



SET OF RECOMMENDATIONS
ON THE MARKETING OF FOODS
AND NON-ALCOHOLIC BEVERAGES
TO CHILDREN



World Health
Organization

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Table of contents

Foreword	4
Introduction	5
Set of recommendations on the marketing of foods and non-alcoholic beverages to children	6
Evidence	7
Recommendations	8
<i>Rationale</i>	8
Recommendations 1 and 2	
<i>Policy development</i>	8
Recommendations 3, 4, 5 and 6	
<i>Policy implementation</i>	10
Recommendations 7, 8 and 9	
<i>Policy monitoring and evaluation</i>	11
Recommendations 10 and 11	
<i>Research</i>	12
Recommendation 12	
Resolution of the Sixty-third World Health Assembly adopted 21 May 2010: WHA63.14 Marketing of food and non-alcoholic beverages to children	13

Foreword

Noncommunicable diseases (NCDs) represent a leading threat to human health and socioeconomic development. Cardiovascular diseases, cancers, chronic respiratory diseases and diabetes cause an estimated 35 million deaths each year, 80% of which occur in low- and middle-income countries. The already heavy burden caused by NCDs, along with the fact that the majority of these deaths are premature and could be averted, provide a strong public health and policy imperative to act.

Unhealthy diet is a key modifiable risk factor for NCDs. Unless addressed, unhealthy diets — in conjunction with other risk factors — increase NCD prevalence in populations through raised blood pressure, raised blood glucose, abnormal blood lipids and overweight/obesity. While deaths from NCDs primarily occur in adulthood, the risks associated with unhealthy diet begin in childhood and build up throughout life.

Overweight and obesity now ranks as the fifth leading risk for death globally. It is estimated that in 2010 more than 42 million children under the age of five years are overweight or obese, of whom nearly 35 million are living in developing countries. Overweight during childhood and adolescence is associated not only with an increased risk of adult obesity and NCDs, but also with a number of immediate health-related problems, such as hypertension and insulin resistance.

Today's food environment is quite different to that experienced by previous generations. Globally, an extensive variety of food and drink products are now available in most markets, offering palatability, convenience and novelty. But at the same time, the wide availability and heavy marketing of many of these products, and especially those with a high content of fat, sugar or salt, challenge efforts to eat healthily and maintain a healthy weight, particularly in children.

Advertising and other forms of food and beverage marketing to children are extensive and primarily concern products with a high content of fat, sugar or salt. Evidence shows that television advertising influences children's food preferences, purchase requests and consumption patterns. Further, a wide range of techniques are used to market these products, reaching children in schools, nurseries, and supermarkets; through television and the Internet; and in many other settings.

The purpose of the set of recommendations presented here is to guide efforts by Member States in designing new and/or strengthening existing policies on food marketing communications to children. The recommendations were developed with substantial input from Member States and other stakeholders and endorsed by the Sixty-third World Health Assembly in May 2010. They reflect special concerns raised during their development and highlight the need for broad intersectoral collaboration, international collaboration and stakeholder support.

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 food environment — one that fosters and encourages healthy dietary choices and promotes the maintenance of healthy weight.

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Introduction

This document calls for global action to reduce the impact on children of marketing of foods high in saturated fats, *trans*-fatty acids, free sugars, or salt. It is developed to facilitate the policy processes and mechanisms to reach this aim, as expressed in the two key documents contained in this publication: the set of recommendations on the marketing of foods and non-alcoholic beverages to children and the resolution endorsing the set of recommendations.

The document reflects the increased recognition over the past decade of the importance of addressing NCDs, most clearly expressed in the action plan for the global strategy for the prevention and control of noncommunicable diseases (2008-2013), endorsed by the Sixty-first World Health Assembly in May 2008 (resolution WHA61.14). The foundation for the action plan was laid with the endorsement of the global strategy's political framework in May 2000, when the WHO Director-General was requested to continue giving priority to the prevention and control of NCDs (resolution WHA53.17). As requested by the Sixtieth World Health Assembly in May 2007 (resolution WHA60.23), the action plan for the global strategy was developed to translate the global strategy into concrete action.

Further, in resolution WHA 60.23, the Director-General was requested "... to promote responsible marketing including the development of a set of recommendations on the marketing of foods and non-alcoholic beverages to children in order to reduce the impact of foods high in saturated fats, *trans*-fatty acids, free sugars, or salt, in dialogue with all relevant stakeholders, including private-sector parties, while ensuring avoidance of potential conflict of interest".

After an extensive consultation process and discussions during the 126th session of the Executive Board, the set of

recommendations was presented to the Sixty-third World Health Assembly in document A63/12 on prevention and control of noncommunicable diseases: implementation of the global strategy. With the adoption of resolution WHA63.14 on marketing of food and non-alcoholic beverages to children, the set of recommendations was endorsed by the Sixty-third World Health Assembly.

The set of recommendations reiterates the goal of the Global Strategy on Diet, Physical Activity and Health, endorsed by the Fifty-seventh World Health Assembly in 2004, to guide the development of an enabling environment for sustainable actions at individual, community, national and global levels. More specifically, the set of recommendations supports the Global Strategy's recommendation to Member States to develop appropriate multisectoral approaches to deal with the marketing of food to children. The recommendations also complement objective 3 of the action plan for the global strategy for the prevention and control of noncommunicable diseases, which identifies as a proposed key action for Member States "to prepare and put in place, as appropriate, and with all relevant stakeholders, a framework and/or mechanisms for promoting the responsible marketing of foods and non-alcoholic beverages to children, in order to reduce the impact of foods high in saturated fats, *trans*-fatty acids, free sugars, or salt."

The structure of this document is as follows. The set of recommendations includes a description of the background and process for the development of the recommendations, an evidence section and 12 recommendations structured under five sub-headings: rationale; policy development; policy implementation; policy monitoring and evaluation; and research. The resolution contains a preamble and proposed actions for Member States and the Director-General.

Set of recommendations on the marketing of foods and non-alcoholic beverages to children¹

1. The Sixtieth World Health Assembly, in resolution WHA60.23 on prevention and control of noncommunicable diseases: implementation of the global strategy, requested the Director-General "... to promote responsible marketing including the development of a set of recommendations on the marketing of foods and non-alcoholic beverages to children, in order to reduce the impact of foods high in saturated fats, *trans*-fatty acids, free sugars, or salt, in dialogue with all relevant stakeholders, including private-sector parties, while ensuring avoidance of potential conflict of interest".

2. The Sixty-first World Health Assembly in resolution WHA61.14 endorsed the action plan for the global strategy for the prevention and control of noncommunicable diseases. The action plan urges Member States to continue to implement the actions agreed by the Health Assembly in resolution WHA60.23. In Objective 3 (paragraph 24 *Promoting healthy diet*, (e) the action plan identifies as a proposed key action for Member States "to prepare and put in place, as appropriate, and with all relevant stakeholders, a framework and/or mechanisms for promoting the responsible marketing of foods and non-alcoholic beverages to children, in order to reduce the impact of foods high in saturated fats, *trans*-fatty acids, free sugars, or salt".

3. In the fulfilment of this mandate, in November 2008, the Director-General appointed members of an ad hoc expert group to provide her with technical advice on appropriate policy objectives, policy options and monitoring and evaluation mechanisms. The group was provided with an updated systematic review that confirmed previous findings that globally foods high in fat, sugar or salt were being extensively marketed to children.

4. Two meetings were held with representatives of international nongovernmental organizations, the global food and non-alcoholic beverage industries, and the advertising sector. The objectives of these meetings were to identify policy initiatives and processes and tools for monitoring and evaluation in the area of marketing of foods and non-alcoholic beverages to children.

5. The Secretariat drew on the advice from the expert group and input from the stakeholder meetings to write a working paper that provided a framework for regional consultations with Member States. These consultations elicited the views of Member States on the policy objectives, policy options, and monitoring and evaluation mechanisms presented in the working paper. By September 2009, 66 Member States had submitted a response to the consultations. Additional input on the working paper was provided through two follow-up stakeholder meetings with representatives of international nongovernmental organizations, the global food and non-alcoholic beverage industries, and the advertising sector.

6. It was clear from the consultations that Member States view marketing of foods and nonalcoholic beverages to children as an international issue and that there is a need to ensure that the private sector markets its products responsibly. The consultations also showed that policies currently in place in Member States vary in their objectives and content, approach, monitoring and evaluation practices, and the ways in which stakeholders are involved. Approaches range from statutory prohibitions on television advertising for children of predefined foods to voluntary codes by certain sections of the food and advertising industry. Several Member States indicated that they would need further support from the Secretariat in the areas of policy development, monitoring and evaluation.

7. Cross-border marketing was raised as a concern by 15 Member States. Many countries, including those with restrictions in place, are exposed to food marketing in their country from beyond their borders and the Member States indicated that the global nature of many marketing practices needs to be addressed.

8. Marketing of foods and non-alcoholic beverages to children in schools and pre-school establishments was a concern expressed by some Member States. The special situation of schools as a setting where children are a captive audience and the health-promoting role that schools should have were identified as factors that need also to be addressed in the recommendations.

¹ As previously presented in document A63/12.

9. The main purpose of these recommendations is to guide efforts by Member States in designing new and/or strengthening existing policies on food marketing communications to children in order to reduce the impact on children of marketing of foods high in saturated fats, *trans*-fatty acids, free sugars, or salt.

10. The recommendations are set out in **bold** text throughout. The recommendations are structured into the following five sections: Rationale; Policy development; Policy implementation; Policy monitoring and evaluation; and Research.

Evidence

11. Unhealthy diet is a risk factor for noncommunicable diseases. The risks presented by unhealthy diets start in childhood and build up throughout life. In order to reduce future risk of noncommunicable diseases children should maintain a healthy weight and consume foods that are low in saturated fat, *trans*-fatty acids, free sugars, and salt. Unhealthy diets are associated with overweight and obesity, conditions that have increased rapidly in children around the world over recent years.

12. Evidence from systematic reviews on the extent, nature and effects of food marketing to children conclude that advertising is extensive and other forms of food¹ marketing² to children are widespread across the world.³ Most of this marketing is for foods with a high content of fat, sugar or salt. Evidence also shows that television advertising influences children's food preferences, purchase requests and consumption patterns.

13. The systematic reviews show that, although television remains an important medium, it is gradually being complemented by an increasingly multifaceted mix of marketing communications that focuses on branding and building relationships with consumers. This wide array of marketing techniques includes advertising, sponsorship, product placement, sales promotion, cross-promotions using celebrities, brand mascots or characters popular with children, web sites, packaging, labelling and point-of-purchase displays, e-mails and text messages, philanthropic activities tied to branding opportunities, and communication through "viral marketing" and by word-of-mouth. Food marketing to children is now a global phenomenon and tends to be pluralistic and integrated, using multiple messages in multiple channels.

¹ Henceforth, the term "food" is used to refer to foods and non-alcoholic beverages.

² "Marketing" refers to any form of commercial communication or message that is designed to, or has the effect of, increasing the recognition, appeal and/or consumption of particular products and services. It comprises anything that acts to advertise or otherwise promote a product or service.

³ Hastings G et al. *Review of the research on the effects of food promotion to children*. Glasgow, University of Strathclyde, Centre for Social Marketing; 2003 (<http://www.food.gov.uk/news/newsarchive/2003/sep/promote>); Hastings G et al. *The extent, nature and effects of food promotion to children: a review of the evidence*. Geneva, World Health organization, 2006 (http://whqlibdoc.who.int/publications/2007/9789241595247_eng.pdf); McGinnis JM, Gootman JA, Kraak VI, eds. *Food marketing to children and youth: threat or opportunity?* Washington DC, Institute of Medicine, National Academies Press, 2006 (http://www.nap.edu/catalog.php?record_id=11514#toc); and Cairns G, Angus K, Hastings G. *The extent, nature and effects of food promotion to children: a review of the evidence to December 2008*. Geneva, World Health Organization, 2009 (http://www.who.int/dietphysicalactivity/Evidence_Update_2009.pdf).

Recommendations

Rationale

14. The reviews of evidence show a clear rationale for action to be taken by Member States in this area. The need to develop appropriate policy mechanisms was also acknowledged by various Member States during the consultation process for the development of these recommendations. These further support Health Assembly resolutions WHA60.23 and WHA61.14 on prevention and control of noncommunicable diseases and provide a solid rationale for policy development by Member States.

RECOMMENDATION 1

The policy aim should be to reduce the impact on children of marketing of foods high in saturated fats, *trans*-fatty acids, free sugars, or salt.

15. The effectiveness of marketing communications depends on two elements: the media in which the communication message appears and its creative content. The first element deals with the reach, frequency and impact of the message, thus influencing the *exposure* of children to the marketing message. The second element relates to the content, design and execution of the marketing message, influencing the *power* of the marketing communication. The effectiveness of marketing can thus be described as a function of both *exposure* and *power*.

RECOMMENDATION 2

Given that the effectiveness of marketing is a function of exposure and power, the overall policy objective should be to reduce both the exposure of children to, and power of, marketing of foods high in saturated fats, *trans*-fatty acids, free sugars, or salt.

Policy development

16. Member States can take various approaches to achieve the policy aim and objective, depending on

RECOMMENDATION 3

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