

WELFARE FOODS – A CONSULTATION ON MEETING THE NEEDS OF CHILDREN AND FAMILIES IN SCOTLAND

The **Scottish Cancer Prevention Network** (SCPN) is focused on moving evidence on cancer risk reduction into everyday life, practice and policy (<https://www.cancerpreventionscotland.org.uk/>). Whilst it is recognised that governments do much to support changing behaviours we also recognise that there is a need to increase capacity around cancer prevention and screening, and there is much more that agencies and government work streams can do to help to accelerate change. As an advocacy group we raise the profile of cancer prevention and screening research and action through a range of communication channels (newsletter, conference, workshops, social media and web-based activities) and support ongoing work in reducing the prevalence of cancer risk factors. The SCPN is funded by the Scottish Cancer Foundation charity (SCO28300).

The evidence base for diet, alcohol and obesity and cancer are provided by World Cancer Research Fund (<https://www.wcrf.org/sites/default/files/Height-and-birthweight.pdf> 2018).

Children who are heavier for their height (mainly due to fat) tend to grow faster and become taller (and fatter). These children also reach developmental milestones earlier. These processes are directly or indirectly the result of **nutrition during development**, and altered hormone levels which influence both the visible structures such as height and the growth and behaviour of cells within the body. Eight cancers are related to adult height (colorectal, breast, ovary, pancreas, endometrium, prostate, kidney, skin). In terms of the relationship between early nutrition and later health we welcome action that will help **achieve equitable, optimal growth trajectories** in infancy and childhood.

Breast feeding is associated with desirable rates of growth in infants, lower body weights in mothers in later life and reduced risk of both pre- and post- menopausal breast cancer (<https://www.ncbi.nlm.nih.gov/pubmed/26116994>). Welfare Food schemes that supports mothers to breast feed is highly desirable.

Our responses to the following questions are as follows:

Q5. What could an innovative programme that will support families to establish healthy eating patterns look like?

The current proposal to increase the monetary voucher from £3.10 to £4.25 is welcome. However, this is still far from what is required to “ensure families on lower incomes can buy nutritious food and milk for their children throughout their early years”. More work is needed to establish realistic costs of feeding a family well that will help equitable purchase and consumption of wholegrains, vegetables, fruits, pulses, fish and dairy products with less reliance on processed foods, discretionary snack foods and sugary drinks.

Healthy eating patterns start with breast feeding. It is not at all clear how the proposed changes to Welfare foods will support or encourage women to breast feed when infant formula milk is a key purchase item. The proposed system does not encourage breast feeding and more thought is needed as to how support might be encouraged within this work. A consistent message on supporting breast feeding in every welfare setting is needed.

The ability to purchase tinned fruit with Best Start Foods payment needs careful consideration. Generally, processed foods do not fit easily into a healthy diet. Canned fruit contains added sugar (whether as sugar syrup or fruit juice) and re-enforces the Scottish liking for high sugar foods. Canned fruit is generally higher in calories and sugar than the fresh equivalent. The nutrient content is somewhat lower. Promoting the purchase of canned fruit is unlikely to contribute to the “establishment of healthy eating patterns”. It should be noted that a paper on **Tinned Fruit Consumption and Mortality in Three Prospective Cohorts** (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4340615/>) reported a positive relationship between self-reported canned fruit and all-cause mortality. The authors note that the findings raise questions about dietary recommendations to promote tinned fruit.

Q8. What do you think about the proposal to offer milk as part of the free meal offer for all children in ELC funded provision by 2020?

We welcome this proposal. However, it is important that evidence and guidance relating to the fat content of milk is heeded. Current guidelines recommend that full fat milk is used between the ages of 1 and 2 years, and after 2 years children gradually move to semi-skimmed milk. This guidance is likely to be reviewed by the SACN subcommittee on maternal and child nutrition in their forthcoming review on diet in children aged 1 to 4. These recommendations were originally designed to ensure adequate growth and to ensure adequate intake of fat soluble vitamins. The use of healthy start vitamins and the incidence of toddlers with excess body fat calls this guidance into question. This is of particular concern in low income families where the intakes of full fat milk is significantly higher (almost double in SIMD quintile 1 compared to SIMD quintile 5). (http://www.foodstandards.gov.scot/downloads/Living_Costs_and_Food_Survey_2014_Interim_Report.pdf)

Q9. What are your views on the proposal to include an offer of a healthy snack to complement the free milk and meal offer for all children in early learning and childcare funded provision by 2020?

A recent report from Food Standards Scotland (http://www.foodstandards.gov.scot/downloads/Final_Report.pdf) highlights that it is essential “we reduce the consumption of discretionary foods and drinks if we are to make a significant and measureable improvements to diet and health”. The discretionary foods highlighted are confectionery, cakes, biscuits, pastries, savoury snacks and sugary drinks. Many of these are viewed as snack foods so it is essential that the definition of a healthy snack is made clear.

The provision of **fruit and vegetable snacks** are desirable and it is essential that these items are specified. We are concerned the definition of “healthy snack” will be relaxed to allow baked crisps, cereal bars etc. which may meet “healthy” criteria but can lead to habit formation (e.g. eating

biscuits and crisps of any sort) beyond early years. In summary offering a fruit/vegetable snack is welcomed, offering other snack foods is not.

Q11. What are your views on the proposal to include an offer of a healthy snack for children out with funded ELC entitlement?

The offer of fruit and vegetables as healthy snack is desirable – other options are not.