



NORTHLAND

PRIMARY HEALTH ORGANISATIONS

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Codes Review Panel
ASA Secretariat
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13th April 2016

Submission to the Advertising Standards Authority by Northland PHOs
(Manaia Primary Health Organisation and Te Tai Tokerau PHO)
on the Review of the Code for Advertising to Children and the Children's
Code for Advertising Food

Introduction

Thank you for the opportunity to provide feedback on this review. This submission is made by Northland PHOs a shared service entity that provides services for two PHOs across the Northland region: Te Tai Tokerau PHO and Manaia Health PHO.

Manaia Health and Te Tai Tokerau PHOs work together on a number of district-wide health programmes such as: immunisation, mental health, Primary Options, respiratory services, B4 School Checks, health promotion, cervical screening, health literacy, podiatry, nutrition, smoking cessation, cardiac rehabilitation. The two PHOs also have joint support services in the IT and population health areas.

Both PHOs work closely and collaboratively with the Northland DHB, other government agencies and non-government organisations (NGOs) to improve health outcomes for the population of Northland.

Te Tai Tokerau PHO has an enrolled population of 61,729 and Manaia Health PHO, had an enrolled population 94,802.

Some brief statistics about Northland from the 2013 Census:

21.6% are aged under 15 years, compared with 20.4% for all of New Zealand

18.3% are aged 65 years and over, compared with 14.3% for all of New Zealand

43.6% of people aged 15 years and over in Northland have an annual income of \$20,000 or less, compared with 38.2% for New Zealand as a whole.

It is important we provide feedback on this review as it is relevant to our childhood population and our families and communities who are more and more commonly struggling with overweight and obesity.

In Northland we have high rates of overweight, obesity and dental caries in children. We wish to support tighter restrictions on advertising to our children to protect the Public Health and Wellbeing of children in Te Tai Tokerau.

It is also important in a Global Context for us all to challenge companies and corporations not to target the most vulnerable and increase problems associated with eating highly processed sugar, fat and salt laden food in communities here and around the world. If all nations were to tighten their advertising standards, the health of our children would benefit.

“Take care of our children. Take care of what they hear, take care of what they see, take care of what they feel. For how the children grow, so will be the shape of Aotearoa”. Dame Whina Cooper

Background:

There are many reviews and reports highlighting the link between food advertising and eating patterns and behaviours in children, which in turn effects their health and wellbeing and the overall Public Health of the New Zealand population (1, 2, 9). This evidence is not being debated and is well understood. The conversation now is around how to implement the recommendations such as those in the World Health Organisation’s Report of the Commission on Ending Childhood Obesity (3) to:

“Implement the Set of Recommendation on the Marketing of Foods and Non-Alcoholic Beverages to Children to reduce the exposure of children and adolescents to, and the power of, the marketing of unhealthy foods’

“Settings where children and adolescents gather (such as schools and sports families or events) and the screen-based offerings they watch or participate in, should be free of marketing of unhealthy foods and sugar-sweetened beverages.”

“Parents and caregivers are increasingly the target of marketing for foods and beverages high in fats and sugar, aimed at their children (this also needs to be addressed)”.

Sweden and Norway prohibit all commercial television advertising directed at children. For New Zealand, this would be our optimal outcome, along with other regulations covering other advertising media, the marketing of food and the targeting of parents in marketing campaigns.

Please see our responses to your questions below.

Responses to Questions:

1. What are the strengths and weaknesses of the two current Children's Codes?

Strengths:

The codes are part of a comprehensive Advertising Code of Practice, which has a strong focus on ethical advertising and social responsibility. The Codes cover a range of advertising mediums and types of advertising.

Weaknesses:

We are aware of the negative impact of food and beverage marketing on the health and wellbeing of our children therefore the restrictions need to be tighter to ensure the best interests and Public Health of our children (2, 4). The code is too narrow in many of its definitions, including its relevance only to those under 14 years of age (which will be discussed more in subsequent questions) and its recommendation in the Code for Advertising Food that 15-17 year olds are provided an "extended duty of care" is ambiguous.

The codes do not clearly address the prevalence of values and emotion-based advertising techniques aimed at children through imagery, slogans and additional incentives to consuming and purchasing unhealthy foods. Unhealthy foods should not be marketed to children and a system of identifying healthy and unhealthy foods should be made clear and explicit and be cautious in their interpretation of healthy food to ensure any processed food high in either fat, salt or sugar are unable to be marketed to children.

The system of self-regulation is problematic. Compliance with the codes is not monitored and there are no sanctions for breaches, and provision of the codes are narrowly interpreted. The Children's Codes currently only apply to content directed primarily at children and shown during children's programming time (during programs created specifically for children and shown during weekday mornings and afterschool time slots), rather at any time children are likely to be watching. Programmes watched by high numbers of children (early evening viewing periods) are not covered by the voluntary codes (5).

2. What are the strengths and weaknesses of the current complaints process?

The main strength of the current process is that it is affordable and taxpayer money is not utilised.

In our view the weaknesses outweigh the strengths. There is a conflict of interest between food advertiser's commercial interests (to advertise in a manner that is effective to sell products) and the public interest (to protect children from advertising of unhealthy products). Food advertisers lack incentive to develop, comply with or enforce effective food advertising restrictions.

In the current complaint process compliance is not monitored. The system relies on complaints from the public to identify breaches. The regulatory wording and

interpretation is complex and difficult for members of the public to identify the code and provision to complain under. Once a complaint is made the advertisement continues to run. There is no deterrent or penalty for the advertiser other than a recommendation to remove the advertisement, which may have already been shown numerous times. The inability of the ASA to impose sanctions on advertisers who breach the code, encourages advertisers to push the limits and test the waters of the Code with no consequences for their actions. Sanctions should be in place that are relevant to the breach and should apply to the advertiser and broadcaster who aired the advertisement. Corrective advertising by an independent body outlining any false messages in the advertising should be included in the variety of sanctions available to the ASA.

3. What changes, if any, are necessary to protect the rights of children and their health / wellbeing?

Changes necessary to protect the rights of children and their health and wellbeing:

- All decisions on changes to the code should be made with the best interests of children as a primary concern and not be weighted in the favour of advertisers.
- We recommend the complaints process is independently monitored and includes children's representatives.
- We recommend monitoring of advertising and marketing in New Zealand to ensure the Codes are being followed.
- We recommend the implementation of a complaints process that is publicly promoted and easy to understand and use by children and the public.
- We recommend Interpretation on the basis on consumer understanding of what the terms mean, not advertiser understanding. A clear outline of examples of what each of the terms mean.
- We recommend interpretation of the Code should be based on Children's best interests including their physical, mental and social health and wellbeing.
- We recommend only healthy foods and beverages are able to be marketed to children. Healthy food needs to be adequately defined and encompasses the Ministry of Health Guidelines on Healthy Eating. Foods able to be advertised should meet public expectation of best practise healthy eating and should limit processed foods high in added salt, sugar and fat. The system of identifying healthy foods should not compromise based on manufacturers views of what constitutes a healthy food and foods to be advertised should mainly be core unprocessed foods such as fruits and vegetables, plain unflavoured milk, unprocessed wholegrains, plain yoghurt, meat, eggs, fish, poultry, legumes, nuts and seeds and water.
- We recommend time restrictions on the promotion of unhealthy foods and beverages be extended to shows broadcast until 8.30pm with a high appeal to children as found in the Children's Media Use Study produced by NZ On Air (5). These shows include, but are not limited to cartoons, sport, documentaries and information shows such as Operation Hero, Let's Get Inventin', Sticky TV, The 4.30 Show, The Block, animal shows, drama and comedies such as Shortland St, Home and Away, Disney Channel, Girl Vs Boy and Jessie. The application of the relevant Children's codes should also apply if these shows are available online

via YouTube, streaming services or on demand services, which are increasing in use.

- We recommend a guideline in the code to limit sport sponsorship and the use of well-known athletes to promote unhealthy foods and beverages as we know that the use of sport in food marketing influences children's food beliefs and behaviours (6, 7).

5. If the content of advertisements is a concern, can you please give examples and / or supporting evidence? A product name and ad description would be helpful so we can source the advertisements.

All marketing promoting fast food to children by promoting children's meals that have incentives including points systems, competitions, access to computer games and apps or toys with purchase are of concern. Examples include McDonalds Happy Meals toys and website, Paddlepop Lick a Prize and Apps and KFC promotions regarding accumulating points for prizes. These incentives encourage children to pester their parents to buy these unhealthy products. These promotions are not in the best interests of our children, families or communities.

All advertisements promoting unhealthy foods during times when children are likely to be watching are of concern.

Social media marketing, especially targeted at youth is of concern. All emotions based advertising targeted at young people and promoting brands should be limited. Coca Cola is well known for targeting young people by using these sorts of advertising techniques. Their New Zealand Facebook page contains numerous posts, clips and photos promoting the product and brand to young people by appealing to their emotions and developmental stage.

The NZ On Air Children's Media Use Survey found nine in ten children use the internet at home (5). Games and YouTube are the most popular. The most favourite websites of 9-14 year olds in New Zealand were YouTube and Facebook. We know that a large number of children are using these sites (5). Online media is in need of greater monitoring as 24.7% of advertising spend was from online and interactive advertising. This percentage is likely to increase as the use of online viewing platforms increases, super-fast broadband is rolled out and devices become more common in New Zealand homes.



6. If the placement of advertisements is a concern, can you please give examples and / or supporting evidence? For broadcast media it would be helpful to have the time / date / channel or programme, for other media, a link / publication title / outdoor location would be appreciated.

Marketing in and around schools and early childhood centres is of concern. Especially regarding resources and sponsorship provided to schools. Companies that are known to market in schools include Cadbury's, McDonalds and Nutrigrain. We know that sponsorship does influence perceptions and feelings around food and encourages families to buy these products.

7. The Children's Codes currently define a child as under the age of 14. Do you support or oppose this definition? Why?

We support this definition as, according to the Children's Commissioner, the law allows parents to leave a young person without supervision from the age of 14 and a young person of 14 can be charged with committing a criminal offence.

We do not support the ASA's definition of a child. We support the Code to include all persons under the age of 18 years, in alignment with the United Nations Convention on the Rights of the Child (8). This aligns with recommendations made by the WHO in their Report of the Commission on Ending Childhood Obesity (3). In the Code for Advertising Food the ASA outlines that

"Advertisers are also required to exercise a particular duty of care for food advertisements directed at young people ages 14 to 17 years of age"

Including 14-17 years olds in the code will increase clarity and decrease the ambiguity of this statement. It will also make it easier to identify advertisements directed at young people like the image shown. Marketing targeted at teenagers may also be quite persuasive to those in younger age groups and we know that children watching family television are exposed to these advertisements in the evenings as found by the Children's Media Use Study (5).



8. Is there a role for a nutrient profiling system such as the health star rating system in the Children's Codes? If yes, in what way and which system would you suggest?

Appropriate clarification of healthy foods, able to be advertised is required.

We do not support the use of the Health Star Rating System, due to a range of inconsistencies in the logarithms used to calculate the ratings and there use predominantly with highly processed packaged foods, which are the foods we are trying to limit. Many foods considered to be healthy, such as frozen blueberries, do not achieve the highest rating of 5 and many foods such as Nutrigrain, which is high in added sugar, receive higher than expected Health Star Ratings. Healthy foods would be

defined as those with a Health Star Rating of 5, however we would recommend the Health Star Rating system not be used to classify healthy foods for advertising purposes.

We would prefer the Heart Foundations Fuelled for Life Buyers Guide for Schools be used to classify healthy foods. Healthy foods are to be defined as foods classified as “everyday foods” by the Fuelled for Life Buyers Guide. This system was formulated specifically with Children’s needs in mind.

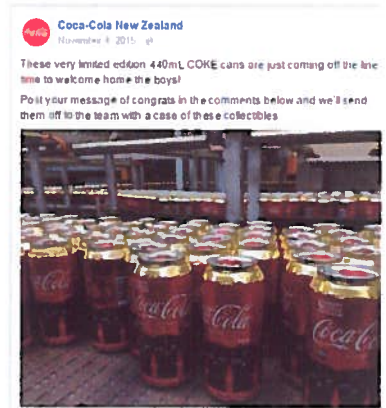
9. Do you support or oppose a specific guideline on sponsorship? Why?

We strongly support a specific guideline on sponsorship. As companies use sponsorship relationships to project an altruistic image which influences brand attitude and food preferences (14). Studies have also found the inherent positive values from an activity are transferred to the sponsor (e.g. the sponsorship of sporting events) (14).

We know that New Zealand children are exposed to marketing of unhealthy foods and drinks via sponsorship of sports (10,11). We also know that boys under the age of 14 like to watch sport (5). There are a range of sponsorship arrangements in place that promote unhealthy foods via sports sponsorship including Georgie Pie’s sponsorship of Twenty20 Cricket, Coke’s sponsorship of the All Blacks and KFC’s sponsorship of Super Rugby. These sponsorship arrangements and the marketing associated with them would be highly appealing to young people and often involve collectors’ items and competitions.

We oppose sponsorship of other festivals or events targeted or appealing to children by companies selling or marketing unhealthy foods, alcoholic beverages or promoting betting or gambling. An example of this is the sponsorship of Christmas in the Park by Coca Cola. This is a family event where children are likely to be present promoting and creating good feelings towards a sugar sweetened beverage that has no health value and contributes to high rates of overweight, obesity and tooth decay in our children.

We also support a guideline that includes regulations on the sponsorship of children’s sport and activities by unhealthy food and beverage companies.



10. Do you support or oppose the introduction of independent monitoring and evaluation of the codes? How would this work?

We support independent monitoring and evaluation of the codes.

We support creating an independent complaints process that has the power to impose sanctions.

We support the independent evaluation of the codes to determine whether they are effective and if children are still being exposed to unhealthy advertisements. We support the monitoring of all advertising and the sharing of data on children's advertising exposure and use of media.

In New Zealand \$2,386 million was spent on advertising according to the ASA's New Zealand Advertising Industry Turnover Report available online. Within this, there must be some capacity to generate funds by instituting perhaps a levy on all advertising to ensure there is the capacity to monitor, evaluate and impose sanctions.

11. What is your view of the sanctions imposed by the ASA when a complaint is upheld?

The ASA's current sanctions are insufficient.

The ASA should have the power to impose harsher sanctions that attract as a deterrent and correct any misinformation as a consequence of the advertisement shown.

The ASA should impose sanctions accordingly to the degree of breach.

12. Are there environments where you consider it to be inappropriate to advertise to children?

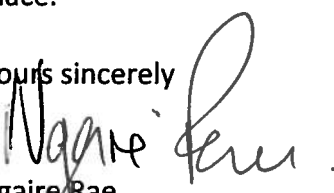
We consider it inappropriate to market or advertise to children as children are often unable to discern the persuasive intent of marketing (12).

Schools, early childhood centres, after school care, school holiday programmes, sportsgrounds and clubs, parks and reserves and their surrounds are environments, child health clinics and paediatric services or environments of events that have the potential to exploit the vulnerability of children and the ability to negatively influence an audience en masse. These environments should be free of marketing and advertising directed at children as recommended by the World Health Organisation recommendations around the marketing of foods and non-alcoholic beverages to children (13).

13. Do you support or oppose combining the two current codes? Why?

We support the combination of the two current codes as long as their content and quality remains strong and monitoring of the codes is effective and sanctions are put in place.

Yours sincerely


 Ngaire Rae
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