

## **Response from the Scottish Obesity Alliance**

The Scottish Obesity Alliance is a forum for organisations to collaborate to influence policy and practice on obesity prevention in Scotland. It is composed of 23 leading national health charities, medical royal colleges, campaign groups and professional bodies with an interest in health and public health. The Alliance works together to influence the Scottish and UK Governments policies on healthy weight and obesity.

### **Media in scope**

1. The Government proposes that any further advertising restrictions apply to broadcast TV and online. Do you think that any further advertising restrictions should be applied to other types of media in addition to broadcast TV and online?

**Yes/No/I do not know**

2. If answered yes, which other media should be subjected to further HFSS advertising restrictions?

**Cinema/Radio/Print/Outdoor/Direct marketing/ other (please specify)**

**The Alliance supports the extension of additional advertising restrictions to other types of media including cinema, radio, outdoor and direct marketing alongside linear TV and online (websites, video-sharing platforms, social media, apps, in-game). We note that text and email marketing should be included alongside traditional forms of direct marketing.**

**Restrictions should also apply to sponsorship by HFSS brands, including idents and programme sponsorship on all forms of TV and video advertising. Experiential marketing, packaging, sponsorship of sports events, sponsorship of schools based activities should also be subjected to further HFSS advertising restrictions.**

**In 2015, the Health Select Committee recommended the extension of restrictions on advertising to apply across all forms of broadcast media, social media and advertising, including in cinemas, on posters, in print, online and advergames, without delay (1). In the same year, Public Health England made the same recommendation (2). This included no exemptions to a 9pm watershed.**

**There are important lessons to be gained from the history of the restriction of tobacco advertising in the UK which highlight the importance of minimising potential loopholes in any new and emerging forms of advertising. Most forms of tobacco advertising and promotion in the UK are now banned, however industry has continued to promote**

**its products through direct mail campaigns, trade shows, catalogues, and targeted search engine marketing (3).**

- (1) House of Commons Health Committee (2015) Childhood obesity—brave and bold action. First Report of Session 2015–16.  
<https://publications.parliament.uk/pa/cm201516/cmselect/cmhealth/465/465.pdf>
- (2) Public Health England (2015) Sugar Reduction. The evidence for action.  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/470179/Sugar\\_reduction\\_The\\_evidence\\_for\\_action.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/470179/Sugar_reduction_The_evidence_for_action.pdf)
- (3) Ash Scotland (2015) Tobacco Advertising and Promotion in the UK  
<http://ash.org.uk/wp-content/uploads/2019/02/Tobacco-Advertising-and-Promotion-download.pdf>

3. Please explain why you think that we should extend additional advertising restrictions to these types of media. (Drop down list, please select all that apply)

- a) Will reduce children’s exposure to HFSS advertising and in turn reduce their calorie intake**
- b) Will drive further reformulation of products**
- c) Will reduce economic impact on broadcasters
- d) Will reduce economic impact on advertisers
- e) Reduces risk of displacing advertising spend**
- f) Easy for advertisers and regulators to understand**
- g) Easy for parents and guardians to understand**
- h) Other – please explain

**An extension of additional advertising restrictions to cinema, radio, outdoor and direct marketing will bring consistency across all types of media. This will create a level playing field for food and drink manufacturers, and minimise potential loopholes in any new and emerging forms of advertising.**

#### **HFSS definition**

4. The Government proposes that any additional advertising restrictions apply to food and drink products in Public Health England’s sugar and calorie reduction programmes, and the Soft Drink Industry Levy, using the NPM 2004/5 to define what products are HFSS. Do you agree or disagree with this proposal?

Agree/**Disagree**/ I do not know

5. If you do not agree with the proposal what alternative approach would you propose and why? Please provide evidence to support your answer.

Please explain your answer

**The 15-year-old nutrient profiling model is difficult to understand and outdated. It should be replaced with a model along the lines of the draft model unveiled by Public Health**

England in 2018 as the very minimum (1). If NPM is chosen, the programme must be regularly reviewed and it must be ensured that the restrictions reflect the recommendations for free sugars.

The Alliance suggests that consideration should be given to the approach that there should be certain categories of discretionary foods where no thresholds need to apply and there should be a blanket restriction on those categories. A model like the World Health Organisation Euro NPM (2) is an alternative tool that takes such an approach. The WHO model tackles health harming products that make up the UK diet, and is simpler, more practical and an evidence-based option (3).

- (1) Public Health England (2018) Annex A. The 2018 review of the UK Nutrient Profiling Model. [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/694145/Annex\\_A\\_the\\_2018\\_review\\_of\\_the\\_UK\\_nutrient\\_profiling\\_model.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/694145/Annex_A_the_2018_review_of_the_UK_nutrient_profiling_model.pdf)
- (2) World Health Organization (2015) WHO Regional Office for Europe Nutrient Profile Model. Copenhagen, Denmark: World Health Organization Regional Office for Europe; [http://www.euro.who.int/\\_data/assets/pdf\\_file/0005/270716/Nutrient-children\\_web-new.pdf](http://www.euro.who.int/_data/assets/pdf_file/0005/270716/Nutrient-children_web-new.pdf)
- (3) Wicks, M., Wright, H., Wentzel-Viljoen E. (2017) Restricting the marketing of foods and non-alcoholic beverages to children in South Africa: are all nutrient profiling models the same? British Journal of Nutrition, 116 (12), 2150-2159

### **Broadcast consultation options**

6. Please select your preferred option for potential further broadcast restrictions.

**Option 1**/~~Option 2~~/~~Option 3~~

7. Please select the reason/s for your choice, providing supporting evidence for your answer. Please tick all that apply

- a) Will reduce children's exposure to HFSS advertising and in turn reduce their calorie intake**
- b) Will drive further reformulation of products**
- c) Will reduce economic impact on broadcasters
- d) Will reduce economic impact on advertisers
- e) Reduces risk of displacing of advertising spend**
- f) Easy to implement**
- g) Easy for advertisers and regulators to understand**
- h) Easy for parents and guardians to understand**
- i) Other - please specify

There is a strong evidence base to support further restriction of HFSS advertising and in turn support the reduction of calorie intake in children. At the international level, the World Health Organisation highlighted the evidence of the influence of HFSS marketing on childhood obesity in 2016 (1), and the WHO Commission on Ending Childhood Obesity recommended reducing HFSS advertising calling on member states to introduce

restrictions on HFSS advertising across all media, including digital, addressing any potential loopholes (2). In the UK, evidence presented at the Health and Social Care Committee's Childhood Obesity Inquiry highlighted the association between HFSS marketing and immediate snack food consumption, greater intake of junk food overall, increased food intake that is not compensated for at later eating occasions and greater body weight (3). In 2018, Cancer Research UK reported exposure to one extra broadcast HFSS advert a week predicted 350 extra HFSS calories a week in 11-19 year olds (4). In another report in the same year from the charity, TV advertising was highlighted as a risk factor for high HFSS consumption and increased junk food eating in 11-19 year olds (5).

The introduction of the Soft Drinks Industry Levy has resulted in some success in the reformulation of soft drinks, and we believe that the restriction of advertising may drive further action in this area (6). It would be worth introducing systems to monitor the subsequent impact of introducing further restrictions on advertising on the reformulation of HFSS products by food and drink manufacturers.

The Alliance believes a 9pm watershed is the most effective and easiest to implement. It reduces the risk of displacement if applied without exemption and includes as many channels and platforms as possible. It is easier for advertisers and regulators to understand, however the 2004/05 NPM does not make it easy to understand how HFSS foods are defined. An alternative model is required (see Q5).

The Alliance believes Option 1 also makes it easier for parents and guardian to understand. Polling by Obesity Action Scotland indicates strong support from parents in Scotland for a 9pm junk food watershed on TV (74%); 69% support for a 9pm watershed online; and 66% support for a ban on junk food adverts shown outside of the home before 9pm (7). 66% of respondents agree that children seeing adverts for junk food contributes to childhood obesity; and 67% of respondents agree that seeing fewer adverts for junk food would help children have a healthier diet.

Polling by the Obesity Health Alliance indicates similar strong support from parents UK-wide for a 9pm junk food advert on TV (72%); 70% support for a 9pm watershed online; and 68% watershed on digital advertising out of the home, including cinemas, bus stops/roadsides) (8). This question in this poll did not include any exemptions.

- (1) WHO Regional Office for Europe (2016) Tackling food marketing to children in a digital world: trans-disciplinary perspectives. <http://www.euro.who.int/en/health-topics/disease-prevention/nutrition/publications/2016/tackling-food-marketing-tochildren-in-a-digital-world-trans-disciplinary-perspectives-2016>
- (2) World Health Organization (2016) Report of the Commission on Ending Childhood Obesity (106) Geneva: World Health Organization
- (3) Boyland, Emma (2018) Written submission from Dr Emma Boyland, University of Liverpool COY0006.
- (4) Cancer Research UK (2018) Under Pressure. New Evidence on Young People's Broadcast marketing exposure in the UK. [https://www.cancerresearchuk.org/sites/default/files/under\\_pressure\\_-\\_a\\_study\\_of\\_junk\\_food\\_marketing\\_and\\_young\\_peoples\\_diets\\_0.pdf](https://www.cancerresearchuk.org/sites/default/files/under_pressure_-_a_study_of_junk_food_marketing_and_young_peoples_diets_0.pdf)

- (5) Cancer Research UK (2018) 10 YEARS ON. New Evidence on TV Marketing and Junk Food Consumption amongst 11-19 Year Olds after Broadcast Regulations.  
[https://www.cancerresearchuk.org/sites/default/files/10\\_years\\_on\\_full\\_report.pdf](https://www.cancerresearchuk.org/sites/default/files/10_years_on_full_report.pdf)
- (6) Public Health England (2018) Sugar reduction and wider reformulation: report on progress towards the first 5% reduction and next steps.  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/709008/Sugar\\_reduction\\_progress\\_report.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/709008/Sugar_reduction_progress_report.pdf)
- (7) Obesity Action Scotland (2019) Public Support for restricting the advertising of junk food  
<https://www.obesityactionsotland.org/media/1298/report-public-support-for-restricting-the-advertising-of-junk-food.pdf>
- (8) Obesity Health Alliance (2019) Protect children from all junk food advertising, say health experts – and parents agree. <http://obesityhealthalliance.org.uk/2019/02/28/protect-children-junk-food-advertising-say-health-experts-parents-agree/>

8. If you selected option 1, the government proposes an exemption for when there are low child audiences. Should this exemption apply to channels or programmes? Please explain your answer.

- a) Programme
- b) Channel
- c) I do not know

**There should be no exemptions to the 9pm-5.30am watershed on broadcast TV. All children should be protected, at all times.**

**It is unclear which programmes and channels would be exempt from any potential exemptions, or the number of children any exemption would affect. The data to indicate which programmes and channels would be exempt, or the number of children this would affect, has not been available. The data should be made available to allow for an impact analysis to be completed on the potential exposure to advertising.**

**The Alliance believes a 9pm watershed is the most effective and easiest to implement. Any exemptions offers possible loopholes for food and drink manufacturers to develop further marketing strategies, requires significant resource to monitor and implement, and provides a challenge for parents to understand.**

9. If you selected option 1, do you agree that 1% of the total child audience (around 90,000 children) is the appropriate level at which programmes or channels should be exempted? (Choose only one) Please explain your answer.

- a) Yes
- b) **No**
- d) I do not know

**There should be no exemptions to the 9pm-5.30am watershed on broadcast TV. All children should be protected.**

**The 1% of the total child audience (around 94,000 children) is likely to be an underestimation, BARB data only captures viewers aged 4 to 15 years old. The Alliance believes that 94,000 is a significantly high number of children to be exposed to harmful HFSS advertising. The effects could be detrimental and could widen inequalities where children from more deprived households are likely to be more exposed to more TV and online advertising (1).**

(1) Ofcom (2017) Children and Parents: Media Use and Attitudes Report  
[https://www.ofcom.org.uk/\\_\\_data/assets/pdf\\_file/0020/108182/children-parents-media-use-attitudes-2017.pdf](https://www.ofcom.org.uk/__data/assets/pdf_file/0020/108182/children-parents-media-use-attitudes-2017.pdf)

10. If you selected option 1 and you do not agree that 1% of the total child audience is the correct threshold to grant an exemption please propose an alternative threshold, providing evidence to support your answer.

- a) x% of total audience
- b) x% of total child audience
- c) x number children
- d) Other (please specify)**

**There should be no exemptions to the 9pm-5.30am watershed on broadcast TV. All children should be protected.**

~~11. If you selected option 2, do you agree with the thresholds suggested for the NPM? If not please explain your reasons with supporting evidence.~~

~~Yes/No~~

~~12. If you selected option 2, should the NPM thresholds remain static or decrease overtime to offer rewards in line with reformulation efforts? Please explain your answer.~~

~~Static/Decrease/Other~~

~~13. If you selected option 2, the Government proposes to allow products that fall within the middle threshold some advertising before the 9pm watershed. What advertising freedoms do you think these products could be offered?~~

~~Please explain your answer~~

~~14. If you selected option 2, in your view, how easy would it be to implement a ladder option compared to the approach outlined in option 1?~~

~~Very easy/ Easy/ I do not have a view/ Difficult/ Very difficult.~~

~~15. If you selected option 2, the Government proposes an exemption for when there are low child audiences. Should this exemption apply to channels or programmes? Please explain your answer.~~

- a) Programme
- b) Channel
- c) I do not know

~~16. If you selected option 2, do you agree that 1% of the total child audience (around 90,000 children) is the appropriate level at which programmes or channels should be exempted? (Choose only one) Please explain your answer.~~

- a) Yes
- b) No
- c) I do not know

~~17. If you selected option 2, and you do not agree that 1% of the total child audience is the appropriate level at which to grant an exemption please propose an alternative level, providing evidence to support your answer.~~

- a) x% of total audience
- b) x% of total child audience
- c) x number of children
- d) Other (please specify)

~~18. If you selected option 3, are there any alternative measures from broadcasters, regulators or the advertising sector that might help to meet our policy objectives in broadcast?~~

~~Yes/No/I do not know  
If you answered yes, what measures do you propose?~~

~~19. If you would like to comment on the options that you have not chosen to support please comment here, providing evidence to support your answer. Please make it clear what option you are commenting on.~~

- a) Option 1
- b) Option 2
- c) Option 3

### **Online consultation options**

20. Please select your preferred option for potential further online HFSS advertising restrictions.

**Option 1**/Option 2/Option 3/Option 4

21. Please select the reason/s for your choice, providing supporting evidence for your answer. Please tick all that apply.

- a) Will reduce children's exposure to HFSS advertising and in turn reduce their calorie intake
- b) Will drive further reformulation of products
- c) Will reduce economic impact on broadcasters
- d) Will reduce economic impact on advertisers
- e) Reduces risk of displacing of advertising spend
- f) Easy to implement
- g) Easy for advertisers and regulators to understand
- h) Easy for parents and guardians to understand
- i) Other - please specify

There is a strong evidence base to support further restriction of HFSS advertising online and in turn support the reduction of calorie intake in children.

Please also see Q9, in addition to the evidence highlighted below.

In 2018, Cancer Research UK highlighted the association between on-demand streaming services (e.g. You Tube) and high HFSS consumption (1). Further research from CRUK highlights children who use the internet for over 3 hours per day are 4 times more likely to buy junk food products than children who did not use the internet or for little time; each additional hour children spend using the internet is associated with a 19% increased likelihood of pestering their parents for junk food; and children who use the internet for over 3 hours per day had a 68% reduction in vegetable intake compared to children who did not use the internet or for little time (ibid, 2, 3).

Research published only last week by the University of Liverpool provides further evidence that food marketing in YouTube videos affects children's immediate intake, and advertising disclosures are not protective and may enhance the effect (4). On the same day, the Advertising Standards Authority UK revealed how children continue to be exposed to HFSS advertising online by big companies Kellogg's, Asda, Lidl, M&S, Pringles, McDonalds, KFC & KP despite rules meant to protect children from online HFSS marketing (5). It is crucial that Government introduces further restrictions in the form of a comprehensive 9pm watershed online and across all digital media, without any exemptions, to protect our young.

We believe that the restriction of online advertising may drive further reformulation of products (see Q 9). Including online advertising as well as TV advertising in the introduction of further restrictions reduces the risk of advertising spend being displaced to other platforms. Advertising online is an expanding area in the UK: in 2017 £11.6bn was spent advertising online compared to just £5.2bn on TV, with mobile advertising accounting for almost 50% of the online spend (6). Children's online habits have also changed: in 2018 children spent between 9 (3-4 years) and 20.5 (12-15 years) hours a week watching TV (7). Between 32% and 58% children aged 3-15 years now watch TV via services such as Netflix or Amazon Prime.

**The Alliance believes a 9pm watershed is the most effective and easiest to implement. It reduces the risk of displacement by creating a level playing field, and be easy for advertisers and regulators as well as parents and guardians to understand.**

- (1) Cancer Research UK (2018) 10 Years On. New Evidence on TV Marketing and Junk Food Consumption amongst 11-19 Year Olds after Broadcast Regulations.  
[https://www.cancerresearchuk.org/sites/default/files/10\\_years\\_on\\_full\\_report.pdf](https://www.cancerresearchuk.org/sites/default/files/10_years_on_full_report.pdf)
- (2) Cancer Research UK (2018) Under Pressure: New evidence of young people’s broadcast marketing exposure in the UK.  
[https://www.cancerresearchuk.org/sites/default/files/under\\_pressure.pdf](https://www.cancerresearchuk.org/sites/default/files/under_pressure.pdf)
- (3) Cancer Research UK (2018) A Prime Time for Action: New evidence on the link between television and on-demand marketing and obesity  
[https://www.cancerresearchuk.org/sites/default/files/a\\_prime\\_time\\_for\\_action.pdf](https://www.cancerresearchuk.org/sites/default/files/a_prime_time_for_action.pdf)
- (4) Coates A.E., Hardman C.A., Halford J.C.G., Christiansen P., Boyland E.J. (2019) The effect of influencer marketing of food and a “protective” advertising disclosure on children's food intake. *Pediatric Obesity*. 2019; e12540 <https://doi.org/10.1111/ijpo.12540>
- (5) ASA UK (2019) ASA Monitoring Report of Online HFSS Ads.  
<https://www.asa.org.uk/uploads/assets/uploaded/14be798d-bd30-49d6-bcfbc9ed7e66e565.pdf>
- (6) Cancer Research UK (2018) 10 Years On. New Evidence on TV Marketing and Junk Food Consumption amongst 11-19 Year Olds after Broadcast Regulations.  
[https://www.cancerresearchuk.org/sites/default/files/10\\_years\\_on\\_full\\_report.pdf](https://www.cancerresearchuk.org/sites/default/files/10_years_on_full_report.pdf)
- (7) Ofcom (2017) Children and Parents: Media Use and Attitudes Report  
[https://www.ofcom.org.uk/\\_\\_data/assets/pdf\\_file/0020/108182/children-parents-media-use-attitudes-2017.pdf](https://www.ofcom.org.uk/__data/assets/pdf_file/0020/108182/children-parents-media-use-attitudes-2017.pdf)

22. If you selected option 1, should exemptions be applied to advertisers that can demonstrate exceptionally high standards of evidence that children will not be exposed to HFSS advertising?

Yes/**No**/I do not know

**There should be no means of securing an exemption: all advertising of HFSS products should be subject to the watershed online. All children should be protected, at all times and on all platforms.**

**The Alliance believes a 9pm watershed is the most effective and easiest to implement. Any exemptions offers possible loopholes for food and drink manufacturers to develop further marketing strategies, requires significant resource to monitor and implement, and provides a level playing field.**

23. If you selected option 1, what evidence should be required to meet the definition of "exceptionally high standards" for the purposes of securing an exemption?

Please explain your answer.

**There should be no means of securing an exemption: all advertising of HFSS products should be subject to the watershed online. All children should be protected, at all times and on all platforms.**

**The Alliance believes there is not enough evidence available to 'exceptionally high standards' to prove that children will not be exposed to HFSS advertising online. The current methods of identifying an online user as an adult or child are insufficient, with children often using sharing accounts or declaring an older age (1). Furthermore media platforms such as Facebook, Amazon etc. capture data on the recipients of their adverts, but do not make this publicly available for examination.**

(1) Ofcom (2017) Children and Parents: Media use and attitudes report. Available at [https://www.ofcom.org.uk/data/assets/pdf\\_file/0020/108182/children-parents-media-use-attitudes-2017.pdf](https://www.ofcom.org.uk/data/assets/pdf_file/0020/108182/children-parents-media-use-attitudes-2017.pdf)

24. If you selected option 1, what exemptions might the government apply to advertisers who can demonstrate exceptionally high standards of evidence? Please describe how they would work and provide supporting evidence.

Please explain your answer

**There should be no means of securing an exemption: all advertising of HFSS products should be subject to the watershed online.**

25. If you selected option 1, should exemptions apply to certain kinds of advertising, recognising the practical challenges of applying a time-based restriction for some kinds of advertising?

Yes/**No**/I do not know

If you answered yes, please explain what types of advertising should be exempted.

**There should be no means of securing an exemption: all advertising of HFSS products should be subject to the watershed online.**

~~26. If you selected option 2, where advertisers must consider the totality of audience information to demonstrate that no more than 25% of the audience are under 16, should this threshold be lowered:~~

- ~~a) Lowered to 10%~~
- ~~b) Lowered to 1%~~
- ~~c) Disapplied entirely~~
- ~~d) Not reduced~~
- ~~e) Other level (please specify)~~

~~27. If you selected option 2, for behaviourally targeted advertising, advertisers are required to use whatever sources of evidence are available to them to prove they have excluded~~

~~under 16s. Do you think they should have to provide specific sources of evidence over and above the existing rules?~~

~~Yes/No/I do not know~~

~~If you answered yes, which sources or standards of evidence do you propose? Please provide evidence to support your answer.~~

~~28. If you selected option 3, should a watershed be applied to video advertising online, and a targeting restriction for all other online advertising?~~

~~Yes/No/I do not know~~

~~If you answered no, how would you divide up online advertising in order to apply a watershed or targeting restrictions to different advertising formats/categories platforms/sites?~~

~~29. If you selected option 3, for advertising subject to a watershed, should exemptions be applied to advertisers who can demonstrate exceptionally high standards of evidence that children will not be exposed to HFSS advertising?~~

~~Yes/No/I do not know~~

~~30. If you selected option 3, what evidence should be required to meet the definition of "exceptionally high standards" for the purposes of securing an exemption?~~

~~Please explain your answer~~

~~31. If you selected option 3, what exemptions might the government apply to advertisers who can demonstrate exceptionally high standards of evidence? Please describe how they would work and provide supporting evidence.~~

~~Please explain your answer~~

~~32. If you selected option 3, for advertising subject to a targeting restriction, where advertisers must consider the totality of audience information to demonstrate that no more than 25% of the audience are under 16, should this threshold be lowered:~~

- ~~a) Lowered to 10%~~
- ~~b) Lowered to 1%~~
- ~~c) Disapplied entirely~~
- ~~d) Not reduced~~
- ~~e) Other level (please specify)~~

~~33. If you selected option 3, for advertising subject to a targeting restriction, which has been behaviourally targeted, advertisers are required to use whatever sources of evidence are available to them to prove they have excluded under 16s. Do you think they should have to provide specific sources of evidence over and above the existing rules?~~

~~Yes/No/I do not know~~

~~If you answered yes, which sources or standards of evidence do you propose? Please provide evidence to support your answer.~~

~~34. If you selected option 4, are there any alternative measures from online platforms, regulators or the advertising sector that might help to meet our policy objectives about online advertising?~~

~~Yes/No/I do not know~~

~~If you answered yes, what measures do you propose?~~

~~35. If you would like comment on any options that you have not chosen to support please comment here, providing evidence to support your answer. Please make it clear which option you are referring to.~~

~~a) Option 1~~

~~b) Option 2~~

~~c) Option 3~~

~~d) Option 4~~

### **Implementation and next steps**

36. The government proposes to introduce any advertising restrictions arising from this consultation at the same time on TV and online. Do you think restrictions should be applied at the same time for TV and online?

**Yes/No/I do not know**

**The Alliance supports introducing advertising restrictions on TV and online at the same time. Including online advertising as well as TV advertising in the introduction of further restrictions reduces the risk of advertising spend being displaced to other platforms. Furthermore restrictions should also be implemented on digital media to create a level playing field and provide maximum protection to all children.**

**Priority should be given to TV and TV-like forms of media, in the case of a delay in introducing restrictions, alongside a monitoring of its impact on online advertising followed by swift action to create a level playing field.**

### **Public Sector Equality Duty**

37. Do you think that introducing further HFSS advertising restrictions on TV and online is likely to have an impact on people on the basis of their age, sex, race, religion, sexual orientation, pregnancy and maternity, disability, gender reassignment and marriage/civil partnership?

**Yes/No/I do not know**

If you answered yes, please explain your answer and provide relevant evidence.

**The Alliance believes that the introduction of further advertising restrictions on TV and online, and other types of media, will ensure health benefits for people of all ages but provide the greatest positive impact on our young by reducing children's exposure to HFSS adverts.**

**The UN Convention on the Rights of the Child sets out a core right to health and states that all children should be protected from a commercialised childhood (1). The introduction to further HFSS advertising restrictions on TV and online, ensures the rights of all children to be protected from exposure to unhealthy food and drink advertising.**

**(1) Scottish Government (2019) <https://www.gov.scot/policies/human-rights/childrens-rights/>**

38. Do you think that any of the proposals in this consultation would help achieve any of the following aims?

**a) Eliminating discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010**

**Childhood obesity is linked to psychological problems such as low self-esteem, anxiety and depression which may lead to discrimination, harassment or victimisation (1). A reduction in childhood obesity is likely to support this aim.**

b) Advancing equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it?

c) Fostering good relations between persons who share a relevant protected characteristic and persons who do not share it?

Yes/No/I do not know

If you answered yes, please explain which aims it would help achieve and how.

If you answered no, could the proposals be changed so that they are more effective?

If you think that proposals could be changed to be more effective please explain what changes would be needed.

**(1) US Centers for Disease Control and Prevention (2019) Childhood Obesity Causes & Consequences. [www.cdc.gov/obesity/childhood/causes.html](http://www.cdc.gov/obesity/childhood/causes.html)**

39. Do you think that the proposed policy to introduce further HFSS advertising restrictions on TV and online would be likely to have a differential impact on people from lower socio-economic backgrounds?

Yes/No/I do not know

If you answered yes, please explain your answer and provide relevant evidence.

**The likelihood of obesity is higher for people living in deprived areas in Scotland, particularly women and children (1). 32% of adults living in the most deprived areas are obese, compared to just 20% of those living in the least deprived areas (2).**

**Tackling inequalities is key to tackling obesity, and the Alliance believes the proposed policy has the potential to have a positive impact on people from lower-socioeconomic backgrounds. Children from low socio-economic backgrounds watch more TV (3), and a report from Cancer Research UK found that more deprived communities are more affected by junk food adverts on TV than people in less deprived communities (4). The report also showed that young people who recall television adverts every day were 40% more likely to be from the most deprived group compared to the least deprived (ibid.).**

- (1) NHS Health Scotland (2017) ScotPHO: Obesity and health inequalities in Scotland, Summary report
- (2) Scottish Government (2017) Scottish Health Survey 2016: volume 1: main report.  
<http://www.gov.scot/Publications/2017/10/2970>
- (3) Ofcom (2017) Children and Parents: Media Use and Attitudes Report  
[https://www.ofcom.org.uk/\\_data/assets/pdf\\_file/0020/108182/children-parents-media-use-attitudes-2017.pdf](https://www.ofcom.org.uk/_data/assets/pdf_file/0020/108182/children-parents-media-use-attitudes-2017.pdf)
- (4) Thomas, F. Hooper, L. Petty, R. Thomas, C. Rosenberg, G. Vohra, J. (2018) "A Prime Time for Action: New evidence on the link between television and on-demand marketing and obesity" *Policy Centre for Cancer Prevention, Cancer Research UK* ([pdf](#))

Our members include:

Action on Sugar  
Association for the Study of Obesity – Scotland Network  
British Dental Association Scotland  
British Dietetics Association Scotland Board  
Cancer Research UK  
Chest Heart Stroke Scotland  
Diabetes Scotland  
Glasgow Centre for Population Health  
Obesity Action Scotland  
Paths for All  
Royal College for Anaesthetists  
Royal College of Nursing  
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Royal College of Physicians Edinburgh  
Royal College of Surgeons and Physicians Glasgow  
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