



Dietitians Association of Australia submission to the Australian Communications and Media Authority draft Children's Television Standards (CTS) 2008.

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Contact for liaison and notices

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DAA maintains its position made in August 2007. The main points are:

1. DAA wants to see a system of government regulation of food and beverage marketing to children (0-12 years) that really works to help them eat better. 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 television advertisements to children, and undermines positive health promotion programs and campaigns. There is a tool available now, developed by FSANZ for use in health claims, which could be adapted to be appropriate for the purpose of regulating food and beverage television advertising to children.
2. An aspect of food and beverage marketing that has gained much attention is the use of the television medium to advertise to children. We believe television can also be a powerful medium for promoting positive messages about healthy eating and it would be a missed opportunity for promoting positive nutrition messages to ban all food and beverage advertising to children.
3. DAA supports 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.
4. DAA believes changes 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.

DAA comments on revised CTS

DAA does not believe the amendments to the CTS go far enough in protecting children. DAA believes the ACMA is not meeting its aim through the revised CTS, ie. "The aim of the proposed changes to the CTS is to ensure that children continue to be protected from the possible harmful effects of television and are specifically catered for in programming."¹

Nutrient profiling systems have resulted in increased availability of healthier foods through product development and reformulation. ACMA states¹ that there is a "lack of a tool in Australia to identify high fat, salt, sugar (HFSS) foods". This is incorrect. Food Standards Australia New Zealand (FSANZ) have developed 'The Health Claims Nutrient Profiling Scoring Criteria Pilot Calculator'. The calculator has been tested with over 10,000 foods using a database of Australian and New Zealand food products. The criteria were based on a nutrient profiling model designed by M Rayner and colleagues and adopted by the UK Food Standards Agency. The UK model, developed to tighten controls on the advertising of children's foods high in saturated fat, sodium and sugar was overseen by an expert group comprising of nutrition scientists, dietitians, food industry and consumer organisation representatives. The criteria considers the energy, saturated fat, sodium and sugar content of food while recognising the role of lean meat, dairy products, fish, fruit, vegetable and nuts and unsaturated fats as important components of a healthy diet². Though it was not designed for use in this context, it has recently been adopted for use in New Zealand by the NZ Television Broadcaster's Council (NZTBC) in a new (since July 2008) self regulation process. Advertising also needs to pass an assessment by an individual/independent expert, so does not solely rely on the profiling system. For more information regarding New Zealand's system see http://nztbc.co.nz/children_tv/images/childrens_brochure_2008.pdf DAA would like to see ACMA consider the NZ system.

The report on the *Television advertising to children: a review of contemporary research on the influence of television advertising directed to children* was disappointing. No nutrition, public health, or epidemiology expertise appears to have been sought by ACMA in the Brand review. This is in contrast with the UK Food Standards Agency who commissioned a review (Hastings Report), and the US Institute of Medicine (IOM) who have made similar investigations that did seek out public health and nutrition advice in addition to psychology, health economics, communications and media, business and law expertise.

DAA has concerns that the methodology used to assess the literature was seriously flawed and a number of relevant sources of evidence were omitted from the Brand review. For example, a systematic review by the US Institute of Medicine³ which concluded that food advertising has a direct effect on children's food consumption. The IOM report³ concludes that "ample information and studies were available for the

committee to draw certain key conclusions, including that television advertising influences the food preferences, purchase requests, and diets, at least of children under the age of 12 years, and is associated with the increased rates of obesity among children and youth. The committee could not state the relationship in quantitative terms, but it is clear that even a small effect across the entire population would represent an important impact."

The quality of children's programs was highlighted by the report as a likely side effect of reducing food advertising to children in children's viewing periods. There has been some research undertaken in this area overseas and this was not found to be the case. A study done 15 years after the enactment of legislation banning advertisement to children in Quebec, Canada, compares television programming in a city that is not part of the legislated children's television marketing regulation area and programming in a city that is a part of the regulated area. The study shows richer, more diverse, and better quality programming in the regulated area in Quebec, with less than 10 percent of the Quebec children's audience choosing to watch US television programming⁴.

The ACMA report itself does not support the idea that advertising is needed to support quality children's programming: The ACMA Issues Paper states that with regard to Australian produced drama:

"Networks' investment in C drama is relatively low compared with their spending on adult drama, providing the financial backing for around one third of total expenditure compared with around two thirds of adult drama expenditure." (p10)

The Issues Paper also states the Film Finance Corporation has been the "key investor in children's drama" and that "Children's dedicated programming is less attractive to advertisers" (p13).

New information for ACMA's consideration

In addition to those mentioned^{3,4} above:

1. The recent Access Economics report⁵ found that in 2008, 3.71 million Australians (17.5%) were estimated to be obese, i.e. 1.76 million males (16.5% of all males) and 1.95 million females (18.5% of all females). They also reported that over 290,000 young Australians (aged 5-19 years) are obese. The financial cost of obesity in Australia in 2008 was estimated as \$8.283 billion. This included productivity costs health system costs, carer costs and deadweight loss (from transfers – taxation revenue forgone, welfare and other government payments) and other indirect costs.
2. The recently released 2007 Australian National Children's Nutrition and Physical Activity Survey⁶ 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 4 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 9–16 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).

The Survey also shows that rates of childhood obesity have slowed. However new regulations should be mindful that obesity is not the only health reason to make changes to children’s television advertising. The survey showed that poor nutrition is still a large problem in children, for example, the consumption of sodium in all age groups exceeded the recommended upper level of intake and many children are potentially at risk due to inadequate calcium and magnesium intake.

Specifically, in relation to television advertising to children (0-12 years) DAA continues to call 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.
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* (currently under review) 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. The assessment system 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. Currently there is a tool developed by FSANZ for use in health claims which could be adapted to be appropriate for the purpose of regulating food and beverage television advertising to children.
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 **at least** C and P rated programs and beyond.
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).

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.

References

1. Review of the Children's Television Standards 2005, *Report of the Review*, August 2008.
2. FSANZ. Nutrient Profiling Calculator.
<http://www.foodstandards.gov.au/foodmatters/healthnutritionandrelatedclaims/nutrientprofilingcal3499.cfm> [Accessed 15/10/2008]
3. Committee on Food Marketing and the Diets of Children and Youth. J. Michael McGinnis, J Appleton Gootman, V. I. Kraak. *Food Marketing to Children and Youth: Threat or Opportunity?* The National Academies Press, Washington DC, 2006.
4. Caron AH. *Television programs for children, financial profitability or social profitability, a social choice*. Conference on marketing in schools CSQ 2000 – available at <http://www.csq.qc.net/sites/1676/options/opt-20/andreacar.pdf> [Accessed 15/10/2008] (This article is in French.)
5. Access Economics. 2008. *The growing cost of obesity 2008: three years on*. Diabetes Australia.
6. CSIRO. *Main Findings of the 2007 Australian National Children's Nutrition and Physical Activity Survey*. 2008.
<http://www.health.gov.au/internet/main/publishing.nsf/Content/phd-nutrition-childrens-survey> [Accessed 15/10/2008]