales eat more calories than they need. On average, overweight and obese adults are overeating by 200-300 calories a day<sup>19</sup>.

We are also the first generation which needs to make a conscious decision to be physically active. Car use has increased, fewer of us have manual jobs, and technological and societal changes have gradually designed physical activity out of our daily lives. Only about half of adults in Wales get enough physical activity, and a third undertake no physical activity at all. Only one in six 11-16 year olds are achieving the Chief Medical Officer's (CMO) guidelines of 60 minutes of activity every day. There is a 17% difference between those meeting the guidelines in the most deprived areas compared to the least deprived<sup>20</sup>. We know that even a moderate increase in the amount of physical activity we undertake can have an important benefit to our health and well-being.

### **What action could we take?**

#### **Enabling us to make healthy food and drink choices**

The food manufacturing industry has the capability to support population dietary change. One of the most effective ways it can do this is through reformulation – to modify the make-up of foods to reduce the levels of calories, sugar, saturated fat and salt. Reformulation does not rely upon individual behaviour change but changes the

food environment for everyone and in doing so can contribute to reducing diet related inequalities. Reformulation work has the best chance of making a strong impact when it is supported by food retailers' decisions about product formulation as well as which products to stock and how to promote them.

To date there has been some good progress at a UK level. We welcome the measures set out in UK Government's Childhood Obesity Plans<sup>21</sup> that support our ambitions for the food environment. The introduction of the soft drinks sugar levy resulted in a decrease in the sugar content of some drinks, and voluntary reduction targets have led to decreases in population salt intakes and reductions in sugar in some foods<sup>22</sup>.

### What Matters?

HE1. Supporting **Welsh business to reformulate and to develop healthier food choices** by providing increased help through Food Innovation Centres. We support the reformulation programme delivered for the UK Government by Public Health England and will monitor progress. We will consider additional measures if necessary, including the use of further taxation powers in Wales, if the scale and pace of change by industry is not sufficient.

The food industry can also support us in making healthier choices through addressing the current imbalance in advertising and promotion. The UK food industry spent over £250 million promoting unhealthy foods in retail settings in 2014<sup>23</sup>, clearly indicating that they see this as a highly effective marketing technique. We also know that on-line advertising provides specific challenges and is increasingly where children and young people are spending more of their time compared to television. Much of the evidence focuses on children, and demonstrates a clear link between food and drink adverts, children's food choices and how much they eat<sup>24</sup>.

### What Matters?

HE2. Limiting the promotion of unhealthy foods. The UK Government has committed to consult on **TV and online advertising** to children of products high in fat, sugar and salt. We wish to support a 9pm watershed, and to go further, such as banning the use of brand generated and licensed character/celebrity endorsement of products across all media. We also want to utilise our powers in Wales by **limiting the use of advertising and promotion of unhealthy food in public places**. This includes, but is not limited to, train and bus stations/bus stops/on buses and at sporting and other events.

Promotions, discounting and in-store marketing and shelf placement of products within the shop also prompt unhealthy choices and higher levels of consumption of unhealthy foods. Such promotions increase the amount of foods people buy by about one fifth<sup>25</sup>. We also know that there have been positive strides taken by retailers to help support healthier choices through product positioning and marketing. We wish

to work closely with Welsh retailers to consider effective ways to drive forward dietary change.

### What matters?

HE3. Creating a level playing field and making healthy food an affordable option. By regulating **price promotion and discounting practices** that lead to higher consumption of unhealthy foods, and encouraging the food industry to apply these approaches, we hope to incentivise healthier food purchasing in Wales. We will consult on how we could do this and wish to work with the UK Government to ensure there are consistent and clear expectations for businesses across boundaries.

The food we eat outside the home (such as takeaways, cafes and restaurants) makes a significant contribution to our diet. The proportion of meals eaten outside of the home is increasing year on year. Last year, 22 million fast food and takeaways were consumed by adults in the UK each week<sup>26</sup>. This food tends to be calorie dense, higher in saturated fat and salt, and lower in fibre and fruit and vegetables than we would eat at home. Eating out of home contributes from a fifth to a quarter of adults' calorie intakes<sup>27</sup>. Improving the nutritional value of foods and reducing portion sizes could have a positive impact. In a survey by Diabetes UK<sup>28</sup>, where 9 out of 10 people say clearer food labelling would help them make healthier food choices.

### What matters?

HE4. Giving people accessible information so that they can make an informed choice.

- We want to consult on **mandating calorie labelling for food purchased and eaten outside of the home**, which will help to inform consumer choice and may encourage reformulation.
- We want to consider further opportunities to improve **consumer information on labelling** which may arise following European Exit, including on front of pack nutrition labelling, and encourage Welsh producers to provide the most effective nutrition information on their products.
- We want to consider how we could support businesses and **stimulate an increase in healthier food establishments**.

The contribution that drinks can make to excessive daily sugar and calorie intake often goes unrecognised. Energy drinks can contain high levels of caffeine in addition to sugar and are associated with sleep loss, addiction, dependence, and withdrawal<sup>29</sup>. Although there is a legal requirement to label these drinks as 'not recommended for children', there are no legal restrictions on sales. Some supermarkets have proactively taken steps to prohibit sales to under-16 year olds. However, we want to create a level playing field and uniformly ban sales across all retailers.



### What Matters?

HE5. Encouraging **healthier drinking habits** by consulting on proposals to ban the sale of **energy drinks** to children under the age of 16, consider restrictions on free refills and introducing a maximum portion size on soft drinks. Alongside this we will encourage people to drink water by making Wales a **Refill Nation**.

### Creating an active environment that supports a healthy weight

There is strong evidence linking health and wellbeing outcomes with the quality of the built and natural environments<sup>30</sup>. Living near to green open spaces, having access to healthy food choices and the opportunity to be active can also support people to maintain a healthy weight. The planning system has the potential to play an important role in the promotion of healthy lifestyles and in creating the conditions which can help people to live healthy lives.

### What matters?

HE6. **Creating healthy weight environments**. By working with local authorities, health boards Public Health Wales and Transport for Wales we can create environments that facilitate active travel, physical activity, access to healthier food, high quality open spaces, green infrastructure and opportunities for play, sport and recreation, are prioritised as part of the **planning process**. This will be supported by the following:

- Promote the use of **health impact assessments** and the development of regulations and guidance on the use of these assessments by public bodies, to enable delivery.
- Public Health Wales to develop and disseminate **resources to support local action** to achieve place making that proactively supports healthy weight. Resources may include evidence reviews, guidance, blueprints and example policies.

It is important when new infrastructure projects are being developed, such as homes, schools or hospitals, that physical activity and active travel are considered in order to prioritise walking and cycling. It is estimated that living in activity friendly neighbourhoods can provide between 32% and 59% of the 150 minutes of weekly physical activity that is recommended for adults<sup>31</sup>.

The Active Travel (Wales) Act 2013<sup>32</sup> is a landmark Welsh law to make it easier for people to walk and cycle in Wales. The Act requires local authorities to continuously improve facilities and routes for pedestrians and cyclists and to prepare maps identifying current and potential future routes for their use. This aims to enable positive behavioural change in our daily routines to reduce the need for car usage, to connect us with access to sustainable transport modes (such as buses and trains) and which also provides opportunities to strengthen community cohesion.



High quality natural resources and ecosystems play a key role in supporting health outcomes. Our National Resources Policy illustrates that nature based solutions, including urban green infrastructure, can support physical and mental health. Studies also suggest that people living closer to good-quality green space are more likely to have higher levels of physical activity, and are more likely to use it more frequently<sup>33</sup>. This includes increasing green space and tree cover and improving public access particularly in areas close to towns and cities where there will be the greatest recreational value and positive impact on health.

Outdoor activity has clear benefits for mental and physical health. Whilst more than 80% of adults in Wales take part in some type of outdoor recreation at least once a year, only about a quarter do so regularly<sup>34</sup>. Section 11 of the Children and Families (Wales) Measure 2010<sup>35</sup> also places a duty on local authorities to assess and secure sufficient play opportunities for children in their area. Wales: A Play Friendly Country is statutory guidance to local authorities on assessing for and securing sufficient play opportunities for children in their areas.

### What Matters?

HE7. To work with local authorities, local health boards, Transport for Wales and partners to ensure that key infrastructure investments in our towns and cities are connected and support the development of healthier weights, this includes:

- Ensure the **design of infrastructure** including new housing and regeneration sites, South Wales Metro, and new health care sites support active environments.
- Continue **investment in Active Travel** and scale support to increase walking and cycling routes across Wales. This will include considering the potential for our new powers over national speed limits to be used to improve road safety and increase active travel.
- Use our Green Infrastructure, Sustainable Management Scheme and the new Enabling Natural Resources and Well-being Grant (ENRaW)<sup>36</sup> to increase **access and use of the countryside** (parks, forests, beaches, national trails, rights of way and rivers) and make use of the land available for community use to support and promote active lifestyles.
- **Community sport infrastructure** to increase access to high quality provision, such as 3G pitches, including reviewing the delivery of the Sports Facilities Capital Loan Scheme. We will work to ensure access to advice and finance for small physical activity-related businesses and clubs and increase capacity for Sport Wales to provide proactive planning advice to encourage best practice.
- **Play provision** which supports our Children and Families (Wales) Measure 2010. This includes working with local authorities and partners to develop approaches in our most disadvantaged areas through Play Sufficiency Assessment and Play Action Plans.

**Question :** Do you agree that the proposals set out in HE1- HE5 would make our food and drink environment healthier? If you agree, how do you think these could be implemented and what support will be required? If not, why?

**Question :** Do you agree that the proposals set out in HE6-HE7 would provide an environment with more opportunities to be active? If you agree, how do you think these could be implemented and what support will be required? If not, why?

### 3. Healthy Settings

**We aim to create healthy settings which provide opportunities for people to access healthy meals, snacks and drinks and be physically active**



#### **The challenge**

Throughout our lives we spend a significant amount of time in a variety of settings. These can influence our daily food and physical activity habits and impact on our weight. They are often designed to support busy lives and provide food and drink from vending machines and take away food outlets, which can lead to unhealthy food choices. In addition, it is often easier to travel by car rather than walk or cycle, which results in a large amount of our time spent sitting and not being physically active. This can have long term impacts on our health and wellbeing.

Settings can provide excellent opportunities to implement policy changes that can support behaviour change and improve diet and physical activity levels.

#### **What action could we take?**

**Childcare settings will provide healthy meals, snacks and drinks and support children to be physically active**

Childcare settings can help the development of healthy eating behaviours and physical activity habits for life, as practices adopted in our early years are usually taken forward into later childhood and adult life. They also provide an opportunity to engage with parents to help promote positive lifestyle choices.

Children attending childcare settings from a young age can receive a lot of their daily food and nutritional intake there. Children's physical development and encouragement for movement can also be promoted in childcare settings. This includes helping children to use their bodies effectively, by encouraging spatial awareness, balance, control and coordination, and developing motor and manipulative skills. This can be supported through active play from a young age.

## What matters?

HS1. Building strong foundations in our early years settings. Strengthening the **Healthy and Sustainable Pre-School scheme** could support positive practices in settings through food, physical activity and play. This will be supported through a range of areas to develop healthy early years environments:

- Work with the local authorities, childcare organisations and Care Inspectorate Wales to embed the best practice guidance on **Food and Nutrition for Childcare**.
- Work with the **childcare sector to promote the importance of physical activity and play** and to recognise the contribution it makes to children's emotional, physical, social, language, intellectual and creative development.
- Embed the importance of **physical activity and well-being in the Foundation Phase** and work with practitioners to identify and share excellence in practice in both childcare settings and in primary schools, working with the Foundation Phase Excellent Network.

## School settings will embed a whole school approach to food and physical activity to optimise opportunities for pupils to adopt healthy lifestyle behaviours

Children's lifestyle choices are influenced by their families and wider society, but schools can play a vital role in promoting positive behaviours. The challenges across primary and secondary schools to support healthy settings are very different, particularly where older children have greater autonomy.

The new school curriculum<sup>37</sup> will support learners to develop an understanding of the contributory factors involved in achieving and maintaining a healthy weight, particularly the impact of food and nutrition on health and well-being and the skills to adopt healthy behaviours. Exploring these subject areas within the curriculum, facilitating new experiences and developing new skills in the process, will contribute to the whole school's approach and to learners' lifelong dispositions.

There are a number of programmes within Welsh schools which could be strengthened and aligned to provide additional support for this agenda. The Welsh Network of Healthy School Schemes<sup>38</sup> is a well-established national programme, operating within the majority of Welsh schools, which seeks to holistically promote health. Programmes such as Eco-Schools<sup>39</sup> have the potential to inspire children to value the environment, understand the benefits of being outside and encourages food growing within school grounds.

The Healthy Eating in Schools (Nutritional Standards & Requirements) (Wales) Regulations 2013<sup>40</sup> have been in place for five years ensuring provision of nutritious food and drink across the whole school day. However, there is scope for improvement to the nutrition and delivery of school food. We also know that many children eat food brought in from home or bought outside of school which can be of lower nutritional value.

A focus on active transport to and from schools, physical education and school sport is also important. More than half of primary school aged children are taken to school by car. We know that only 14-17% of adolescents aged 11-16 reported being active for at least 60 minutes every day and that physical activity levels in girls are lower compared to boys<sup>41</sup>. Schools can help to drive change in the wider community through the promotion of safe active travel routes and encouraging physical activity.

### What matters?

HS2. Support schools to create **whole school healthy weight environments**, including the modelling and reinforcement of healthy weight behaviours. This will be facilitated by the following:

- Strengthen **school programmes** to ensure it provides tailored support to schools to create whole school healthy weight environments. This includes Natural Resources Wales, Public Health Wales and Sport Wales to focus on the **collective** opportunities for education and learning based interventions to maximise the potential of existing programmes of work on physical activity and to accelerate the pace of change.
- **Strengthen pupil's voices** to drive healthy change in schools and work with School Councils and Youth Ambassadors to develop local approaches.
- One of the four purposes of the **new curriculum** is that learners develop as healthy, confident individuals who take part in physical activity and apply knowledge about the impact of diet and exercise on physical and mental health in their daily lives. The Health and Well-being Area of Learning and Experience will draw on physical activity, physical well-being, healthy eating and cooking. This will support learners to maintain healthy, balanced diets and physical activity for life.
- Update the **Healthy Eating in Schools (Wales) Regulations 2013** to reflect current government nutrition recommendations. Work with the Welsh Local Government Association, local authorities and schools to strengthen implementation.
- We will fund the **School Holiday Enrichment Programme** in summer 2019/20 to support children from participating schools to receive nutritious food and education, which includes increasing opportunities for physical activity, whilst working with parents to promote healthy behaviours.
- Embed **daily physical activity at an early stage** within primary schools. This includes expanding programmes such as The Daily Mile and strengthening opportunities through the physical environment in and around schools, such as playground design and access to green spaces.
- Work with local authorities to support **active travel to school**. This includes enhancing safe routes to schools by working with local communities to design appropriate solutions and supporting behaviour change through the Active Journeys programme.

## **Further and higher education settings will provide a healthy food offer and support young people and adults to be active**

Data from the National Survey for Wales shows that around 40% of the population is overweight or obese by the time they are 24 years old<sup>42</sup>. This indicates that there is an opportunity to influence eating and activity habits amongst young adults as they are beginning to make independent decisions about lifestyle choices.

Further and higher education settings can provide significant challenges. We know that factors such as new social environments and stressful situations can impact on eating and drinking behaviour. Young people may also be catering for themselves for the first time and may not have the knowledge, skills or confidence to budget or manage their low income or prepare meals. We also know that sports participation begins to decline after the age of 16 years, when many leave school<sup>43</sup>.

Environments within higher and further education can help to promote and support positive lifestyle behaviours such as a healthy diet and being physically active. This includes through pastoral care, ensuring provision of affordable healthy food choices and promoting movement and participation through organised physical activity.

### **What matters?**

HS3. Recognising that our young people are at risk of becoming overweight or obese as they move to tertiary education. Implementation of the **Healthy Colleges and Universities Framework** could improve opportunities for healthy food provision, facilities and participation in physical activity. This could be achieved by :

- Working with Colleges Wales, Universities Wales and Student Unions to support **implementation and opportunities**.
- Reviewing and strengthening current programmes to **increase physical activity and promote healthy eating opportunities across campuses**, including active travel to campus for students and to develop campaigns and support around healthy eating and preparing basic and nutritious meals for students.

## **Workplaces are supported to provide a range of healthy affordable food and drink options and support employees to be physically active**

Almost 1.5 million of people in Wales are in employment, so the workplace is an ideal setting to implement strategies to promote healthier lifestyles to achieve a healthy weight. Employers that support such strategies can reap substantial benefits. A healthier workforce results in less staff sickness absence and turnover, increased productivity and employee satisfaction, and fewer accidents and injuries. The Healthy Working Wales programme has engaged with 36% of the working population in Wales, including supporting employers to work towards a Corporate Health Standard or a Small Workplace Health Award<sup>44</sup>.

There are also many other opportunities. Workplaces can promote schemes such as Cycle to Work, offer free health checks and provide facilities to encourage active travel or physical activity. Healthier food and drink options in canteens and vending

machines, accompanied by price and placement promotion can facilitate healthier food choices.

### What matters?

HS4. Supporting businesses to develop good practices on healthy eating and physical activity. This could include:

- Promote the use of our **Economic Contract**<sup>45</sup> to encourage employers to support the health and wellbeing of their workforces.
- Encourage employers to **participate in national schemes to promote healthy weight**, including developing motivational campaigns and supporting employees to access evidenced based weight management programmes.

### NHS settings will be exemplars of best practice in promoting healthy eating and physical activity

Our healthcare settings must be exemplars of best practice in promoting healthy and active lifestyles for both the public and their workforce. We have mandatory nutrition standards for food and drink for hospital inpatients, and a range of standards and guidance covering food provided for staff and visitors, which need to be aligned. Contracts leased to external retail outlets on hospital premises can be a barrier to ensuring that entire hospital sites are healthy environments. However, there is good practice taking place which we want to build on throughout Wales.

All Health Boards and Trusts have the Corporate Health Standard Gold or Platinum award. As part of this we want to ensure there is optimal compliance with food and nutrition criteria across the whole hospital environment.

### What matters?

HS5. Local Health Boards and Trusts should act as an exemplar and support their workforces to be **healthy and active workforces**. This might include increasing active travel, promoting routine daily physical activity and providing weight management services for NHS staff. We also want health and care environments to be healthy through proposals to:

- **Align and mandate food and nutrition standards** for food and drink provision for staff and visitors.
- Develop a national **Hospital Retail Standard**, which will increase healthier options in retail outlets on NHS estates.

### Public settings will promote healthy eating and physical activity

Other public sector settings, including leisure centres and community centres, can help to encourage and support healthier food and drink choices and promote opportunities for physical activity.



Current practice in many settings includes vending provision focussed on sugary drinks and unhealthy snacks, upselling of chocolate or sweets and canteens which promote unhealthy food choices. Whilst we realise that many services rely upon the profit from food and drink sales to generate additional income, this can still be achieved with increased healthier options. There is evidence that competitive pricing and increasing the availability of healthier snacks in vending machines increases their purchase.

All public sector settings need to buy in food. It is important that public spending on food supports the aims and principals of the plan to support healthier weight. This will help to drive an increased demand and is a key way in which public sector spending can focus on driving change.

### **What matters?**

HS6. Supporting **public sector settings** to promote healthy food and drink options for staff, visitors and customers by developing guidelines and exploring opportunities to use contractual arrangements to drive change. We also want to work with the Welsh National Procurement Service (NPS) and other regional purchasing consortia to embed **stricter nutrition and food criteria in contract specifications** for food and food products.

**Question:** Do you agree with the proposals for the following settings (*please identify which setting(s) you wish to comment upon*)?

- Early Years (HS1)
- Schools (HS2)
- Higher/ Further Education (HS3)
- Workplace (HS4)
- NHS (HS5)
- Public Sector (HS6)

If you agree, how do you think these could be implemented and what support will be required? If not, why?

## 4. Healthy People

**We aim to provide the opportunities for people and communities to achieve and maintain a healthy body weight, particularly in areas where there are the greatest health inequalities**



### The challenge

Making improvements to the environment and our settings can create the conditions for individuals to make healthier choices. However, enabling and motivating people to make changes to their daily routines is often still a challenge; particularly when there are a number of competing priorities and perceived barriers. In many cases this requires changing habits built up over a life time, which is why embedding positive behaviours at the earliest opportunity is important.

Barriers faced by those trying to change their lifestyles can be psychological, practical or environmental. It may be not enough time to cook, competing priorities, the cost of buying healthier food, lack of cooking skills or simply the difficulty in making what can seem to be a difficult change. The good news is that many people express a desire to lose weight and recognise the negative impact that poor eating habits and physical inactivity have on their health and wellbeing.

### What action could we take?

**People and communities will have greater understanding and support to make informed and positive food and physical activity choices**

Social marketing and media campaigns can promote healthy behaviours for the population by addressing the motivations and barriers people face. However, we know that people are frequently frustrated and confused by a seemingly daily bombardment of messages from a range of sources about what to eat, or not eat, in order to be healthy. For some people this reduces their motivation to make changes. We want to make sure that people in Wales have access to authoritative, accurate and unbiased information to help them make informed choices for them and their family.

### What Matters?

**HP1. Understanding what will encourage or prevent people from adopting a healthier diet or being physically active.** We will work with Public Health Wales to design and deliver effective and high impact **behaviour change programmes based on** the evidence of what is effective for specific groups.

We know that having the skills, time and confidence to hold a discussion with an individual about their weight can be difficult. Yet a timely and effective prompt to discuss a person's eating or physical activity habits could help to stimulate a change in behaviour. This can be supported by a range of approaches to initiate change,



such as social prescribing approaches, which can lead to lifestyle change and ensuring that a strengthened preventative approach can be delivered within primary and secondary care.

### **What Matters?**

HP2. Ensuring that relevant front line health and care staff have undertaken core **Making Every Contact Count (MECC)** training on healthy weight and will have the skills and confidence to hold conversations with individuals about their weight and signpost to appropriate support services. This includes strengthening opportunities to develop and reinforce the knowledge and skills of staff working across a range of roles in the community, to include:

- Staff in childcare and foundation phase education
- Staff in primary, secondary and social care
- Community development and third sector staff
- National Education bodies, e.g. Health Education and Improvement Wales (HEIW) and Social Care Wales to ensure nutrition and physical activity (and where appropriate healthy weight) education is included as a core element in the training of health and social care professions.

### **Children will have the best start to life and families who need the most help will be supported**

We want to ensure children start school at a healthy weight - nearly three in ten currently do not. The early years (ages 0-7 in Wales), which include the first 1000 days of a child's life (from when a baby is conceived to two years of age) are crucial and can have a positive influence on how they develop, grow and learn with life-long consequences. This includes establishing good nutrition and eating habits for life.

The Healthy Child Wales Programme<sup>46</sup> provides a universal health programme for all families with 0 – 7 year old children. Children and their families are supported by services across the NHS and has the potential to engage, advise and support families to talk about their diet and weight during this crucial period of development.

Making the right choices as parents and carers can be difficult; we want to support and enable parents to make informed decisions. Public Health Wales has established the 10 Steps to a Healthy Weight Programme<sup>47</sup> to support the delivery of consistent, and evidence based advice and support to families. This starts in pregnancy, with helping women to attain a healthy weight before, during and after pregnancy, followed where possible by breastfeeding, and then timely introduction of solid food. Playing outdoors daily, getting enough sleep and limiting access to screen time are important. Supporting meal time behaviours such as the early introduction to vegetables and fruit, supporting portion control and avoiding sugary drinks can help to set children on the right path for the future.

We recognise that for some families, the day to day challenges of life can make translating good intentions into action much more difficult. Some families may also not have access, for example, to cooking equipment. We want to support parents to take preventative steps through increasing their awareness and providing support in

an accessible way. We want to develop new evidence-based approaches to help parents whose children are already overweight and obese, to enable lifestyle changes.

### **What Matters?**

HP3. The **10 Steps to a Healthy Weight** programme will provide practical support and information for parents via a range of evidenced based interventions and positive parenting campaigns. To include:

- Evaluation and implementation of a range of evidenced based programmes, particularly to **support mothers who are overweight or obese within pregnancy**.
- Ensuring **professionals have appropriate skills and consistent resources** to hold positive conversations about healthy weight. This includes utilising holistic programme of advice and support that will enhance children's health and developmental potential to parents and children in the early years, including through Flying Start (and outreach).
- Implementation an **all Wales breastfeeding action plan**, to create positive conditions and the right support for women to choose to breastfeed and increase the numbers of women who breastfeed for at least six months.
- Support for families on lower incomes, including working with the UK Government to consider consultation findings from the **Healthy Start Scheme**<sup>48</sup>, which aims to help pregnant women and children under five in low-income families to eat healthily and also includes an option to obtain free vitamins. Moving forward we wish to consider how funding for welfare foods could be best delivered across Wales.

### **Children will start school at a healthy weight and will have continued to maintain and sustain a healthy weight into adolescence (age 11-16)**

The Millennium Cohort Study<sup>49</sup> shows a sudden increase in obesity between the ages of 7 and 11, with 40% being obese or overweight. Only one in five 11-16 year olds met the Chief Medical Officer guidelines for engaging in at least 60 minutes of daily physical activity. These are crucial years which can help to shape future eating and activity habits.

We know that becoming obese or overweight is a continuing trend as children grow. Like adults, children and young people's lives have become less physically active and a higher proportion of their weekly food intake is not prepared at home. Food and drink prepared outside of the home tends to be higher in sugar, saturated fat and salt, compared to meals prepared at home.

Family and parents have considerable influence on children's healthy weight behaviours, particularly in the earlier years of a child life. In shaping the home environment, routines around bedtimes, mealtimes, play, physical activity and food choices, can support or hinder efforts to achieve and maintain a healthy weight. It is therefore important to focus on family-orientated approaches.

## What matters?

HP4. Support for families, utilising the Child Measurement Programme to identify schools with the greatest obesity rates that could benefit from a **Children and Families programme**. This work will link with schools and Families First provision, to ensure a coherent local approach to early intervention and prevention to help drive change and promote healthy weight behaviours.

### **People who are overweight or obese or at risk of becoming overweight/ obese will be able to receive access to information or services to support a healthier weight**

NICE<sup>50</sup> identifies that preventing and managing obesity is a key priority both from a strategic point of view and one of implementation. In Wales the obesity pathway<sup>51</sup> was established in 2010 by Welsh Government as a mechanism to implement and manage activity across the full range of determinants which cause obesity and overweight. Our seven Local Health Boards and Public Health Wales are responsible for working with partners and stakeholders to deliver and implement the Wales Obesity Pathway.

The pathway outlines service requirements for adults and children across four levels of support from population wide prevention, early intervention, weight management services and specialist medical and bariatric surgery services for morbid obesity. The pathway has led to the development of increased support and obesity services. There is a range of BMIs and spectrum of need across the levels of the pathway, ranging from people who are overweight or at risk of being overweight and have a constant struggle with being a healthy weight, and people who have become severely overweight who find it extremely difficult to achieve a meaningful weight reduction and could require bariatric surgery.

A key priority of this strategy is to ensure that we have the appropriate pathway in place to help our population to achieve and maintain a healthy weight, prevent excessive weight gain, identify people early and provide clinical and psychological support as required. This provides an important structure to deliver coherent services and to create transition points for people to access obesity services and support. A well-designed pathway can also act as an anchor point for local partnership delivery between local health boards, local authorities and third sector organisations.

In addition, links to mental health are significant and in some cases there is a need for specialist service support to enable change. There are associated links between obesity and adverse childhood experiences (ACEs)<sup>52</sup>, which will need to be addressed by skilled professionals in a multidisciplinary team, to enable and support positive lifestyle change.

It is key that all components of the pathway are in place and that people affected by overweight and obesity is able to access the right part of the pathway at the right time. We plan to have the appropriate pathway in place to help our population to achieve and maintain a healthy weight, prevent excessive weight gain, identify people early and provide clinical and psychological support as required.

## **What Matters?**

**HP5. Review and implement a clinical obesity pathway** ensuring it meets current standards, provides clear definitions, sets clear transition points across each level and that there is explicit governance and accountability for delivery. This includes reviewing current delivery and implementation barriers, setting minimum standards at each level and agreeing a minimum national dataset to help monitor impact by working with Local Health Boards.

**Question:** Do you agree that proposals HP1 – HP2 will support behavioural change and increase conversations about healthy weight through front line services? If you agree, how do you think these could be implemented and what support will be required? If not, why?

**Question :** Do you agree that proposals HP3 – HP4 will enable children and families to support a healthy weight? If you agree, how do you think these could be implemented and what support will be required? If not, why?

**Question :** Do you agree that proposal HP5 will develop a clinical pathway to ensure those who are overweight or obese can access the right kind of support? If you agree, how do you think these could be implemented and what support will be required? If not, why?

Consultation  
Response Form

Your name:  
Organisation (if  
applicable):  
email / telephone  
number:  
Your address:

## **Consultation Questions**

### **Healthy Weight: Healthy Wales**

We are seeking views on what will work to prevent and reduce obesity in Wales and help people achieve and maintain a healthy weight.

If you would like to comment on specific proposals under this theme, please use the summary of proposals document.

1. Are you responding as an individual or on behalf of an organisation? If you're responding on behalf of an organisation, please provide the organisation's name.

Individual

Organisation

Name of organisation:

We have identified some proposals for how we think we can help people to achieve and maintain a healthy weight but we want to know if these are the right proposals, if you know of different approaches which have proven to be effective and how we can best deliver the plan

2. Do you agree that a whole system approach could enable change to take place? If not, why? What are the opportunities, risks and barriers to effective leadership?

3. Are you aware of any good practice locally? How can we build upon and maximise existing practice and resources to support population change across Wales?

4. Do you agree that the proposals set out in HE1- HE5 would make our food and drink environment healthier?

- 5 Completely agree
- 4 Agree
- 3 Neither agree/ disagree
- 2 Disagree
- 1 Completely disagree

If you agree, how do you think these could be implemented and what support will be required? If not, why?

5. Do you agree that the proposals set out in HE6-HE7 would provide an environment with more opportunities to be active?

- 5 *Completely agree*
- 4 *Agree*
- 3 *Neither agree/ disagree*
- 2 *Disagree*
- 1 *Completely disagree*

If you agree, how do you think these could be implemented and what support will be required? If not, why?

6. Do you agree with the proposals for the following settings (*please identify which setting(s) you wish to comment upon*)?

- Early Years (HS1)
- Schools (HS2)
- Higher/ Further Education (HS3)
- Workplace (HS4)
- NHS (HS5)
- Public Sector (HS6)

- 5 *Completely agree*
- 4 *Agree*

- 3 *Neither agree/ disagree*
- 2 *Disagree*
- 1 *Completely disagree*

If you agree, how do you think these could be implemented and what support will be required? If not, why?

7. Do you agree that proposals HP1 – HP2 will support behavioural change and increase conversations about healthy weight through front line services?

- 5 *Completely agree*
- 4 *Agree*
- 3 *Neither agree/ disagree*
- 2 *Disagree*
- 1 *Completely disagree*

If you agree, how do you think these could be implemented and what support will be required? If not, why?

8. Do you agree that proposals HP3 – HP4 will enable children and families to support a healthy weight?

- 5 *Completely agree*
- 4 *Agree*
- 3 *Neither agree/ disagree*
- 2 *Disagree*
- 1 *Completely disagree*

If you agree, how do you think these could be implemented and what support will be required? If not, why?

9. Do you agree that proposal HP5 will develop a clinical pathway to ensure those who are overweight or obese can access the right kind of support?

**5** *Completely agree*

**4** *Agree*

**3** *Neither agree/ disagree*

**2** *Disagree*

**1** *Completely disagree*

If you agree, how do you think these could be implemented and what support will be required? If not, why?

10. This question relates to the impact the proposals might have on certain groups. Do you think the proposals in this consultation document might have an effect on the following?

o Those living in rural areas

o Welsh language

o Equality

- Age

- People with disabilities

- Sex

- Transgender

- Marriage or civil partnerships

- Pregnancy and maternity

- Race

- Religion

- Sexual orientation

o Children and young people



11. Do you have any other comments about these proposals?

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