

GOING UNIVERSAL. THE IMPACT OF FREE SCHOOL LUNCHES ON CHILD BODYWEIGHT OUTCOMES

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INTRODUCTION

Child overweight and obesity a worldwide public health problem with serious implications for health, healthcare and productivity. In England:

- Almost 1 on 4 children overweight or obese at age 4/5
- More than 1 in 3 children aged 10/11 overweight or obese

Children consume a large fraction of their food energy at school \rightarrow school meal provision possible lever to increase rates of healthy weight among children.

Setting & Data

Setting (England)

- Means-tested free meals available since 1940's. Linked to receipt of income support
- 18% of children eligible for free meals pre 2014
- From 2014 free lunch for all children during first 3 years of schooling (age 4-7)
- High nutritional standards introduced 2006-2008. Max energy: 530 kcal
- Alternative meal: lunch made at home, mean energy 624 kcal (Evans et al., 2010)

Data

National Child Measurement Programme data 2008-18

Height and weight measurement taken during school visits in 16,000 primary schools at ages 4-5. Anonymised school-level data including

- % obese, % normal weight, mean BMI zscore
- Date of measurement in school
- Student, neighbourhood, school, local authority level characteristics

CONCLUSIONS

1) Find (small) benefits of expanding eligibility from 18% to 100% on weight outcomes, drivenby benefits on newly eligible children.

Estimate a DiD model that compares change in children's weight outcomes over the school year before and after the introduction of universal free lunches.

2) Could justify in-kind transfer to higher income students affected by information & time constraints of parents.

RESEARCH QUESTION

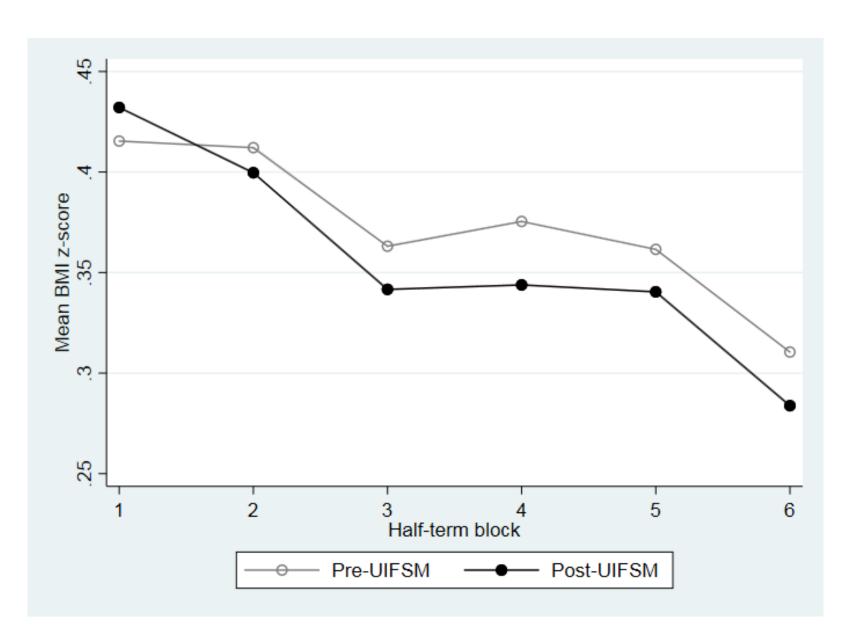
Can providing free, high quality lunches to all children in school contribute to tackling childhood obesity?

We study a switch is from targeted to universal school lunch provision in England and speak to lit on:

- effects of school meal provision
- advantages of means-testing vs universalism
- role of in-kind transfers in promoting child welfare

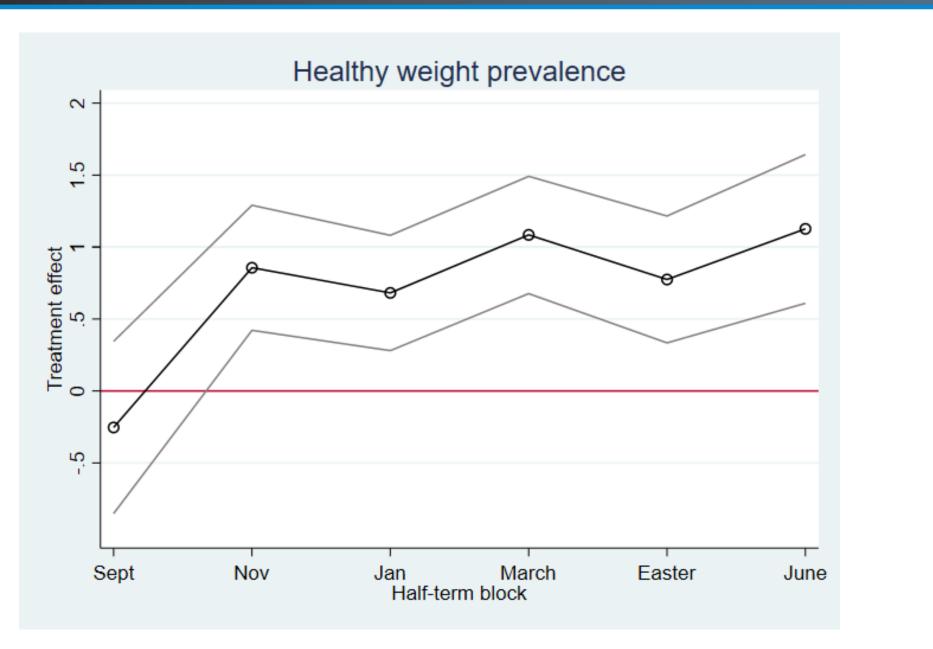
EMPIRICAL STRATEGY

- Variation in date of school measurement leads to different duration of exposure throughout first school year of school
- Expect greater effect for children exposed for a year (190 meals) than just entering school (0 meals)
- Difference to pre-policy years should get larger in the course of the school year



 \rightarrow by end of school year treated children 1 ppts more likely to be normal weight; 0.75 ppts less likely to be obese; have a 4.2% of a SD lower BMI \rightarrow small effect but larger than other UK school-based interventions \rightarrow implied ToT effects considerably larger given incomplete take-up

MAIN RESULTS



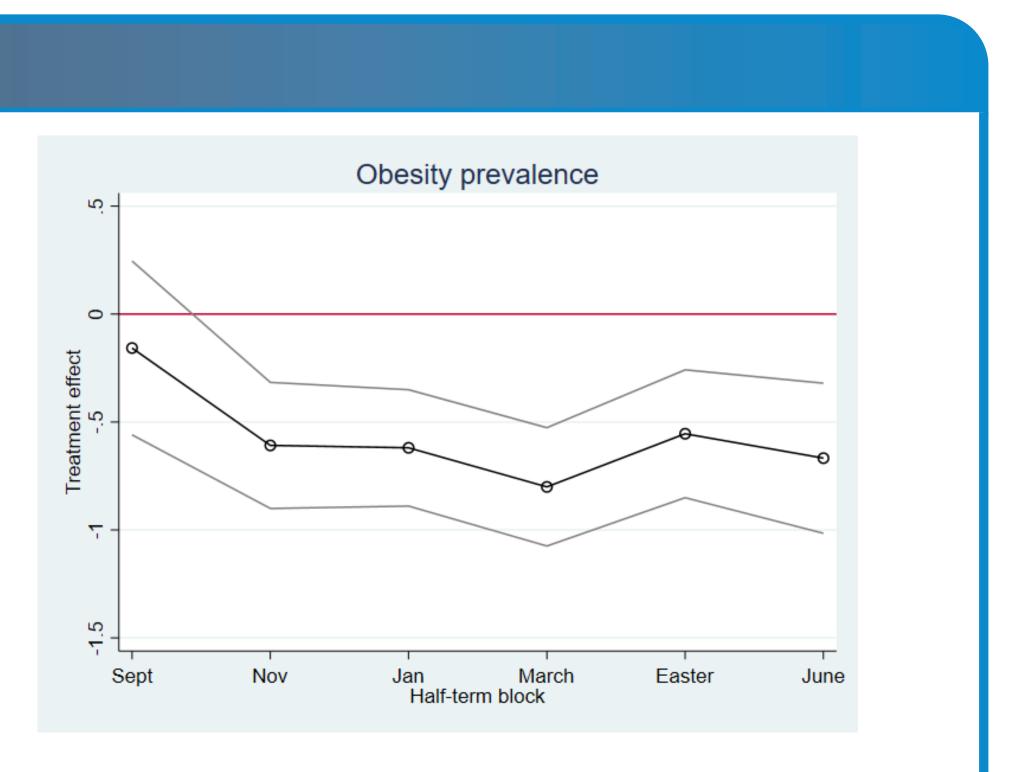


Figure 1: ITT effects on normal weight

IDENTIFYING ASSUMPTIONS

Random timing of measurement

- measurements representative only if timing random across half terms
- bias if any pattern in timing changed between pre & post years

Parallel trends

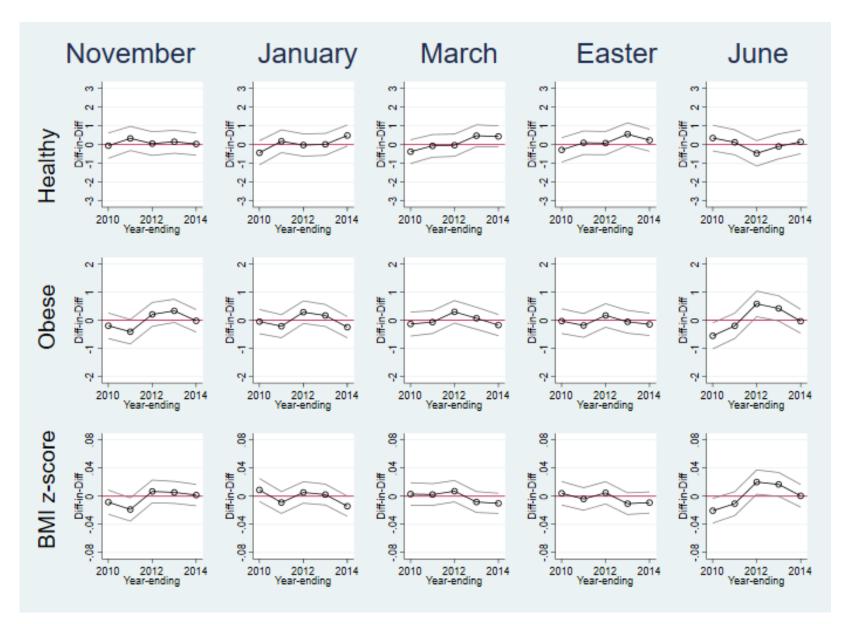


Figure 3: Parallel trends

3) But: deadweight of >30% among newly eligible children reduces value-for-money.

MECHANISMS

Are the effects driven by increased take-up among low-income students? Or benefits among higher income children newly eating lunches?

 \rightarrow small increase among FSM kids suggests no previous stigma effect of school lunches. \rightarrow effects likely driven by newly eligible, suggests diets of relatively well-off students can be improved.



Figure 2: ITT effects on obesity

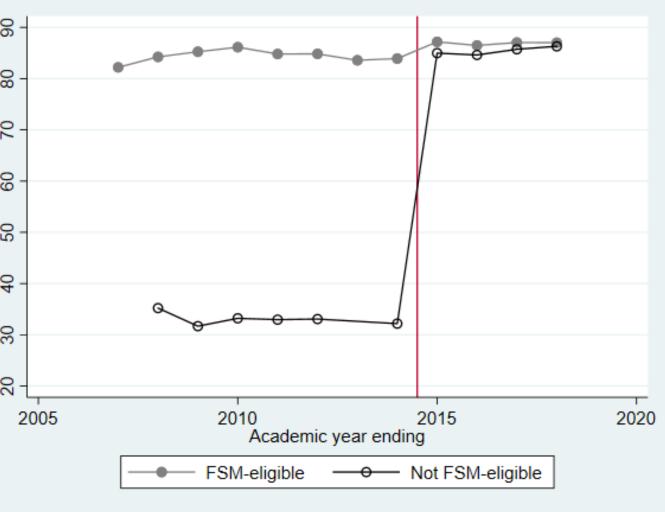


Figure 4: Take-up analysis

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