

EVERY CHILD A HEALTHY WEIGHT

TEN AMBITIONS FOR LONDON



**LONDON'S
CHILD
OBESITY
TASKFORCE**

SUPPORTED BY
MAYOR OF LONDON



In 2018, the Mayor brought us together as the London Child Obesity Taskforce. We are professionals with a diverse set of experiences and perspectives who come from many walks of life and give our time freely for this exciting piece of work.

Our vision is that every child in London grows up in a community and an environment that supports their health and weight.

Our purpose is to unleash a transformation in London so that every child has every chance to grow up eating healthily, drinking plenty of water and being physically active.

Our commitment by 2030 is to halve the percentage of London's children who are affected by unhealthy weight at the start of primary school and by obesity at the end of primary school, and to reduce the gap in childhood obesity rates between the richest and poorest areas in London.



The London Child Obesity Taskforce was established in 2018 as part of the Mayor's commitment to address child obesity.

Find out more at www.london.gov.uk/what-we-do/health/londons-child-obesity-taskforce or email childobesitytaskforce@london.gov.uk

Paul Lindley OBE

Chair

Entrepreneur and children's welfare campaigner

Professor Corinna Hawkes

Vice Chair

Director, Centre of Food Policy, City, University of London

Tim Baker

Headteacher, Charlton Manor School

Kieron Boyle

Chief Executive, Guy's and St Thomas' Charity

Christopher Eyitayo

Talent Manager, Young Foodies

Dr Mahamed Hashi

Co-Founder, Brixton Soup Kitchen and Founder, New Beginnings Youth Provision

Florence Kroll

Director of Children's Services, Royal Borough of Greenwich and representing the Association of London Directors of Children's Services

Yinka Makinde

Programme Director at Digital Health. London and pharmacist

Ellen O'Donoghue

Executive Director, James' Place suicide prevention charity

June O'Sullivan MBE

Chief Executive, London Early Years Foundation

Professor Paul Plant

Interim Regional Director, Public Health England London

Rachel Toms

Healthy urban design and planning specialist

Phil Veasey

Community engagement consultant

Steve Whiteman

Director of Public Health and Wellbeing, Royal Borough of Greenwich and representing the Association of Directors of Public Health for London

With thanks to past members for their contribution:

Professor Yvonne Doyle

Former London Director, Public Health England and Statutory Health Advisor to the Mayor of London

Danny Ruta

Former Director of Public Health, Lewisham and Child Obesity Lead, Association of Directors of Public Health for London

CONTENTS

WELCOME TO OUR CALL TO ACTION	6
PART ONE: INTRODUCTION	8
About this call to action	9
What good looks like for London’s children	12
The design of our call to action	14
Theory of change model	14
PART TWO: OUR CALLS TO ACTION	16
1. End child poverty in London	18
2. Support women to breastfeed for longer	20
3. Skill up early years professionals	22
4. Use child measurement to better support parents	24
5. Ensure all nurseries and schools are enabling health for life	26
6. Make free ‘London water’ available everywhere	28
7. Create more active, playful streets and public spaces	30
8. Stop unhealthy marketing that influences what children eat	32
9. Transform fast-food businesses	34
10. Fund good-food innovation and harness the power of investment	36
PART THREE: WHAT THE TASKFORCE WILL DO NEXT	38
Involving children, young people and families	40
Using our voice to tell the story	40
Learning our way to the future	42
Mobilising others to take action	42



WELCOME TO OUR CALL TO ACTION

London is a vibrant city full of opportunity. But too many of London's children face the risk of lifelong ill health because the circumstances in which they live their lives make it difficult for them to eat healthy food, drink water and be physically active. This is unfair. It is reducing their life chances and preventing them from flourishing.

The causes span the systems in our city and beyond: poverty, jobs, housing, high streets, transport, advertising and more – all making it harder for families and children to eat well and be active.

The good news is that these things can change. That's precisely why the Mayor convened our taskforce – to produce a step change in the citywide response. We want to unleash a transformation in London, so that every child has every chance to grow up eating healthily, drinking plenty of water and being physically active. That is our goal.

There is still so much to be done. But every time someone with a part to play in London's health steps up to lead and deliver on any of our ambitions, we will move further and faster along the road. By helping all our children reach a healthy weight, we will be investing in a healthier London of the future.

We recognise the vital role you could play in delivering this future. On behalf of our taskforce colleagues, we urge you to take up our call to action.



Paul

Corinna

**Paul Lindley OBE
Chair**
Entrepreneur and
children's welfare
campaigner

**Professor
Corinna Hawkes
Vice Chair**
Director, Centre
of Food Policy,
City, University
of London

PART ONE

INTRODUCTION



ABOUT THIS CALL TO ACTION

This call to action is a response to the Mayor of London's request to the London Child Obesity Taskforce to identify what actions are needed for London's children to be a healthy weight.

As taskforce members, we were aware that there are countless actions that could make a difference to the health of London's children. And there are many policies and programmes already being delivered by London's 33 local authorities, along with healthcare providers, schools, businesses, voluntary, community and social enterprises, and the Greater London Authority (GLA), to help London's children be a healthy weight.

This means that London already has tremendous assets. But in our conversations across London, we identified three things needed to step-change the important work already going on:

- **Place children at the centre** Actions, however well meaning, will address inequity only if they are based on an understanding of the realities of the lives of London's children and their families – and seek to provide support, rather than stigma and blame. If we are going to fix the system, we need to understand how children experience it on the inside. This is why our first action as a taskforce was to develop some profiles of London's children.¹ Engaging children, especially those living in poverty, in co-designing solutions also has potential to make action more effective and equitable.

- **Take a whole-systems approach**

There is a lot going on across London, but much needs to be done to truly change the whole system around children's lives. Actions are needed at multiple levels working together and reinforcing each other to reshape what children eat and drink and the activity they do. This means connecting existing actions to create greater consistency and coherence throughout children's lives, and identifying actions with ripple effects that will enable the system to change. A systems approach also means dispersing leadership throughout the system, so everyone is taking responsibility for action towards shared ambitions.

- **Get bigger and bolder** Many of the positive initiatives to date have been small scale, short term and patchy. We want to see promising work scaled up and extended, minimum standards set across London, capacity built where it is lacking, and new, powerful actions trialled and implemented.

As a taskforce, we see our work as building on, supporting, intensifying and amplifying the important work already done, so that we can go further and faster as a city.

Our call to action sets out the ten shared ambitions that we need to achieve if we are to create a healthy-weight city. These ambitions are about transforming ten aspects of the daily lives of children and their parents. They set out what good could look like for London's children (see 'Ten ambitions for London's children', pages 12–13).

Each ambition includes two targeted calls to action – the next steps that we believe are needed in London's journey to become a city that supports health and wellbeing for children. These actions are interconnected. Collectively, they can unleash a transformation of the experience of growing up in our city in the next ten years. If implemented together, they have the potential to shift the whole system, to help children eat and drink well and move more.

We selected these ambitions and actions after engaging extensively throughout London. We also assessed the evidence base. Most importantly, we sought to better understand the lives of children living in poverty and those who care for them. This is because tackling inequality is core to achieving our goal.

By placing children at the centre, we were able to see the nature of the problem – and potential solutions – much better. We were able to identify what in the system around them really needs to change, in a way that meets them where they are.

TERMS USED

Poverty

In this call to action, we use the term 'poverty' as shorthand for deprivation as defined by the index of multiple deprivation.

Parents

We use the term 'parents' to refer to parents and caregivers (including other family members).

Children

We use the term 'children' to refer to all children and young people, from infancy through to adolescence.

Our ambitions and actions recognise that three types of changes are needed to get to what good looks like:

- **Resources** Children and their families need skills, assets and financial resources that give them capacity to live better lives.
- **Environment** Children of all ages need to be surrounded by an environment that enables them to eat healthily, drink water and take plenty of physical exercise. That means implementing changes throughout the spaces where children live their lives and spend their days.
- **Care and emotional support** When children and their families are struggling, they should be able to easily find care and support that fits into their lives.

We need these changes implemented coherently and consistently from the very earliest years. This will involve building the teams, knowledge, partnerships and leadership needed for systems change.

To achieve these shared ambitions, we thus call on all organisations that impact on the daily lives of parents and their children, from infancy right through the teenage years, to step up and lead change.

To begin with, we would like to see these calls to action reflected in the London health and care partners' forthcoming London Health and Care Vision.

Our ultimate aim is to support the health and wellbeing of children by making it easy – and enjoyable – for them to achieve and maintain a healthy weight.

¹ London's Child Obesity Taskforce, 2019. What makes it harder for London's children to be healthier? London, GLA, at: www.london.gov.uk/what-we-do-health/londons-child-obesity-taskforce

TEN AMBITIONS FOR LONDON'S CHILDREN

***We want to live
in a city where...***

*... the routes we take are
safe, fun, nice places to
walk, cycle and play*

*... our parents feel confident
we will get the support we
need after we are weighed
and measured at school*

*... our nurseries and
schools give us the chance
to be the best we can, by
helping us be healthy*

*... it's easy for mums
to breastfeed*

*... we can hang out with
our friends without
pressure to buy extra
unhealthy food or drink*

*... companies don't push us to
eat and drink unhealthy stuff*

*... all families can afford healthy
food and fun activities*

*... everyone helps us develop
healthy habits, right from
when we are really little*

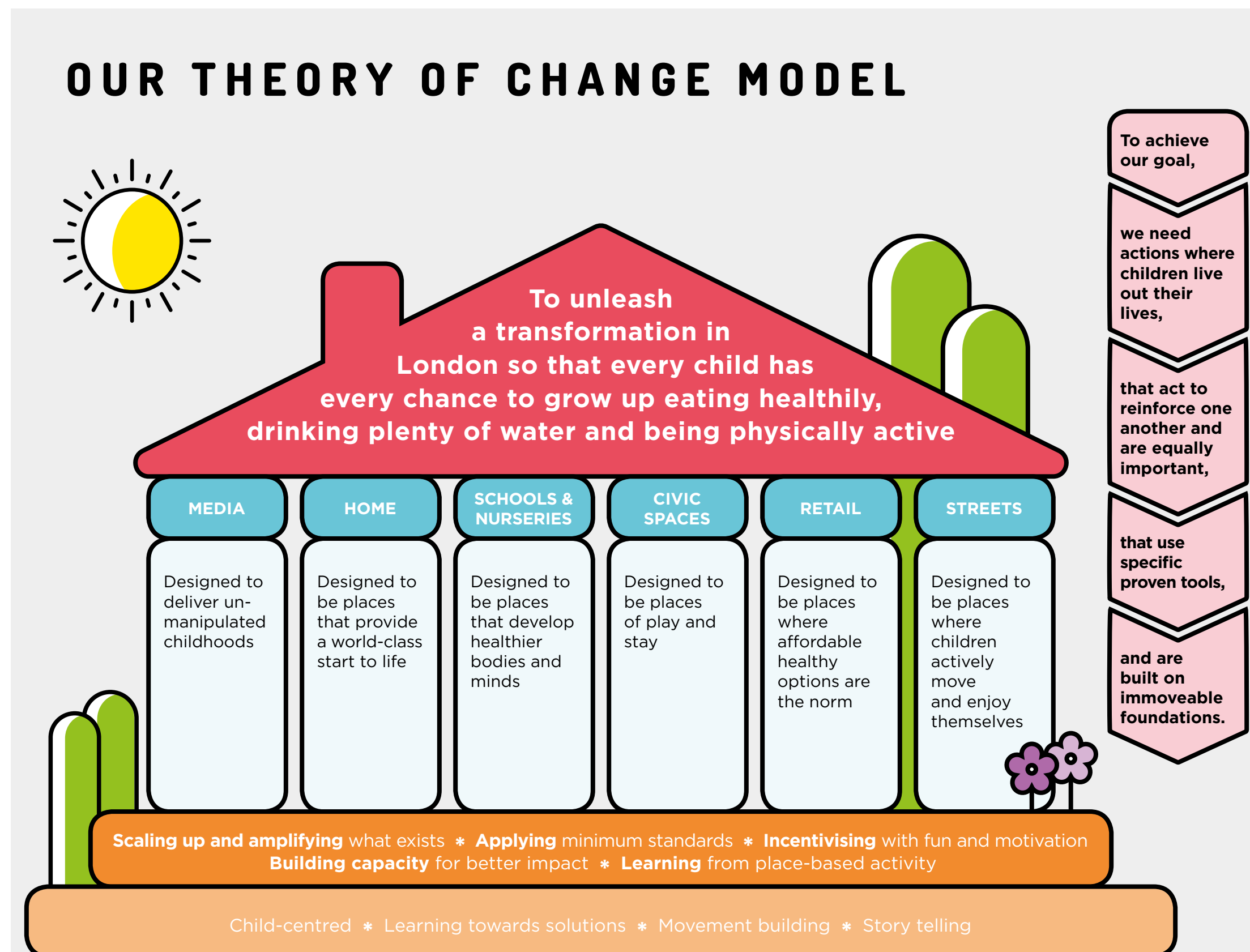
*... businesses are helped
to make healthier food
and drinks*

*... we are always close
to fresh, free water that
we really want to drink*

THE DESIGN OF OUR CALL TO ACTION

Our call to action is designed around a theory of change. This holds that in order for future generations of London's children to thrive, we must provide them with the protection of a new, healthier environment (the roof in the graphic), targeted support, and structured actions (the pillars) that are themselves built on a solid foundation of evidence and designed to support the success of our ambitions (the floor and foundations).

Our theory of change is only workable and sustainable when its roof is complete, its pillars are all given equal importance, and it is built on stable foundations that are tailored to their purpose.



PART TWO

OUR CALLS TO ACTION



AMBITION 1

END CHILD POVERTY IN LONDON



We want to live in a city where all families can afford healthy food and fun activities.

OUR CALLS TO ACTION

- ➔ We call on **the Mayor** to lead a drive to significantly increase the number of employers becoming London Living Wage accredited, and the **UK Treasury** to devolve power to the Mayor to set a legal minimum wage for London.
- ➔ We call on the **Department of Health and Social Care** and **Alexandra Rose Charity** to work with **Public Health England**, the **London boroughs** and **retailers** to review existing food voucher schemes and trial improved ways to design and deliver them so they work better for London's families.

WHY THESE ACTIONS WILL MAKE A DIFFERENCE

Life at home can be very challenging for children living in poverty: the poorest 10-11 year olds in London are twice as likely to be affected by unhealthy weight than the richest 10 per cent.²

The Mayor has made progress in building more affordable housing,

reducing the cost of transport, and launching his Good Work Standard. But cramped, poor quality homes, unstable tenancies and tough working patterns make it harder for families to eat and drink well and be active.

Lack of money is at the root of this issue. Data released in 2019 showed that 400,000 of London's children under 15 live in a home where parents cannot always afford to put food on the table.³

Across the UK, families with children in the bottom two income deciles would have to spend 42% of after-housing disposable income to meet national dietary guidelines.⁴

On average, poverty rates in London are lower than the rest of the UK. But once housing is taken into account, they are higher. Thirty-seven per cent of London's children live in poverty – and most have working parents. In these homes, tough decisions are made, day in, day out, about paying for food and finding opportunities to be physically active.

If we're to address this problem fairly, parents must have enough money to support their children. No parent should have to have a job – let alone two or more – and still not have enough money or time to enable their children to be healthy.

The London Living Wage is an hourly rate (currently £10.55) that provides the minimum to lead a basic life in London. Currently, only 1,600 employers in the capital pay this. That is nowhere near enough. That's why we're calling for employers to pay the London Living Wage and be accredited to do so.

The public sector should lead the way. We also want to see devolution of statutory power to enable the Mayor to set a legal minimum wage for London.

Another way of supporting lower-income families is to provide vouchers for healthy foods. Low-income pregnant women and families in London have access to the nationwide Healthy Start programme, which provides vouchers worth £3.10 per week. In four London boroughs low-income families have access to Rose Vouchers for Fruit & Veg, run by the Alexandra Rose Charity, which they can spend in local markets.

We believe there is so much more that voucher schemes could do to help struggling families. With £5.6 million of unredeemed vouchers in London per year,⁵ Healthy Start is failing to meet its objectives. It needs to be designed and delivered in new ways. There are many proposals and good ideas on how to do this⁶ and national government now needs to take these forward. We want to see these improvements trialled in London. Meanwhile, as the Alexandra Rose Charity expands its voucher scheme, we want to see an evaluation of its impact so the learning can be shared.

DID YOU KNOW?

- Businesses that are accredited to pay the living wage see reduced sick leave and improvements in staff morale and productivity.⁷
- Healthy Start vouchers increase the range of fruits and vegetables that families use,⁸ and in the London Borough of Lambeth 95 per cent of families reported eating more fruit and vegetables after receiving Rose Vouchers for Fruit & Veg.⁹

⁴ Scott C et al, 2019. Affordability of the UK's Eatwell Guide. London, The Food Foundation

⁵ Sustain, 2018. London's young families miss out on £5.6 million that could help them eat well. London, Sustain

⁶ Food Power, 2018. Improving the uptake of Healthy Start vouchers. London, Food Power

⁷ Heery et al, 2017. The living wage employer experience. Cardiff, Cardiff Business School

⁸ McFadden A et al, 2014. Can food vouchers improve nutrition and reduce health inequalities in low-income mothers and young children? BMC Public Health 14 (1): 148

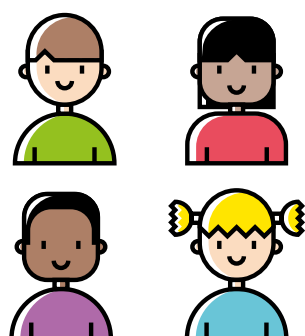
⁹ Food Matters, 2017. Rose vouchers for fruit & veg: final Lambeth project evaluation. London, Food Matters

² Public Health, England 2019. Fingertips data tool. Available at: <https://tinyurl.com/y69nh69j>

³ Greater London Authority, 2019. Food security in London: headline findings from the Survey of Londoners. London, GLA

AMBITION 2

SUPPORT WOMEN TO BREASTFEED FOR LONGER



We want to live in a city where it's easy for mums to breastfeed.

OUR CALLS TO ACTION

- ➔ We call on the **London boroughs** and **voluntary sector organisations** to initiate and scale up peer-to-peer support networks and trial incentives with **academic partners** to help mothers feel more supported to breastfeed for longer, and in more places.
- ➔ We call on the **NHS**, the **London boroughs** and **Public Health England** to collect and analyse robust breastfeeding data at ten days and six-to-eight weeks, to explore how mothers can be more supported to breastfeed for longer.

WHY THESE ACTIONS WILL MAKE A DIFFERENCE

We've seen already that increasing income is an important part of addressing unhealthy weight among London's children. But this must be complemented by emotional support, knowledge sharing and practical services from birth.

Breastfeeding is an important part of this picture. Breastfeeding is protective against childhood obesity, with longer and more exclusive breastfeeding having a strong protective effect against excess weight gain.¹⁰ In London, most women – 86 per cent – start to breastfeed. But this figure significantly falls in the first ten days. It is easy to see why: women say that lack of support is a major factor in their decision to stop.¹¹

Effective social support, combined with guidance from skilled practitioners, can help women overcome difficulties with breastfeeding. There are some excellent examples of good support being provided in London, such as in Tower Hamlets. But overall, direct support to families in London is patchy, partly because of funding challenges.

Evidence shows that peer-to-peer support groups and incentives to breastfeed for longer can form part of the solution. So, we want to see a mass scale up of peer-to-peer networks and trialling of incentives. Mechanisms of funding these initiatives need to be explored, such as DHSC ringfencing funding for boroughs.

We strongly support the call in the London Food Strategy for London to become a baby-friendly city and for all boroughs to become Unicef UK

Baby Friendly Initiative accredited in maternity and community services. There also needs to be stronger UK regulations on the marketing of infant formula. We thus commend the Mayor for his commitment to move ahead with partners to develop a baby-friendly action plan for London.

We also want to see boroughs and NHS providers giving midwives and health visitors the capacity and resources to collect and analyse robust data on breastfeeding rates at ten days (not currently collected) and at six-to-eight weeks after birth (not currently robustly or reliably collected).

If we don't understand the current picture, we can't expect to design effective actions to support and encourage women from all communities to breastfeed for longer.

DID YOU KNOW?

- Breastfeeding peer support networks have a positive effect on breastfeeding duration rates¹² and help mothers feel more confident and less vulnerable to self-doubt.¹³
- A large trial in England found that financial incentives led mothers living in areas where breastfeeding prevalence was low to breastfeed for longer.¹⁴ Interviews with mothers suggested this was because they felt rewarded and valued for their efforts.¹⁵

¹⁰ Yan J et al, 2014. The association between breastfeeding and childhood obesity: a meta-analysis. BMC Public Health 14: 1267

¹¹ Brown A, 2016. Breastfeeding uncovered: who really decides how we feed our babies? London, Pinter & Martin

¹² McFadden A et al, 2017. Support for healthy breastfeeding mothers with healthy term babies. Cochrane Database of Systematic Reviews 28: 2

¹³ Muller et al, 2009. NCT Breastfeeding peer support project. London, NCT

¹⁴ Relton et al, 2018. Effect of financial incentives on breastfeeding. JAMA Paediatrics 172 (2)

¹⁵ Johnson et al, 2018. Valuing breastfeeding: a qualitative study of women's experiences of a financial incentive scheme for breastfeeding. BMC Pregnancy and Childbirth 18 (20)

AMBITION 3

SKILL UP EARLY YEARS PROFESSIONALS



We want to live in a city where everyone helps us develop healthy habits, right from when we are really little.

OUR CALLS TO ACTION

- ➔ We call on the **NHS, Health Education England, the Mayor** and the **London boroughs** to provide a core training programme for the early years workforce and NHS staff who engage with young children and their parents.
- ➔ We call on **the Mayor, Public Health England** and the **London boroughs** to implement food training and require qualifications for all **early years settings** with caterers and chefs.

WHY THESE ACTIONS WILL MAKE A DIFFERENCE

The need for support continues as babies become toddlers, and as toddlers become young children. It is hard for any parent – let alone one on a low income – to make sure their growing child is eating and drinking the right things and being active enough.

Our conversations across London revealed that to provide the capacity to really support parents and caregivers, there needs to be investment in proper training for all who work with babies and young children. Health visitors, midwives, and staff in early years settings often interact closely with parents. But, while highly skilled, they do not receive adequate training on how to engage with parents and children on healthy eating and activity.

We want to see all these staff receive a core training programme. In a city with 74,000 staff in early years settings, 1,500 health visitors and other NHS staff advising on healthy diets and introduction to solid foods,¹⁶ we believe there are missed opportunities. All these staff could be better supporting the learning journeys of the parents they work with, with much more impact.

We need to support and train practitioners who have direct parental contact to empower, enable, advise and provide emotional support on healthy eating (including breastfeeding and feeding for babies), healthy hydration and activity. This training should include information about how children develop preferences and habits and how to engage parents on these issues – with a focus on those living in poverty.

We also want to see training for caterers and nursery chefs, to broaden their knowledge about how best to cook for children in early years settings, and specific early years qualifications for caterers and chefs to improve the food in early years settings.

We know that young children learn from the environments around them, so early years settings need to role model healthy eating, good hydration and plenty of physical activity. We think this training should be a requirement for any setting with caterers or chefs to achieve the Healthy Early Years London Bronze award.

DID YOU KNOW?

- Evidence shows that training and support for staff, teachers and practitioners is critical to the success of multi-behaviour obesity prevention interventions.^{17,18}
- Many early years settings are already taking action through the Healthy Early Years London programme, with 31 of London's local authorities committing local resources for the programme.
- There is already exciting action in London to improve food provision in nurseries. For example, in mid-2019, the London Early Years Foundation launched its Early Years Chef Academy, which offers specialist qualifications for chefs.

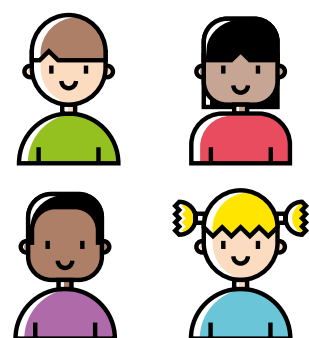
¹⁶ Department for Education, 2018. Survey of childcare and early years providers, England, 2018. London: DfE

¹⁷ Waters et al, 2011. Interventions for preventing obesity in children. Cochrane Database of Systematic Reviews. Online

¹⁸ Willis TA et al, 2012. Training community practitioners to work more effectively with parents to prevent childhood obesity: the impact of HENRY upon Children's Centres and their staff. Public Health Nutrition and Epidemiology. Online

AMBITION 4

USE CHILD MEASUREMENT TO BETTER SUPPORT PARENTS



We want to live in a city where our parents feel confident we will get the support we need after we are weighed and measured at school.

OUR CALLS TO ACTION

- ➔ We call on the **London boroughs** to work with the **NHS**, children, parents, and teachers to co-produce guidance on how to make the National Child Measurement Programme more supportive for London's families.
- ➔ We call on each **London borough** to work with **Public Health England**, the **NHS** and **community groups** to communicate the results of the National Child Measurement Programme to parents in a way that makes them feel confident that their child will receive the support they need.

WHY THESE ACTIONS WILL MAKE A DIFFERENCE

By the time a child is six years old, he or she will have been weighed and measured at school. This is part of the National Child Measurement Programme (NCMP) – England's world-leading programme established to provide population-level data on our children's weight. The programme has proven to be a hugely valuable monitoring tool, providing data

to guide action on unhealthy weight in London and nationwide.

While not mandatory, many local authorities send parents a letter with their child's data (sometimes just to parents of children with an unhealthy weight), either using a national template or crafting their own. Public Health England regularly reviews the content of the letter and has developed a range of support tools for healthcare professionals who follow up with parents.

There is a significant opportunity for London to play a leading role in maximising this opportunity to connect with parents. With an engaging approach that builds parents' awareness of the issue, outlines the underlying causes of the problem (such as unhealthy food and physical activity environments) and signposts them to help and support, we could extend this world-class monitoring tool to a world-class parent support tool for London's families.

To ensure that this guidance is really going to support London's families, we believe it should be co-designed with them. So, we are calling on the London boroughs to work with the NHS, children, parents, and teachers to co-produce guidance on how to make the NCMP more supportive for London's families.

We are also calling on each borough to communicate the results to parents in a way that makes them feel supported and well informed about the underlying causes. We want to see borough-

specific letters that signpost families to the right support, at the right time, in the right way – whether from local borough offers, NHS programmes, peer-to-peer support or apps. This should be part of a 'whole family' approach to help households achieve and maintain a healthy weight right across the family and throughout their lives.

Meanwhile, we want to see all headteachers receiving a summary explaining the results, the likely health outcomes for pupils, the relationship between healthy lives, attendance and attainment, and identifying actions the school could take and the support available to do so.

Finally, we believe every family in London should receive an NCMP letter every time their child has been weighed and measured, even if their child is a healthy weight. We realise this has extra costs, but all children are at risk and this step could reduce any stigma associated with the letter.

DID YOU KNOW?

- The NCMP is widely recognised as a world-class source of data. Established in 2006, it measures the height and weight of children aged 4/5 and 10/11 at state-funded schools in England. Over 95% of all children are measured every year (more than 1 million), with over 99% of eligible schools taking part.¹⁹
- The NCMP results letter has been subject to considerable debate. Studies have reported that the letter makes parents feel anxious, angry or stigmatised, leading to recommendations that the feedback process should be improved.^{20,21,22,23,24} On the other hand, in a survey of more than 200 parents of overweight children, 72% said they intended to change health-related behaviours after receiving the results and 55% reported positive behaviour change for their children.²⁵

¹⁹ Public Health England, 2019. National Child Measurement Programme: operational guidance 2019. London, PHE

²⁰ Kovacs BE et al, 2018. Is children's weight a public health or a private family issue? BMC Public Health 18 (1): 1295

²¹ Gainsbury A, Dowling S, 2018. 'A little bit offended and slightly patronised'. Public Health Nutrition 21 (15): 2884-92

²² Nyanzi LA et al (2016). Parental response to a letter reporting child overweight measured as part of a routine national programme in England. BMC Public Health 16 (1): 846

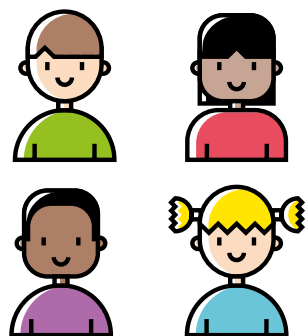
²³ Syrad H et al, 2014. Health and happiness is more important than weight. Journal of Human Nutrition and Dietetics 28 (1): 47-55

²⁴ Falconer CL et al, 2014. The benefits and harms of providing parents with weight feedback as part of the NCMP. BMC Public Health 14: 549

²⁵ Park MH et al, 2014. Predictors of health-related behaviour change in parents of overweight children in England. Preventive Medicine 62: 20-24

AMBITION 5

ENSURE ALL NURSERIES AND SCHOOLS ARE ENABLING HEALTH FOR LIFE



We want to live in a city where our nurseries and schools give us the chance to be the best we can, by helping us be healthy.

OUR CALLS TO ACTION

- ➔ We call on **'ambassador' nurseries and schools**, supported by the **Association of Directors of Public Health for London**, to build capacity for comprehensive and bold change across London by establishing peer networks with headteachers, governors and school food providers.
- ➔ We call on **Ofsted** to include in all its reports and its inspections framework a stronger emphasis on the provision of, and education about, healthy diets, water and activity when evaluating education, child development and overall effectiveness of early years settings and schools.

WHY THESE ACTIONS WILL MAKE A DIFFERENCE

So far, we have seen the importance of providing financial, emotional and learning support to families to help children achieve a healthy weight. But focusing on these issues is not enough.

We also need to change the environment in which children live their daily lives.

Much has already happened to improve learning environments in London. More than 2,100 schools have signed up for the Healthy Schools London programme and 492 primary schools are implementing the Daily Mile. Twenty-

four boroughs are home to schools with the Food for Life programme and 12 boroughs are running Sugar Smart campaigns involving schools. In a promising start, more than 1,300 early years settings are now signed up to the Healthy Early Years London programme.

Yet there is a way to go to implement at scale. For example, despite national standards, the quality and take-up of school meals is highly inconsistent across London.

We know that comprehensive, multi-level action is most likely to work. This means healthy, delicious meals and freely available water in spaces where children want to be; inspiring children through cooking, meeting chefs, eating meals with staff, growing fruit and vegetables in gardens and having fun being active; and food, water and physical activity incorporated as a teaching tool throughout the national curriculum.

We know that taking this comprehensive approach is not easy. Staff and their budgets are already overloaded and headteachers have many conflicting priorities. Caterers are often unclear what steps they can take and governors unaware of the importance of this issue. What is missing is the resource, capacity and inspiration.

The good news is that London is home to nurseries and schools that are already taking this type of comprehensive approach. So, we call on them to act as 'ambassadors', to build capacity across London by developing and leading peer networks between headteachers, governors and school food providers.

We hope this will inspire comprehensive change while providing a platform to lobby for more resources to do so. And we hope it will lead to bolder change, such as water-only, 'sugar free' learning spaces.

We also need a system for holding school heads, governors, trustees and caterers to account. We applaud Ofsted for placing educational quality and child development front and centre of its inspections framework, and including diet and activity in its inspections handbooks.^{26,27} But its current approach does not prioritise food, water and physical activity as essential means of achieving outstanding educational quality and the personal development of pupils.

So, we see a considerable opportunity for Ofsted to create the incentives for early years settings and primary and secondary schools to take comprehensive and bold action to maximise the roles of food, water and activity in enhancing educational quality and child development.

DID YOU KNOW?

- Charlton Manor Primary School in Greenwich is an example of a school that has taken comprehensive action on food and physical activity. Its activities include an innovative approach to school meals, an educational cooking programme delivered across the curriculum, an extensive school garden with beehives and chickens cared for by the primary pupils, a healthy tuck shop, morning PE classes for parents and children, and after-school sports clubs.

²⁶ Ofsted, 2019. School inspection framework. London, Ofsted

²⁷ Ofsted, 2019. Early years inspection handbook. London, Ofsted

AMBITION 6

MAKE FREE 'LONDON WATER' AVAILABLE EVERYWHERE



We want to live in a city where we are always close to fresh, free water that we really want to drink.

OUR CALLS TO ACTION

- ➔ We call on **the Mayor, water companies** and the **advertising industry** to incentivise children to drink water by reframing London's free drinking water as a 'London Water' brand, co-designed with London's children.
- ➔ We call on **the Mayor, the food service industry, schools** and **public institutions** to scale up and extend existing initiatives to make drinking water widely, freely and conspicuously available from public drinking fountains, all restaurants and public buildings, and in 'water only' schools.

WHY THESE ACTIONS WILL MAKE A DIFFERENCE

We know that children and young people need to cut down on their sugar intake. School initiatives such as water-only schools and Sugar Smart are designed to help them on their journey. But as soon as they walk past the school gates, sugary drinks are easily available

and widely promoted. So, we also need to look at environments where children spend their time once the school bell has rung.

We know that at first, switching to water is a tough ask for many children – and especially for young people. Many are accustomed to drinking flavoured, sweet drinks, attractively packaged and widely marketed.

So, to start, we propose creating an incentive for children to drink more water, through publicising London's tap water as an exciting brand called London Water, owned by, and free to, all Londoners.

We want to see London Water featured on refillable bottles, promoted in civic spaces, widely communicated to children and supported by educational and marketing campaigns. We want it to become aspirational and talked about among London's children and families.

We call on children and young people – particularly those living in poverty – to help define, articulate and co-design the look and feel of the brand so the campaign is based on an in-depth understanding of what will work for them.

We want to see London Water promoted everywhere. So, we call for existing initiatives to be significantly scaled

up – notably Refill London, water fountains introduced by the Mayor, and water-only schools. We also want these initiatives extended, to ensure that water is conspicuously available in drinking fountains in streets and in easily accessible locations in restaurants, schools, hospitals and all public buildings.

Our aim is for no child to ever be further than 100m from free, fresh, desirable drinking water when they are in high streets, civic spaces and public buildings. This is aligned with the Mayor's ambition of reducing single-use plastic bottles in London, to support environmental goals.

We want these two calls to action to help change the culture of drinking water in our city. By providing plentiful and visible access points and creating aspiration, we believe children will want to drink a lot more water and fewer sugary drinks.

DID YOU KNOW?

- Studies show increased water consumption will have a positive impact on weight and health outcomes in children and adolescents.²⁸
- Recent surveys have found that 78 per cent of UK citizens would like greater availability of free tap water in public spaces.²⁹ Trials across school systems in New York³⁰ and San Francisco³¹ found links between installing and promoting water fountains, behaviour change and positive health outcomes.

²⁸ Wang et al, 2009. Impact of change in sweetened caloric beverage consumption on energy intake among children and adolescents. Arch Pediatr Adolesc Med 163 (4): 336–43

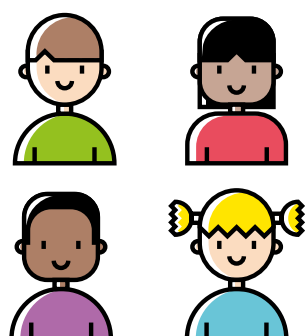
²⁹ Keep Britain Tidy, 2018. Water water everywhere. Wigan, Keep Britain Tidy

³⁰ Elbel B et al, 2015. A water availability intervention in New York City public schools. American Journal of Public Health 105 (2): 365–72

³¹ Patel AI et al, 2016. A trial of the efficacy and cost of water delivery systems in San Francisco Bay Area middle schools, 2013. Prev Chronic Dis 13: 160108

AMBITION 7

CREATE MORE ACTIVE, PLAYFUL STREETS AND PUBLIC SPACES



We want to live in a city where the routes we take are safe, fun, nice places to walk, cycle and play.

OUR CALLS TO ACTION

- ➔ We call on **the Mayor**, the **London boroughs**, **housing associations**, **landowners** and **developers** to dramatically increase timed closures of streets to motor traffic and other public realm improvements that reduce traffic and support children's health, wellbeing and mobility.
- ➔ We call on **the Mayor** and the **London boroughs** to make children's health, wellbeing and mobility required criteria for public funding and authorisation of regeneration and transport schemes.

WHY THESE ACTIONS WILL MAKE A DIFFERENCE

Children's routes – the roads and paths along which they travel – present a prime opportunity to encourage physical activity such as walking, scooting, biking and playing. We know from

the evidence that integrating physical activity into children's everyday lives is the best way forward. That's why building in active travel before and after school is particularly vital. Yet children and parents – especially in poorer neighbourhoods – may perceive their local streets as unappealing or unsafe.^{32,33}

There have been some exciting initiatives in London to encourage active travel, including the Healthy Streets Approach and School Streets. These schemes are showing promise in encouraging Londoners to walk and cycle, so we want to see them scaled up throughout London.

Reducing families' reliance on cars and enabling more active travel will also reduce London's air pollution, which is harming children's health. Research shows that a quarter of weekday morning peak car trips are for school drop offs, and walking or cycling to school could take 254,000 cars off London's roads each day.²⁵

That's why we are calling on the Mayor and others to dramatically increase timed restrictions on motor traffic on roads so that only pedestrians, cyclists and scooters can use them. We want to see plenty of other area-based public realm improvements too, as well as schemes that motivate children to be active in these spaces, such as scooter and bike

schemes, apps and gamification. Children must be given the chance to help design these streets and spaces.

We also want London to be a city of play. Initiatives such as Play Streets are a great start. On a broader level, if we are to create a city where there are great opportunities for children of all ages to play outdoors, free of charge and close to home, we need to embed a culture of child-centred thinking in London's built environment and transport sectors.

That's why we are calling on the Mayor and the boroughs to make children's health, wellbeing and mobility required criteria for public funding and authorisation of regeneration and transport schemes.

We believe this will begin to catalyse a new culture for planning and stimulate innovation, to put children's health and wellbeing on the agenda for all new construction and future maintenance of London's streets, parks and civic spaces.

DID YOU KNOW?

- In Camden, closing roads to motor traffic at the start and end of the school day led to more children actively travelling to school, reduced driving trips and improved air quality.³⁴
- In May 2019 Hackney Council launched the School Streets Toolkit to support councils nationwide to implement School Streets.³⁵
- In the United States, the Safe Routes to School programme used infrastructure (city planning changes to the built environment) and non-infrastructure (educational activities for students and parents) to produce improvements in children's active travel, in an evaluation conducted across 801 schools.³⁶

³² Pearce A et al, 2009. Gaining children's perspectives. Heal Place 15 (2): 614–21

³³ Edwards G et al, 2015. Moving the goal posts: poverty and access to sport for young people. London, Centre for Analysis of Social Exclusion

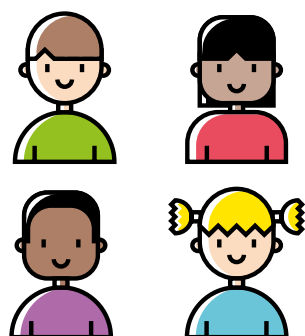
³⁴ Transport for London, 2018. TfL research shows that walking or cycling to school could take 254 cars off London's roads each day. Press release. London, TfL

³⁵ Hackney Council, 2019. School Streets; Timed Traffic Restrictions, toolkit for professionals. London, Hackney Council

³⁶ McDonald et al, 2014. Impact of the Safe Routes to School Program on walking and bicycling. Journal of the American Planning Association 80 (2): 153–67

AMBITION 8

STOP UNHEALTHY MARKETING THAT INFLUENCES WHAT CHILDREN EAT



We want to live in a city where companies don't push us to eat and drink unhealthy stuff.

OUR CALLS TO ACTION

- ➔ We call on **the Mayor, Transport for London, the London boroughs, sport clubs, stadia and leisure centres** to extend the advertising restrictions on the TfL estate – initially to all outdoor public spaces in London, sports stadia and leisure facilities, and then beyond.
- ➔ We call on the **Consumer Goods Forum** and **shops and supermarkets** to extend industry trials on healthier retailing to stop displaying unhealthy foods at the height of a small child's eyes or hands and work with **academic partners** to evaluate impact.

WHY THESE ACTIONS WILL MAKE A DIFFERENCE

Children need every possible chance to grow up in a healthy environment. So, we want parents to be able to take their children to sports, leisure, public and cultural activities and shops that are free from uninvited unhealthy food advertising and promotion.

Children do not generally earn incomes, they do not easily have direct legal recourse, and many do not have the experience or sophistication to differentiate between advertising and objective information. And yet they are often exposed to advertising and sophisticated promotional techniques that influence their behaviour.

Protecting our children from commercial activities that shape their behaviour or

preferences should be enshrined as part of our efforts to give them a healthy start. They should not be exposed to activities that encourage them to buy, pester for, or eat products known not to optimise their health.

The Mayor has already introduced a restriction on advertising of unhealthy foods on the land, assets and advertising sites he controls through TfL. But this approach needs to go further, so that children are not exposed to, or manipulated by, unhealthy advertising anywhere in the city.

All public spaces in London should be free from junk-food advertising. Following the Mayor's lead, Haringey, Southwark and many other boroughs are soon to introduce their own healthier food advertising policies. We want advertising restrictions extended to all London's outdoor spaces, with boroughs able to restrict advertising on sites that are currently often outside of their control, such as phone boxes and sports stadiums. National government needs to give them the powers to do this.

We are also calling for an extension to sports stadia and leisure facilities. Building on initiatives such as Healthy Stadia, we

want one of London's professional football clubs and one leisure-centre site to trial restrictions on their premises, with a view to encouraging all sports venues to follow suit.

We also need to see a reformed approach to promotion inside shops. Younger children go into shops alone, or with their parents, on the way to and from school and at weekends. There are still far too many temptations for young children to buy, or pester for, unhealthy products as a result.

There are simple solutions. Evidence shows that removing foods such as confectionary, chocolate and crisps from checkouts and replacing them with healthier items reduces unhealthy purchases.³⁷ We also know that strategies such as adjusting prices and item availability and suggesting swaps can encourage people to buy healthy foods.³⁸

So, we call on supermarkets and shops to move any foods high in fat, salt or sugar out of the reach or view of young children. This is important not just for large supermarkets but for the budget supermarkets, local markets and corner shops used widely by people who are living in poverty. The results also need to be evaluated by academic partners.

DID YOU KNOW?

- Sports stadia (and the accompanying TV broadcasting) are key venues in which children are exposed to unhealthy advertising: 76 per cent of sports sponsors promote food with a low nutritional value and 52 per cent show sugar-sweetened drinks.³⁹
- Amsterdam has successfully introduced a restriction on unhealthy adverts in sports stadia.⁴⁰ Action on advertising is backed by a Transport for London survey illustrating that 82 per cent of Londoners support a full unhealthy-food advertising ban.⁴¹

³⁷ Ejlerskov et al, 2018. Supermarket policies on less-healthy food at checkouts. PLOS Medicine 15 (12): e1002712

³⁸ Hartmann-Boyce J et al, 2018. Grocery store interventions to change food purchasing behaviours. Am J Clin Nutr. 107 (6): 1004-16

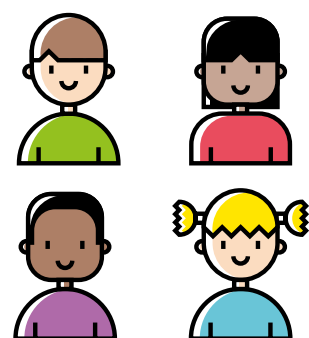
³⁹ Bragg MA et al, 2018. Sports sponsorships of food and non-alcoholic beverages. Paediatrics 141 (4): e20172822

⁴⁰ Council and Health Department of Amsterdam, 2019. Amsterdam Healthy Weight Programme review 2012-2017. Amsterdam: Council Health Department of Amsterdam

⁴¹ Greater London Authority, 2018. TfL junk food ads ban will tackle child obesity. London, GLA

AMBITION 9

TRANSFORM FAST-FOOD BUSINESSES



We want to live in a city where we can hang out with our friends without pressure to buy extra unhealthy food or drink.

OUR CALLS TO ACTION

- ➔ We call on **takeaway and fast-food businesses** to restrict the sale of unhealthy items at times when unaccompanied children and young people are likely to visit.
- ➔ We call on the **London boroughs** and **the Mayor** to step up support to **small takeaway and fast-food businesses** to enable them to become Healthier Catering Commitment accredited and to identify and trial tangible incentives to encourage them all to do so, with **academic partners** to evaluate impact.

WHY THESE ACTIONS WILL MAKE A DIFFERENCE

London's high streets are not healthy for young people. Children often buy fast food on their way to and from school. The total number of takeaway outlets in the UK has increased by over one third since 2010, with 8,563 takeaway outlets in London (92.7 per 100,000 of the population).⁴² Eighteen of London's boroughs have a higher

density of fast-food outlets per 100,000 population than the England average.⁴³ Children living in poorer boroughs are surrounded by a significantly higher number of fast-food restaurants and the availability of more takeaway foods.⁴⁴

We have learned, however, that children value these outlets not only for the products they sell, but as social spaces where they feel welcome and can gather to socialise.⁴⁵ Takeaways and fast-food restaurants tend to be parent free, and many offer free wi-fi.

So, we want to see the businesses that already exist – including the many small independents and the chains – transformed. To start with, we want to see the most unhealthy foods and drinks commonly consumed by young people, and promotions for them, off the menu at times when they are most likely to visit, and healthier options and promotions offered instead.

We believe that limits on unhealthy products, combined with healthier offers, are warranted when children are unaccompanied. Takeaway and fast-food restaurants can lead the way by implementing these changes now, guided by public health advice about what constitutes a healthy menu.

We also want to see small takeaway and fast-food businesses, particularly in areas of poverty, receiving support to offer healthier options.

London already has a voluntary scheme that provides accreditation for businesses that meet set criteria for healthier food: the Healthier Catering Commitment. We want to see this scheme supercharged – scaled up, extended and fully implemented. But we know small businesses in areas of poverty find it hard to comply without greater support.

So we want to see them given freely available advice and support to help them implement it, along with tangible, effective incentives that would encourage all of them to become Healthier Catering Commitment accredited. We want the Mayor and boroughs to explore what incentives could work and trial them with small takeaways, fast-food businesses and academic partners.

DID YOU KNOW?

- London's children's patterns of fast-food consumption are highly influenced by the availability and price of fast-food restaurants on their routes to and from school.⁴⁶
- Evidence indicates that changing the way unhealthy products are sold from fast-food outlets and cafeterias, including reducing portion sizes,⁴⁷ restricting visibility of fried foods,⁴⁸ and modifying menu positions,⁴⁹ can have positive impact. Actions that moderate availability of unhealthy products and create incentives for customers to buy healthier options tend to be more effective than those that only provide information or make healthier options more available.⁵⁰
- The Pennine Lancashire consortium of local authorities is developing and testing incentives for takeaways and fast-food businesses to sell and promote healthier food, including free and heavily subsidised advertising, reduced-cost waste management, and links to local food growing.⁵¹

⁴² Public Health England, 2018. Density of fast food outlets in England by local authority and ward: data tables and metadata. London, PHE

⁴³ Public Health England, 2016. Fast food map. London, PHE

⁴⁴ Public Health England, 2018. Fast food outlets: density by local authority in England. London, PHE

⁴⁵ Thompson C et al, 2018. Fast-food, everyday life and health. Appetite 128: 7-13

⁴⁶ Caraher M et al, 2014. The 'School Foodshed': schools and fast-food outlets in a London borough. British Food Journal 116 (3): 472-93

⁴⁷ Goffe L et al, Feasibility of working with a wholesale supplier to co-design and test acceptability of an intervention to promote smaller portions. BMJ Open 9: e023441

⁴⁸ Alfred Health, 2019. Fried food trial. Web page. Victoria, Australia: Alfred Health. Available at: www.alfredhealth.org.au/about/healthy-communities/healthy-food/fried-food-trial

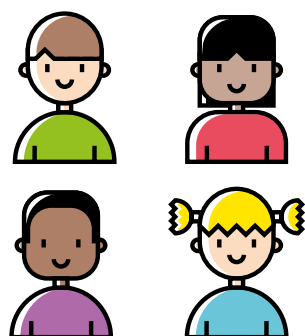
⁴⁹ Schmidtke KA et al, 2019. Menu positions influence soft drink selection at touchscreen kiosks. Psychology & Marketing March: 1-7

⁵⁰ Hillier-Brown FC et al, 2016. The impact of interventions to promote healthier read-to-eat meals. Obesity Reviews 18 (2): 227-46

⁵¹ Local Government Association, 2018. Childhood Obesity Trailblazer Programme. Web page. London, LGA, available at: www.local.gov.uk/childhood-obesity-trailblazer-programme

AMBITION 10

FUND GOOD-FOOD INNOVATION AND HARNESS THE POWER OF INVESTMENT



We want to live in a city where businesses are helped to make healthier food and drinks.

OUR CALLS TO ACTION

- ➔ We call on **investment funders, the Mayor, the London boroughs, established businesses** and **Guy's and St Thomas' Charity** to support the development of a 'good food' investment fund.
- ➔ We call on **the Mayor** to support the responsible investment case for solutions to unhealthy weight in childhood and encourage **institutional investors** to join the ShareAction Healthy Markets coalition.

WHY THESE ACTIONS WILL MAKE A DIFFERENCE

Making the changes needed to transform the diets and activity of London's children will require deep change in the economics of the system. Yet we are not naive about the current risks for businesses operating in challenging times – including small businesses,

often run by people struggling themselves and running on tiny margins.

Meanwhile, new opportunities await brave entrepreneurs driven by a mission to improve health. There are opportunities to develop newly opened supply chains, distribution channels, technology and the exciting circular and shared economies – albeit each potentially bringing additional risk.

To kickstart this deeper change, we think businesses that are willing to be healthier should receive support in retaining or building a customer base or exploring such new opportunities.

We want to see a new generation of food businesses that are financially sustainable while at the same time providing the affordable, healthy, tasty and convenient food that London's children will want. We want London to build on its reputation of being 'open for business', home to many good-food entrepreneurs, and the custodian of a vibrant culture of world-leading food innovation.

So, we call on investors and business leaders to build a London good-food investment fund to invest in existing businesses and in new entrepreneurs wanting to create healthy food opportunities.

We also call on the Mayor, the GLA and boroughs to explore ways to support such a fund with added value, non-cash assets.

A London Good Food Fund could generate investment funding, access to expertise and risk-mitigating support and other potential Mayor-convened assets. This would be transformative not only to young ambitious and innovative businesses but, crucially, to the children, young people and families living in poverty in this city.

There are also other opportunities to transform investment in healthier foods, specifically with the global food companies operating in London or trading on the London Stock Exchange. Working with institutional investors such as pension funds, pressure can be put on these companies' boards to redesign the food environments to which children are exposed, through changing how they measure success, their speed of development of healthier products and their governance outlook.

This is possible because globally, more than £50 trillion is invested by institutional investors in big food companies that market their products to – and employ – Londoners, among others. Ultimately, much of this investment money comes from the savings and pensions of ordinary people, including Londoners. So we all have a stake, and should all have a voice, in the way that it is invested.

We call on the Mayor to support the responsible investment case for solutions to unhealthy weight in childhood, including backing ShareAction's Healthy Markets campaign, which harnesses the power of investors to work with food and drink companies in order to improve the accessibility of healthier options.

DID YOU KNOW?

- In the United States, the Michigan Good Food Fund (a \$30 million/£24 million public-private partnership loan fund) provides financing to enterprises working to increase access to affordable, healthy food in low-income and underserved communities. The fund has invested \$13 million/£10.7 million in 92 businesses, all of which offer healthy food.⁵⁰

⁵⁰ The Kresge Foundation, 2019. Case study: Michigan Good Food Fund. Troy, Kresge Foundation

PART THREE

**WHAT THE
TASKFORCE
WILL DO NEXT**





© 2018 Guy's and St Thomas' Charity

This document is a call to action to everyone who can help London's children eat healthier diets, drink water and be more physically active. Although we have no mandate or budget to deliver any specific action, we as the London Child Obesity Taskforce will push to see this plan delivered. To do so, we will use:

- **our determination** to engage with children and families
- **our voice** to tell the story and communicate our vision
- **our commitment** to helping the system learn
- **our efforts** to mobilise those who can effect change.

We also know that in communities, people are the main assets and have their own ideas about what will work for them. So, we will continue to explore how we can more effectively engage with and incentivise communities to come up with new actions that we haven't yet considered and that could help fulfil their own life goals.

USING OUR VOICE TO TELL THE STORY

We have used our voice to articulate our call to action and to motivate the Mayor and other key partners and sector leaders. Moving forward, we will use it to champion the work of those leading the change and those who get involved along the way. We will use it to call out those who overtly fail to act, too.

INVOLVING CHILDREN, YOUNG PEOPLE AND FAMILIES

We believe the actions set out in this plan have the potential to unleash a transformation in London. But there is a lot we don't yet know.

For example, we can only guess how to design a water fountain in such a way that would encourage a London child to use it. So, we will talk to children, young people and families about how to design actions that will work in the context of their everyday realities. That's why one of our first tasks is to establish a co-design process with children, young people and their families.

Our communications will be constant and consistent. They will be framed to reflect the reality that, although achieving a healthy weight can be a difficult and complex goal to achieve, it is entirely possible to shift the system and achieve real success. And so, we will be relentlessly positive in our approach.

We will also use our voice to tell the stories of the people we meet along the way: London's children and families living in poverty. Many are unheard, marginalised or blamed for mismanaging their health. We will share their lived experience, the challenges they face and the solutions they propose.



LEARNING OUR WAY TO THE FUTURE

We want to learn from others and learn by doing. We will engage with other cities, in the UK and around the world, so we can learn from each other, share what we learn and use the power of cities to advocate for policy change together where it will benefit our communities.

To this end, we will look to set up a global cities network focused on children's healthy weight, and in 2020 will host the first global summit on actions to promote healthy weight in cities. We will also engage with the research community to assess how action in London could be better monitored and evaluated.

MOBILISE OTHERS TO TAKE ACTION

When we first met as a taskforce, we agreed that we needed to get out around London and engage those who could make a difference to children's lives. This has been a crucial part of our work so far. Our role now is to continue to drive leadership throughout the system, through engagement and partnership.

Our aim is to motivate the leadership of many sectors to help create a change so that everyone in London feels that they have agency to be part of the solution – so that a child with an unhealthy weight is not just the problem of one person, one family or one politician, but of everyone in London and beyond.

Building on previous action in London, we have identified these calls to action as the next phase of tackling unhealthy weight in London – a more concerted, systems approach. They are the next steps we believe are needed. But there is scope to do so much more.

The ten ambitions present a framework within which any stakeholder can identify and deliver action within their power. We will continue to seek more ideas, contributors, calls to action and partners so that the most complete transformation of this city can be unleashed to offer every child a healthy weight.

FIND OUT MORE

Visit our website at
www.london.gov.uk/what-we-do/health/londons-child-obesity-taskforce

