10 YEARS ON

NEW EVIDENCE ON TV MARKETING AND JUNK FOOD CONSUMPTION AMONGST 11-19 YEAR OLDS 10 YEARS AFTER BROADCAST REGULATIONS

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The authors are solely responsible for the content of the report.

CANCER RESEARCH UK

Cancer Research UK is the world’s leading cancer charity dedicated to saving lives through research. We support research into all aspects of cancer through the work of over 4,000 scientists, doctors and nurses. Today 2 in 4 people survive their cancer for at least 10 years. Cancer Research UK’s ambition is to accelerate progress so that by 2034, 3 in 4 people will survive their cancer for at least 10 years.

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FOREWORD

I am delighted to introduce the first report from the Youth Obesity Policy Survey run by Cancer Research UK. The survey benchmarks young people’s exposure to junk food marketing, and helps us understand any link this has to their diet and weight.

This report examines the association between television marketing and diet. Specifically, it tests whether commercial television is linked to consumption of a range of unhealthy foods and drinks – in turn, helping to quantify the role that television marketing may be playing the UK’s youth obesity epidemic.

This is a public health topic of the upmost importance. Obesity is responsible for around 5% of all cancers in the UK, at substantial cost to the NHS. Further, an obese child is around five times more likely to be an obese adult. Results from this year’s National Childhood Measurement Programme, run by Public Health England, showed that obesity rates amongst 11 year olds remain alarmingly high. It is important that we better understand, and address, the factors that sustain the UK’s youth obesity epidemic.

In the 2000s, a range of evidence showed that junk food marketing increases children and young people’s total calorie intake. In answer to this, the UK introduced regulations on junk food broadcast marketing in 2008. These regulations prevent junk food marketing on children’s television programming. However, their introduction was a decade ago and they may now be out of date. One concern is that they have not kept up with changing viewing habits. Ofcom’s own figures show children currently watch the most TV between 7-8pm, when ‘family entertainment’ programming is commonly on. This is generally unregulated and may constitute a source of continued high exposure to junk food marketing amongst children and young people.

This report tests current regulations and our concerns about their effectiveness. More specifically, it ascertains whether the impact of junk food marketing on young people is at an acceptably low level; explores whether new viewing habits need better regulation, and evidences policy recommendations to ensure the UK’s approach to junk food marketing is fit for purpose.

This is the first of several reports to be released using data from the Youth Obesity Policy Survey. Future reports will focus on marketing more broadly; test for a link between marketing and weight; examine common arguments against regulation through our data and explore the link between junk food marketing and health inequalities. In sum, this series will add to an already extensive evidence base, and I encourage UK policy makers to use it as an opportunity for action.

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EXECUTIVE SUMMARY

HOW DOES OBESITY IN CHILDHOOD AFFECT CANCER RISK AS AN ADULT?

Obesity is the biggest preventable cause of cancer after smoking and is linked to 18,100 cancer cases a year in the UK (5.5% of all cancer cases), with the largest number of weight-linked cases in the UK being breast, bowel and womb. Between 1998 and 2008, obesity in England more than doubled and modelling studies estimate that if current trends of overweight and obesity continue, it could lead to a further 670,000 cancer cases by 2035. The cost of this rise in obesity to the NHS would be an extra £2.5 billion/year.

Children’s obesity constitutes a specific problem. As Public Health England’s National Childhood Measurement Programme trends analysis report recently showed, obesity rates are holding steady at an alarmingly high level. An obese child is five times more likely to become an obese adult. In the long-term, this increases health and cancer risk, and in the short-term can cause physiological and psychological harm. There is no one reason that explains the rise in levels of obesity amongst young people. Research has pointed to factors as diverse as genetics, increased food and drink consumption and lower levels of exercise. However, factors which increase food and drink consumption and calorie intake have been shown to be the more powerful explanations.

The link between junk food marketing and the consumption of products high in fat, salt or sugar (HFSS) is clear in the research literature. The weight of the evidence led the UK government to introduce regulations in 2008 preventing all junk food marketing on children’s programming. A decade on, these regulations may now be out of date. One particular concern is that they have not kept up with changing viewing habits. Ofcom figures show young people watch the most television (TV) between 7:00 and 8:00pm, when family entertainment shows are more common, where junk food regulations remain generally lighter, and HFSS adverts are most regularly aired.

This research is designed to test current broadcast regulations and explore whether they remain fit for purpose ten years on. Through a UK-wide and representative study of 11-19 year old’s diet, weight, marketing exposure and screen time, we explored whether the impact of junk food marketing on young people is acceptably low. We also examined whether new viewing habits, such as online on-demand streaming, need to be considered. This adds to the evidence base and provide an opportunity for UK policy makers to act.
KEY FINDINGS

Our analysis of the data collected as part of the Youth Obesity Policy Survey indicate that urgent action on junk food television marketing is needed.

TV MARKETING WAS MOSTLY SEEN ON FAMILY SHOWS

Young people were asked to select genres of TV shows where they felt they saw the most junk food adverts. The top four results were 1) entertainment, 2) reality TV, 3) sports and 4) daytime TV. These genres are generally made up by ‘family viewing shows’, seen on evenings and weekends, and often exempt from junk food regulations. This source of exposure supports our fear that current viewing habits mean existing, decade-old regulations are unfit for purpose.

TV MARKETING IS A RISK FACTOR FOR HIGH HFSS CONSUMPTION IN 11-19 YEAR OLDS

Our study used commercial TV viewing at high (3 hours a day or more) and moderate (0.5 - 3 hours per day) levels as a proxy for TV advertising exposure. High exposure was associated with increased risk of high consumption for 10 of the 12 HFSS product types tested – a tellingly consistent link.

Highlights from the model are that young people with high TV exposure were associated with being:

- 1.9 times more likely to consume 2 or more sugary drinks per week.
- 1.8 times more likely to consume 1 or more takeaways per week
- 1.7 times more likely to consume fried potato products 1 or more times per week.

TV MARKETING WAS ASSOCIATED WITH HIGH RISK OF CONSUMING A WIDE RANGE OF PRODUCTS

The study tested several quite different product types – including healthy items, low price and accessible unhealthy items and high price, less accessible items. Significant effects across diverse products would offer stronger evidence that TV marketing influences energy intake. TV marketing was associated with similar increases in risk of high consumption across each of these categories – except healthy eating, where it was associated with decreased eating. This association is a strong indication of marketing’s power.

DURING WHICH TYPES OF TV SHOWS DO YOUNG PEOPLE TEND TO SEE UNHEALTHY FOOD/DRINK ADVERTS?

- ENTERTAINMENT
- REALITY TV
- SPORTS
- DAYTIME TV
We also tested for a link for total junk food consumption. In this model, the correlated risks were as follows:

- **People with high advert exposure were around 2.7 times more likely to have high total HFSS consumption.**
- **People with low exposure (< 0.5 hours/day) were around 2.6 times more likely to have low total HFSS consumption.**

The difference between being a high consumer and a low consumer was at least 520 junk food products/year. This means advert exposure may have a substantial impact on a population level.

**STREAMING WAS A RISK FACTOR FOR HIGH JUNK FOOD CONSUMPTION**

On-demand streaming services with adverts were associated with increased risk of unhealthy eating/drinking. For example, in terms of fizzy drinks, this meant, high TV marketing exposure was associated with being:

- **2.5 times more likely to consume one energy drink or more per week.**
- **2.1 times more likely to consume 2-4 or more diet drinks per week.**
- **1.5 times more likely to consume sugar sweetened fizzy drinks 2-4 times per week or more.**

This is the first UK study we are aware of to test the association between on-demand television and risk of HFSS consumption on this scale. It shows the need to account for TV advertising holistically in any regulations by considering new, online ways of watching commercial content.

**POLICY IMPLICATIONS**

The study finds that junk food marketing is a clear, consistent and cumulative risk factor for high junk food consumption.

Genres watched by family audiences on evenings and weekends were perceived by participants to be the main source of exposure to junk food marketing. Restrictions that focus on these programmes – often shown at evenings and weekends – would improve the effectiveness of the regulations. A 9pm watershed on TV would clearly be the most effective mechanism, but scheduling restrictions or revisions to the audience index are alternative options.

Our study also found that streaming had a similar association with HFSS eating to TV. This popular new way of watching television ‘on-demand’ should be proactively regulated through inclusion in any regulation of TV content.

Whilst there will not be a single solution to obesity in the UK, our findings show that junk food advert restrictions constitute a simple and pragmatic way for policy makers to make a sustainable impact on the UK’s childhood obesity epidemic.
Figure 1: The percentage increased likelihood of consuming high amounts of a given food associated with each significant junk food category. This figure shows the maximum increased risk associated with high exposure to either on-demand or traditional TV content.

*Non-broadcast mediums had no consistent association with dietary choices in our tests.
REFERENCES