



Public Health Association of Australia:

Policy-at-a-glance: Marketing of Food and Beverages to Children Policy

Key message: PHAA will -

1. Campaign for legislation to ban all television food advertising at times when children comprise the majority of the viewing audience, and an effective system for monitoring and evaluating the effects of a ban on television food advertising on children's eating behaviour;
2. Lobby for non-advertising messages (community service announcements) consistent with recommendations for healthy eating to be screened during children's viewing times; and
3. Advocate for appropriate regulation of other forms of food marketing, as well as television food advertising.

Summary: The Commonwealth government must provide leadership by introducing legislation nationally that bans all television food advertising at times when children comprise the majority of the viewing audience. The legislation must include an effective system for enforcement and compliance.

All marketing methods (including sponsorship of children's sport) need to be included as proposed restrictions on television advertising may lead to an increase in other forms of marketing. A mandated regulatory approach to marketing of unhealthy food and beverages needs to be part of an overall national food and nutrition policy which also includes environmental, socio-cultural and educational strategies to improve health across the entire population. This policy seeks to outline a series of principles and tangible actions designed to achieve these goals.

Audience: Australian, State and Territory Governments, policy makers and program managers.

Responsibility: PHAA's Food and Nutrition Special Interest Group (SIG)

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MARKETING OF FOOD AND BEVERAGES TO CHILDREN POLICY

The purpose of this policy is to convey the Public Health Association of Australia's position on the marketing of food and beverages to children. Particular reference is made to the marketing of unhealthy food and beverages that is significantly reducing the impact of public health promotion of healthy food and beverages.

The Public Health Association of Australia notes that:

1. The United Nations Convention on the Rights of the Child mandates that the best interests of the child is a primary consideration in all actions concerning children (United Nations, 1989). The Convention defines children as those less than 18 years of age. The Convention highlights the moral issues concerning child protection and children's rights to consume healthy food and beverages. There is a moral imperative to ensure all children are protected.
2. The World Health Organisation (WHO) has a mandate as part of the implementation of the 2004 Global Strategy on Diet, Physical Activity and Health to increase the availability of healthy food and promote healthy diets and healthy eating habits. The WHO encourages member states to strengthen existing, or establish new, structures for implementing the strategy in health and other sectors, for monitoring and evaluating its effectiveness to guide policy and program implementation to reduce the prevalence of non-communicable diseases and the risks related to unhealthy diet and physical inactivity (WHO, 2004).
3. The WHO promotes responsible marketing including the development of a set of recommendations on the marketing of foods and non-alcoholic beverages to children (WHO, 2006). WHO has called for all governments to take action against marketing messages that increase unhealthy dietary intakes of food and beverages - specifically to develop national legislative procedures, including legislation, regarding marketing to children; nutrition labeling; food and non-alcoholic beverage advertisements; and health claims. Performance indicators include percentage of:
 - a. Television advertisements for foods and non-alcoholic beverages targeting children during peak child-viewing hours.
 - b. Printed media advertisements for foods and non-alcoholic beverages targeting children.
 - c. Internet advertisements for foods and non-alcoholic beverages targeting children.
4. Marketing is described as the commercial promotion of food and beverages which may a) be deliberately targeting children or b) target other groups but exposure to children is widespread. Common marketing methods include but are not limited to mass-media (television) advertising, website promotion, point-of-sale, packaging, use of cartoon characters and celebrities, free toys, computer games, text messaging, product placement in movies, educational materials and sponsorship (e.g. sports) (WHO, 2006).

5. Marketing of food and beverages to children can affect dietary choices in several ways by:
 - a. affecting consumption of energy-dense, micronutrient-poor foods and beverages, inconsistent with the Commonwealth Government's dietary advice for health (NHMRC, 2003).
 - b. increasing preferences for these foods.
 - c. increasing purchase requests for these foods which ultimately affect purchases and
 - d. contributing to positive beliefs associated with these foods (WHO, 2006).
6. Regulations on the marketing of food, specifically the television advertising of foods and beverages to children, are currently either not adequate to protect children from the marketing of unhealthy food and beverages or are non-existent (Morton et al 2005; Kelly & Chua, 2007).
7. WHO is considering an international code for the marketing of food and beverages to children that will help facilitate changes at a country level. This recognizes the global nature of food and beverage companies and the marketing that crosses country borders.
8. The 2007 National Child Nutrition and Physical Activity Survey clearly demonstrates that children are still not meeting recommendations for core food and beverage intakes. The 2007-08 National Health Survey measured body mass index (weight/height²) and found that, 25% of children aged between 5 and 17 were overweight or obese (17% overweight and 7.8% obese) (ABS, 2009). Rates of childhood obesity are continuing to increase in Australia.
9. Marketing of unhealthy food and beverages is a contributor to Australia's obesogenic environment. Inaction to reduce marketing and promotion of foods and beverages in Australia is considered a case of government failure that is undermining government dietary recommendations (Swinburn 2009). Whilst only a small amount of evidence exists directly linking marketing of unhealthy food and beverages to obesity, causation modeling in Australia and overseas suggests that reducing the marketing of unhealthy food and beverages to children would contribute to reducing overweight and obesity (Moodie et al, 2006; Veerman et al, 2009).
10. The Sydney Principles for reducing the commercial promotion of foods and beverages to children developed by the International Obesity Taskforce take a rights of the child approach (Swinburn et al, 2008) (http://www.ionf.org/sydneyprinciples/documents/SydneyPrinciplesFinal_000.pdf).

The Public Health Association of Australia confirms in regard to mass media, particularly television advertising of food and beverages in Australia:

11. Australia has high rates of advertising on television. Children watch an average of 2 hours and 30 minutes of television per day (Young Media Australia, 2007). Advertising during children's viewing times is covered by the Children's Television Standards (CTS). The CTS place restrictions on the content of advertising to children however only one provision deals specifically with food advertisements. Research has shown however that children also make a significant proportion of the viewing audience at other times, particularly between 6pm and 9pm for which the CTS do not apply.
12. Food and beverages are consistently found to be heavily advertised to children during designated children's viewing times (Hill and Radimer, 1997; Neville,

- Thomas & Bauman, 2005; Kelly et al, 2007a). Food and beverages consist of 55% to 80% of the advertising. Children are exposed to around 22 000 unhealthy food and beverage advertisements on television per year (Young Media Australia, 2007).
13. Children's viewing times generally have a higher proportion of unhealthy food and beverages featured than other times (Hattersly, Kelly and King 2006; Kelly et al 2007a).
 14. The majority of food and beverage advertising is for non-core foods and beverages which contrast with the National Health and Medical Research Council's dietary recommendations (NHMRC, 2003; Kelly et al 2007b). The most commonly advertised food and beverage products to children contribute to high fat, high added sugar and salt content of children's dietary intakes. There is consistent evidence in Australia of a clear imbalance in the messages delivered in this advertising (Zuppa, Morton & Mehta, 2002).
 15. Aggressive and sophisticated techniques are used to influence children in advertising, including repetition of advertisements and the use of cartoon characters and competitions (Kelly et al 2008a).
 16. Children who watch more than two hours of television per day are more likely to be consuming unhealthy food and beverages (Salmon, Campbell & Crawford 2006).
 17. Exposure to television advertising of unhealthy food and beverages is more likely to influence their preferences for unhealthy food and beverages (Halford et al 2007; Dixon et al 2007).
 18. Many food and beverage products whose primary target groups for consumption are children are marketed to children and adults differently. There is evidence that this marketing is interpreted differently by each group (Jones and Fabrianesi, 2008).
 19. Regulation that restricts unhealthy food and beverage television advertising when a majority of children (under 18 years) are watching will be the most effective strategy to limit exposure to these foods and beverages (Kelly et al 2007c; Handsley et al, 2009).

The Public Health Association of Australia believes in regard to other forms of marketing of foods and beverages that:

20. Other forms of marketing reinforce mass media advertising and that these other forms of marketing of food and beverages are relatively unregulated. There is at this point limited evidence about the impact of these other forms of marketing and more research is required.
21. Website promotion of food and beverages consistently demonstrates an imbalance in favour of unhealthy food and beverages in the UK (Lingas, Dorfman, Bukofzer, 2009), US (Alvy and Calvert, 2008) and Australia, where there are 61% vs. 31% more branded unhealthy foods being featured (Kelly et al, 2008b).
22. Australian children's magazines contain predominately unhealthy advertising content and unhealthy food and drink references (Kelly & Chapman 2007). This is similar to overseas research on content and use of free food gifts (Cowburn & Boxer, 2007).

23. Supermarkets are environments where marketing using packaging (shape and novelty value), giveaways, competitions and cartoon and movie characters in promotions is common and up to 35% of some product categories use these marketing techniques (Chapman et al, 2006). Supermarkets purposely position unhealthy foods and beverages at children's heights and near checkouts to encourage purchase requests (Dixon, Scully and Parkinson 2006).
24. Analysis of outdoor advertising near schools in Australia shows that food and beverage advertising is predominately (80%) for unhealthy products (Kelly et al, 2008c).
25. Unhealthy food and beverages are the major canteen sales at children's sporting events (Kelly et al, 200d). Sport in general is associated with sponsorship from unhealthy food and beverage producers and exposure to these products during televised events can be significant (Colaquiuri & Caterson, 2008). Children can make up a significant proportion of the viewing audience for these events.
26. Sponsorship from unhealthy food and beverage producers can undermine classroom health education and lead to perceptions that schools are endorsing product consumption (Richards 2005). In New Zealand, junior sports teams have been shown to have significantly more unhealthy food sponsorship compared to other sports collectively (Maher 2006).
27. Australian parents are concerned about unhealthy food and beverage marketing and want restrictions placed on the marketing of unhealthy food and beverages to children (Ip, Mehta and Coveney, 2007; Morley et al 2008). This marketing influences food and beverage preferences (Campbell, Crawford & Hesketh, 2007). Parents don't always feel equipped to deal with the amount and types of marketing of unhealthy foods and beverages to children (Booth et al, 2009).

The Public Health Association of Australia believes that with regard to marketing in child specific settings that:

28. Marketing of unhealthy food and beverages should be prohibited in schools (and within a specified radius of a school), preschools, kindergartens, daycare centres, play areas, children's sports and children's hospitals.
29. The majority of foods and beverages for sale in child-specific settings should be from the core healthy foods. A national food & beverage categorisation system being developed for school canteens based on a set of nutrient criteria will provide a clear guide to parents, children and those selling the food. The food categorisation system will provide an evidence-based guide to the selection of food and beverages for sale within school canteens (<http://www.nhsc.com.au/index.php/public/>).
30. The presence of fast food outlets in children's hospitals significantly increases the consumption of those foods (Salud et al, 2006).

The Public Health Association of Australia believes that with regard to the Code on Marketing of Breast Milk Substitutes:

31. There is concern amongst public health practitioners that increased competition in the infant food industry is contributing to increasing marketing of breast milk substitutes (Smith, 2007).

32. Marketing of breast milk substitutes must be controlled to provide a supportive breastfeeding environment to maximize breastfeeding rates in Australia by supporting the WHO Code for Marketing of Breast Milk Substitutes <http://www.who.int/nutrition/publications/infantfeeding/9241541601/en/> .
33. Australian government must ensure compliance with the Marketing in Australia of Infant Formulas: Manufacturers and Importers Agreement - The MAIF Agreement - through the Advisory Panel on the Marketing in Australia of Infant Formula (APMAIF) http://www.health.gov.au/internet/main/publishing.nsf/Content/health-publth-publicat-document-brfeed-maif_agreement.htm .

The Public Health Association of Australia affirms the following principles:

34. Marketing can be beneficial if the foods and beverages being marketed contribute to healthy dietary intakes. For example Government social marketing campaigns aim to increase the consumption of healthy foods via campaigns like the National Go for 2&5 ® (<http://www.gofor2and5.com.au/>) campaign.
35. While the media can serve as an important source of education for children, frequent exposure to advertisements promoting foods of low nutritional value is not consistent with providing a positive environment for teaching children about healthy food choices.
36. Children require special consideration in respect to marketing, as they are less able than adults to be able to judge it critically. Children must be protected from commercial exploitation, especially when this has the potential to compromise their health.
37. It is immoral to exploit children to promote over-consumption leading to illness and poor health and the food industry has a moral responsibility not to do so.
38. Parents have ultimate responsibility for children's food choices but they need an environment that enables children to develop skills to select food and beverage choices for health.
39. The Government has a responsibility to provide a bold, innovative and effective regulatory system to protect children against marketing of unhealthy food and beverages. A regulatory strategy should be one part of Government's multi-strategy approach to increasing healthy food and beverage choices across the Australian population.
40. Increasing healthy food and beverage marketing is considered insufficient (WHO, 2006). Estimates are that the top ten food companies in Australia spend more than \$375 million annually on the marketing of food and beverages, which outspends the Commonwealth Government's healthy lifestyle social marketing by six to one.

The Public Health Association of Australia believes that the following actions should be taken:

41. The Commonwealth government must provide leadership by introducing legislation nationally that bans all television food advertising at times when children comprise the majority of the viewing audience. The PHAA notes that this needs to be more encompassing than the current regulations for 'C' and 'P' programs.

42. This legislation must prohibit the use of premium products (such as toys) in the advertising of food to children. It must also be consistent across all forms of marketing by treating all forms equally.
43. The legislation must include an effective system for enforcement and compliance that does not rely on complaints from consumers and public health groups alone.
44. Groups/organisations with appropriate expertise in representing public health interests must be represented on all review committees involved in considering the impact and regulation of the marketing of food and beverages to children.
45. It is imperative that a National Nutrition Monitoring and Surveillance System is in place to provide evidence to formulate legislation and to provide ongoing monitoring of the impact of legislation on dietary intakes.
46. All marketing methods (including sponsorship of children's sport) need to be included as proposed restrictions on television advertising may lead to an increase in other forms of marketing.
47. A mandated regulatory approach to marketing of unhealthy food and beverages needs to be part of an overall national food and nutrition policy which also includes environmental, socio-cultural and educational strategies to improve health across the entire population.
48. Food industry must consider the social responsibilities it has towards children and not use marketing practices that undermine children's health and current government dietary recommendations.
49. Nutrient consistent, whole of food supply profiling systems approved by Government must be consistent across food regulations for food labeling and marketing including advertising. However, the need for specification of cut-offs for different purposes is acknowledged. Manufacturers currently use a variety of systems to identify the healthiness of their products which is confusing for the population. The government must work urgently to approve and mandate a single system.
50. A comprehensive and whole of government approach to obesity prevention must be in place to support legislation to reduce the impact of unhealthy marketing of food and beverages to children.

The Public Health Association of Australia resolves to take the following actions through its Board, Branches and Special Interest Groups and by its participation in the Coalition on Food Advertising to Children:

51. Campaign for legislation to ban all television food advertising at times when children comprise the majority of the viewing audience.
52. Lobby for non-advertising messages (community service announcements) consistent with recommendations for healthy eating to be screened during children's viewing times.
53. Campaign for an effective system for monitoring and evaluating the effects of a ban on television food advertising on children's eating behaviour.
54. Advocate for appropriate regulation of other forms of food marketing, as well as television food advertising.

55. As an interim measure, until a total ban is implemented:
- a. Campaign, as part of the Coalition on Food Advertising to Children, for an independent review of the current food advertising regulatory framework;
 - b. Advocate for the implementation of the recommendations, including an effective and independent review of the Children's Television Standards.
 - c. Encourage behavioural research into the impact of marketing on children's food preferences and dietary intakes and address any gaps in current knowledge, including Recommendation 11 from the House of Representatives 2009 report Weighing It Up: Obesity in Australia which calls for commissioned research into the effects of advertising of food products of limited nutritional value (<http://www.aph.gov.au/house/committee/haa/obesity/report/fullreport.pdf>).
 - d. Encourage policy research into effective systems for the regulation of food marketing.

ADOPTED 2009

This Policy Statement has been developed from a previous Position Statement on Television Advertising of Food and Beverages to Children adopted at the 1999 Annual General Meeting of the Public Health Association of Australia, which was previously revised in September 2002 and September 2006.

This Policy Statement on Marketing of Foods and Beverages to Children was first adopted in 2009.

Associated PHAA Policy Statements

- Promoting Healthy Weight: The Prevention and Management of Overweight and Obesity
- Food and Nutrition Monitoring and Surveillance in Australia

Associated PHAA organizations

Coalition on Food Advertising to Children (CFAC) <http://www.cfac.net.au/>

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