

Television advertising to children: Ethical considerations with regard to advertising of unhealthy foods and drinks

The marketing of foods and non-alcoholic beverages with a high content of fat, sugar or salt reaches children throughout the world. Efforts must be made to ensure that children everywhere are protected against the impact of such marketing and given the opportunity to grow and develop in an enabling environment – one that fosters and encourages healthy dietary choices and promotes the maintenance of healthy weight.

Dr Ala Alwan, Assistant Director-General, Noncommunicable Diseases and Mental Health, World Health Organization (cited in WHO 2010: 4)

Executive summary

This policy brief deals with the issue of television advertising of food products to children in South Africa. During 2012, a study was undertaken by the Human Sciences Research Council (HSRC), the South African Medical Research Council (MRC) and the University of Athabasca in Canada to examine the extent of television advertising of food products to children by the SABC across its four television broadcasting stations. The study evaluated the number and type of food products advertised in order to determine whether children were being exposed to unhealthy food and beverage advertising.¹

Four key findings were reported by the study, which involved recording food-related advertisements (ads) over a period of one week on four SABC television stations between 1500 and 2100 every day:

- A total of 665 food-related TV ads were recorded.
- Nearly 50% of food ads appeared during family viewing time and the most frequent ads were for desserts and sweets, fast foods, starchy foods and sweetened beverages.
- The majority of food ads shown to both children and adults would not foster good health, despite the health claims made, since they were high in fat, sugar and/or salt.
- The majority of the alcohol ads (93 ads, 67%) fell into the children and family viewing period.

¹ The study has been published and is available as Mchiza ZJ, Temple NJ, Steyn NP, Abrahams Z & Clayford M (2013) Content analysis of television food advertisements aimed at adults and children in South Africa. *Public Health Nutrition* 16(12): 2213–2220.

Based on our findings, a study of recent literature and the Department of Health draft Foodstuffs, Cosmetics and Disinfectants Act of 2007, the following recommendations were made:

Food marketers have realised the importance of targeting children. They want to develop positive, long-lasting brand relations with young children, teens and parents in order to create brand loyalty in the future. Highlighting this importance, marketers spend large sums of money attempting to persuade children and youth to desire particular food products.

(Da Fonseca 2010: 12)

- The prohibition of advertising of foods and beverages high in fat, sugar and salt in accordance with the World Health Organization (WHO) recommendations.
- The prohibition of alcohol advertisements.
- Restriction on the use of advertising techniques that appeal to children. Advertisements should not use cartoon characters and/or animation, or include promotional offers and gifts or tokens.

It was recommended that the SABC screen food and beverage advertisements to ensure that they meet the recommendations above before being shown on SABC channels. The screening committee members should be nominated by the Nutrition Directorate of the Department of Health.

Introduction and background

Over the past two decades many studies have shown that obesity, and particularly childhood obesity, is increasing globally. South Africa is a middle-income country and has one of the highest levels of obesity in the world. A recent national study found that 14% of children 1 to 9 years old, and 51.5% of women aged 16 to 35 years, were overweight (Labadarios et al. 2008). The recent South African National Health and Nutrition Examination Survey (SANHANES) found that 16.2% of boys and 23.6% of girls aged 2 to 14 years were overweight (Shisana et al. 2013). These percentages are much higher than those of any other sub-Saharan African country.

An unhealthy diet and sedentary lifestyle are the primary risk factors for developing obesity. The risk starts during childhood and continues throughout life. To decrease the future risk of developing obesity and related conditions, such as diabetes and heart disease, children should consume a healthy diet.

Television is a powerful medium for marketing and advertising products. There is evidence to suggest that more frequent TV watching is associated with increased consumption of sweet and salty snacks, sweetened drinks, and fast foods, and lower intakes of fruits and vegetables. Furthermore, children with a high body mass index (BMI) – indicative of being overweight – are more likely to be exposed to fast-food advertising. A large number of studies have documented the association between number of hours/ads of TV watched and the prevalence of obesity (Andreyeva et al. 2011). Spending more time watching TV may lead to decreased physical activity and increased snacking. It has been found that TV advertising contributes to childhood obesity by an estimated 16% to 40% in the USA, 10% to 28% in Australia and Italy, and 4% to 18% in Britain (Goris et al. 2010).

The WHO recommends the development of policies aimed at regulating the marketing of foods high in saturated fats, trans fatty acids, free sugars and salt to children in order to foster a healthy lifestyle and prevent obesity and other chronic diseases (WHO 2010).

Currently, there are policies regulating television food advertising in the USA (AHA 2012), the United Kingdom (ASA, UK 2011), Canada (ASC 2006), New Zealand (ASA, NZ 2010), Australia (AANA 2009) and elsewhere. These policies range from a total ban on advertising to children (Sweden), to restrictions on the type of food advertised (UK) as well as the number of advertisements (Australia), and to the designation of specific time slots when advertisements can be aired (Norway).

There has been little research into food advertising on TV in South Africa. A study undertaken between 2003 and 2005 on children 7 to 15 years old found that children were exposed to 24 minutes of advertising per day (Cassim 2010). One small study carried out in 2007 reported

that approximately 55% of advertisements were for fast-food restaurants or foods of poor nutritional value (Temple et al. 2008).

In the present study undertaken by the HSRC, the MRC and the University of Athabasca, we further investigated advertising of food and beverages on TV in SA (Mchiza et al. 2013). The aim of the study was to determine the number of ads for food and beverages appearing on four SABC TV channels in order to determine how healthy their content was. The channels targeted by most advertisers are SABC 1, 2, 3 and eTV, which are channels viewed by the majority of low- and middle-class South Africans, who are also ethnically diverse. We recorded the types of products advertised and the time of day the ads appeared, marketing techniques, and the nature of claims used to market food as well as alcoholic beverages.

Research study

Television programmes on each of the four TV channels mentioned above were recorded for six hours each day between

1500 and 2100 for seven consecutive days within a period of four weeks. The ads were divided into three groups:

- Those aimed at children (shown around the 1500 to 1700 time slot, when most educational programmes, infomercials and cartoons are broadcast).
- Those aimed at both children and adults (shown around the 1700 to 1900 time slot, when most non-restriction soaps, family drama, talk shows and early news are broadcast).
- Those aimed at adults (shown around 1900 to 2100, when late news as well as semi- to full-restriction movies are broadcast).

The ads were coded to identify the TV channel, the language of broadcast, the name and type of programme they appeared in, the date and time of day, the target audience, the name of the company placing the advert, the name of the product advertised and its description, and a health claim, if such was made (Mchiza et al. 2013).

Table 1: Different food and non-food product groups advertised on South African TV by time slot

Type of product	Time slots			Total ads	Total %
	1500–1700 Children	1700–1900 Family	1900–2100 Adults		
Meat, chicken and fish	3	11	1	15	2.2
Starchy foods	24	27	16	67	10.1
Desserts and sweets	39	37	18	94	14.1
Sweetened drinks	15	14	12	41	6.2
Margarines and spreads	3	5	4	12	1.8
Franchises and fast foods	24	37	25	86	12.9
Infant formula	3	2	0	5	0.8
Milk and dairy products	11	14	10	35	5.3
Fruit and vegetables	1	4	2	7	1.1
Alcohol	12	81	47	140	21
Coffee, tea and condiments	15	35	8	58	8.7
Slimming products	2	2	0	4	0.6
Multivitamin products	2	7	6	15	2.3
Supermarket and pharmacy promotions	10	50	26	86	12.9
Total	164	326	175	665	100

Source: Adapted from Mchiza et al. (2013)

Key findings

A total of 665 food-related TV ads, divided into four different advert groups, were recorded, namely:

- food and beverage items (84.2%);
- slimming products (0.6%);
- multivitamins (2.3%); and
- promotions for supermarkets (12.9%).

Table 1 shows that there were 11 different product categories under the food group category, with the majority of ads being for alcohol, followed by desserts and sweets; fast foods; starchy foods; tea/coffee; sweetened drinks; dairy products; meat; chicken and fish; margarine and spreads; and infant formula products. Only 1.1% of the ads were for fruit and vegetables.

The highest number of ads was recorded during the family viewing time of 1700 to 1900, namely 326 (49.0%) ads. During children (1500 to 1700) and adult (1900 to 2100) viewing times, there were 164 (24.7%) and 175 (26.3%) ads respectively.

The largest number of ads were seen on SABC 2 and 3 (197 and 201 ads respectively), compared to SABC 1 and eTV (120 and 147 ads respectively). Out of the total of 665 ads on the four channels, 76 ads (11.4%) had health claims. The ads with health claims were for

- starchy food (38 ads, 50%);
- multivitamins (14 ads, 18.4%);
- supermarket and pharmacy promotions (7 ads, 9.2%);
- margarine and spreads (7 ads, 9.2%);
- infant formula (5 ads, 6.6%);
- slimming products (4 ads, 5.3%); and
- desserts and sweets (1 ad, 1.3%).

The majority of ads that carried claims for enhanced well-being and improved performance were for food (95.0% and 56.3% respectively). By contrast, pharmacy

promotions carried the majority of claims for improved health, improved immune function and balanced nutrition (46.7%).

Out of the total ads recorded, the majority (62%) used ordinary people, such as adult men and women, children or families, to promote their products. Twenty-two per cent used a mix of personalities, such as celebrities, professionals (pharmacists and chefs) as well as ordinary people. Ten per cent of ads were presented using celebrities only, such as actors, sportspeople, and TV personalities. The rest of the ads (6%) used professionals and popular cartoon characters.

Current policies on food advertising

While there are regulations relating to the labelling of food products, there are currently no regulations governing the advertising of food products on television to children in this country.² The Advertising Standards Authority (ASA) of South Africa provides guidelines on advertising of food and beverages to children by means of its Code of Advertising Practice.³ However, the ASA is not a controlling or enforcing body and only reacts to complaints. This means that ads on food and beverages are not screened and checked before they appear.

In 2007, the Department of Health published a draft Foodstuffs, Cosmetics and Disinfectants Act. This draft included prohibitions on advertising certain foods regarded as not being essential to a healthy lifestyle. It included items such as crisps, confectionary, certain fast foods and carbonated drinks. The draft act also included prohibition of the use of gifts, tokens, cartoon characters, animation and puppets in advertising to children. However, the draft was put on hold, largely because of the heated debates and outcry

² This is reflected in Government Notice No. R 146. Available at <http://www.hahnlaw.co.za/Food%20Labelling%20Regs%20R%20146%20of%201March%202010.pdf>

³ Appendix J of the Code of Advertising – Food and Beverage Code. Available at http://www.asasa.org.za/Default.aspx?mnu_id=114

from industry and the broader public (Igumbor et al. 2012).

Conclusion

Overall, the television ads shown during the study would favour the selection of foods and beverages associated with weight gain and unhealthy diet. These foods and beverages include fast foods, dessert and sweets, starchy foods and sweetened drinks, since these categories are high in kilojoules, sugar, fat and salt. On the other hand, health-enhancing foods, such as fruit and vegetables, only comprised around 1% of advertisements. While we are aware that parents are ultimately responsible for their children's diet, local research has suggested that parents believe that TV viewing does affect their children's nutritional choices as children tend to prefer unhealthy foods, such as snack foods (Da Fonseca 2010). The advertising of snack foods therefore makes it less likely that the children will eat nutritious meals.

Recommendations

An unhealthy diet is a risk factor for obesity and non-communicable diseases such as diabetes and heart disease. The risk starts during childhood and continues throughout life. To decrease the future risk of obesity and these non-communicable diseases, children should follow a healthy diet. Policy and regulations need to be adopted in order to ensure that children are not exposed to unhealthy foods during the children and family viewing times on television.

It is recommended that there be a restriction on the type of food and beverage advertisements allowed during children and family television viewing times. The following restrictions are recommended:

1. A prohibition of foods and beverages high in fat, sugar and salt, in accordance with the WHO recommendations.

2. A prohibition of alcohol advertisements.
3. Restriction on the use of advertising techniques that children find appealing. It is recommended that advertisements should not use cartoon characters, puppets or animation, or include promotional offers and gifts or tokens

It is further recommended that food and beverage advertisements be pre-screened by the SABC to meet the recommendations above before being shown on SABC television channels. The screening committee should ideally be nominated by the Nutrition Directorate of the Department of Health, since that department has the knowledge and expertise to select nutrition experts. The SABC would be the ideal body to undertake screening of advertisements since the corporation already has a screening system for infomercials that requires a clearance certificate to be obtained before the infomercial can be shown.

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