

UK government consultation on applying the 2018 Nutrient Profile Model to junk food marketing and promotions restrictions - WCRF Response

June 2026

World Cancer Research Fund (WCRF) examines how diet, weight and physical activity impact the risk of developing and surviving cancer¹. As part of an international network of charities, we have been funding life-saving research, influencing global public health policy and educating the public since 1982. We've been in official relations with the World Health Organization (WHO) since 2016 and work together to address modifiable risk factors for cancer, such as obesity and alcohol, and improve survivorship. While society continues searching for a cure, our prevention and survival work is helping people live longer, happier and healthier lives - free from the devastating effects of cancer.

WCRF warmly welcomed publication of the 2018 Nutrient Profile Model (NPM). This consultation on applying the updated NPM to junk food marketing and promotions restrictions is imperative as current policies are based on the 2004 NPM, which was developed over 20 years ago and does not reflect the latest evidence. As a result, unhealthy foods continue to be marketed and promoted. This is concerning from a cancer prevention perspective given that the marketing and promotion of unhealthy food leads to increased consumption which in turn contributes to excess weight.

Overweight and obesity is a well-established risk factor for at least 13 cancer types². It is the second largest modifiable risk factor after smoking, yet the leading cause of bowel, kidney, ovarian and liver cancer in the UK³. By 2043, overweight and obesity is projected to become the greatest preventable cause of cancer among UK women⁴. Childhood obesity is also a growing issue, with rates having increased from 4% to 20% over the past 50 years⁵. The latest data shows that in England, 1 in 5 start school above a healthy weight and 2 in 5 children leave primary school above a healthy weight⁶. This not only affects their immediate health and wellbeing but also has lasting consequences. Children living with overweight or obesity are five times

¹ World Cancer Research Fund <https://www.wcrf-uk.org/>

² World Cancer Research Fund/American Institute for Cancer Research (2018) *Diet, nutrition, physical activity and cancer: a global perspective. Continuous Update Project expert report 2018*. Available at: <https://www.dietandcancerreport.org>

³ Brown, K.F., Runggay, H., Dunlop, C. *et al.* The fraction of cancer attributable to modifiable risk factors in England, Wales, Scotland, Northern Ireland, and the United Kingdom in 2015. *Br J Cancer* 118, 1130–1141 (2018). doi: [10.1038/s41416-018-0029-6](https://doi.org/10.1038/s41416-018-0029-6)

⁴ Cancer Research UK (2018) *When could overweight and obesity overtake smoking as the biggest cause of cancer in the UK?* Available at: https://www.cancerresearchuk.org/sites/default/files/obesity_tobacco_cross_over_report_final.pdf?_gl=1

⁵ World Obesity Day (2026). 8 Billion Reasons to Act on Obesity. Available at: https://www.worldobesityday.org/assets/downloads/WOD_One_Pager.pdf

⁶ NHS Digital (2024) *National Child Measurement Programme, 2023–24 school year*. Available at: <https://digital.nhs.uk/data-and-information/publications/statistical/national-child-measurement-programme/2023-24-school-year>

more likely to develop serious, diet-related conditions in adulthood, including cancer⁷. WCRF's evidence clearly shows that consumption of sugar sweetened beverages, fast food, and other HFSS foods contributes to excess weight gain and must therefore be limited for cancer prevention⁸. Hence, the marketing and promotion of these products is a core concern especially when it comes to children and young people.

Ensuring that junk food marketing and promotions restrictions are robust and based on the updated 2018 NPM is especially important for those living in deprived communities. These populations have higher rates of overweight and obesity and face greater barriers to accessing healthy, affordable food⁹. A significant driver of this is the food environment. Statistics published by the Office for Health Improvement and Disparities in February 2025 show that the number of fast-food outlets per head of population in the most deprived areas of England are double the level in the least deprived areas, at 147 versus 73 per 100,000¹⁰. Moreover, evidence suggests that advertisements for unhealthy food are more concentrated in deprived areas¹¹.

As members of the Obesity Health Alliance (OHA), we support their response.

Applying the new NPM to the existing restrictions

The advertising and promotions restrictions are designed to reduce children's exposure to 'less healthy' food or drink products. The restrictions are currently underpinned by the UK NPM 2004 to 2005. We are proposing to apply the NPM 2018 (the new NPM) to the advertising and promotions restrictions to bring them in line with the latest dietary recommendations. This would bring into scope more food and drink products that are high in free sugars.

Do you agree or disagree that applying the new NPM to the advertising and promotions restrictions will improve population health?

- **Agree**
- **Neither agree nor disagree**
- **Disagree**
- **Don't know**

⁷ World Health Organization (2024) *Noncommunicable diseases: childhood overweight and obesity*. Available at: <https://www.who.int/news-room/questions-and-answers/item/noncommunicable-diseases-childhood-overweight-and-obesity>

⁸ World Cancer Research Fund/American Institute for Cancer Research (2018) *Diet, nutrition, physical activity and cancer: a global perspective. Continuous Update Project expert report 2018*. Available at: <https://www.dietandcancerreport.org>

⁹ UK Government. Obesity Profile Short Statistical Commentary. 2024. Available at: <https://www.gov.uk/government/statistics/update-to-the-obesity-profile-on-fingertips/obesity-profile-short-statistical-commentary-may-2024>

¹⁰ UK Government. Wider Determinants of Health Statistical Commentary. 2025. Available at: <https://www.gov.uk/government/statistics/wider-determinants-of-health-february-2025-update/wider-determinants-of-health-statistical-commentary-february-2025>

¹¹ Palmer, G., Green, M., Boyland, E. *et al.* A deep learning approach to identify unhealthy advertisements in street view images. *Sci Rep* 11, 4884 (2021). doi: [10.1038/s41598-021-84572-4](https://doi.org/10.1038/s41598-021-84572-4)

World Cancer Research Fund (WCRF) supports the new Nutrient Profiling Model (NPM) as a critical step towards creating the healthiest generation of children and delivering the government's ambition to end obesity. Evidence provided in the Impact Assessment (IA) shows that applying the new NPM could prevent over 110,000 cases of childhood obesity and nearly 520,000 cases in adults. This is imperative for cancer prevention given that obesity is linked to at least 13 different types of cancer¹².

The case for action is clear. In 2015, the Scientific Advisory Committee on Nutrition (SACN) halved recommended free sugar intake from 10% to 5% of total energy due to strong evidence of harm to children's health. Yet just 9% of 4-10 year olds and 5% of teenagers meet this recommendation¹³, and diet-related ill health continues to rise. In 2024/25, 10.5% of reception-aged children were living with obesity, the highest level recorded outside the pandemic peak¹⁴. At the same time, fibre intakes remain significantly below the updated SACN guidance - 95% of children aged 11 to 18 years do not meet the fibre recommendation¹⁵. Again, this is a concern for cancer prevention given that dietary fibre protects against colorectal cancer¹⁶.

Updating the existing NPM will translate updated SACN recommendations into policy, better capture free sugars, and reward foods higher in fibre and whole fruit and vegetables. It will also offer more transparency for families on the healthiness of foods and help address the "health halo" effect, where products high in free sugars benefit from processed fruit being treated favourably and confusing consumers¹⁷.

Strengthening policy by applying the new NPM is the next logical step to improve effectiveness and population health. Moreover, the public supports stronger action to help food companies provide healthier options¹⁸.

Do you agree or disagree that applying the new NPM to the advertising and promotions restrictions will capture the products that contribute to childhood obesity?

- **Agree**
- **Neither agree nor disagree**

¹² World Cancer Research Fund/American Institute for Cancer Research (2018) *Diet, nutrition, physical activity and cancer: a global perspective. Continuous Update Project expert report 2018*. Available at: <https://www.dietandcancerreport.org>

¹³ OHID (2025) National Diet and Nutrition Survey [online] Available at: <https://www.gov.uk/government/statistics/national-diet-and-nutrition-survey-2019-to-2023/national-diet-and-nutrition-survey-2019-to-2023-report#executive-summary>

¹⁴ NHS (2025) National Child Measurement Programme [online] Available at: <https://digital.nhs.uk/services/national-child-measurement-programme/>

¹⁵ OHID (2025) National Diet and Nutrition Survey [online] Available at: <https://www.gov.uk/government/statistics/national-diet-and-nutrition-survey-2019-to-2023/national-diet-and-nutrition-survey-2019-to-2023-report#executive-summary>

¹⁶ World Cancer Research Fund/American Institute for Cancer Research (2018) *Diet, nutrition, physical activity and cancer: a global perspective. Continuous Update Project expert report 2018*. Available at: <https://www.dietandcancerreport.org>

¹⁷ Action on Sugar and Salt (2020) Processed Fruit Snacks Survey Report [online] Available at: <https://www.actiononsugar.org/media/actiononsugar/Processed-Fruit-Snacks-2020-Survey-Report-pdf>

¹⁸ Recipe for Change (2026) Public polling highlights [online] Available at: <https://www.sustainweb.org/assets/recipe-for-change-public-polling-highlights-1776860544.pdf>

- Disagree
- Don't know

We agree that applying the new NPM will better capture products contributing to childhood obesity. These categories were originally identified as key drivers of excess calorie and free sugar intakes in children, and this remains the case¹⁹. Crucially, the new NPM will continue to exclude core foods aligned with the Eatwell Guide, such as fruit.

Due to reformulation, many products in categories within scope now pass the existing NPM and continue to be widely promoted and advertised despite being high in free sugars. The Broken Plate report found one in three (34%) breakfast cereals would be considered unhealthy under the 2004/05 model, rising to almost 100% using the 2018 draft model²⁰. By offering a more focussed lens on free sugars as opposed to total, this would help to reduce the prominence of these products in store, on TV and online.

Importantly, the new NPM does not negate previous reformulation efforts and businesses can continue to sell products that do not meet its criteria. Consumers will continue to benefit from reductions in fat, sugar and salt. We would hope that reformulation was not undertaken solely to meet the previous NPM thresholds, but that companies did so to prioritise customers' health.

While the new NPM is a positive next step, analysis by Nesta found that 60% of spend on HFSS products is on food and drink that falls outside of the categories in scope of regulations²¹. We therefore recommend that following the successful implementation of the new NPM to advertising and promotions policies, the government should review these categories. In particular, alcoholic drinks must be reconsidered given that alcohol is a Group 1 carcinogen linked to at least seven types of cancer²², and there are significant concerns about displacement effects at the end of aisles within stores²³.

As part of the process for determining which products are in scope of the advertising and promotions restrictions, a product must fall into one of the categories of food and drinks products within the schedules of the regulations and be assessed as 'less healthy' by the NPM.

¹⁹ Office for Health Improvement and Disparities (2025) National Diet and Nutrition Survey 2019 to 2023: report [online] Available at:

<https://www.gov.uk/government/statistics/national-diet-and-nutrition-survey-2019-to-2023/national-diet-and-nutrition-survey-2019-to-2023-report>

²⁰ Food Foundation (2026) The Broken Plate 2026 [online] Available at:

https://foodfoundation.org.uk/sites/default/files/202606/The%20Broken%20Plate%202026_DIGITAL.pdf

²¹ Nesta (2026) Mind the gaps: Why restrictions on less healthy food and drink advertising fall short [online]

Available at: https://media.nesta.org.uk/documents/Mind_the_gaps_-_full_report.pdf

²² World Cancer Research Fund. Alcoholic Drinks. Available at: <https://www.wcrf.org/wp-content/uploads/2024/10/Alcoholic-Drinks.pdf>

²³ Alcohol Health Alliance (2023) AHA response to secondary legislation [online] Available at: <https://ahauk.org/wp-content/uploads/2023/03/AHA-response-to-advertising-restrictions-on-TV-and-online-for-HFSS-products-secondary-legislation.pdf>

The NPM 2018 technical guidance provides businesses with the information they need to calculate whether a product is ‘less healthy’. If the technical guidance requires any further clarity to help you to determine if a product is classified as ‘less healthy’, please set this out.

We believe the concerns over difficulties in calculating the new NPM have been overstated, and that the real concern is that some companies will now no longer be able to hide their high free sugar content. The Obesity Health Alliance (OHA) arranged a free sugars roundtable with members of its NPM working group, composed of NGOs and academics, and representatives from the Department of Health and Social Care (DHSC) on Wednesday 25th March 2026. The meeting aimed to be a practical, problem-solving workshop focused on calculating free sugars as part of the 2018 NPM technical guidance.

NGOs and academics in attendance agreed that the current technical guidance requires further clarity by setting out a clear set of assumptions to base free sugars calculations on (e.g. thresholds, rounding, negligible quantities) and further worked examples (including out of home products and other complex products)²⁴. Whilst NGOs and academics are not responsible for enforcement, this will assist us to confidently, consistently and accurately calculate free sugars to conduct research and have independent oversight, in the absence of having access to ingredient-level data. This is equally important for enforcement agencies such as the Advertising Standards Authority (ASA) and local trading standards/environmental health officers to take a consistent approach in checking compliance. Furthermore, if any business does not have access to detailed product information to inform their own free sugar calculations, these assumptions can be used instead.

From 2016/2017, the National Diet and Nutrition Survey has estimated free sugars intakes at a population level from dietary intake, which is supported by a set of assumptions²⁵ DHSC could consider expanding on these further in the first instance, for example, and consult with key stakeholders to agree on a revised set.

Understanding the impact on industry

What are the main challenges or operational issues that businesses might experience when implementing the new NPM? We welcome examples of actions businesses are taking to overcome these challenges.

WCRF can only comment from an NGO perspective and is not responsible for implementing the new NPM in policy. The OHA’s free sugars roundtable highlighted challenges for NGOs and academics in calculating free sugars, particularly due to reliance on back-of-pack nutrition information and inconsistent adherence to labelling

²⁴ Obesity Health Alliance (2026) Free sugars roundtable report summary [online] Available at: <https://obesityhealthalliance.org.uk/wp-content/uploads/2026/04/Free-Sugars-Roundtable—Meeting-Summary.pdf>

²⁵ Public Health England (2017) Appendix AA Calculation of free sugars and AOAC fibre in the NDNS RP [online]. Available at: <https://data.food.gov.uk/catalog/datasets/cba8b3a8-608a-468d-917d-7dfcacda2dfc>

requirements²⁶. By contrast, many businesses have access to detailed product specifications, which should address some of these issues. Much of the data required to calculate the new NPM is already generated through lab testing or internal analysis to support mandated nutrition labelling.

Roundtable participants agreed that the priority should be consistency and defensibility rather than perfect precision. The existing 2004/05 NPM already depends on estimation and accepted tolerances. For example, current labelling allows up to 20% variation in reported carbohydrates and sugars to reflect natural variability, processing, and storage in line with EU legislation²⁷. Clear assumptions in technical guidance would help standardise approaches and reduce legal risk, as seen in the 2022 Kellogg's case²⁸.

During that case, Kellogg's noted that 30% of its HFSS sales were driven by prominent in-store promotions. Given this, it is reasonable to expect industry to invest in more detailed product assessment for free sugars, improving transparency and understanding of the healthiness of the products they sell.

Finally, the use of an NPM is well-established. Industry has used it since Ofcom's advertising regulations and previously overcame early implementation challenges through collaboration and system development. The switch from total to free sugars is not a new concept. Having been consulted on in 2018, businesses should have been working towards it. We are confident similar progress can be made to ensure consistent calculation of free sugars under the new NPM.

If the NPM is reviewed and updated again in the future to reflect new dietary recommendations, what would be a proportionate timeframe for applying any future updates which supports alignment with the investment cycles of industry?

We would support the NPM being regularly reviewed and updated to reflect our changing food system and the latest evidence base on diet and health. We do not have a view on alignment with investment cycles of industry. However, we urge the government to learn from the lessons of the new NPM by ensuring updates are delivered in a timely manner, match the scale and urgency of the challenge in relation to dietary-health, and stakeholders are provided with a clear implementation plan of when the changes will take effect.

²⁶ Obesity Health Alliance (2026) Free sugars roundtable report summary [online] Available at: <https://obesityhealthalliance.org.uk/wp-content/uploads/2026/04/Free-Sugars-Roundtable---Meeting-Summary.pdf>

²⁷ European Commission Health and Consumer Directorate-General: Guidance document for competent authorities for the control of compliance with EU legislation on Regulation (EU) No 1169/2011 with regard to the setting of tolerances for nutrient values declared on a label. Available at: https://food.ec.europa.eu/system/files/2016-10/labelling_nutrition-vitamins_minerals_guidance_tolerances_121%202_en.pdf

²⁸ Royal Courts of Justice (2022). Available at: <https://www.judiciary.uk/wp-content/uploads/2022/07/Kellogg-v-SSHSC-judgment-040722.pdf>

Timescale for applying the new NPM

Subject to the consultation outcome, we would introduce an implementation period to allow businesses to adapt to any changes. Do you agree or disagree that 12 months is a sufficient implementation period for businesses in scope of the advertising and promotions restrictions and enforcement authorities to adapt to the new NPM being applied?

- **Agree**
- **Neither agree nor disagree**
- **Disagree**
- **Don't know**

We support a 12-month implementation period as sufficient for businesses and enforcement agencies to prepare. We propose the following timeline as a feasible roadmap for businesses to work to:

- September/October 2026: Government responds to the consultation, in line with government guidance.
- Early 2027: DHSC publishes updated technical guidance, including a clear and defensible definition of free sugars and assumptions, and legislation is laid before Parliament. This is where we understand the 12-month implementation window commences.
- Early 2028: The new NPM is applied to advertising and promotions policy.

We do not believe a longer implementation period is required. There is work already underway to resolve the challenges around free sugars calculation²⁹, and industry has been sensitised to the possibility of calculating free sugars since the first consultation took place in 2018. The published technical guidance this year does not differ significantly from the draft model published eight years ago, we are already nearly a year on from the new measures being announced, and there are strong foundations for the new NPM to build on.

How can the government support businesses during an implementation period?

Businesses are best placed to provide insights on how they can be most effectively supported during the implementation period. Researchers at the Centre for Food Policy at City St George's, University of London are currently conducting work to capture business perspectives on the new NPM, which may offer further valuable insight. As this research has not yet been published, we refer to the Centre for Food Policy's submission to this consultation, where it is referenced in more detail.

From experience in previous obesity policy, businesses emphasise the importance of the government delivering on committed policies and providing clear, consistent

²⁹ Obesity Health Alliance (2026) Free sugars roundtable report summary [online] Available at: <https://obesityhealthalliance.org.uk/wp-content/uploads/2026/04/Free-Sugars-Roundtable---Meeting-Summary.pdf>

direction and a level-playing field to support investment planning. Interviews with retailers stressed the importance of timely, clear and comprehensive guidance to facilitate effective implementation of the HFSS locations legislation³⁰. Furthermore, uncertainty and delays risk undermining business confidence in the regulatory framework, creating a 'first-mover' disadvantage and a loss of engagement and buy-in³¹. The government can mitigate these risks by setting out a clear implementation roadmap and ensuring that agreed timelines are met.

Enforcement

Guidance is available to support enforcement authorities in enforcing the advertising and promotions restrictions. What kind of support would be useful to enable enforcement authorities to effectively adapt to the new NPM being applied to the advertising and promotions restrictions?

There is considerable learning to be drawn from the enforcement of existing HFSS location promotion regulations. Research by Jenneson et al. (2025) highlighted that there are limited resources within local authorities to carry out compliance checks, compounded by gaps in training, access to nutrition information, and the absence of a simple method for calculating scores under the existing NPM³². These findings align with surveys conducted by the OHA, where Trading Standards officers reported being familiar with the legislation but lacking the training needed to enforce it effectively, alongside managing competing priorities³³. Similar challenges have been observed in the implementation of the Calorie Labelling Regulations³⁴.

Dhuria et al. (2026) identified several measures the government could take to support successful implementation, including developing a freely accessible HFSS calculator, providing targeted support for smaller businesses, and allocating additional resources to local authorities to strengthen enforcement³⁵. Enforcement

³⁰ Kininmonth, A.R, Stone, R.A, Jenneson, V., Ennis, E., Naisbitt, R., Johnstone, A.M, Morris, M.A and Fildes, A. (2026) "It was a force for good but...": a mixed-methods evaluation of the implementation of the high in fat, sugar and salt (HFSS) legislation in England. *Food Policy*, Volume 139, <https://doi.org/10.1016/j.foodpol.2026.103048>

³¹ Food Foundation (2024) Lobbying for Good: Why we need regulation to level the playing field for the food industry [online] Available at: <https://foodfoundation.org.uk/news/lobbying-good-why-we-need-regulation-level-playing-field-food-industry>

³² Jenneson VL, Pontin F, Ennis E, Fildes A, Johnstone AM, Morris MA; DIO Food team. Protocol for a quasi-experimental analysis: using retail sales data to evaluate impacts of the high fat, sugar and salt (HFSS) product placement restrictions legislation in England. *BMJ Public Health*. 2025 Dec 25;3(2):e002065. doi:10.1136/bmjph-2024-002065. PMID: 41458241; PMCID: PMC12742058.

³³ Food Active and Obesity Health Alliance (2023) Location, location, location [online] Available at: https://obesityhealthalliance.org.uk/wpcontent/uploads/2026/05/Location_Location_Location_Winter2023_FINAL.pdf

³⁴ Essman M, Bishop T, Burgoine T, Jones A, Polden M, Robinson E, Smith R, Adams J, White M. Implementation and enforcement of mandatory calorie labelling regulations for the out-of-home sector in England: Qualitative study of the experiences of business implementers and regulatory enforcers. <https://doi.org/10.1371/journal.pone.0323452>

³⁵ Muir S, Dhuria P, Roe E, Lawrence W, Baird J, Vogel C. UK government's new placement legislation is a 'good first step': a rapid qualitative analysis of consumer, business, enforcement and health stakeholder perspectives. *BMC Med*. 2023 Jan 26;21(1):33. doi: 10.1186/s12916-023-02726-9. PMID: 36703194; PMCID: PMC9878939

activity is a key driver of compliance. Yet large retailers have reported very limited enforcement checks, largely confined to the initial months following introduction of the legislation, and no financial penalties have been issued³⁶

To ensure the new NPM is implemented effectively, the government should introduce a comprehensive package of support for local authorities:

- Given the challenges noted in calculating free sugars at this stage, ensuring the model is accessible and practical for resource-constrained local authorities is crucial to support consistent implementation. We therefore recommend that the government commissions a freely accessible calculator. This will be crucial in supporting consistent and accurate compliance checks alongside better adherence to current nutrition labelling requirements.
- Ensuring local authorities are adequately resourced to carry out enforcement checks, including through increased ring-fenced funding to boost capacity.
- Developing and delivering workforce training so that relevant officers have the necessary knowledge and skills to assess compliance.

Consultation-stage impact assessment

Do you agree or disagree that the transition cost calculations within the impact assessment reflect a fair assessment of the costs that would be faced by your organisation or business?

- **Agree**
- **Neither agree nor disagree**
- **Disagree**
- **Don't know**
- **Not applicable**

Please provide any further evidence that could be used to improve our estimates. If you are referring to a specific calculation, please state which one.

N/A

Do you agree or disagree that the ongoing cost calculations within the impact assessment reflect a fair assessment of the costs that would be faced by your organisation or business?

- **Agree**
- **Neither agree nor disagree**
- **Disagree**
- **Don't know**
- **Not applicable**

³⁶ Jenneson VL, Pontin F, Ennis E, Fildes A, Johnstone AM, Morris MA; DIO Food team. Protocol for a quasi-experimental analysis: using retail sales data to evaluate impacts of the high fat, sugar and salt (HFSS) product placement restrictions legislation in England. *BMJ Public Health*. 2025 Dec 25;3(2):e002065. doi:10.1136/bmjph-2024-002065. PMID: 41458241; PMCID: PMC12742058.

Please provide any further evidence that could be used to improve our estimates. If you are referring to a specific calculation, please state which one.

N/A

We are assessing how many advertisements there currently are for products that would be reclassified as 'less healthy' if the new NPM was applied to the advertising restrictions. We are assessing children's exposure to these advertisements for products that would be reclassified as 'less healthy'. If you have any evidence or data that would help inform our assessment, you will be asked to include it.

Please see submissions by the OHA.

Impact on groups with protected characteristics

We would like to understand the impact of our proposals on people with protected characteristics. It is against the law to discriminate against anyone because of protected characteristics, which are:

- age
- disability
- gender reassignment
- marriage and civil partnership
- pregnancy and maternity
- race
- religion or belief
- sex
- sexual orientation

Do you think that this proposal is likely to impact on people who share a protected characteristic in a way that is different from those who do not share it?

- Yes
- No
- Don't know

If you said 'yes', which protected characteristics do you think this applies to? Select all that apply.

- age
- disability
- gender reassignment
- marriage and civil partnership
- pregnancy and maternity
- race
- religion or belief

- sex
- sexual orientation

If you selected any characteristics, how might the proposal impact people differently because of these characteristics? Provide any specific information or evidence to support your answer, including whether the impact is likely to be positive or negative.

Currently, those most at risk of dietary-related ill health include people with disabilities, those on lower incomes, some minority ethnic groups and vulnerable populations such as people experiencing homelessness³⁷.

Policies focused solely on individual behaviour are not effective in reducing these inequalities³⁸. Instead, action is needed to address the wider economic, social and commercial drivers that shape the food environment and make it harder for many people to eat healthily. Strengthening regulation through the new NPM represents an important step in tackling these systemic factors and has the potential to reduce health inequalities.

Evidence shows that people from lower socioeconomic backgrounds and some minority ethnic groups are disproportionately exposed to unhealthy food advertising³⁹⁻⁴⁰. Children, particularly those under the age of eight, are especially susceptible to the influence of such advertising⁴¹. As a result, reducing exposure to unhealthy food marketing through an improved NPM is likely to deliver greater benefits for these groups, helping to create a more level playing field.

The OHA also notes that some policies exclude SMEs. For example, product placement regulations do not apply to many smaller retail outlets such as convenience stores. Given that some communities, particularly those on lower incomes, rely more heavily on these outlets for food, the impact of updating the NPM may be more limited for these groups^{42,43}. Specialist stores such as 'American Candy Stores' are also exempt. This highlights the importance of ensuring that policy design maximises reach and effectiveness across all settings to avoid widening

³⁷ Kriznik NM, Kinmonth AL, Ling T, Kelly MP. Moving beyond individual choice in policies to reduce health inequalities: the integration of dynamic with individual explanations. *J Public Health (Oxf)*. 2018 Dec 1;40(4):764-775. doi: 10.1093/pubmed/fdy045. PMID: 29546404; PMCID: PMC6306091

³⁸ Coleman, P. C., Hanson, P., Rens, T and Oyebode, O. (2022) A rapid review of the evidence for children's TV and online advertisement restrictions to fight obesity, *Preventive Medicine Reports*, Volume 26, <https://doi.org/10.1016/j.pmedr.2022.101717>.

³⁹ Bite Back (2025) Fuel IsDon't Fool Us [online] Available at: https://cdn.bitebackmedia.com/media/documents/Bite_Back_Report_Fuel_Us_Dont_Fool_Us_Advertising.pdf

⁴⁰ Boyland E, Muc M, Coates A, et al. Food marketing, eating and health outcomes in children and adults: a systematic review and meta-analysis. *British Journal of Nutrition*. 2025;133(6):781-805. doi:10.1017/S0007114524000102

⁴¹ BeLue R, Ndao F, McClure S, Alexander S, Walker R. The role of social issues on food procurement among corner store owners and shoppers. *Ecol Food Nutr*. (2020) 59:35–46. doi: 10.1080/03670244.2019.1659789, PMID.

⁴² Isaacs, A., Halligan, J., Neve, K and Hawkes, C. (2022) From healthy food environments to healthy wellbeing environments: Policy insights from a focused ethnography with low-income parents' in England. *Health & Place*. Volume 77. <https://doi.org/10.1016/j.healthplace.2022.102862>

⁴³ Nesta (2026) Mind the gaps: why restrictions on less healthy food and drink advertising fall short [online]. Available online: <https://www.nesta.org.uk/report/mind-the-gaps-food-advertising/>

existing inequalities. This would also align with the approach proposed in the legislation to ban the sale of high-caffeine energy drinks to children⁴⁴.

Additional information you would like to submit

If applicable, you can raise any further matters about this consultation. Please do not include any personal information.

We support the new NPM, which represents a rational and proportionate update. To enable progress, the government should publish its response within 12 weeks. By early 2027, the updated DHSC technical guidance should be released, including a clear and defensible definition of free sugars and a set of assumptions. Clarity is critical to minimise legal risk and ensure confidence in national and local policies that rely on the existing NPM. A new NPM calculator should be commissioned, be freely available and ready in time for implementation to support enforcement bodies including local authorities and the ASA, and allow NGOs/academics to have independent oversight.

We are concerned about delays to the consultation on mandatory reporting and targets. To avoid slowing wider progress, the government should acknowledge that different policies may need to operate using different NPM versions in the short term, with the intention to align over time. This is also important for local policies such as TfL's 'junk food ad' ban and promotions policies in Scotland and Wales.

Sufficient capacity within DHSC will be essential for effective implementation, monitoring and evaluation. In addition, current exemptions significantly limit impact. The government should concurrently take steps to address brand advertising exemptions⁴⁵ and extend restrictions to outdoor advertising⁴⁶.

Aligning the NPM with other policies, i.e. School Food Standards and the energy drinks ban, would offer greater policy coherence and a consistent message to families. Additionally, the government should ensure the new NPM is aligned with climate objectives to avoid unintended barriers to progress on net zero. Consideration should be given to updating the model so that nutritionally adequate dairy alternatives are not disproportionately classified as HFSS.

⁴⁴ Department of Health and Social Care (2025). Banning the sale of energy drinks to children: Impact assessment Available at:

<https://assets.publishing.service.gov.uk/media/68b56ee1d723ba6f74dba85f/banning-the-sale-of-high-caffeine-energy-drinks-to-children-impact-assessment.pdf>

⁴⁵ Nesta (2026) Mind the gaps: why restrictions on less healthy food and drink advertising fall short [online]. Available at: <https://www.nesta.org.uk/report/mind-the-gaps-food-advertising/>

⁴⁶ Food Foundation (2025) State of the Nation's Food Industry [online] Available at: <https://foodfoundation.org.uk/publication/state-nations-food-industry-report-2025>



Finally, while recognising cost-of-living pressures, weakening or delaying evidence-based measures would be counterproductive. Implementing the new NPM remains essential to improving children's health⁴⁷.

⁴⁷ Obesity Health Alliance (2026) Delaying Food Health Measures Would Be a False Economy, Say Leading Health Experts [online] Available at: <https://obesityhealthalliance.org.uk/2026/06/11/u-turn-letter/>