FACTSHEET

DIETARY HABITS OF SCHOOLCHILDREN

The National Diet and Nutrition Survey (NDNS) provides comprehensive data on eating patterns of people aged 1.5 years and older in the UK. For schoolchildren aged 4 to 18 years data is available from the NDNS Rolling Programme carried out in 2008/09 (years 1 and 2) and 2011/12 (years 3 and 4), with data from years 1 to 4 combined and compared with data from 1997.

ENERGY AND MACRONUTRIENT INTAKE

Schoolchildren’s energy intakes have decreased slightly since 1997. Boys and girls aged 11 to 18 years have energy intakes lower than Estimated Average Requirements (EARs), that is, the estimated number of calories needed per day by children of a particular age group. This may be due in part to under-reporting as, considering a high prevalence of overweight and obesity, it is unlikely that children are not meeting their energy requirements. Boys and girls aged 10 years and under have energy intakes close to or above the EAR.

Protein intakes have slightly increased between 1997 and 2008-12 by about 1-2% of food energy and intakes were well above the Recommended Nutrient Intake (RNI), that is, the amount estimated to be sufficient for the vast majority of the population, in girls and boys of all age groups. The contribution of carbohydrate to food energy in young people was close to the Dietary Reference Value (DRV) of 50% of food energy in 1997 and 2008-12. There was a decrease in the contribution of non-milk extrinsic sugars (NMES) to energy intake of about 2% (to 14.7%) in 4 to 10 year olds and a slight decrease of 0.5% (to 15.6%) in 11 to 18 year olds between 1997 and 2008-12. Intakes in both age groups were higher than the recommendation, at the time of the survey, that NMES should provide no more than 11% of total energy. The average intake of non-starch polysaccharides (NSP) was higher in boys than in girls in all age groups in 2008-12. An increase in NSP intake was seen between 1997 and 2008-12 in the 4 to 10 years age group, but not in the 11 to 18 year olds.

The average contribution of fat to energy intake decreased slightly by about 2% between 1997 and 2008-12 in children of all ages. A decrease in fat intake as a proportion of food energy was also reported between 1983 and 1997. Average intakes in 2008-12 were close to the recommended population average intake of 35% of food energy. Average saturated fatty acid intakes also decreased between 1997 and 2008-12 by about 1-1.5%. However, intakes remain above the recommended upper level of 11% of food energy (13.2% in 4 to 10 year olds and 12.5% in 11 to 18 year olds). In all groups, trans fatty acid intake has more than halved from 1997 to 2008-12, but average intakes of omega-3 and omega-6 polyunsaturated fatty acids (PUFA) remain below the DRV of 6.5% food energy.
MICRONUTRIENT INTAKE

Data from the NDNS Rolling Programme (2008-12) suggests that significant proportions of young people aged 11 to 18 years have low intakes of all minerals and vitamin A, riboflavin and folate, with this most prominent in girls from this age group. In girls and boys aged 4 to 10 years low intakes of zinc and vitamin A were found.

VEGETARIANS AND VEGETANS

In 2008-12, 2% of children aged 4 to 18 years were reported to be vegetarian. None were reported to be vegan.

SOCIO-ECONOMIC DIFFERENCES

Data from the Low-Income Diet and Nutrition Survey carried out in 2007 found that children from low income families ate less buns, cakes and pastries; semi-skimmed and skimmed milk; vegetables; and diet carbonated soft drinks compared to children from the general population. Girls from low income families were likely to eat less wholemeal bread and boys less fruit and fruit juice. Children from low-income families were likely to eat more pizza; whole milk; fat spreads; beef, veal, lamb and pork; processed meats; oily fish and canned tuna and (non-diet) non-carbonated and carbonated soft drinks compared to children from the general population.

ALCOHOL AND DRINKING HABITS

Over the last decade, there has been concern about alcohol consumption among children and young people; however, recent figures indicate that there has been a steady fall in the prevalence of alcohol use among children aged 11 to 15 years. Since 2003, the proportion of children aged 11 to 15 years who reported ever having drunk alcohol has decreased from 61% to 43% in 2013, and the proportion drinking alcohol at least once a week has dropped from 19% in 2003 to 5% in 2013. Moreover, the number of children aged 11-16 years admitted to hospital as a direct result of alcohol consumption has decreased year-on-year from 4590 in 2009-10 to 2702 in 2013-14.