STAKEHOLDER VIEWS ON RESTRICTING MARKETING FOR HIGH FAT, SALT AND SUGAR FOODS IN THE UK

1. INTRODUCTION

Overweight and obesity is the second leading cause of cancer in the UK after smoking, causing 13 types of cancer and over 22,000 cancer cases each year in the UK [1]. Each year, it is estimated that obesity costs the NHS in England £6.1bn and the wider UK economy £27bn [2]. A child with obesity is around five times more likely to be an obese adult [3], and currently a third of children in the UK leave primary school with obesity [4]. It is therefore of vital importance to address this public health challenge, and to act early to protect children and young people from a lifetime of avoidable ill-health.

There is a wealth of evidence showing that exposure to marketing of food and drinks high in fat, salt and sugar (hereafter HFSS foods) has a negative impact on children and young people’s dietary attitudes, consumption, and health outcomes [5, 6, 7, 8, 9]. It is vital that a UK-wide, whole-systems approach is implemented to reduce unhealthy choices and empower and give choice back to parents and families. Given the amount of existing evidence around the impact of marketing for HFSS foods, this is an area where policy interventions are of crucial importance and could generate considerable population-level benefit.

In 2018/2019, the UK Government held two consultations as part of the Childhood Obesity Plan Chapter 2, first published in 2018 [4]. These included restricting television and online advertising for HFSS foods to between 21:00 and 5:30 (i.e. a ‘9pm watershed’) [10], restricting price promotions (e.g. ‘buy one get one free’), and limiting placement of HFSS foods in retail settings (e.g. at checkouts) [11]. Cancer Research UK (CRUK) submitted evidence to both consultations, and the Government’s responses are currently expected to be published by late Spring 2020. Across February and March 2020, CRUK will also be running a health marketing campaign targeted to Members of Parliament to highlight CRUK’s policy calls around restrictions on the marketing of unhealthy food and drink to children.

Regardless of whether restrictions on television and online advertising, price promotions, and retail placement are successfully introduced, these will only address a small part of the marketing landscape for HFSS foods. In October 2019, out-going Chief Medical Officer (CMO) Professor Dame Sally Davies published an independent report with a series of further recommendations for addressing childhood obesity. This included policies which go beyond those the Government has already consulted on, such as: (1) reviewing tax-deductible expenses around advertising of unhealthy versus healthy foods; (2) phasing out all less healthy food and drink marketing at major public venues; and (3) introducing innovative policies which find win-wins for children’s health and the private sector (such as continuing private sector sports sponsorship but only allowing advertising and sales of most healthy products on site) [12].
It is important to continually explore other policy options which may further lessen exposure to, and the impact of, marketing for HFSS foods on children, adolescents, and the wider population. Doing so is vital to inform thinking on where CRUK’s research efforts and policy calls on marketing for HFSS foods goes next.

This study will therefore generate insight into this by collating the views of a range of stakeholders across important policy-relevant areas, such as: What is likely the impact of proposed restrictions on marketing for HFSS foods, and how will different groups and stakeholders be impacted; What other policies or mechanisms could help reduce the impact of marketing for HFSS foods; and what the main barriers to reducing exposure to marketing for HFSS foods and tackling childhood obesity.

2. AIM OF STUDY AND KEY POLICY QUESTIONS

This research aims to explore the perspectives of a range of stakeholders to identify feasible and effective options to reduce exposure to marketing for HFSS foods among children and young people, and reduce rates of childhood obesity. By speaking to a range of stakeholders, this study should help identify pragmatic next steps for where to focus policy and research efforts, which navigate the breadth of perspectives and needs these stakeholders will have. The key research and policy questions which underpin this are:

- What is the likely impact of proposed restrictions on advertising and price promotions for HFSS foods, particularly on children and young people, and how will other stakeholders be impacted?
- What other policy areas would stakeholders like to see a focus on to tackle the marketing of HFSS foods and what are the key evidence gaps?
- What are the barriers experienced within/by an organisation to achieving their ambitions to reduce exposure to marketing for HFSS foods and childhood obesity?
- If stakeholders could do anything to tackle childhood obesity, what would it be?

The above is not an exhaustive list, and we welcome proposals that highlight additional areas that make meaningful contributions to the study aim.

Study scope

The exact focus for parts of this study will depend on the policy context once the outcome of the two Government consultations are announced. It is anticipated this will be by late Spring 2020.

In investigating what other policies areas could tackle the marketing of HFSS foods, the study should be structured around the four Ps of marketing: Product, Price, Place and Promotion. Children and young people must navigate a marketing mix comprising of these factors across traditional and digital marketing, and therefore understanding policy needs within and across these will provide insight that will help us to shape develop future research and policy development.

The topic guide should also include a smaller element of broader open thinking on what stakeholders would do to tackle childhood obesity if they could achieve anything, and what they perceive to be the
main challenges in achieving this. This will aid understanding of existing barriers and provide ideas of potential new/previous unconsidered policy and research areas.

We are keen that this study should reflect the views of a mix of stakeholders. We would not expect all stakeholders to have extensive policy knowledge, but we are interested in hearing a breadth of perspectives. This will inform, and therefore strengthen, future policy development and research.

Below is a list of potential groups. This list is not intended to be prescriptive or exhaustive, and we would welcome researchers’ views on which stakeholders (or others) to approach and/or prioritise.

- Food and drink industry
- Charities and obesity harm-reduction groups
- Advertising industry (including media-buyers, agencies and marketeers)
- Academics
- Regulatory bodies
- Poverty groups
- Stigma community (such as Obesity UK)
- Social media influencers (could encompass influencers promoting HFSS products and those promoting healthy lifestyles/body positivity)
- Those who work with children and young people e.g. teachers
- Trade associations (such as British Soft Drinks Association, British Retail Consortium, Internet Advertising Bureau)
- Retail sector
- CRUK corporate partners (Tesco and Slimming World)
- Broadcasters and Internet platforms
- Food and health journalists
- Young people

Within the prioritised selection of stakeholders, some should be able to provide an inequalities perspective on the project’s key research and policy questions.

3. METHODOLOGY DETAILS

We are open to hearing your proposals on how best to approach this research, although we expect proposals to reflect the following criteria:

- Qualitative approach, such as interviews, with a breadth of key stakeholders.
- Sampling frame including approximately 5-6 stakeholder groups, with multiple individual interviews conducted within each group.
- UK-wide approach.
4. **OUTPUTS**

The product of the research will be a policy research report that sets out:

- An introduction setting out the context around the research
- A summary of the methodology and its strengths and weaknesses
- A full account of all of the research findings
- A discussion to interpret the research findings and outline avenues for future research

This report will be developed in collaboration with CRUK, who will write an executive summary and policy recommendations. Examples of these reports can be found on the Cancer Policy Research Centre’s website [here](#).

This list is not exhaustive and additional outputs may be considered.

5. **ISSUES TO CONSIDER**

The scope of this study should remain flexible in order to respond to the status of the Government’s consultation responses and other policy developments.

Any amendments or alterations to the study would be discussed with the CRUK team.

6. **TIMESCALES**

A full proposal giving a detailed methodology and budget breakdown should be submitted by close of business **10th February 2020**.

All proposals will be independently peer reviewed and the decision made in early March. The chosen applicants will be invited in March to finalise the project plans and key deliverables and discuss contract terms with a view to starting the study in April.

A full report would be expected to be submitted to the Cancer Policy and Research Centre, Cancer Research UK by **December 2020** (unless otherwise agreed); a longer project duration will only be considered if fully justified.

7. **SUBMISSION DETAILS**

The outline should include:

- Introduction/Background
- A detailed methodology
- All intended outputs
- Timelines
- Breakdown of the budget (costs should include VAT where applicable)
- Expertise of staff working on the project (CV’s should be included)
- Governance structures at the organisation
- Perceived risk and the mitigation steps that will be taken
Please submit your proposal by close of business on **10th February 2020**. If you would like to express interest and submit a proposal, please contact:

- Ruzina Begum, Research Policy Intern, Cancer Policy Research Centre, Cancer Research UK ([Ruzina.begum@cancer.org.uk](mailto:Ruzina.begum@cancer.org.uk))
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8. REFERENCES


unhealthy food and non-alcoholic beverage advertising on intake in children and adults,”


