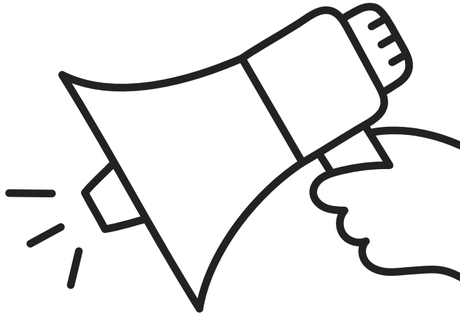
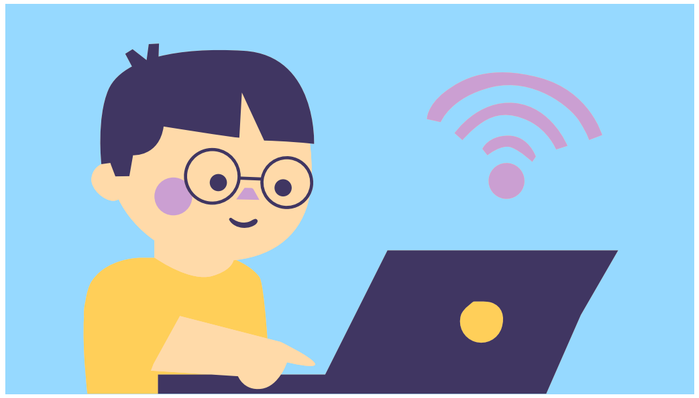
Best-ReMaP
Healthy Food for a Healthy Future



SNAKES AND LADDERS OF FOOD MARKETING

challenges and facilitators to reducing children's exposure to unhealthy food marketing

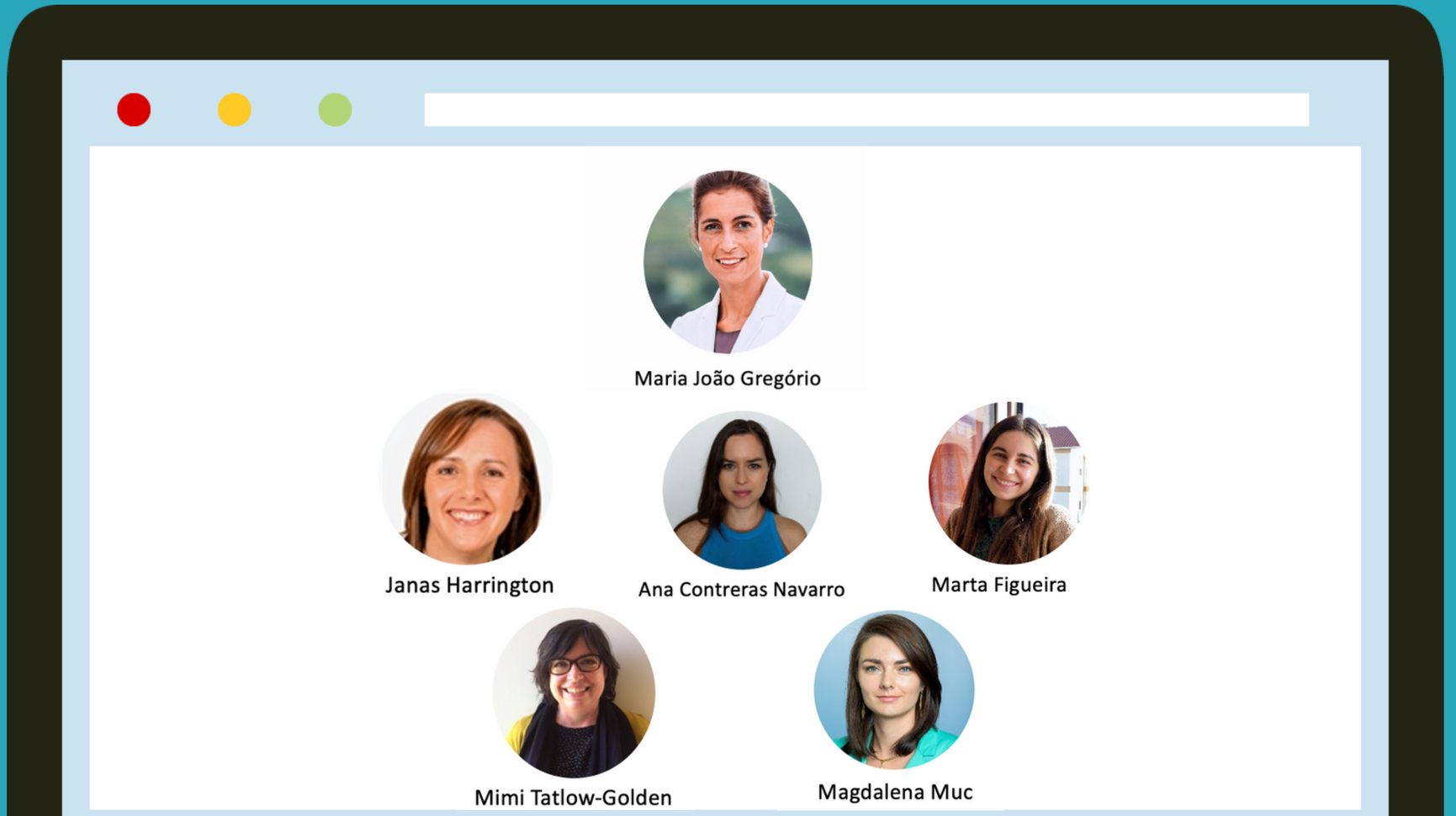


Co-funded by the European Union's
Health Programme (2014-2020)

Time	Session title	Speakers
10:00-10:10	Introduction and Welcome	Albert Aszalos, Semmelweis University & WP2 Leader Maria João Gregório, DGS Portugal & WP6 Leader
10:10-10:20	Government control of harmful food and drink marketing to children and the young: The why and the how. *Presentation*	Ana Contreras Navarro, University College Cork Ireland & WP6
10:20-10:30	Monitoring unhealthy food marketing - challenges and facilitators. *Presentation*	Magdalena Muc, The Open University & WP6
10:30-10:40	*Foods to include or exclude in food marketing controls: application of Nutrient Profile Models.* *Presentation*	Margarida Bica, Nuffield Department of Population Health, University of Oxford
10:40-11:55	*Q&A*	
11:55-11:00	Closing remarks	Janas Harrington, University College Cork *Ireland & WP6*

WORK PACKAGE 6

Best practices in reducing marketing of unhealthy food to children and adolescents



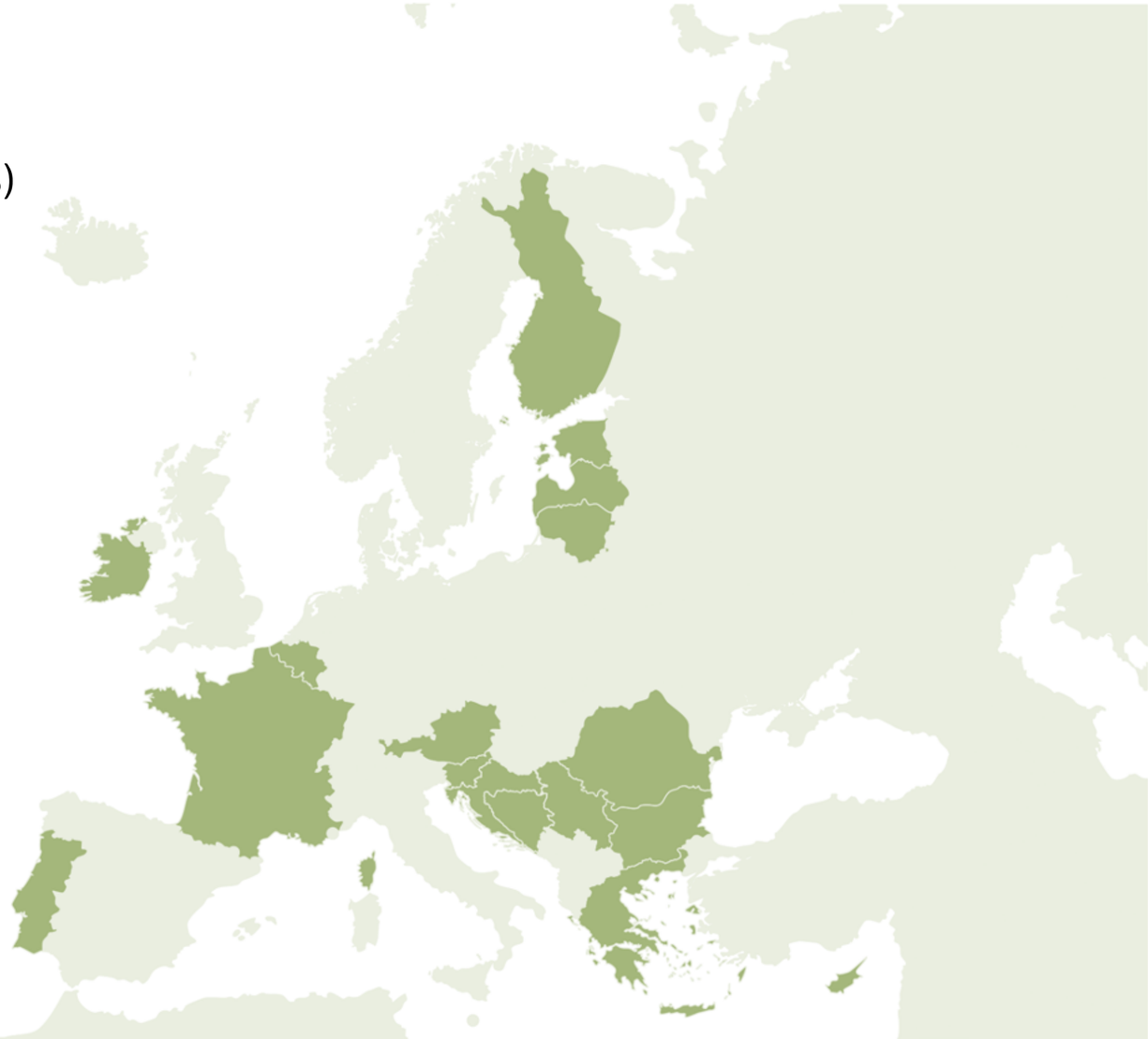
OUR TEAM

OUR GOALS

- to identify, develop and share best policy practices to reduce exposure of children to the marketing of unhealthy foods;
- to develop harmonised protocols and tools to monitor the extent and nature of marketing exposure of children;
- support Member States with the implementation of the new EU rules on audiovisual media services.

OUR PARTNERS

AUSTRIA (BMASGK)
BELGIUM (SCIENSANO)
BOSNIA AND HERZEGOVINA (MCA; PHI-FBH; PHI-RS)
BULGARIA (NCPHA)
CROATIA (CIPH)
CYPRUS (MoH CY)
ESTONIA (MoSA; NIHD)
FINLAND (THL)
FRANCE (ANSES; SPF; MoH-FR)
GREECE (ICH)
IRELAND (DoH; CHDR)
LATVIA (CDPC)
LITHUANIA (LR SAM)
PORTUGAL (DGS; FCNAUP)
ROMANIA (NIPH)
SERBIA (IPHS)
SLOVENIA (NIJZ)



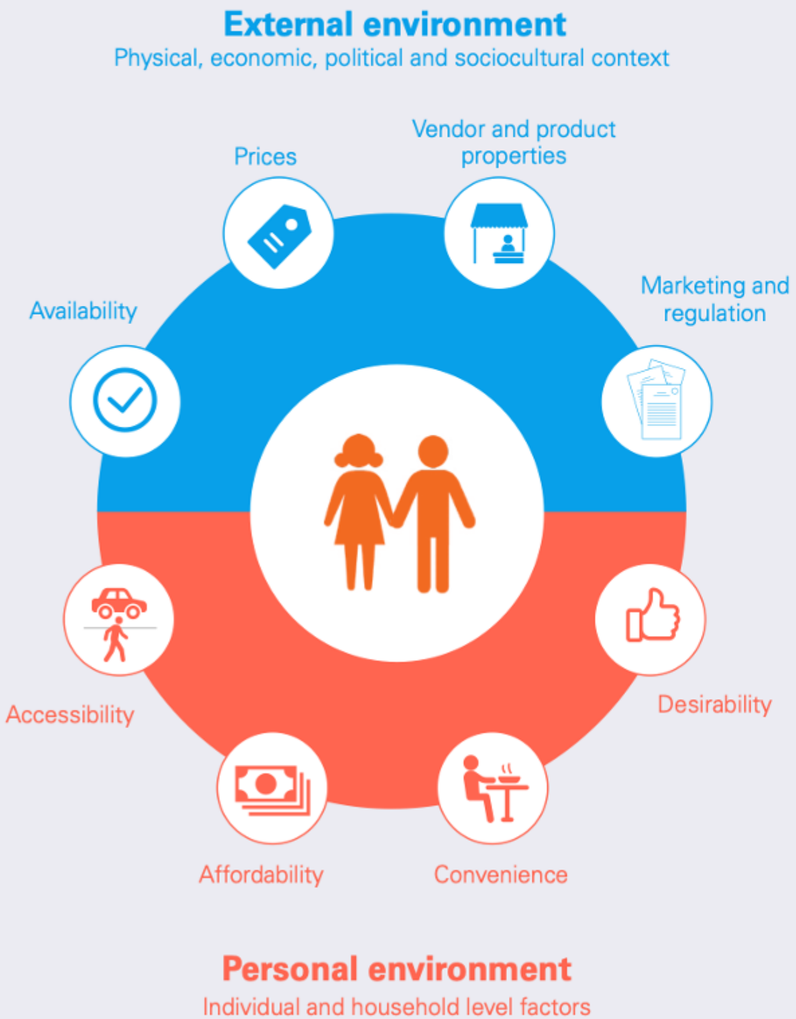
EXPOSURE OF CHILDREN TO UNHEALTHY FOOD MARKETING

IMPACT ON DIETS AND EVIDENCE FOR ACTION

Dr Maria João Gregório

Unhealthy food marketing is one of the main elements of the **obesogenic environment** in which children are living now

Food environments are **spaces where children and their families interact or engage with food**. Depending on how they are structured, they may either help or harm children's nutrition.

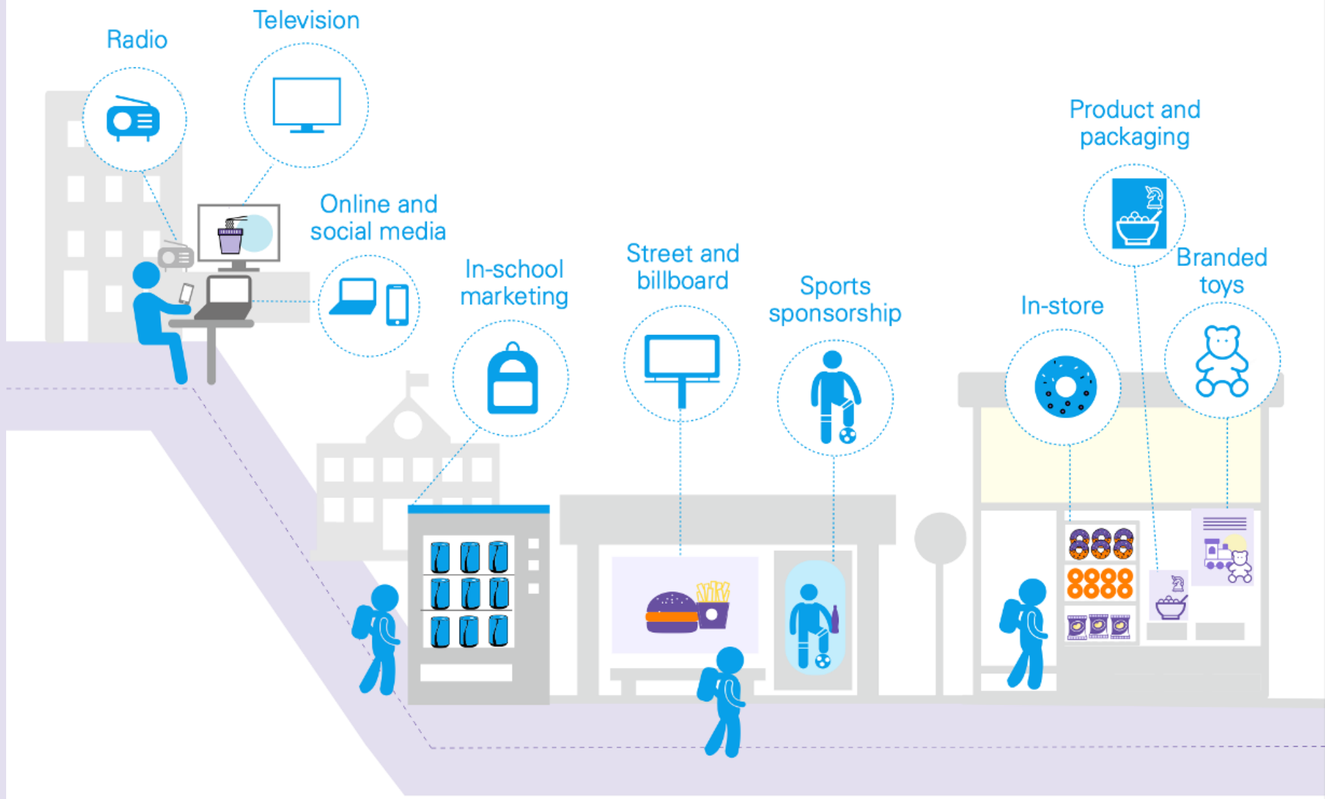


An **unhealthy food environment** is a food environment with low availability, accessibility, desirability and affordability of healthy foods; and high availability, affordability and promotion or marketing of unhealthy foods. Unhealthy food environments lead to increased consumption of unhealthy foods and beverages. It is increasingly recognized that unhealthy food environments violate multiple child rights.

Children deserve to live, learn and play in spaces where nutritious and affordable food is available for all.
They should be protected from promotion of unhealthy foods and beverages. Families and caregivers should be supported to provide healthy diets. The F&B industry should be incentivised and regulated to act in the best interest of children.

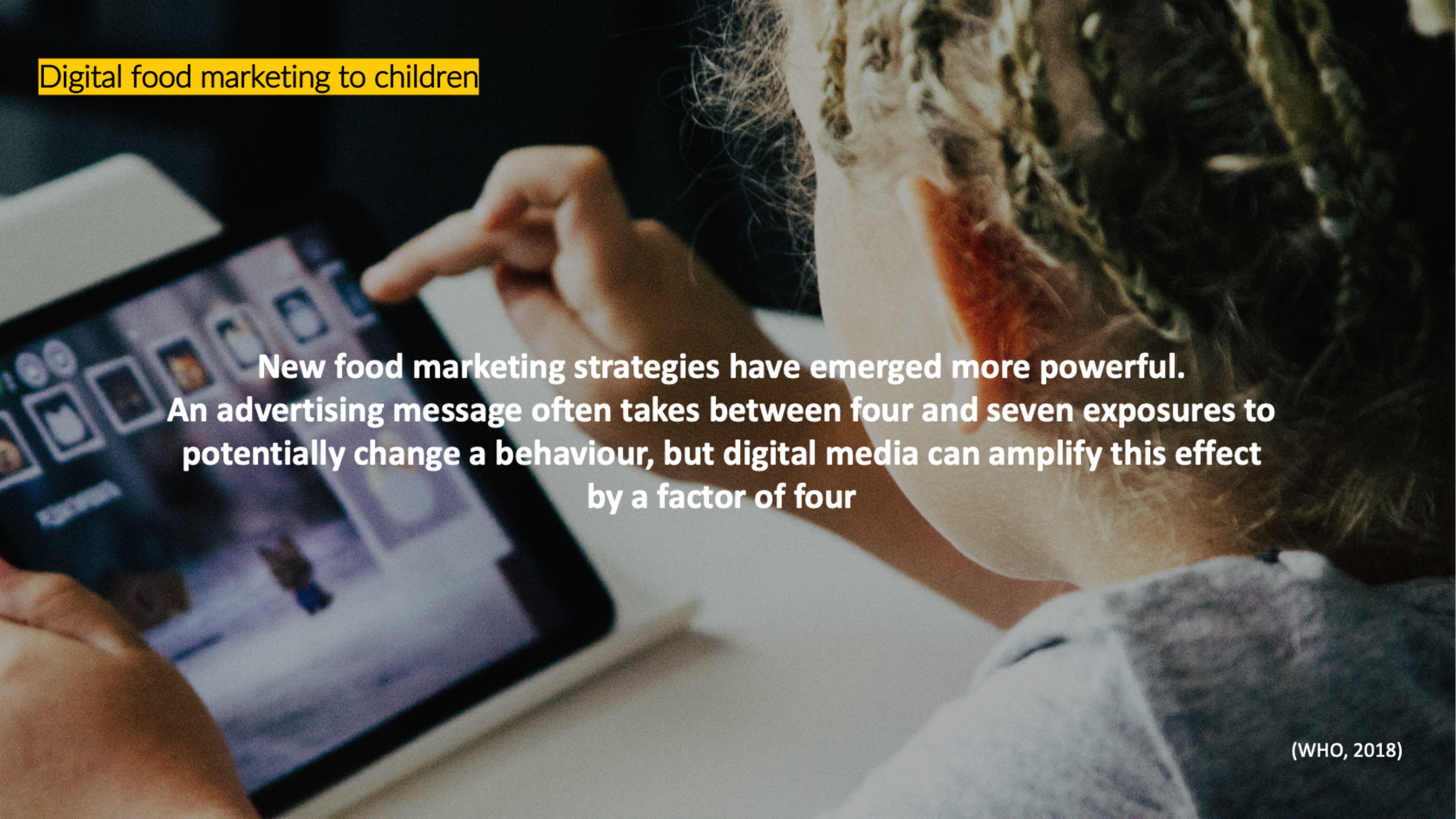
(UNICEF/WHO, 2021)

European children are **exposed of a large number of ads and promotion** for unhealthy foods that come from a **variety of sources**



(PHOTO CREDITS: UNICEF/WHO, 2021)

Digital food marketing to children



New food marketing strategies have emerged more powerful.
An advertising message often takes between four and seven exposures to potentially change a behaviour, but digital media can amplify this effect by a factor of four

(WHO, 2018)

THE POWER OF FOOD MARKETING

FOOD MARKETING TO CHILDREN

Foods are promoted using persuasive creative strategies

Use of movie and sports celebrity endorsements, promotional characters, promotion, gifts, incentives and tie-ins, competitions and entertainment events, competitions, advergames, colour visual images and graphics designed to appeal to children, animation, use of cartoons, humour, fun and fantasy, and various others engagement techniques

(WHO, 2022)

THE MAJORITY OF FOOD ADS PROMOTE UNHEALTHY FOODS

FOOD MARKETING TO CHILDREN

4x more advertisements for food and beverages not permitted to be market according to the WHO NPM

(Kelly et al, Obesity Reviews, 2019)

SOCIAL INEQUALITIES IN CHILDREN'S EXPOSURE

FOOD MARKETING TO CHILDREN

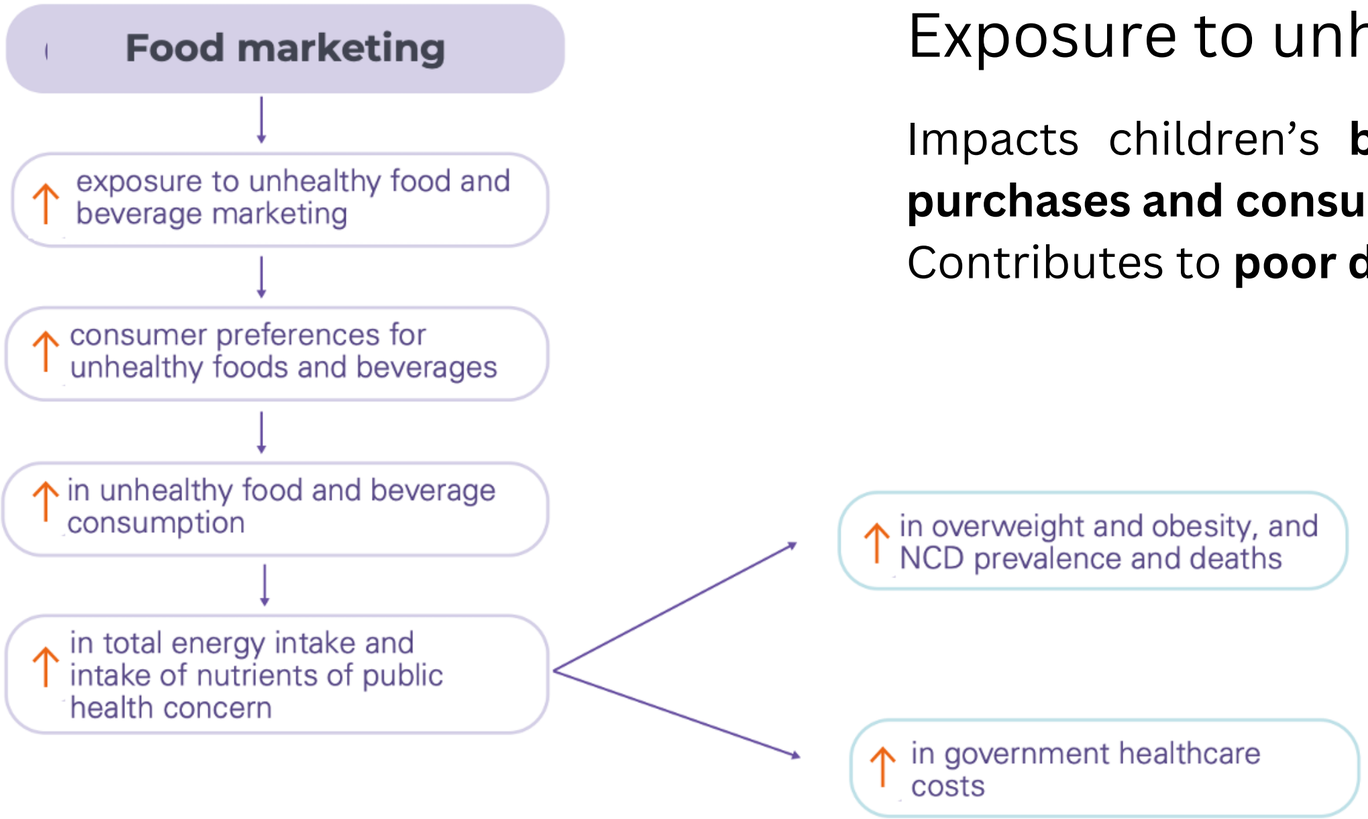
More food advertisements and a **higher proportion of unhealthy food advertisements** are found near **schools in lower socioeconomic areas.**

The **highest proportion of advertisements for unhealthy foods in Australian** train stations occurs **in areas with the lowest socioeconomic status.**

(Trapp et al, Health Promotion Journal of Australia, 2021; Sainsbury et al, BMC Public Health, 2017)

IMPACT OF CHILDREN'S EXPOSURE

FOOD MARKETING TO CHILDREN



Exposure to unhealthy food marketing

Impacts children's **brand awareness, preferences, requests, purchases and consumption**

Contributes to **poor diets and weight-related outcomes.**

(WHO, 2022; Cairns et al, Appetite, 2013; Boyland et al, The American Journal of Clinical Nutrition, 2016; Boyland et al, JAMA, 2022)

IMPACT OF CHILDREN'S EXPOSURE

FOOD MARKETING TO CHILDREN

"**Exposure to 4.4 minutes of food advertising** would on average **increase a child's food consumption by 60.0 kcal**, whilst playing an advergame with food cues for 5 minutes would increase consumption by 53.4 kcal on average."

(Russel et al, Obesity Reviews. 2019)

IMPACT OF CHILDREN'S EXPOSURE

FOOD MARKETING TO CHILDREN

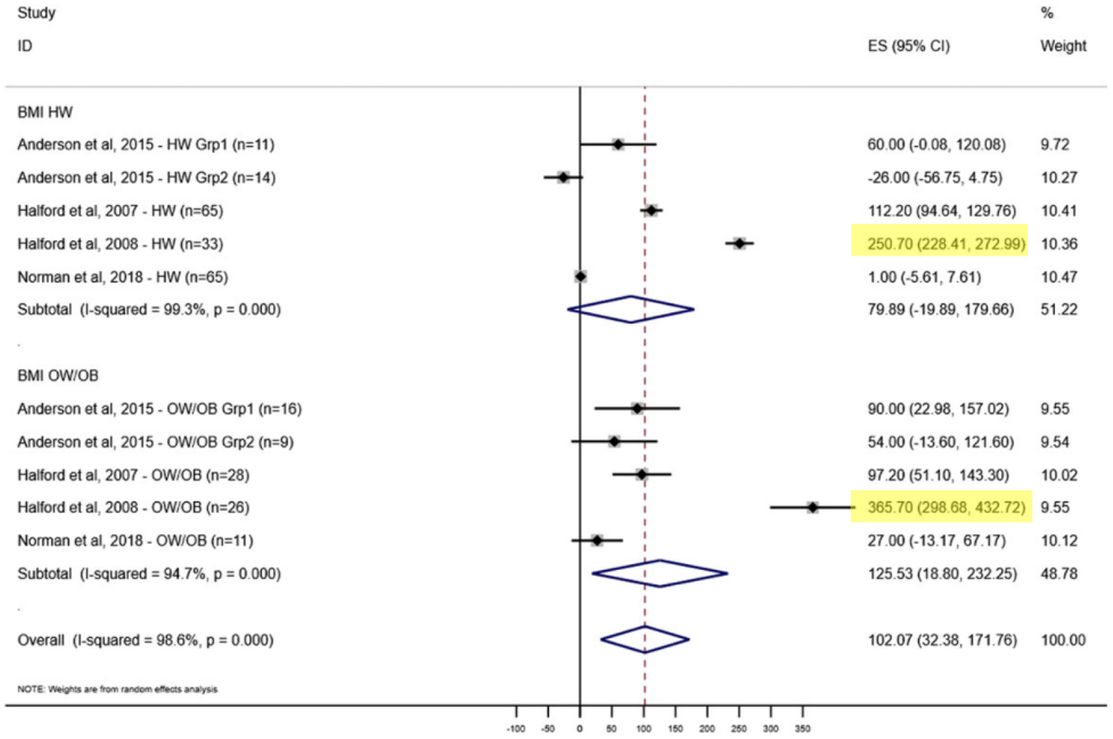


FIGURE 3 Forest plot showing mean difference (kcals) in dietary intake between television food advertising and nonfood advertising by BMI group (HW = healthy weight, OW/OB = overweight/obese); 95% CIs and study weights are indicated. The overall effect size was generated by a random effects model [Colour figure can be viewed at wileyonlinelibrary.com]

The effect size of television food advert exposure on dietary intake was greater for children with overweight or obesity (mean difference 125.5 kcal, compared with children with healthy weight (mean difference 79.9 kcal).

Overweight children consume **57% more calories** (45.6 kcal) than children with healthy weight following exposure to food adverts.

(Russel et al, Obesity Reviews. 2019)

THANK YOU

mariajoaobg@dgs.min-saude.pt

alimentacaosaudavel.dgs.pt

nutrimento.pt

Stock Image: GETTY

REPÚBLICA PORTUGUESA
SAÚDE

SNS
SERVIÇO NACIONAL DE SAÚDE

DGS desde 1899
Direção-Geral da Saúde

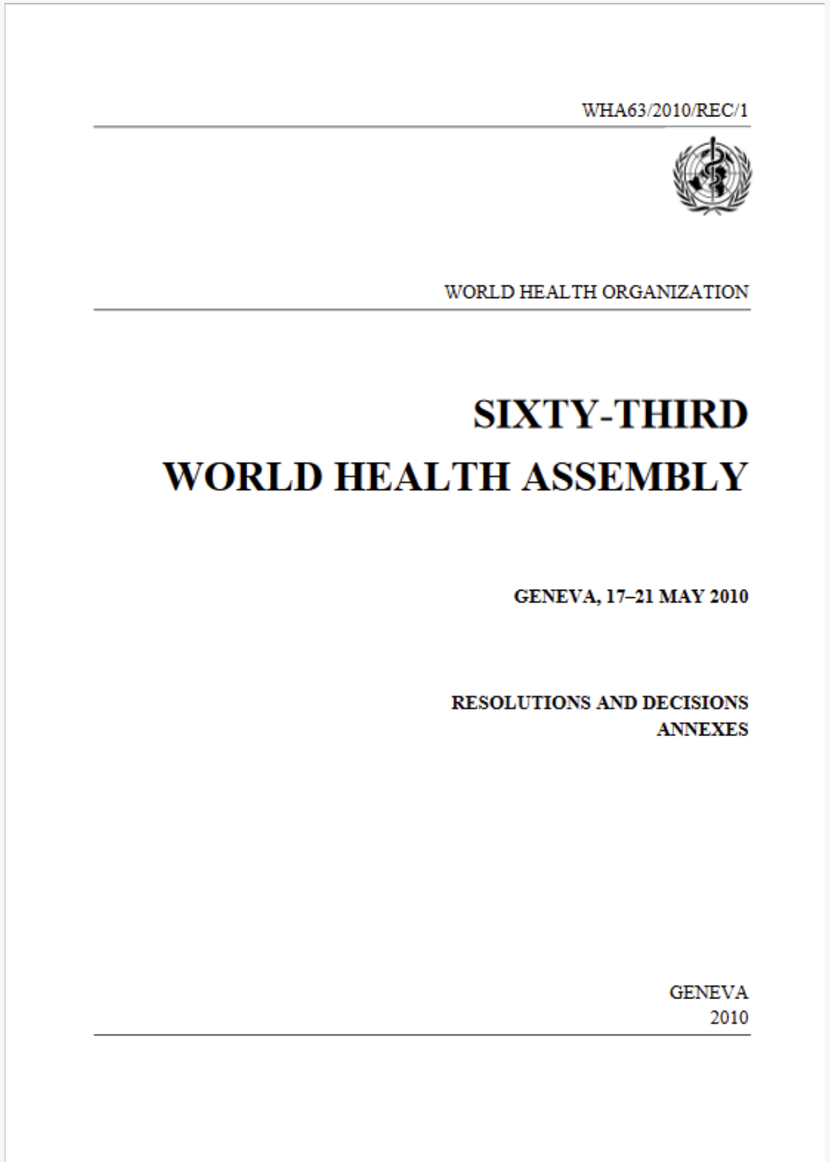
Programa Nacional para a Promoção da Alimentação Saudável

GOVERNMENT CONTROL OF HARMFUL FOOD MARKETING TO CHILDREN AND THE YOUNG

the why and the how

Dr Ana Contreras Navarro
School of Public Health
University College Cork

Almost 13 years ago, in May of 2010, the World Health Assembly and 194 member states, unanimously endorsed a set of recommendations on the marketing of foods and non-alcoholic beverages to children, to reduce the impact on children of marketing of foods **H**igh in saturated **F**ats, trans-fatty acids, free **S**ugars, or **S**alt (**HFSS**).



WHA63/2010/REC/1

WORLD HEALTH ORGANIZATION

SIXTY-THIRD
WORLD HEALTH ASSEMBLY

GENEVA, 17–21 MAY 2010

RESOLUTIONS AND DECISIONS
ANNEXES

GENEVA
2010

In 2019, 28 countries across Europe had a policy action in place, establishing the rules for advertising food and non-alcoholic beverages to children.

However, the majority of policy actions lack implementation of best practices from international and EU frameworks:

- do not protect children up to 18 years;
- do not define 'child marketing';
- do not use nutrient profiling method to identify **HFSS** food;
- do not cover all settings (broadcast, digital, outdoor, print);
- do not cover all marketing techniques (sponsorship, product placement, gifts or tie-ins);
- do not address cross-border marketing; and/or
- do not incorporate clear implementation, evaluation and enforcement strategies.

Government controls on marketing of food to children are needed from a NCD prevention policy perspective

In Europe, 12% of children 5–9 years and 7% of children 10–19 years are living with obesity.

Obesity can cause

- musculoskeletal complications,
- metabolic effects (type 2 diabetes and cardiovascular risk),
- effects on mental health, and
- different types of cancer (13 types).

Obesity alone was estimated to be responsible for 8% of health costs in EU MS.

(WHO/Europe, 2022)

In school-aged children:

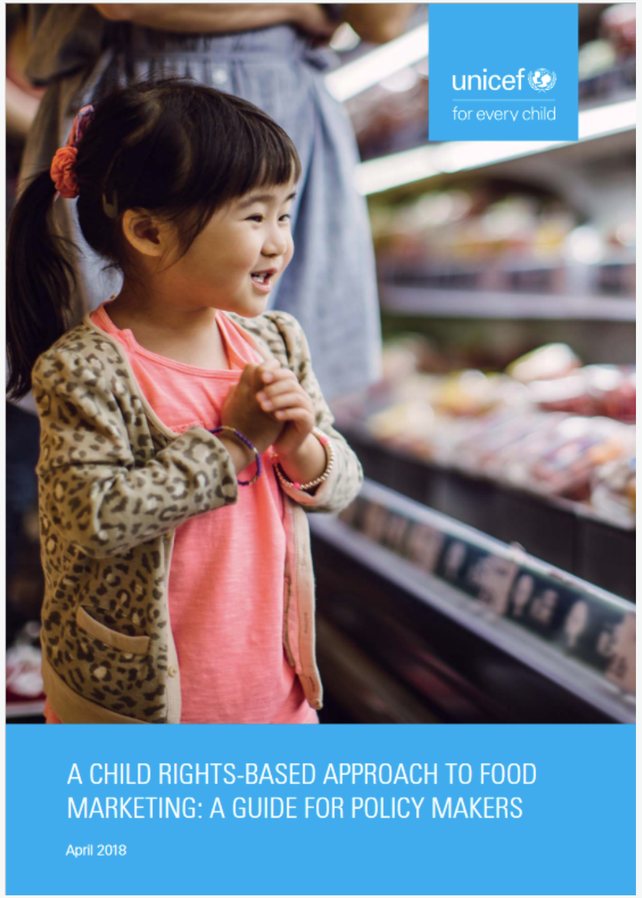
A diet that includes **high in fat or sugar rich foods** is associated to increased body mass, waist circumference and fat mass gain **after 2-years of follow up**.

A diet that includes whole grains, vegetables and fruits is **protective against weight gain**.

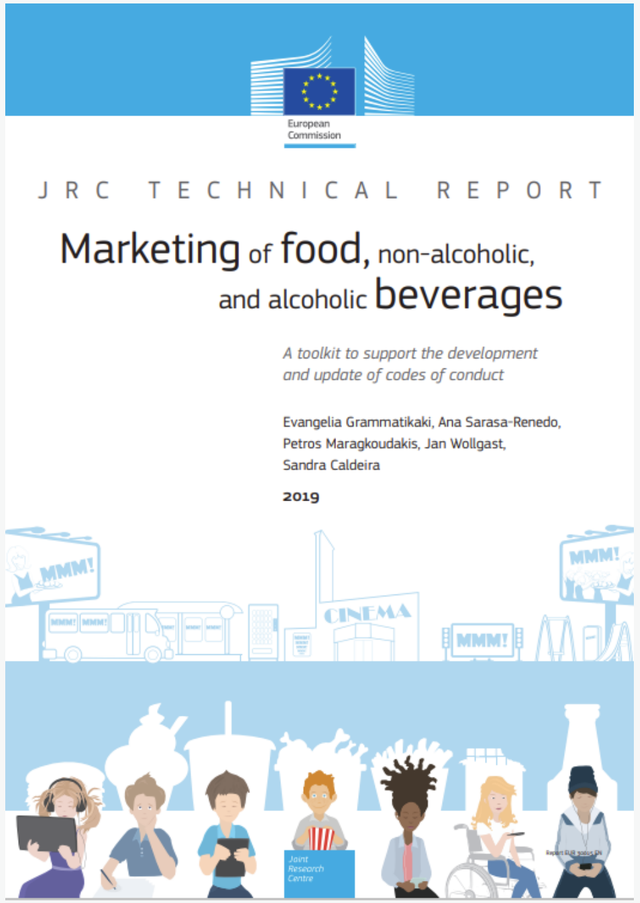
EU-funded IDEFICS cohort studies (Fernandez-Alvira et al, 2017; Pala et al, 2013)

Tools for restricting food marketing to children in high level policy documents

WHO, 2012

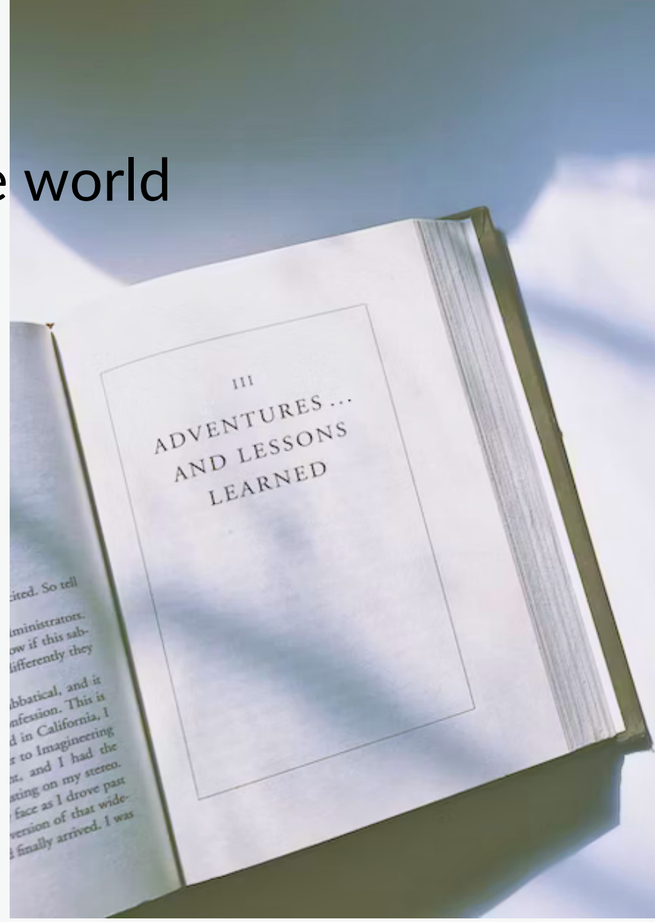


UNICEF, 2018



EC JRC, 2019

Implementation best practices—examples from countries around the world



(WHO 2022, FAO 2021)

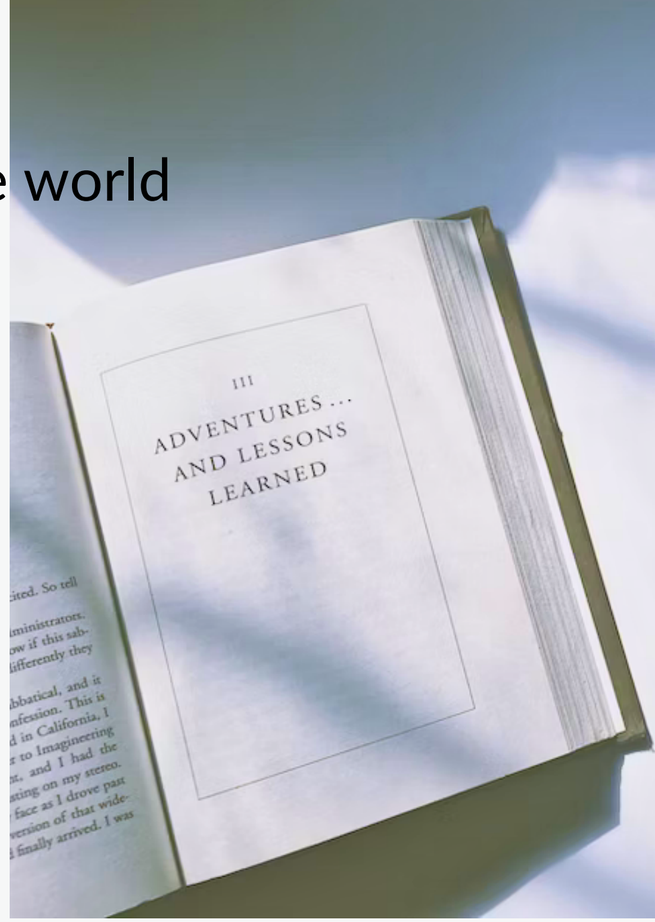
Chile

- Comprehensive in scope, this **statutory** marketing code prohibits all advertising of **HFSS** foods and beverages that is directed at children (<14y) through any setting or medium, including sale and promotion of food in schools, food packaging and TV broadcast aired between 06:00 and 22:00.

- The code covers child-directed techniques and incentives, such as cartoons, animations, toys and any other content that could attract the attention of children.

- Television advertising with child-targeted appeals, such as cartoon characters, fell by 35% for preschoolers and by 52% for adolescents.

Implementation best practices—examples from countries around the world

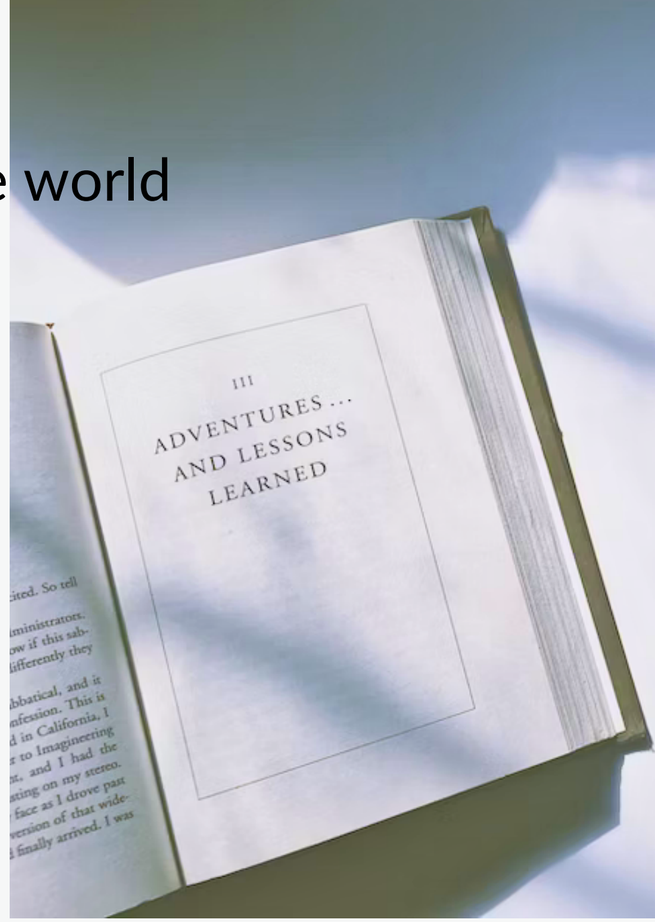


(WHO 2022, FAO 2021)

Turkey

- Broadcast **statutory** marketing codes are intended to protect all children up to 18 years.
- Nutrient criteria are closely aligned with WHO European NPM used to define **HFSS** foods.
- Enforcement strategies include fines ranging from 8,546 Turkish liras (€402) to 341,921 TL (€16,075). Repeat offenders face bigger fines, with Turkey's Board of Advertisement able to issues fines up to 10 times the value of the initial penalty.
- Monitoring strategy included a baseline study conducted in 2017 (WHO and Ministry of Health) on digital food advertising to children.

Implementation best practices—examples from countries around the world



(WHO 2022, Garde et al, 2018)

Quebec, Canada

- **Statutory** marketing code prohibits any commercial advertising (directed at children aged <13y), including food and non-alcoholic beverages on TV, radio, print, Internet, mobile phones, as well as use of promotional items.

- Enforcement strategy in 3 ways:
  - notifying the actors concerned of the rules that apply to their activities;
  - negotiating with said actors to voluntarily change their practices; or
  - filing criminal proceedings against the actors for violating the Act. Fines range from 600 Canadian dollars (€409) to 100 000 CAD (€68,130).

The Consumer Protection Act contributed to an estimated 11% drop in the likelihood of purchasing ‘fast food’, consequently reducing fast food consumption by $88 million per year.

Our review of published evidence so far indicates that the most efficient controls on the marketing of **HFSS** foods are government-led initiatives that incorporate best practices from international bodies and the best interests of the child. In addition, these food marketing codes are periodically supplemented by guidance documents, as well as updated regulations.

THANK YOU

Contact: acontrerasnavarro@ucc.ie

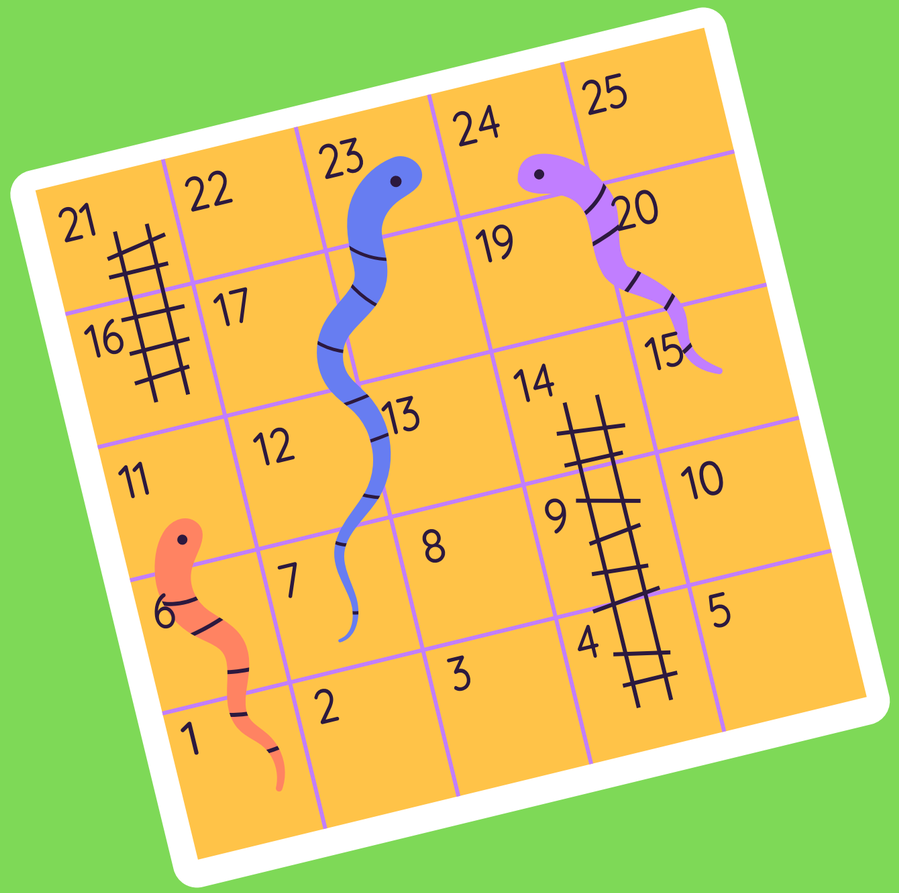
UCC
University College Cork, Ireland
Coláiste na hOllscoile Corcaigh

School of
Public Health

Best-ReMaP
Healthy Food for a Healthy Future

MONITORING UNHEALTHY FOOD MARKETING

challenges and facilitators



Dr Magdalena Muc
Dr Mimi Tatlow-Golden
WP6

Best-ReMaP
Healthy Food for a Healthy Future
Co-funded by the European Union

THE GOAL

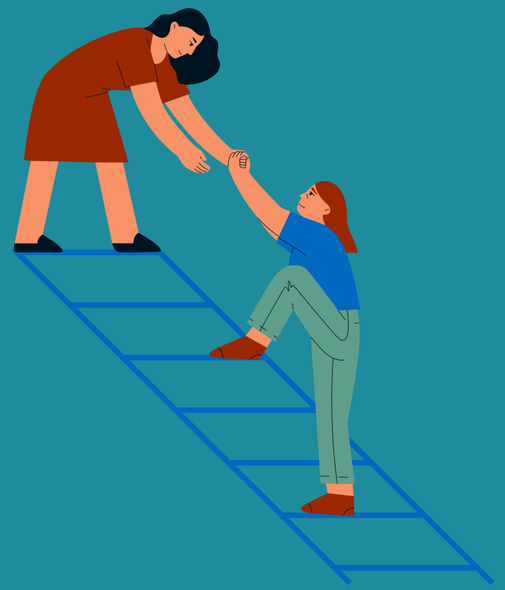
Comprehensive, **coordinated**, **replicable** and **regular** monitoring programme implemented in all Member States' using the EU-wide Monitoring Protocol

WHAT WE HAVE DONE SO FAR:

- Review of existing protocols
- Knowledge and information sharing workshop
- Consultations with experts including YP
- Draft of the EU-WHO protocol
- Piloting the EU_WHO protocol

Facilitators – elements of a good protocol

- [x] Comprehensive (monitor all channels) and regular (e.g. bienially)
- [x] Replicable and comparable data
- [x] Clear stepwise approach and resource planning
- [x] Use and build on existing protocols (WHO protocols and CLICK)
- [x] Classify methods based on involvement of children
- [x] Section on ethical issues and working with children
- [x] Supply coding sheets, templates and analysis plans
- [x] Use visual examples throughout
- [x] Expand sports sponsorship and other big events if possible
- [x] Experience and knowledge sharing network of countries and experts



EU-WHO PROTOCOL

Channel	Protocol
Media and brands survey	**Best-ReMaP**
TV	**WHO P&T + BRM feedback**
Internet - potential exposure (not working with children)	**WHO P&T + BRM feedback**
Internet - actual exposure (working with children)	**WHO CLICK+ BRM feedback**
Outdoor	**Best-ReMaP**
Engaging children (involving children and young people, child's rights and ethics, recruitment and retainment, dissemination)	**Best-ReMaP**
Resource planning (research question, time, skills, financial etc.)	**Best-ReMaP**

Piloting

22 projects

14 countries

Country	Affiliation	Protocol piloted	
Austria	BMASGK	Influencers	Digital media
Srpska Republica	PHI-RS	Influencers	
Estonia	NIHD	SM Capt Screen	
Finland	THL	SM Inv Exp	
Portugal	DGS	SM Inv Exp	
Slovenia	NIJZ	SM Inv Exp	
Croatia	HZJZ	SM pop brands	
Serbia	IPHS	SM pop brands	
Srpska Republica	PHI-RS	SM pop brands	
Austria	AGES	Media and brands survey	TV and Digital media Survey
Bosnia and Herzegovina	PHI- FBH	Media and brands survey	
France	SANTE	Media and brands survey	
Romania	INSP	Media and brands survey	
Cyprus	MoH CY	Media and brands survey	
Belgium	SCIENSANO	Outdoor	Outdoor
Croatia	HZJZ	Outdoor	
Ireland	UCC	Outdoor	
Portugal	DGS	Outdoor	
Serbia	IPHS	Outdoor	
Austria	AGES	TV	TV
France	SANTE	TV	
Portugal	DGS	TV	

SNAKES AND LADDERS OF IMPLEMENTATION

Lack of confidence/ experience	Lack of resources	Ethics – (i.e actual exposure online)	Recruitment of children	Technical issues with some DM tools	Lack of political support and industry/ ad lobby
Media literacy education at all levels	Funds to increase resources (time, people, skills)	EU-wide GDPR-compliant guidance/ agreement	Guidance in working with children + YP board	Improving and validating the tools	Knowledge and experience sharing

THANK YOU FOR THE PARTICIPATION!

Contact:

mimi.tatlow-golden@open.ac.uk

magdalena.muc@open.ac.uk

FOODS TO INCLUDE OR EXCLUDE IN FOOD MARKETING CRONTROLS

application of Nutrient Profile Models

Margarida Bica

What is Nutrient Profiling?

“the science of classifying or ranking foods according to their nutritional composition for reasons related to preventing disease and promoting health”.

WHO, Guiding Principles and Framework for the development or adaptation of nutrient profile models

General purposes of Nutrient Profiling

- Food classifications that refer to the nutrient levels in food

e.g. "high fat", "source of fibre", "high in fat, dugar or salt"

- Food classifications that refer directly to the effects of consuming the food on a person's health

e.g. "healthy", "less healthy", "healthies option"

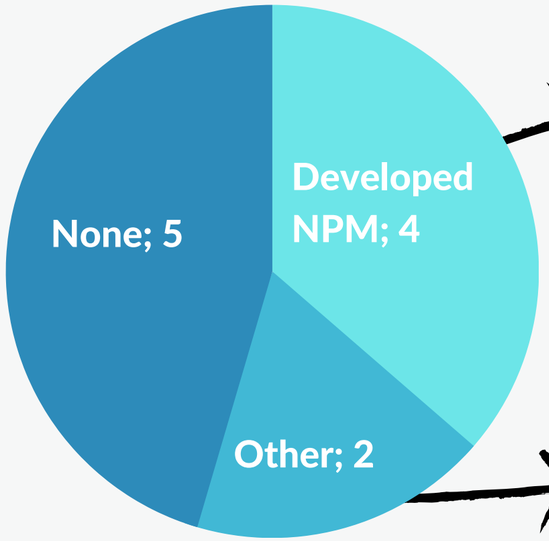
Nutrient Profile Model applications

Restricting marketing of unhealthy foods to children

- Front-of-Pack labelling
- Baby food
- Food taxes
- Healthy and sustainable diets

WHAT WE HAVE DONE SO FAR

Implementation of Nutrient Profile Models



Developed NPM
Based on the WHO Europe NPM (2 countries)

Other
EU Pledge and Nutri-Score

WHAT WE HAVE DONE SO FAR

Testing of the Nutrient Profile Model

March - June 2022

- Belgium
- Croatia
- Estonia
- Finland
- France
- Greece
- Ireland
- Latvia
- Portugal
- Romania
- Serbia
- Slovenia
- Spain

Database with a total of 108 578 products

Best-ReMaP
Healthy Food for a Healthy Future

World Health Organization
European Region

Category no.	Product category	Examples	Total fat (g)	Saturated fat (g)	Total sugars (g)	Added sugars (g)	Non-sugar sweeteners (g)	Sodium (g)	Energy (kcal)
1	Chocolate and sug ene top des	Chocolate confectionery Sugar confectionery (including jellies and boiled sweets; chewing-gum and bubble gum; caramels; liquorice sweets,							
2	Cak bisc pas swe and mak								
3	Sav								
4	Bev								
4.1	Jui								
4.2	Dai								
4.3	Pla								

Category no.	Product category	Examples	Total fat (g)	Saturated fat (g)	Total sugars (g)	Added sugars (g)	Non-sugar sweeteners	Sodium (g)	Energy (kcal)
4.4	Energy drinks	Beverages containing caffeine or other stimulants such as guarana, taurine, lucuronolactone and vitamins				0	0		
4.5	Soft ters	Water-based flavoured drinks (carbonated and still) Fruit and							
5	Edibl								
6	Brea								
7	Yogh crea								
8	Chee								
9	Reac conv comp								

Category no.	Product category	Examples	Total fat (g)	Saturated fat (g)	Total sugars (g)	Added sugars (g)	Non-sugar sweeteners	Sodium (g)	Energy (kcal)
10	Butter, other fats and oils	Butter, butter blends, margarine and oil-based spreads Vegetable oils		21				0.5	
11	Bread, bread products and crisp breads	Sweet and raisin breads (including brioche) Leavened bread (including breads made with all types of cereal flours, e.g., white or whole-grain wheat, spelt and rye) Flatbreads	17		12.5			0.5	
12	Fresh or dried pasta, rice and grains	Fresh or dried pasta and noodles Rice and grains	17		12.5			0.5	
13	Fresh and frozen meat, poultry, fish and similar	Fresh and frozen meat, poultry, game and fish Eggs	17						
14	Processed meat, poultry, fish and similar	Processed fish and seafood products (including tinned, raw and non-heat-treated; e.g.,, tinned tuna, smoked fish and fish fingers) Processed meat , poultry, game and preparations (including tinned, raw, heat- and non-heat-treated, e.g., ham, burgers, sausages and breaded meat products)	17					0.5	
15	Fresh and frozen fruit, vegetables and legumes	Fresh and frozen fruit, vegetables without additional ingredients (including starch vegetables, roots and tubers) Fresh and frozen legumes without additional ingredients.	Permitted						
16	Processed fruit and vegetables	Tinned, pickled, dried, battered and breaded vegetables and legumes Tinned, dried and pickled fruits Fruit and vegetable pouches	3		12.5	0		0.5	
17	Savoury plant-based foods/ meat analogues	Tofu and tempeh Meat analogues (including "veggie" burgers)	17			0	0	0.5	
18	Sauces, dips and dressings	Stock cubes Cooking sauces (including pasta sauces) Dips and dipping sauces Salad dressings Condiments (including tomato ketchups)	17			0	0	0.5	

Marketing is prohibited of any product, regardless of category, that contains > 1 g per 100 g total fat in the form of industrially produced trans fatty acids.

Published in the 7th March 2023

How to use the WHO NPM 2023?

- Ensure the product is covered by the NPM;
- Identify the food category into which the product falls;
- Cross-check the nutritional content of the food product against the thresholds -
- Food product should be assessed as sold or as reconstituted (if necessary) according to the manufacter's instructions;
- If marketing is considered for several products,e.g., in a restaurante meal, each item must meet the relevant nutrient criteria;

THANK YOU

Contact: bicam@who.int

QUESTIONS & ANSWERS SESSION