

NZBCGP

New Zealand Beverage
Guidance Panel

POLICY BRIEF:
Sugary Drink Free Schools



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1. Purpose

The purpose of this policy brief is to highlight the importance of adopting a *'sugary drink free schools policy'* nationwide to improve the health of New Zealand children. This policy aims to ban the availability and consumption of sugary drinks* during school hours on school and early childhood education (ECE) premises. We believe our government has a responsibility to implement comprehensive policy in areas that are known to be detrimental to health. There is clear evidence of the negative health effects associated with sugary drink consumption and thus it is important that all schools and ECEs in New Zealand be required by government policy to remove sugary drinks and adopt *'sugary drink free schools policy'*.

This document outlines the issue of sugary drink (SD) consumption in New Zealand (NZ), and its related negative health consequences, along with the potential benefits of how a *'sugary drink free schools policy'* can provide guidance for schools in New Zealand. This policy will also describe how a multi-stakeholder effort is imperative for effective implementation of this policy as well as describing key attributes of what such a policy may resemble.

*Note a sugary drink is considered any drink with ≥ 5 grams of sugar per 100ml.

2. Policy

Sugary Drink Free Schools POLICY

- This policy applies to all Schools and Early Childhood Educations Centers in New Zealand.
- Sugary drinks* will Not be allowed on school premises.
- If a sugary drink is brought onto school grounds, the student will be asked to put it away in their bag (or throw it away if preferred) and reminded that they cannot bring such drinks to school as they are unhealthy.
- Sugary drink consumption is prohibited during school hours and on school premises.
- Water (tap/drinking fountain/packaged) and unflavored milk and drinks that have < 5 grams of sugar per 100ml are drinks that are acceptable

Exemptions: –

- Zero sugar alternatives
- 50% less sugar juice acceptable (as is < 5g sugar per 100 ml)

All events including gala days, fundraisers, celebrations, trips, events, and catering will adhere to this policy.

- For example - Sports events: Sports teams should only have water or zero sugar drinks for hydration Exemptions: –

*A sugary drink here is defined as any drink that has 5 grams or more of sugar per 100ml, as described on the nutrition label. (Including: soft-drinks, fizzy-drinks, energy drinks, sports drinks, flavoured milk, fruit-drinks, juices)

**This policy does not apply to students with diabetes, when sugary drinks are required to treat low blood glucose

***This policy does not affect staffroom tea and coffee, or alcohol.

3. Rationale for Sugary Drink Free Schools policy

DEFINITION of a sugary drink (SD): All types of beverages that contain free sugars or other caloric sweeteners. The WHO describe “free sugars” as “monosaccharides (such as glucose or fructose) and disaccharides (such as sucrose or table sugar) added to foods and drinks by the manufacturer, cook, or consumer, and sugars naturally present in honey, syrups, fruit juices,

and fruit juice concentrates”⁽¹⁾. The main categories of sugary drinks include fizzy-drinks (carbonated), soft-drinks (including sachet mixes), fruit juices, fruit drinks, cordials, flavoured milks, and energy/sports drinks.

Why target sugary drinks?

The consumption of sugary drinks (SDs) is very popular in most countries, particularly amongst children and adolescents⁽¹⁾. New Zealand is no exception, with SD consumption being the leading source of sugar in the diet of youth and the second leading source for adults^(3, 4). Over-consumption of sugar increases the likelihood of developing unhealthy weight, type-2 diabetes, non-alcoholic steatohepatitis, gout and tooth decay⁽⁵⁻¹³⁾ and thus SD intake is a significant public health concern worldwide. A reduction in SD consumption will reduce the risk of developing these avoidable health conditions. Policy and regulatory controls on SDs are likely to be the most effective strategy to reduce SD intake^(5, 6, 14). Such policies are also likely to be the most cost-effective approach⁽¹⁴⁾.

Studies have shown that energy consumed in beverages increase net energy intake and is not well compensated for by a reduction in food intake⁽¹⁵⁾. A growing body of evidence shows that sugar and SDs have addictive characteristics among high intake consumers. Sugar has addictive-like properties and acts on the brain to encourage frequent consumption. People coming off high sugar diets describe experiencing feelings of withdrawal similar to those experienced when coming off other addictive substances⁽¹⁶⁻²⁰⁾.

Sugary drinks are easily identifiable, inexpensive, nutrient poor, highly concentrated in sugar and the leading single product item contributing sugar to the diet of children and adults. The development of the adverse health outcomes associated with SD consumption is avoidable. These reasons provide a strong rationale for policy action to improve the health of the children.

Historical context of relevant Sugary Drink Free Schools Policy

In 2006, the then government added ‘clause 5 section 3’ to the National Administration Guidelines (NAGs) that stated: ***where food and beverages are sold on schools’ premises, to make only healthy options available***. This saw unhealthy foods and drinks exit schools including sugary drinks. National Administration Guidelines sit within the Ministry of Education and are for school administration and set out statements of desirable principles of conduct or administration for specified personnel or bodies⁽²¹⁾. These are revised on a regular basis and subject to change.

Unfortunately, in 2009 a new administration revoked ‘clause 5 section 3’ which saw these unhealthy items re-emerge in many schools again. We recommend that rather than including a clause into the NAGs again that government introduce enduring policy that will require schools to only allow healthy drinks to be sold and consumed on school grounds as described in this policy brief. This will ensure the sustainability of this policy into the future.

When ‘clause 5 section 3’ was revoked in 2009 many schools continued to adhere to its principles and did not allow unhealthy foods and drinks back in. More recently many schools have been part of a Water Only movement to get rid of sugary drinks from their premises⁽²²⁾. Water Only Schools Policy is supported by many health organisations including the NZ Dental Association, the NZ Medical Association and the Health Coalition Aotearoa.

Health impacts of sugary drink consumption

Since 2006, there have been several systematic reviews and meta-analyses of prospective cohort studies, observational studies, and randomised controlled trials (RCT) that have assessed the association between SD consumption, body mass index (BMI), unhealthy weight and related health consequences. These reviews demonstrate a significant positive relationship between SD intake and unhealthy weight,^(9, 12, 23-28) type-2 diabetes,⁽²⁹⁻³⁵⁾ hypertension⁽³⁶⁻⁴⁰⁾ and gout^(8, 41, 42). Two randomised control trials conducted by de Ruyter and Ebbeling found that masked substitution of SDs with sugar free equivalents compared to usual

intake, resulted in significantly less weight gain and fat accumulation in the sugar free group^(5, 6). This is in consensus with pre-twentieth century studies, which have shown that a diet which is limited in free sugars, reduces total energy intake and induces weight loss⁽⁴³⁻⁴⁶⁾.

In addition, there is strong evidence indicating a significant association between SD consumption and dental caries⁽⁴⁷⁻⁵²⁾. There is also increasing evidence demonstrating that high SD intake is likely linked to the development of cancer and impaired cognitive development^(53, 54). These adverse health outcomes have long-term health effects such as illness, disability, premature mortality and also contributes to inequity in New Zealand⁽⁵⁵⁾. We believe that a diet high in sugar is a form of malnutrition in which unhealthy weight gain, type-2 diabetes and dental caries are predictable results.

Economic and productivity related considerations

Costs associated with treating the health harms that high intake of sugary drinks cause is substantial. For example, tooth decay is one of the first harms that will present in children that consume sugary drinks and will require timely and often immediate treatment. In 2019, it was reported that due to the extremity of the situation more than \$20 million is spent each year anaesthetising Kiwi children so they can undergo multiple tooth extractions as a consequence of consuming sugary drinks.⁽⁵⁶⁾ When other associated costs are added to this, these procedures become very expensive and are avoidable. Type 2 diabetes is another disease that is associated with high SD intake. In 2020, treatment for this disease was estimated to cost NZ \$1.07 billion each year⁽⁵⁷⁾. Heart disease is also impacted by SD intake and in 2020 it was conservatively estimated to cost the NZ government approximately \$14 billion dollars each year⁽⁵⁸⁾. Combined these three diseases account for over half the annual Vote Health budget (total budget of \$32.7 billion in 2025) that fund all health costs for New Zealand each year. There are other health related problems associated with high sugar and sugary drink intake that would also benefit from a reduced intake of SDs. Apart from the treatment costs for these diseases, there can also be substantial reductions in productivity that add to the overall economic cost. These can be as much as the costs of treatment and include the economic value of: i) lives lost early; ii) the inability to perform labour due to disability; and iii) the economic value of reduced labour productivity. Looking specifically at Type 2 diabetes. It was estimated that in 2020 the treatment costs for type 2 diabetes in NZ were \$1066 million, whilst the costs related to loss in productivity amounted to \$1060 million – representing almost half of the overall economic cost of type 2 diabetes to NZ of \$2.18 billion in 2020.⁽⁵⁷⁾

New Zealand's consumption of SD

SD consumption remains very high in NZ. The most recent national nutrition surveys show that SDs contribute 26 percent of sugar to the diets of New Zealand children and 17 percent of total sugar intake to the diets of adults^(3, 4). Further, 29 percent of children consume four or more SDs per week. This was markedly higher for boys (33 percent as opposed to 24 percent for girls), Pasifika (49 percent) and Māori (39 percent)⁽⁵⁹⁾. Oral health is directly impacted by high sugar and SD intake, and oral health is the leading cause of avoidable hospitalisations in pre-school children.

Scragg et al, using the 2002 National Children's Nutrition Survey, found a positive relationship between SD consumption and BMI in children⁽⁶⁰⁾. Children who drank more than one SD per day had a significantly higher BMI compared to children who drank less than one SD per week (BMI: 19.7 verses 18.8 kg/m²)^(56no 59). Findings from the Obesity Prevention in Communities study showed that children who consumed more than one SD per day had a mean BMI of approximately 26.3 kg/m² compared to 25.3 kg/m² for non-regular SD drinkers⁽¹⁾.

Although there has been a slight reduction in the consumption of sugary drinks from 2015 – 2019, this reduction was not large enough to offer any health benefits. However, a reduction in this area is more encouraging than an increase⁽⁶¹⁾.

Learning and behavior implications of Sugary drinks and Sugar intake.

Research shows that SD consumption and poor diet are associated with lower academic achievement and problematic behaviours from students. Local schools that have removed sugary drinks and become water (and milk) only have seen that it benefits both teaching and learning as well as student health and wellbeing ⁽⁶²⁾.

How will removing sugary drinks from school's address obesity, diabetes and dental caries?

This is a simple action that can have significantly positive health effects if implemented well. Prohibiting the sale and consumption of SDs on school premises and making water more readily accessible will make it easier for children to establish healthier behaviours and to normalise these. The introduction of such a policy will also raise children's, the staff and the community's awareness of the harm that sugary drinks pose. This awareness raising is just as important as the reduction in SD intake that is likely to result from this policy.

Changes to accessibility of SDs may prompt different behavioural responses. This is likely to de-normalise SD consumption and eventually lead to a reduction in SD intake and burden of preventable illnesses like rotten teeth, diabetes, and unhealthy weight. The Water Only Schools policy is a simple initiative that will improve learning and health outcomes.

What about fruit juice and flavoured milk?

There is a misconception that fruit juice and flavoured milk are acceptable and healthy alternatives for water. Unfortunately, these drinks can contain very high amounts of sugar and in some cases have more sugar than some fizzy drinks. High consumption of fruit juices and flavoured milk carries the same risk in the development of rotten teeth, unhealthy weight, diabetes as other sugary drinks such as fizzy drinks. The high sugar content will also make concentration and learning difficult. For these reasons fruit juices and fruit drinks that have ≥ 5 grams of sugar per 100 ml are not available for children and students as part of the Sugary Drink Free Schools Policy. Although fruit juices and flavoured milks have some nutritional value, their high concentration of sugar is more harmful than any nutritional benefits offered. This means that if substituted in place of traditional fizzy-drinks/soft-drinks similar health risk in terms of dental and metabolic health remain.

Are artificially sweetened and non-caloric naturally sweetened drinks allowed?

Zero-sugar and low sugar drinks that may contain artificial and/or non-caloric natural sweeteners are acceptable provided that their overall sugar content is <5 grams of sugar per 100 ml. Although there has been speculation that artificial sweeteners may pose health risks of their own, on balance of evidence - leading experts in the nutrition field agree that these concerns are unwarranted⁽⁶³⁾. When balanced with the known harms that sugary drinks pose to metabolic and dental health that have been established beyond doubt, a move from full-sugar drinks to zero-sugar versions is beneficial. However, agree that the best options are water and unflavoured milk.

4. Implementation

Challenges?

- 1) Reluctance to change
- 2) Perception that choice is being removed
- 3) Parents unaware of policy
- 4) Teachers will need to role model this behavior
- 5) Poor quality drinking fountains in some schools.

No doubt there will be challenges experienced during the implementation of a Sugary Drink Free school policy. However, these can be addressed by the principal or a designated staff member charged with implementing this policy meaningfully engaging with all staff, students and their families in the lead-up to the implementation of the policy. In addition, there needs to be clear communication that the policy places the well-being of their child at the center of this policy as it will not only improve their ability to learn but also their health. By clearly and frequently communicating these messages to all involved will promote our natural desire to support children to flourish.

Implications for Staff

It is vitally important that teachers engage fully in this policy for it to be successfully adopted by students. For this to happen – we believe that an educational resource be developed by the Ministry of Education and delivered to all staff in schools that clearly articulates the rationale and evidence that shows what health and learning benefits will be experienced and how the policy should be worked into school practices.

Modelling and expectation of staff

- Staff lead by example by modelling healthy drinking behaviours. This means, staff also cannot have sugary drinks at school.
- Promote healthy drinking habits through education and awareness.
- If a student is seen with a sugary drink, staff will be expected to ask the child to put it in their bag (or throw it away) and remind the child that the reason for this is because the drinks are unhealthy. A letter will also be sent home with the student to inform parents and/or their caregiver why the product was removed.

Orientation of staff – Along with other school principles and values, it is important that all new staff are informed of the rules and regulations of the Sugary Drink Free Policy during their orientation and most importantly the reasons for this policy.

Implications for Students

- Students will be encouraged to bring water and/or plain milk to school, however drinks that are <5 grams per 100 mls are acceptable.
- If a student is seen with a SD, they will be asked to put it in their bag (or throw it away) and reminded that they cannot bring such drinks to school as they are unhealthy. In addition, a letter will be sent home with the child to inform parents and/or caregiver.
- If a student purchases a SD from a nearby store, it cannot be consumed on school premises.

Implications for Parents

Expectations of parents

- Parents will need to provide healthy lunch options that do not include sugary drinks.
- It is hoped that parents will eventually encourage these healthy behaviours out of school too.
- Less lunch money for purchasing lunch and more home-made lunches.

Note – it is **very** important that the parent and/or caregiver of new students are explained the Sugary Drink Free policy as well as any other nutrition policies in place on starting.

Schools should audit their drinking fountains on a regular basis to ensure that they have enough of them to support their student population, that they are clean, hygienic and in accessible locations in their school grounds.

How?

Partnership between principal – teachers – students – parents – wider community

For effective implementation, this change will need to be embraced and supported by all the partnership stakeholders. To achieve optimal benefits from this policy, the principal and staff have a responsibility to support parents and/or caregivers as well as the community to be engaged in the students' learning and health.

Implications on School Fundraising activities and Events

- All school events including school gala, fundraisers, sports events or other celebrations will uphold practices outlined in the Sugary Drink Free Schools Policy.
- NO sugary drinks will be available for purchase or consumption at any school event or on school premises at all times.
- The Heart Foundation's 'healthy fundraising ideas for schools – tool'⁽⁶⁴⁾ provides ideas of healthy fundraising alternatives.

Consideration of alternatives

- Focus on full sugary drinks first
- 50% less sugar juice alternatives are acceptable but not ideal
- Diet drinks that are zero sugar are acceptable
- Water and plain milk are best

Consideration of water fountain quality and accessibility

Accessibility

- At least one water fountain is required per 60-70 students
- Allow children's access to water during class time
- Water fountains will need to be cleaned regularly
- Regular maintenance
- Should be simple for children to re-fill their water bottles

There needs to be a regular audit of the number and quality of water fountains in your school. If schools need to upgrade and/or install more water fountains, the school principal and Board of Trustees must set aside/provide a budget for this.

5. Leaders in our communities

Which other schools have implemented a Sugary Drink Free or Water Only policy?

- Yendarra Primary School (Otara, Manukau City) adopted a Water-Only policy in 2006 (14 years ago). Since the improvement of the food and beverage environment in 2006, there have been anecdotal reports of weight loss, improvements in behaviour, attendance, academic achievement, better health and fewer rotten teeth.
- Orautoha School (Ruapehu District) has been Water-Only for some time now and the principal recognises the benefits were numerous. "The children are able to focus longer, they have more energy, they stay hydrated throughout the very warm summers, and water is so much healthier for their teeth and bodies – and it's free."⁽⁶⁵⁾
- Mosston School (Whanganui City) implemented a Water-Only policy in 2010. The principal said that children were more

able to learn when they were well hydrated and drinking plenty of water also helped recover from illness so there were fewer absences ⁽⁶⁵⁾.

- Glenview School (Cannons Creek, Porirua City) has had a Water-Only policy in place for over 25 years, making it New Zealand's longest duration Water-Only school. Regardless of the vastly available and cheap unhealthy foods and beverages in neighbourhood, the children usually show up with healthy lunch options anyway. This shows how deeply rooted and normalised these behaviours have become ⁽⁶²⁾.

These are progressive schools and leading the way to address childhood unhealthy weight and other negative health consequences associated with SD intake. Many principals have said that the transition to a water-only school was not difficult.

We note that there are many other schools across New Zealand that are also Water Only, however, we accept that there is a larger number of schools that have sugary drinks freely accessible to our NZ children.

The Sugary Drink Free policy described and proposed in this policy brief has many similarities to the Water Only policy described and proposed by our group (the NZBGP) in 2024, however, differs in that this policy allows low sugar alternatives provided they are < 5 grams of sugar per 100 mls. We feel that this difference is less restrictive and will encourage broad-based support across the political spectrum. We believe that it is also likely to be more broadly supported across all schools and easier to implement.

For this reason, we believe that it is necessary for the government to introduce enduring policy – that ensures ALL Schools and ECEs in New Zealand only provide drinks that have No/low SUGAR as part of a '*Sugary Drink Free Schools Policy*'.

Industry

This policy proposes the government take a stance that is consistent with the beverage industry. In recognising the harm that high sugar intake can have on children, the beverage industry introduced policies restricting the drinks that they will sell directly to school.

In 2006, Coca-Cola Amatil NZ and Frucor Suntory signed an MOU with the Ministries of Education and Health to remove full sugar carbonated beverages and energy drinks from secondary schools by 2009⁽⁶⁶⁾. In 2017, the NZ Beverage Council, representing the majority of the non-alcoholic beverage industry in NZ (including Frucor Suntory, Red Bull, Better Drinks Co., Coca-Cola Oceania and Coca-Cola Amatil NZ), introduced an overarching policy committing their members to only sell bottled water to primary and intermediate schools in NZ and to not sell sugar-sweetened carbonated soft drinks or energy drinks to secondary schools^(67, 68).

These policies show that the beverage industry acknowledges that sugary drinks contribute to health problems in NZ children, such as obesity and dental carries. Therefore, the beverage industry wishes to reduce the harm that sugary drinks cause children, by not selling their beverages *directly* to schools⁽⁶⁹⁾.

While this may sound promising, unfortunately, sugary drinks still abound in NZ schools. There are two reasons for this: first, sugary drinks are often made available in schools through businesses that on-sell sugary drinks from manufacturers to schools. In other words, many school canteens are contracted out to private operators. These private operators usually buy drinks directly from supermarkets, thus bypassing beverage wholesalers. Therefore, the policies of the beverage industry have little influence on what drinks are being supplied and sold to children in NZ schools. Second, restrictions on selling sugary beverages to schools fail to include many types of sugary drinks, such as juice, flavoured milk, or sports drinks, which are increasingly popular around the world and in NZ. Importantly, such 'non-carbonated' sugary drinks have contributed to persistently high consumption levels of sugary beverages in NZ⁽⁷⁰⁾. Thus, despite some restrictions, sugary drinks are still available in many NZ

schools, highlighting the urgent need for regulation.

Summary

Sugary drink consumption negatively affects children's behaviour, learning and health. Childhood obesity, dental caries and type-2 diabetes are all preventable disorders with serious long-term health consequences. Stopping the sale and consumption of SD in schools is essential to help tackle these health issues. Implementing the '*Sugary Drink Free Schools Policy*' will ensure all school children and students get the best possible start that they can and establish healthy lifestyle possible.

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