Sarah Wollaston Chair, Health Committee. To watch the full debate click here.

I absolutely recognise that physical activity is important and that it should be for everyone, irrespective of their weight or age. Like me, the hon. Lady will remember Julie Creffield, who spoke so powerfully before our Committee in the last Parliament. However, the current Committee felt that it did not want to be distracted by something we had already produced some work on. We therefore wanted to endorse everything that was said by our predecessor Committee, rather than to go over that ground again.

Sarah Wollaston Chair, Health Committee.

I pay tribute to Helen Jones, Jamie Oliver and Sustain for giving us an opportunity to discuss the issue raised by the petition. I also thank all the members of the Health Committee and the Committee team, particularly Huw Yardley and Laura Daniels, for their contribution to today's report, "Childhood obesity—brave and bold action". Brave and bold action is what we need.

The first question is: how important is this issue? The answer is starkly set out in the first few pages of our report. There is a graph showing that a quarter of children leave primary school not just overweight but obese, and that an enormous and entirely unacceptable health inequality gap is opening up, and getting ever wider, between the most advantaged and the disadvantaged children in our society. Overall, a third of children are either obese or overweight by the time they leave school, which has enormous implications for them as individuals—it will blight their future life chances, and it exposes them to bullying when they are at school—and for the NHS.

As we heard, the estimated cost of obesity to the NHS is £5.1 billion. Obesity is one of the major contributing factors to developing type 2 diabetes. Diabetes now accounts for 9% of the entire NHS budget. If we are looking to make the NHS live within its means by preventing illness, we have to do something about childhood obesity. Most of all, we need to do it for the sake of the children. We need to be clear that no single measure will be the answer. We need a package of measures, and we have considered the issues in our report.

The Committee did not focus on the role of exercise in our report, primarily because we looked into physical activity and health just before the last election and we wanted to endorse the findings of that report. The message is clear: whatever someone's weight or age, exercise is enormously beneficial, but we must not be distracted into thinking that increasing exercise alone will be the answer to childhood obesity. We often hear that view from industry—that all we need is a bit more education and a bit more exercise—but we will be disappointed if we go down that route. Of course those things are important, but ultimately, unless we address the food environment in which we live, we will not make a meaningful difference to childhood obesity. Yes, let us put exercise and education firmly within the obesity strategy—I am sure that the Minister will do just that—but we need to go further.
We made recommendations in a number of areas, for example on promotions. We considered marketing and the pervasive advertising to which children are now exposed wherever they go. We considered the role of reformulation and of clearer labelling, endorsing the powerful point made about teaspoon labelling in particular. We considered improving information about food and education in schools, and school food standards. We also touched on the powerful role that local authorities can play and how we can support that.

However, as I said, we also considered whether we should introduce a sugary drinks tax, and that is what I will discuss in this debate, because the Government have indicated that they will not take action in that area. I would like to make the case to the Minister for why we felt that that should be an important part of an overall strategy.

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