



**Dietitians Association of Australia submission to
the Senate Inquiry 'Protecting Children from Junk Food Advertising
(Broadcasting Amendment) Bill 2008**

October 2008

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Introduction

DAA thanks the Community Affairs Committee for the invitation to make a submission to this Senate Inquiry on the amendments to the *Broadcasting Services Act 1992* and the *Schools Assistance (Learning Together – Achievement Through Choice and Opportunity) Act 2004*.

The most recent study data available indicates overweight and obesity are serious health issues affecting up to 25% of Australian children (1). The World Health Organization confirmed the current volume of food and beverage advertising to children is impacting on the food preferences, purchase behaviour and consumption of an unhealthy diet, after reviewing a report based on the current evidence on the state and effects of food advertising to children (2).

DAA has already developed and endorsed *Best Practice Guidelines for the Treatment of Overweight and Obesity in Adults*. DAA has also been engaged in advocating strongly on public health aspects of obesity and working with a range of stakeholders. The DAA Overweight and Obesity Strategy (3), which encompasses all aspects of overweight and obesity prevention, includes recommendations on food and beverage marketing to children.

As part of this strategy the DAA is again calling for more responsible marketing of food and beverage products and tighter government regulation of food and beverage marketing, and is meeting with a range of stakeholders including political parties and industry on this important issue.

Summary

DAA wants to see a system of government regulation of food and beverage marketing to children (0-12 years) to help them develop better eating habits. Regulation of food and beverage marketing must allow the promotion of healthy eating habits, and appropriate foods

and beverages, to our children. The current system does not significantly reduce the number of Energy Dense Nutrient Poor (EDNP) food and beverage television advertisements to children, and undermines positive health promotion programs and campaigns.

An aspect of food and beverage marketing that has gained much attention is the use of the television medium to advertise to children. Recent research reflects the public concern with this issue(4) and the positive correlation between television food advertising and children's food preferences (2).

We support a collaborative approach to developing a system of government regulation because we believe in working with all stakeholder groups is essential to bring about sustainable changes that really make a difference. Dietitians, government agencies, food, beverage and advertising industries and the public all need to actively participate in developing this system. The regulatory system that is developed needs to be transparent and unambiguous to ensure confidence by all parties.

DAA believes change to food and beverage television advertising regulation is part of the solution to the obesity crisis in children, as it will make it easier for parents to support their children to make healthier food choices. This strategy should be part of a bigger plan that requires equal focus and investment. DAA is aware of the shifts in the viewing trends of children and therefore, whilst the suggested changes will have an important impact, it is only the first step in effective regulation within the marketing continuum and the emphasis on other marketing channels needs to be considered as a matter of urgency.

Response to Amendments

The proposed amendment to the Act, (part 2A) includes:

- “proscribing advertisements for food or for a beverage from being broadcast during a C period” as well as during C and P programs, and
- ‘proscribing advertisements or sponsorship announcements (identifying or referring to a company, person or organisation whose principal activity is the manufacture, distribution or sale of food or a beverage from being broadcast during a C period” as well as during or immediately before or after a C or P program outside the C or P periods.

DAA does not support this amendment because we believe restrictions on food advertising to children should be put in place when children are actually watching television and not be limited to C and P programs and time periods. The peak viewing time for children 0-14 years is between 7-8pm, not during C or P programs and large numbers of children are watching television between 5.30pm and 8pm(4). DAA would support an amendment that included restriction during the time slot 5.30pm-8pm in addition to during C and P periods.

DAA does support the amendment (2B) which sees the Health Minister able to exempt advertisements, ie. “if the Minister considers that the food or beverage is beneficial to children's health and well being, based on the FSANZ (Food Standards Australia and New Zealand) nutrient profiles”. Use of the FSANZ tool alone to distinguish between food and beverages for advertisement on television is unlikely to be satisfactory. The tool was not designed by FSANZ for regulating television advertising. It was developed from the UK Ofcom tool which was developed for judging advertising directed to children.

It was designed by FSANZ in this way for use in part of an assessment process of foods and beverages regarding labelling in relation to health claims. It may well be adapted for the

purpose of assessing foods and beverages for television advertising, however DAA believes a group of professionals with expertise in nutrition, eg. Accredited Practising Dietitians (APDs), would be well placed to provide input into an assessment process in addition to a nutrient profile calculator tool.

DAA also supports the amendment (2C) regarding community service announcements as we believe television can be a powerful medium for promoting positive messages about healthy eating. DAA encourages the government to take a greater role in producing and paying for community service announcements that promote a healthier eating pattern for children.

Regarding the Schools Assistance Act, DAA is supportive of these amendments as exposure to food advertising / marketing through the school setting should be consistent with that via television.

Who Should Regulations Protect?

The aim of any government regulation over marketing and advertising should be to protect those who are most vulnerable. The literature on the development of children indicates by the age of 12, children are able to differentiate advertising from entertainment and become critical of advertising (5, 6). Additionally, there is little evidence on the impact of food and beverage advertising to young people over the age of 12 years (7). Any regulations restricting advertising and marketing to children over the age of 12 would therefore require further debate. For the purpose of DAA's position on television advertising, children are defined as zero to 12 years.

Current Screen Time Trends

Current trends in television viewing are shifting with the changing electronic environment. Statistics from OzTAM based on 2006 estimates show a significant decrease in free to air television viewing, whilst subscription television viewing increased (8). Based on the 2006 universe estimates reported by OzTAM, 24.9 per cent of Australian homes have access to subscription television (9).

Additionally more Australian families are gaining access to the internet from their homes. An estimated 1,730,700 (65%) children aged five to 14 years accessed the internet either during or outside of school hours with 85% of those children accessing the internet from home in 2006 (9). These figures are expected to climb as more households gain access to fast speed internet. The total number of internet subscribers in Australia increased by 1.285 million from June 2006 to June 2008, with a current total of 7.23 million subscribers to the internet in Australia. (10).

The recently released 2007 Australian National Children's Nutrition and Physical Activity Survey(11) found the following regarding children's screen time:

- Participation in screen-based activities peaked in children aged 13–14 years, where screen time varied from 3.5 hours in girls to over four hours in boys.
- Screen time primarily consisted of television viewing (approximately 2.5 hours for both boys and girls).
- Only 33 per cent of the children aged nine–16 years met the recommendations for screen time in the National Physical Activity Guidelines (no more than two hours of non-educational screen time each day).

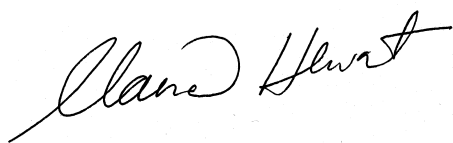
Current screen time trends highlight the need to not only focus on television advertising to children but also to address food and beverage marketing to children as a whole. Research by Ip et al 2007 indicates parents are noticing their children's food and beverage preferences being influenced by not only television advertising but road sign advertisements, supermarket product placements and promotions, peer pressure, school curriculum and school canteens (12). Kelly et al (13) found that 61% of the Internet sites targeting children were advertising unhealthy foods. However, as a first step DAA would like improved government regulation in food advertising to children through the television medium.

Current OzTAM data also indicates the majority of children are viewing television both inside and outside the current C and P designated programs. Generally, C programs are aired during the 4-5pm timeslot, however the peak viewing time for children 0-14 years is between 7-8pm (5). Therefore, regulations which limit regulation to C and P programs are ineffective in protecting the majority of 0-12 year olds watching television, as it does not take into account the time we know children are actually watching television. A new regulatory system needs to be broadened to outside the designated C and P programs.

Specifically, in relation to television advertising to children (0-12 years) DAA is calling for:

1. Government regulation of EDNP foods and beverage advertising to children (0-12). To achieve DAA's recommendations, a government led regulatory body would need to be developed which brings together all key stakeholders including Accredited Practising Dietitians. This regulatory body would be responsible for the development of the regulation framework and implementing a compliance monitoring system. The ACMA would be the appropriate group to monitor as they are already responsible for the Broadcasting Act.
2. A regulatory framework that includes: the development of an assessment system to select products that reflect the Australian Dietary Guidelines for Children and Adolescents (to be revised 2009) and approve them for marketing to children, including television advertising. Under this system, foods that do not meet this criteria would not be permitted for marketing to children. A similar assessment system is likely being developed as part of the Department of Health and Ageing funded 'National Healthy School Canteens Project'. This system may provide some useful links to a children's television advertising regulation system and ideally would be consistent. An assessment system for food and beverage advertising needs to reflect the Australian food supply and our foods standards legislation and be a useful resource to encourage food companies to improve the nutritional quality of their products. Current tools are available. FSANZ has developed one such tool 'Nutrient Profiling Scoring Criteria' as previously mentioned, and this could be modified to be appropriate for the purpose of regulating food and beverage television advertising to children. It is important to note that this is occurring in New Zealand as of July 2008 (14).
3. The use of the OzTAM rating system to identify television programs of particular interest to children, where only products approved by the above system could be advertised. The OzTAM data should be used to determine when children are actually watching television and should be reviewed on a regular basis to ensure any regulations are consistent with the changes in viewing trends. This rating system should cover television programs of particular interest to primary school age children, twelve years old and under, including those outside C and P rated programs.

4. Regulations that cover the portion and serve size of foods and beverages advertised. All food and beverage marketing and television advertising must represent appropriate portion sizes of foods and beverages, and avoid promoting over consumption of any item, eating more than usual, or eating more often than usual. Portion sizes and quantities of foods and beverages advertised should be in line with the Australian Guide to Healthy Eating (once revised and in line with revised Australian Dietary Guidelines).
5. Banning premium offers and endorsements with cartoon characters and celebrities for EDNP food and beverage purchasing by children, or for children. Premium offers refers to the use of promotional offers that provide an added incentive to purchase the food or beverage such as give-aways, competitions and prizes. It also encompasses promotional offers that encourage over consumption such as three for the price of two offers. The nutrient profiling system as indicated in point two would provide a framework to exclude EDNP and permit more nutritious foods and beverages to continue to use incentives.
6. The government regulatory body conduct impact evaluation, such as Health Impact Assessments, on any new regulations developed.



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Background

The Dietitians Association of Australia (DAA) is the national association of the nutrition and dietetic professions, with branches in each State and Territory. DAA represents over 3700 members and as such is the largest professional nutrition-focused body in Australia. Dietitians are employed in a wide variety of work areas including clinical dietetics, public health and community nutrition, education, food service and management, private sector, government, research, industry, public relations, marketing and communications. DAA is the leader in nutrition and advocates for better food, better health, better living for all.

Accredited Practising Dietitians (APDs) are recognised professionals with the qualifications and skills to provide expert nutrition and dietary advice. APDs are qualified to advise individuals and groups on nutrition related matters. They also have clinical training to modify diets to treat conditions such as diabetes, heart disease, cancers, gastro-intestinal diseases, food allergies and intolerances and overweight and obesity.

APDs have sound university qualifications accredited by DAA, undertake ongoing training and education and comply with the Associations guidelines for best practice. They are committed to the DAA Code of Professional Conduct and Statement of Ethical Practice, and

to providing quality service. APD is the only national credential recognised by the Australian Government, Medicare, the Department of Veterans Affairs and most private health funds as the quality standard for nutrition and dietetics services in Australia. It is a recognised trademark protected by law.

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