

Response ID ANON-5MB4-H3G8-J

Submitted to Proposed changes to the promotion and provision of healthy drinks in schools
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Consultation questions

1 In what capacity are you providing feedback? For example, are you responding as a parent, student, organisation, principal, teacher, or other interested person? Please specify your role and, if applicable, the type of school you work in.

Answer:

Thank you for the opportunity to respond to this Ministry of Education request for feedback on proposed changes to the promotion and provision of healthy drinks in schools. The Cancer Society of NZ is providing comment as childhood diet and drink patterns are an important way to prevent weight-related adult cancers inequitably affecting Māori and Pacific people in Aotearoa.

The Cancer Society of New Zealand (NZ) is a non-profit organisation which aims to minimise the incidence, impact, and inequities of cancer on those living in Aotearoa, New Zealand. We work across the cancer continuum including health promotion, supportive care, provision of information and resources, and funding of research. Cancer is New Zealand's single biggest cause of death.

2 Do you agree with our view of the problem? If not, why not?

Answer:

The Cancer Society agrees that many children in Aotearoa are eating poor quality diets with excess free sugar, fat and salt. Unhealthy eating patterns not only negatively impact children's learning, but their health, including dental caries and lifelong health and wellbeing including adult cancer risk.

Healthy diets protect against poor health. The World Cancer Research Fund (WCRF) recommends, healthy kai and being a healthy weight to reduce the risk of 12-13 different cancers. A diet rich in wholegrains, fruit, vegetables, nuts and beans (lentils and legumes) and low in unprocessed (fats, sugars and starches) is key to cancer prevention, to protect against weight gain, the single biggest cause of cancer, after tobacco.

Childhood years are when lifelong food and drink habits are established. The school environment offers a key opportunity to empower and role model healthy food and drink choices for children especially for those who live in poorer communities where healthy food is not the easy choice. Children who live in poorer communities are exposed more to unhealthy food and drink and its marketing. School food policy regulation would have an important influence on improving equity in school food environments. All children deserve a healthy food environment where healthy food is normalised and the easy choice.

Mandating healthy drinks in schools and aligning with healthy drinking standards in the Ka Ora Ka Ako Healthy School Lunches programme, and existing guidance from the Ministry of Health's Healthy Active Learning programme would be a start to improving childhood nutrition. However, the overall diet and food environment of all children, not just sugary drinks and not just those of primary age are critical in establishing lifelong healthy diets.

To make a real difference the Cancer Society would like to see the problem reframed from individual health in primary school children and sugary drinks, that of the lack of national food and drink regulation of school environment such as 'the lack of national healthy food and drink regulation to address the unhealthy food environment in all school settings in Aotearoa to improve inequity of students diet, health, wellbeing and learning.' The school environment also needs to be clearly defined to include not only all food and drink sold and provided to children but also to those provided in fundraising, events and in venues close too and surrounding schools.

Māori are much affected by poor food environments, poor diets and poor health including cancer. School food regulation offers an important opportunity for the Crown to honour the Te Tiriti o Waitangi obligations to protect the health and wellbeing of Māori. It would also contribute significantly to the Governments own flagship Child and Youth Well Being Strategy and is an important way to reinforce and role model the Governments school lunch programme, Ka Ora, Ka Ako and national nutrition curriculum. This would also play an important contribution to the Governments vision of equity in health and well-being for Māori.

3 What other problems, if any, do you think should be taken into consideration in assessing options?

Answer:

The overall diet and food environment of all children, not just sugary drinks and not just those of primary age are critical in establishing lifelong healthy diets.

Secondary schools are more likely to be selling unhealthy food than primary schools so have a bigger opportunity for influence. Most don't have time to look up or write complicated rules. Luckily, we already have good national healthy food and drinks guidelines that we use in the Ka Ora Ka Ako Healthy School Lunches Programme. We should use these to make the new rules.

However, many socioeconomic and other factors normalise and promote affordable ultra-processed food influence food choice. While healthy food in schools is important, these wider economic and environmental factors also need to be addressed (such as food insecurity and unhealthy food advertising) to equitably impact childhood diet, health and learning. This would support the Crowns, Te Tiriti o Waitangi obligations to protect the health and wellbeing of Māori.

4 Are these the right objectives? Can you think of any others to add?

Answer:

The size of poor childhood diet, obesity and healthy burdens in Aotearoa is too big for these objectives to be sufficient to make a real difference.

Since the removal of the requirement of schools to provide only healthy food and drinks was removed in 2009, the NAG has been inadequate to ensure schools adequately protect the nutritional health and wellbeing of their childhood communities. While many primary and secondary schools still value and have their own policies in place, stronger regulation is needed to more effectively and equitably impact the diet and health of our tamariki. Schools are an important venue for role modelling healthy food/drink from childhood into adulthood such as in secondary schools. We recommend these objectives include:

- All students receiving positive education on healthy food and nutrition
- All ELSs and schools role modelling and providing healthy food and drink environments for students of all ages
- Hauora of children being a primary goal
- An evidence-based approach be used to address this inequitable and immense public health problem

5 Are there any other options that you think should be considered?

Answer:

The Cancer Society does not think the options 1-3 go far enough to address this significant issue. Around two thirds of primary schools in Aotearoa already have a healthy drinks policy. Secondary schools tend to sell more unhealthy food and are less likely to have hauora as a priority. For this reason, secondary schools should be more of a priority than primary schools. We think the options provided are too weak to have any real impact.

The longer children and young people are exposed to a positive healthy food/drink environment, the higher the likelihood these behaviours will become engrained into adulthood. If the Government is serious about improving childhood diets, every school in the country should have the same, evidence-based regulations, requiring the provision of healthy food and drink. Fortunately, the public is supportive of healthy food policies with over eighty percent of the public surveyed by Heart Foundation and the Cancer Society Auckland in 2015 being in favour.

The Cancer Society would support an additional option that requires the existing nutrition guidelines for schools be replaced with 'a regulation that all schools (primary and secondary) promote healthy, nutritious food, and a duty on all schools to only provide healthy food and drinks.'

6 Do you agree with this definition of healthy drinks? Are there any other drinks you think should be allowed, or any included in this definition that shouldn't be? If so, what are your reasons for including or excluding these drinks?

Answer:

Cancer Society agrees the best drinks for children are water and low-fat milk and this aligns with, 2015 MOH Food and Nutrition Guidelines for Healthy Children and Young People (Aged 2 –18 years) which recommend 'milk and milk products or suitable alternatives, preferably reduced or low-fat options.

7 Can you think of any difficulties primary schools might have in only providing healthy drinks? Would a 'lead-in' period be helpful for schools to transition to the new duty?

Answer:

The Cancer Society sees no reason for sugary drinks and ultra-processed foods to be part of primary or secondary school life (like other cancer risk factors, tobacco and excessive UV sunlight). Childhood learning and health should be the key priority, not food industry profit. Many schools are already sugar free and teachers, parents and pupils see the benefits from doing so.

However, transition takes time and barriers should be expected, including schools lacking time, teacher expertise and leadership and those with existing sugary drinks sponsorship or contracting arrangements. To support success, we recommend a lead-in period, up to a year, to gain the 'buy-in' of communities, schools, external canteen contractors and communities/families. Schools using vending machines or sugary drink sponsorship will need 'lead-in' time to rearrange contracts and share communication. Centralised resourcing to support and promote such a policy within schools would be valued.

Childhood behaviours are also influenced by the food environment outside of schools and addressing these are also important to truly make a difference. However, we urge implementing a health food and drink policy requirement as soon possible as an important starting point.

8 If you are an area and/or composite school, are there particular difficulties you may face implementing this duty?

Answer:

NA

9 Can you think of any benefits and/or challenges that secondary schools would face in meeting a new legal duty to only provide healthy drinks?

Answer:

The real benefits of 'a legal duty for only healthy drinks in secondary school' is to extend the role modelling and normalisation of water and milk as the best drink for children's health and body weight. This will benefit not just childhood health, well-being and learning but also adult behaviour, weight and health including cancer risk.

Challenges will remain those of commercial revenues gained by some schools from tuck shops, vending machines or sugary drink sponsorship which can

be an important source of revenue for schools especially in low SES areas and can fund 'extra' school life beyond the curriculum. The constant financial pressure schools face mean they are forever vulnerable to pressure from vending machine/junk food representatives. We would like the government to address these financial pressures with support and time to find alternate revenue streams.

However, secondary schools have removed sugary drinks and provided healthy food in the past under HEHA. Many schools and parents are cognisant of the benefits of healthy nutrition and the importance for children's behaviours and learning. Clear communications framing the issue will be critical in getting all sectors on board.

10 Do you agree that we should replace the current guidance to promote healthy food and nutrition with Regulations that require school boards to continue doing this? Please explain the reasons for your agreement or disagreement.

Answer:

Socioeconomic, environmental factors including food systems promoting highly processed, cheap food do not enable equitable healthy food choices. Population rather than individually focused strategies such as school policies will much more effectively and equitably address healthy food choice and associated non-communicable nutrition related diseases such as cancer.

Therefore, Cancer Society supports regulations that go much further than the promotion of healthy food and nutrition but that also recommends extending these to mandatory regulations that require healthy food and drinks within all schools. Evidence shows that mandatory regulations are a much more effective and equitable way to address children's diet and weight.

11 What do you think about these circumstances? Are any of them unnecessary? Can you think of any other circumstances where it would be reasonable to not have the duty? If so, why?

Answer:

The Cancer Society supports the provision of clear guidance about when the duty will not apply, such as fundraisers, vending machines, tuck shops but not to stipulate all exceptions. Stating a clear purpose of the regulation as children's hauora, would support schools to interpret this principle as needed. The key goal is to normalise the provision of healthy food and drink and make unhealthy ones the exception.

12 Do you feel that the high-trust light-touch compliance approach is appropriate? If not, why not?

Answer:

To reflect the substantial problem and costs we are trying to solve including adverse childhood health and learning outcomes caused by poor diets we recommend greater school support around policy implementation including support for food service staff and some low burden monitoring. This aligns with the valuing the health and well-being of children in Aotearoa . Cancer Society supports some enforcement and monitoring of greater food regulation if this can be done simply through schools posting their policies on websites, self-reporting progress and using the ERO assessment cycle.

The Cancer Society would also like to see stronger government commitment to regulation and resourcing to enable affordable sustainable healthy food for all New Zealanders. Widespread polices such as unhealthy food marketing restrictions and sugary drinks are needed to make healthy affordable food a priority in schools, early childhood education centres, kura kaupapa, kōhanga, iwi wananga and in public settings to reduce uptake of poor diet patterns.