



## Protecting children from the marketing of unhealthy food

### ACDPA Position Statement

ACDPA recommends that the Australian Government protect children by restricting the marketing of unhealthy food and beverages (i.e. energy-dense, nutrient-poor food and beverages). This includes:

- Legislating to implement time-based restrictions (up to 9.00pm) on unhealthy food marketing on free-to-air television when the greatest number of children are likely to be watching, independent of whether the programs are designated as children's programs.
- Drawing on existing legislation, regulation and regulatory agencies to restrict unhealthy food marketing to children in all other media, including digital media (websites, social media, email, text messages, apps, branded games), print, radio, cinema, outdoor media, direct marketing, product packaging, sports sponsorship, point of sale promotions, and embedded marketing, which is directed at children or to which a high number of children are likely to be exposed.
- Developing independent and consistent nutrient criteria to determine which foods are classified as unhealthy.
- Establishing independent, clear and transparent monitoring and enforcement processes with meaningful penalties to deter companies from breaching regulations.

### Key messages

- There is "unequivocal evidence that the marketing of unhealthy foods and sugar-sweetened beverages is linked to childhood obesity."<sup>1</sup>
- Exposure to food advertising increases children's intake<sup>2</sup> and consistently influences food preferences and choices.<sup>3</sup>
- The current system is failing to protect children. Existing regulations and voluntary codes are inadequate and ineffective, and lack transparency and accountability.<sup>4</sup>
- Children continue to be exposed to unhealthy food advertising. Over one year, the average Australian child will see 35 hours of food advertising on television, with more than half of this promoting unhealthy foods.<sup>5</sup>
- Restricting unhealthy food marketing to children is one of the most cost-effective and feasible interventions, saving an estimated \$38 for every \$1 invested.<sup>6</sup>
- There is strong public support for limiting children's exposure to unhealthy food marketing.<sup>7,8</sup>

### Children are vulnerable to unhealthy food marketing

- More than one in four Australian children are already overweight or obese<sup>9</sup> and more likely to grow up to become overweight or obese adults, with an increased risk of chronic disease and premature mortality.<sup>10</sup>

- Unhealthy foods comprise almost 40% of Australian children’s daily intake, while less than 5% of children consume the recommended daily serves of fruit and vegetables.<sup>11</sup>
- Children are particularly vulnerable because they lack the cognitive ability to recognise the persuasive intent of advertising and cannot critically evaluate advertising content.<sup>12,13</sup>
- Food companies spend large amounts on food and drink advertising. In 2009, an estimated \$402 million was spent on food advertising in Australia with a further \$149 million spent on non-alcoholic drink advertising.<sup>14</sup> Food/Produce/Dairy advertising was the fourth largest advertising category in Australia in 2016, with an ad spend of \$392.3 million.<sup>15</sup>
- Unhealthier foods are promoted more than healthier foods. In a single year, Australian children would be likely to watch 800 junk food advertisements on free-to-air television.<sup>16</sup> Similarly, a recent study found that outdoor advertisements near schools featured many more unhealthy (31%) than healthy products (<1%).<sup>17</sup>

### **Current regulations are inadequate**

- In Australia, food marketing to children is covered by a complex system of voluntary codes and initiatives, and limited government regulation:
  - The Australian Communications and Media Authority (ACMA) Children’s Television Standards contain some restrictions and relate to children’s programs only.
  - The voluntary Australian Association of National Advertisers’ (AANA) codes include general clauses regarding food marketing to children.
  - The voluntary industry codes - Responsible Children's Marketing Initiative (RCMI) and Quick Service Restaurant Initiative for Responsible Advertising and Marketing to Children (QSRI) - cover retail products and fast food respectively.
- Industry self-regulation has not been effective in reducing children’s exposure to unhealthy food marketing.<sup>18</sup> Current definitions of children’s viewing times do not reflect children’s actual viewing programs and exclude programs most popular with children, such as family movies, reality shows, sport and light-entertainment.
- Unhealthy food advertisements continue to feature prominently during children’s peak television viewing times, and unhealthy foods are advertised at a significantly higher rate than core foods.<sup>19</sup>

### **Government intervention is justified**

- The World Health Organization (WHO) recommends that governments establish policy and provide leadership to reduce children’s exposure to, and the power of, unhealthy food marketing.<sup>20</sup>
- Independent, comprehensive regulation of digital marketing across social media, websites, games and apps, is recommended to protect children’s “right to participate in digital media” and “right to protection of their health and privacy and not to be economically exploited.”<sup>21</sup>
- Regulating unhealthy food advertising was identified as a priority recommendation for the Federal Government in a 2017 analysis of policies to address unhealthy diets and obesity.<sup>22</sup>
- Internationally, a number of countries have introduced restrictions. Chile, Iran, Ireland, Mexico, Norway, South Korea, Sweden, Taiwan and the UK have introduced broadcast advertising restrictions, while Chile, South Korea, Brazil, Canada (Quebec), Finland, Peru, Thailand<sup>23</sup> and the UK<sup>24</sup> have introduced non-broadcast restrictions.

- The UK regulations have reduced advertising expenditure on unhealthy food and drinks, and impacted household food expenditure with a positive shift towards the purchase of healthier foods.<sup>25</sup>
- There is strong public support for regulations to limit children's exposure to unhealthy food marketing, with more than 80% of people surveyed supporting broadcast<sup>26</sup> and non-broadcast media restrictions.<sup>27</sup>
- Restricting unhealthy food advertising to children is modelled to be one of the most cost-effective and feasible obesity-prevention interventions, saving an estimated \$38 for every \$1 invested.<sup>28</sup>

No single solution is sufficient to reverse obesity. Restricting unhealthy food marketing to children should form part of a sustained and comprehensive approach to improve dietary intake and reduce overweight and obesity amongst children.

*The Australian Chronic Disease Prevention Alliance (ACDPA) is an alliance of Cancer Council Australia; Diabetes Australia; National Heart Foundation of Australia; Kidney Health Australia; and Stroke Foundation. Members work together in the primary prevention of chronic disease, with emphasis on changes to the food and physical environments.*

*Statement prepared 2018*

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<sup>1</sup> WHO 2016. Report of the Commission on Ending Childhood Obesity. WHO: Geneva.

<sup>2</sup> Boyland, E.J., et al., Advertising as a cue to consume: a systematic review and meta-analysis of the effects of acute exposure to unhealthy food and nonalcoholic beverage advertising on intake in children and adults. *Am J Clin Nutr*, 2016. 103(2): p. 519-33.

<sup>3</sup> Norman, J., et al., The impact of marketing and advertising on food behaviours: Evaluating the evidence for a causal relationship. *Current Nutrition Reports*, 2016. 5(3): p. 139-49.

<sup>4</sup> Reeve, B., Self-regulation of food advertising to children: An effective tool for improving the food marketing environment? *Monash University Law Review*, 2016. 42(2), 419-457.

<sup>5</sup> King, L, et al., Building the case for independent monitoring of food advertising on Australian television. *Public Health Nutrition*, 2013. 16(12):2249–54.

<sup>6</sup> Bauman, A., et al. 2016. Obesity Prevention in Children and Young People aged 0-18 Years: a Rapid Evidence Review brokered by the Sax Institute. Full Technical Report. Prepared for the NSW Ministry of Health: Sydney. PANORG: The University of Sydney.

<sup>7</sup> Berry NM., et al., Public attitudes to government intervention to regulate food advertising, especially to children. *Health Promot J Austr*, 2017. 28:85-7.

<sup>8</sup> Morley, B., et al., Public opinion on food-related obesity prevention policy initiatives. *Health Promot J Austr*, 2012. 23(2):86-91.

<sup>9</sup> AIHW 2017. <https://www.aihw.gov.au/reports/overweight-obesity/a-picture-of-overweight-and-obesity-in-australia/contents/summary>. Accessed Apr 2018.

<sup>10</sup> NHMRC 2013. Australian Dietary Guidelines. NHMRC: Canberra.

<sup>11</sup> AIHW 2016. Australia's health 2016. Australia's health no. 15. Cat. no. AUS 199. AIHW: Canberra.

<sup>12</sup> American Psychological Association 2004. Report of the APA Taskforce on advertising and children.

<sup>13</sup> Story, M., et al., Food Advertising and Marketing Directed at Children and Adolescents in the US. *Int J Behav Nutr Phys Act*, 2004. 1(1): p. 3.

<sup>14</sup> Jolly, R., 2011. Marketing obesity? Junk food, advertising and kids. Parliament of Australia, Research Paper No. 9, 2010-11, p22.

<sup>15</sup> Food & Beverage Industry News. <https://foodmag.com.au/australias-food-marketers-reduce-ad-spend-in-2017/> Accessed April 2018.

<sup>16</sup> Smithers, L.G. Food advertising on Australian television: Frequency, duration and monthly pattern of advertising from a commercial network (four channels) for the entire 2016. *J Paediatr Child Health*, 2018.

<sup>17</sup> Parnell, A., Edmunds, M., et al. The volume and type of unhealthy bus shelter advertising around schools in Perth, Western Australia: Results from an explorative study. *Health Promot J Austr*, 2018. Online article.

<sup>18</sup> ACMA 2011. Industry self-regulation of food and beverage advertising to children. ACMA monitoring report. ACMA: Canberra.

<sup>19</sup> Watson, W.L., et al., Advertising to children initiatives have not reduced unhealthy food advertising on Australian television. *J Public Health (Oxf)*, 2017: p. 1-6.

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<sup>20</sup> WHO 2010. Set of recommendations on the marketing of foods and non-alcoholic beverages to children. WHO: Geneva.

<sup>21</sup> WHO 2016. Tackling food marketing to children in a digital world: trans-disciplinary perspectives. WHO Regional Office for Europe: Copenhagen.

<sup>22</sup> Sacks G., for the Food-EPI Australia project team. 2017. Policies for tackling obesity and creating healthier food environments: scorecard and priority recommendations for Australian governments.

<sup>23</sup> WCRF. NOURISHING framework. <https://wcrf.org/int/policy/nourishing-database> Accessed Apr 2018.

<sup>24</sup> UK Advertising Standards Authority. Food and soft drink advertising to children consultation and regulatory statement (CAP). Accessed: May 2017. Available from: <https://www.asa.org.uk/resource/food-and-soft-drink-advertising-to-children-consultation.html>.

<sup>25</sup> Silva, A., et al., An evaluation of the effect of child-directed television food advertising regulation in the United Kingdom. *Canadian Journal of Agricultural Economics*, 2015. 63, 583–600.

<sup>26</sup> Berry NM., et al., Public attitudes to government intervention to regulate food advertising, especially to children. *Health Promot J Austr*, 2017. 28:85-7.

<sup>27</sup> Morley, B., et al., Public opinion on food-related obesity prevention policy initiatives. *Health Promot J Austr*, 2012. 23(2):86-91.

<sup>28</sup> Bauman, A., et al. 2016. Obesity Prevention in Children and Young People aged 0-18 Years: a Rapid Evidence Review brokered by the Sax Institute. Full Technical Report. Prepared for the NSW Ministry of Health: Sydney. PANORG: The University of Sydney.