

**The Committee on Advertising Practice (CAP) Consultation: food
and soft drink advertising to children**

July 2016

The Royal Society for Public Health (RSPH) is an independent, multidisciplinary charity dedicated to the improvement of the public's health and wellbeing. We have a membership of over 9000 members working in public health and healthcare management.

Our vision is that everyone has the opportunity to optimise their health and wellbeing, and we seek to achieve this through our qualifications, conference and training programmes and policy and campaign work.

One of the most pressing public health issues we are facing is the epidemic of childhood obesity. Having released our own childhood obesity policy paper in late 2015 calling for the restriction of junk food advertising to children online and on social media, and more recently, the Child's Obesity Strategy, putting forward solutions from young people themselves, we are very pleased to provide a response to this consultation.

Work of the Royal Society for Public Health

'Tackling the UK's childhood obesity epidemic' policy paper

In November 2015, we released a policy paper that looked at ways in which we could tackle the growing number of our children that are leaving primary school obese and going on to become obese teens and adults. The paper featured a wide-range of 'calls to action' that included: introducing an hour of physical activity for primary school children, ending junk food advertising at sporting and family events and **restricting junk food advertising to children online and on social media**. This last call to action is most relevant to this consultation and one that we wish to focus on.

The 2006 Ofcom ban on junk food advertising around children's programming on TV was a very positive step in the right direction. However, there is the issue of ads still being shown around programmes viewed by whole families where children-specific rules and regulations may not apply as they are not the primary target audience. Also, with the proliferation of the internet, particularly among young people, rules and restrictions are in desperate need of being updated to be relevant to how children are accessing information. Internet ads must be brought in line with other forms of advertising.

Almost 3 in 5 children (59%) are thought to have used social media by the age of 10, routinely ignoring age limits to sign up. Junk food advertisers have been keen to exploit this by signposting to their websites on social networking sites aimed at children, with 75% of websites advertising HFSS products. This new bombardment of our children and young people needs to be addressed. Our own research has shown that 75% of UK adults would support stronger regulation in this area.

‘The Child’s Obesity Strategy: How our young people would solve the childhood obesity crisis’

In late June 2016, we released our ‘Child’s Obesity Strategy’. The report was written with the help of young people themselves telling us the solutions they believed would solve the childhood obesity crisis. It’s the first time that young people have been consulted on the matter and their views put forward in this way.

The report contained many recommendations covering a wide-range of issues that included better food labelling, making takeaways more of a treat, supermarkets promoting and rewarding healthier options and advocating healthy activities during school and leisure time. However, restrictions on advertising was a reoccurring theme amongst the children we worked with. They told us that they want greater restrictions on fast food advertising through channels such as social media and websites as three quarters have seen unhealthy food adverts via these platforms and over half had ordered a fast food takeaway using their phone. They feel under siege from adverts when they are browsing and socialising online, a vast amount of which are promoting HFSS products.

Another issue raised was bus tickets featuring junk food deals printed on the back of them. Many children across the UK use bus services and we would like to see the nature of what can be printed on tickets regulated to ensure that this isn’t yet another avenue for which unhealthy foods can be pushed on children.

Restrictions on HFSS product advertising

- a) Should the CAP Code be updated to introduce tougher restrictions on the advertising of products high in fat, salt or sugar (HFSS)?

Yes – the current rules state that: “Advertisements must not condone or encourage practices that are detrimental to children’s health.” The evidence is clear that when HFSS food is consumed too often by children it is detrimental to their physical and mental development. We should be limiting its exposure to children through advertising as much as possible to de-normalise unhealthy food.

- b) Should CAP use the existing Broadcast Committee of Advertising Practice (BCAP) guidance on identifying brand advertising that promotes HFSS products to define advertising that is likely to promote an HFSS product for the purposes of new and amended rules?

Yes

Selecting a nutrient profiling model

- c) Should the CAP Code adopt the Department of Health (DH) nutrient profiling model to identify HFSS products?

Yes – the Department of Health’s nutrient profiling model is the best mode available of identifying HFSS products.

Existing prohibitions on the use of promotions and licensed characters and celebrities

- d) There are existing rules in place relating to the creative content of food and soft drink advertising directed at children aged 11 and younger. Should these rules now be applied to advertising for HFSS products only?

No – existing rules are sufficient.

Introducing media placement restrictions

- e) Should CAP introduce a rule restricting the placement of HFSS product advertising?

Yes – we would strongly support restrictions on media placement, particularly on websites and social media aimed at young people. Our work has consistently shown us that young people are under a constant stream of bombardment from junk food advertising, especially online. New restrictions in this area should consolidate rules across all forms of media.

- f) If a media placement restriction is introduced, should it cover media directed at or likely to appeal particularly to children:
i) Aged 11 or younger?

No – advertising of HFSS products target children older than this as well and the age range should reflect this.

- ii) Aged 15 or younger?

Yes – Children are highly open to influence right the way through their teens. We need to be restricting media placements that appeal to children across the board to ensure consistency. We know that 20% of 8-11 years olds own a smart phone (with access to the internet and adverts) and this figure jumps to 65% for 12-15 year olds. The vast number of children with internet access in their pocket all day every day most certainly means we need to be regulating the media placements they are exposed to. We wouldn’t dream of exposing children to cigarette or alcohol advertising on the internet and social media aimed at them – there is no reason HFSS products should be any different given the obesity epidemic we are currently facing – with 1 in 5 children now leaving primary school obese and sugary drinks accounting for 30% of 4-10 years olds’ daily sugar intake.

Defining the audience

It is often straight-forward to identify media targeted at children. Where media has a broader audience, CAP uses a “particular appeal” test – where more than 25% of the audience are understood to be of a particular age or younger – to identify media that should not carry advertising for certain products media.

- g) Should the CAP Code use the 25% measure for the purpose of restricting HFSS product advertising?

No – the ‘particular appeal’ test would be difficult to implement for non-broadcast media. We would like to see CAP devise and test the efficacy of a new means by which to measure.

Application to different media

- h) Should CAP apply the placement restriction on HFSS product advertising to all non-broadcast media within the remit of the Code, including online advertising?

Yes – this is potentially the most important point of this consultation for us. Our work on childhood obesity and work with young people themselves has highlighted that this area of regulation is woefully behind the curve given its influence over the decisions of young people. While the internet is a fantastic place for children to learn and explore it has become a platform for junk food advertisers to hound children with adverts for unhealthy HFSS products. We wouldn’t allow this to continue via any other form a media aimed at children - online via websites and social media should be no exception.

Key recommendations and conclusions

- The Royal Society for Public Health is largely supportive of the proposed policy recommendations put forward by CAP. **The prohibiting of placement of HFSS product advertising in media targeted at or likely to appeal particularly to children must include online media, including websites and social media.**
- Obesity does not just stop when a child reaches a certain age. **We would like to see the new rules applying to media that is targeted at children under 16.** Although it is important to focus efforts on children when they are as young as possible to engrain healthy habits, it is also important to set rules for adverts that are targeted at the widest age-range of children possible so as to have maximum positive impact on their health and wellbeing.

Thank you for the opportunity to respond to this consultation. For more information please contact Matt Keracher, Policy and Communications Executive on mkeracher@rsph.org.uk