

**Department of Health and Social Care
10-Year Cancer Plan: Call for Evidence**

**Submission by World Cancer Research Fund
1 April 2022**

World Cancer Research Fund is the leading authority on cancer prevention research related to diet, weight and physical activity. Our Cancer Prevention Recommendations [1] can make an enormous impact on people's likelihood of developing cancer. There is evidence from numerous studies that greater adherence to our cancer prevention recommendations is associated with lower cancer incidence and improved cancer survival. This indicates that following these recommendations can improve health and have a positive impact on population level health. At a population level, our recommendations are best delivered through policy.

We welcome that the proposed 10-year plan recognises the importance of diet, physical activity and alcohol related risk factors. However, we offer several suggestions to strengthen the scope and ambition of the plan from the perspective of prevention and survivorship.

To be successful, the plan needs to adopt a whole of society and health for all approach, recognising that action needs to be taken across the life-course. The plan should focus on creating healthy environments and should avoid stigmatising language that perpetuates negative stereotypes about addressing risk factors at an individual level. There should also be recognition of the negative impact of inequalities on cancer risk reduction and this should be factored within and connected to the government's levelling up agenda.

Policy coordination and coherence is vital to ensure that the cancer plan can be delivered successfully. A whole of government approach must be taken, with buy in from the highest levels of government and strong political will.

To underpin prevention and reap the full benefits, it will be critical to deliver the policy initiatives within the Government's Obesity Strategy [2] and other recommendations as outlined in the Obesity Health Alliance 'Turning the Tide – 10 year Healthy weight strategy' [3]. New regulations must be protected from industry lobbying tactics that can weaken and undermine policy measures. Therefore, we call on the government to:

- Ensure full implementation of new restrictions on retail promotions on unhealthy food and drinks (due to be implemented from October 2022)
- Ensure full implementation of new restrictions on TV and online advertising of unhealthy food and drinks and ensure these are not delayed beyond January 2023.

Furthermore, the government should recognise the important opportunities that the forthcoming Food Strategy and Health Disparity White Papers present towards cancer prevention, and should set out approaches for food and drink reformulation. The government should recognise and build on the successful approach of the Soft Drinks Industry Levy [4] and effectively further incentivise manufacturers through policy to make their products healthier.

In addition, the plan needs to include a range of measures to promote breastfeeding and optimal feeding practices for infants and young children that are free from commercial interest. Breastfeeding [5] promotes the healthy growth and development of children, protects against overweight and obesity and cancer in later life, as well as protecting the mother against breast cancer. Consequently, we call on the government to:

- a. Enact and enforce stronger regulations to better protect parents from misleading commercial influence on when, what and how they feed their babies -

by putting an end to the inappropriate marketing of infant milks through the full implementation of the International Code of Marketing of Breastmilk Substitutes [6], which provides the most relevant policy framework.

b. Regulate the composition, labelling and marketing of foods, snacks and drinks marketed for infants and young children, many of which are ultra-processed and are high in free-sugars. We recommend that guidance and a nutrient profile model from WHO Europe are used as the basis of UK regulation, and in addition the use of cartoon characters on foods marketed for pre-school children are banned.

c. Improve access and uptake to the Healthy Start scheme, given the rising cost of living, to support families and pregnant women access milk, fruit and vegetables.

We urge the Government to urgently develop an alcohol strategy, given that alcohol increases the risk of six cancers and there is no safe level of alcohol consumption [7]. The strategy should introduce minimum unit pricing (MUP), calorie and cancer warning labelling and an increase in alcohol duty. Product labelling is a well-known strategy to raise awareness of health risks, and is recognised as such by the World Health Organisation in their global strategy to reduce the harmful use of alcohol [8].

Modelling has indicated that a 50p MUP in England would prevent 670 cancer deaths, 6,300 cancer admissions, and reduce healthcare costs by £1.3 billion over a 20-year period [9]. WHO modelling has estimated that by doubling the current duty, the UK could potentially avoid more than 1,800 cancer cases (10.9% of new cases) and 680 cancer deaths (10.9% of deaths) [10].

Furthermore, the negotiation of trade deals can pose a significant threat to cancer risk reduction efforts, given the negative impact on the availability and affordability of healthy foods, leading to unhealthier diets [11]. Health impact assessments should be built into trade negotiations as a key recommendation under the new cancer strategy.

Finally, healthcare professionals should be provided with training and resources and ongoing professional development to be better equipped to advise patients on how to follow a healthy diet, reduce alcohol consumption and move more [12].

[1] <https://www.wcrf.org/diet-and-cancer/cancer-prevention-recommendations/>

[2] <https://www.gov.uk/government/publications/tackling-obesity-government-strategy/tackling-obesity-empowering-adults-and-children-to-live-healthier-lives>

[3] Obesity Health Alliance (2021) Turning the Tide: A 10-year Healthy Weight Strategy

[4] <https://www.gov.uk/government/publications/soft-drinks-industry-levy/soft-drinks-industry-levy>

[5] <https://www.wcrf.org/dietandcancer/for-mothers-breastfeed-your-baby-if-you-can/>

[6] World Health Organization. (1981). International code of marketing of breast-milk substitutes. World Health Organization. <https://apps.who.int/iris/handle/10665/40382>

[7] <https://www.wcrf.org/dietandcancer/alcoholic-drinks/>

[8] Kokole,D.; Anderson,P.; Jané-Llopis, E. Nature and Potential Impact of Alcohol Health Warning Labels: A Scoping Review. *Nutrients* (2021)13,3065. <https://doi.org/10.3390/nu13093065>

[9] Angus C, Holmes J, Pryce R, Meier P & Brennan A (2016) Alcohol and cancer trends: Intervention Studies University of Sheffield and Cancer Research UK

[10] Carolin Kilian, Pol Rovira, Maria Neufeld, Carina Ferreira-Borges, Harriet Rumgay, Isabelle Soerjomataram, Jürgen Rehm (2021) Modelling the impact of increased alcohol taxation on alcohol-attributable cancers in the WHO European Region, *The Lancet Regional Health – Europe*

[11] Freund, F., Springmann, M. Policy analysis indicates health-sensitive trade and subsidy reforms are needed in the UK to avoid adverse dietary health impacts post-Brexit. *Nat Food* **2**, 502–508 (2021). <https://doi.org/10.1038/s43016-021-00306-9>

[12] <https://www.wcrf-uk.org/health-professionals/free-cancer-prevention-package/>

Contact

This consultation response was prepared by Kate Oldridge-Turner, Head of Policy and Public Affairs. For any queries about WCRF's submission, please contact policy@wcrf.org.