Getting serious about protecting New Zealand children against unhealthy food marketing
Stefanie Vandevijvere, Boyd Swinburn

ABSTRACT
Reducing childhood obesity is now a high priority for Government and New Zealand society, and foremost in these efforts should be getting serious about protecting children from being targeted by sophisticated marketing for the very foods and beverages that are making them fat. The marketing of unhealthy food products to children is powerful, pervasive and predatory. Previous studies in New Zealand found that food marketing targeted at children through various media is predominantly for unhealthy food products. Statutory comprehensive regulations providing full protections for children against unhealthy food marketing are recommended, but strengthening voluntary codes into a more quasi-regulatory system would allow food companies to clearly demonstrate their commitments to becoming part of the solution for New Zealand’s unacceptably high rate of childhood obesity.

The marketing of unhealthy food products to children is powerful, pervasive and predatory. It is powerful because it influences children’s food preferences, purchase requests, and consumption. It is pervasive because modern, integrated marketing ensures that brands engage with children across multiple media platforms. It is predatory because it exploits the credulity of children for commercial gain. It is timely to evaluate the degree of exposure of New Zealand children to unhealthy food marketing so that policy options can be better formulated and monitored.

Previous studies in New Zealand found that food marketing targeted at children through television, internet (paper under review), magazines, sports, around schools, in schools and on front-of-pack of food products is predominantly for unhealthy food products high in salt, sugar and saturated fat (Table 1). New Zealand children and adolescents who watch the most TV are significantly more likely to be higher consumers of foods most commonly advertised on TV: sugar-sweetened beverages, sweets, snacks and fast food. In addition, beverages that children commonly associate with sports overwhelmingly have characteristics which do not support them in adhering to existing nutrition guidelines.

International, national and public support for restriction of junk food marketing to children
There is strong international support for the restriction of unhealthy food marketing to children. Five years ago, at the 63rd World Health Assembly, New Zealand and other member states endorsed Resolution WHA63.14 to reduce the marketing of unhealthy foods and non-alcoholic beverages associated with obesity in children and adolescents. In 2013, at the 65th Health Assembly, member states also endorsed the World Health Organization (WHO) Global Action Plan and Monitoring Framework to Prevent and Control Non-Communicable Diseases (NCDs), including the restriction of unhealthy food and beverage marketing to children as one of 25 indicators to reduce NCDs by 25% by 2025. The WHO Commission on Ending Childhood Obesity, chaired by the Chief Science Advisor to the New Zealand Prime Minister, also highlighted the imperative to reduce children’s exposure to unhealthy food and beverage marketing.

There is
strong agreement of experts within the public health and medical communities in New Zealand about the restriction of unhealthy food marketing as one of the top priorities to tackle childhood obesity.\textsuperscript{19,20} The New Zealand Medical Association’s report on \textit{Tackling Obesity}\textsuperscript{19} included it as one of the 10 priorities, and the 56 public health experts participating in the healthy Food Environment Policy Index,\textsuperscript{21} identified the reduction of food marketing through broadcast and non-broadcast media and in settings where children gather as two of the seven top priorities.\textsuperscript{22} A New Zealand public opinion poll recently showed that the level of public support for not allowing advertisements of products that contain a lot of sugar and salt to be shown on television before 9pm was 3.7 on a scale from 1 to 5. In addition, the level of public support for not allowing fast food and soft drink companies to sponsor children’s sport was similar.\textsuperscript{23}

**Mandatory approaches—regulation as the gold standard**

The strongest policy option to protect children from being targeted by the marketing of unhealthy food products would be comprehensive restrictions of unhealthy food marketing to children through statutory regulations which cover all media, with a focus on television, sport sponsorship and marketing in settings where children gather. The Nutrient Profiling Scoring Criterion (NPSC)\textsuperscript{24} or the Health Star Rating system for the healthiness of foods developed by Food Standards Australia New Zealand could be used to define unhealthy food products not to be marketed to children, and children should be defined as up to at least 16 years old.

**Voluntary approaches – moving beyond failed self-regulation**

Studies have consistently demonstrated the failure of industry self-regulations to reduce the exposure of unhealthy food marketing to children and adolescents,\textsuperscript{25-27} because the sector has too many vested interests in perpetuating the status quo. The voluntary controls on marketing unhealthy foods to children currently in place by the Advertising Standards Authority\textsuperscript{28} are narrow, weak and ineffectual, and their continuation in their current form, is not a credible option for protecting children. There is, however, the potential for strengthening voluntary commitments by food companies and marketers by taking what is being called a quasi-regulatory approach. This would involve the Government setting clear policy goals and performance targets for the food industry to meet, monitoring them closely and providing the credible expectation that, if measurable improvements in voluntary performance are not achieved, more direct forms of regulation will be introduced.\textsuperscript{29} Quasi-regulatory approaches have worked in the UK for sodium reduction in processed food products\textsuperscript{30} and in Australia for implementing the voluntary Health Star Rating front-of-pack labelling. Expectations should include clear timelines for outcomes, common definitions,\textsuperscript{2} transparency and reporting requirements. Regular monitoring of the extent and nature of unhealthy food marketing through various media by an independent body is important to significantly strengthen and improve food industry initiatives.

**Conclusion**

Reducing childhood obesity is now a high priority for both the New Zealand Government and society, and foremost in these efforts should be getting serious about protecting children from being targeted by sophisticated marketing for the very foods and beverages that are making them fat. Statutory comprehensive regulations providing full protections for children against unhealthy food marketing are recommended, but strengthening voluntary codes into a more quasi-regulatory system would allow food companies to clearly demonstrate their commitments to becoming part of the solution for New Zealand’s unacceptably high rate of childhood obesity.
Table 1: Evidence on the extent of unhealthy food marketing to children through diverse media in New Zealand

<table>
<thead>
<tr>
<th>Author, year</th>
<th>Medium</th>
<th>Sample size</th>
<th>Extent of unhealthy food marketing to children</th>
<th>Limitations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jenkin, 2009</td>
<td>Television</td>
<td>Four weeks of weekday TV, 3.30–6.30pm, 60 h of TV time, TV2, mid-winter</td>
<td>483 advertisements for food products or retailers with 66% for ‘unhealthy’ foods</td>
<td>Only one channel, limited hours of the day</td>
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<tr>
<td>Wilson, 2006</td>
<td>Television</td>
<td>155 h of TV time, 6.30–8.30 pm and 3.30–6.30 pm on weekdays and 6.30–11.30 am on weekends, TV3 and TV2</td>
<td>858 food advertisements with 80% of ads on TV3 and 69% of ads on TV2 for ‘unhealthy’ foods</td>
<td>Only two channels, limited hours of the day</td>
</tr>
<tr>
<td>Wilson, 1999</td>
<td>Television</td>
<td>42 h of TV time, 3.30–6.30pm on weekdays and 8–11 am on weekends, TV2</td>
<td>269 food advertisements with 63% for ‘unhealthy’ foods</td>
<td>Only one channel, limited hours of the day</td>
</tr>
<tr>
<td>Carter, 2013</td>
<td>Sports settings</td>
<td>308 websites of national (n=58) and regional (n=250) New Zealand sporting organisations</td>
<td>24% of websites featured food company sponsorship. 186 logos on the websites included bars and restaurants (34%), unhealthy brands or companies (28%) and healthy brands/companies (20%).</td>
<td>Websites may not show all sponsorships</td>
</tr>
<tr>
<td>Maher, 2006</td>
<td>Sports settings</td>
<td>107 websites of national and regional New Zealand sporting organisations and local sport clubs</td>
<td>640 sponsors listed on 107 websites. Sponsorships with ‘unhealthy’ products (33%) over twice as common as those associated with ‘healthy’ products (16%).</td>
<td>Actual sponsorship practices of clubs not assessed, study included gambling and alcohol as well</td>
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<td>Vandevijvere, 2015 (under review)</td>
<td>Internet</td>
<td>Websites (n=70) of the food brands most frequently marketed to children through television, sport sponsorship, magazines and Facebook plus the most popular websites (n=110) among New Zealand children 6–17 years</td>
<td>Marketing techniques on food brand websites, included ‘advercation’ (branded education) (87%), viral marketing (64%), use of cookies (54%), free downloadable items (43%), promotional characters (39%), designated children’s sections (19%) and ‘advergaming’ (branded games) (13%). Techniques more frequent on websites specifically targeting children. Food marketing on popular non-food websites was low.</td>
<td>Social media not assessed</td>
</tr>
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<td>No, 2014</td>
<td>Magazines</td>
<td>3 magazines which target 10–17 year olds plus 3 other popular (women’s) magazines with this age group</td>
<td>Branded food references (30% of total) were more frequent for unhealthy (43%) compared to healthy (25%) foods. Magazines specifically targeted to children and adolescents contained a significantly higher proportion of unhealthy branded food references (72%) compared to the women’s magazines (42%).</td>
<td>Only one food group assessed</td>
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<td>Devi, 2014</td>
<td>Product packaging</td>
<td>Front-of-pack for all breakfast cereals (n = 247) at two major supermarkets in Auckland in 2013</td>
<td>Of the 52 products displaying promotional characters, 48% were for ‘cereals for kids’, and of those, 72% featured on ‘less healthy’ cereals.</td>
<td>Only one food group assessed</td>
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<td>Maher, 2005</td>
<td>Outdoors around schools (1 km radius)</td>
<td>10 schools randomly selected from Wellington and Wairarapa area</td>
<td>Out of the 1,408 advertisements, 62 were for food with 70% of them for ‘unhealthy’ foods.</td>
<td>Limited number of schools included, pilot study</td>
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<td>Richards, 2005</td>
<td>In schools</td>
<td>77/114 primary/intermediate schools and 79/147 secondary schools in six geographical regions of New Zealand (Auckland, Waikato, Wellington, Nelson/ Marlborough, Canterbury and Southland)</td>
<td>Most schools were involved in at least one form of sponsorship. Almost all schools reported selling products, and 58% of products sold by primary/intermediate and 61% by secondary schools were for ‘unhealthy’ foods.</td>
<td>Poor details on sponsorship practices</td>
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COMPETING INTERESTS: Nil

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