



**European Public Health Alliance**

rue d'Arlon 39-41  
B-1000 Brussels – Belgium  
Tel + 32 2 233 38 89  
Fax + 32 2 233 38 80

E-mail: [anne@epha.org](mailto:anne@epha.org)  
Web: <http://www.epha.org>



**European Heart Network**

rue Montoyer 31  
B-1000 Brussels – Belgium  
Tel + 32 2 512 91 74  
Fax +32 2 503 35 25

E-mail: [info@ehnheart.org](mailto:info@ehnheart.org)  
Web: <http://www.ehnheart.org>



**Pharmaceutical Group of the EU**

Rue du Luxembourg 19-21  
B-1000 Brussels – Belgium  
Tel + 32 2 238 08 18  
Fax + 32 2 238 08 19

E-mail: [pharmacy@pgeu.org](mailto:pharmacy@pgeu.org)  
Web: <http://www.pgeu.org>



rue d'Arlon 39-41  
B-1000 Brussels – Belgium  
Tel: + 32 2 233 38 74  
Fax: + 32 2 233 38 80

E-mail: [amcneill@ias.org.uk](mailto:amcneill@ias.org.uk)  
Web: <http://www.eurocare.org>



**European Respiratory Society**

rue d'Arlon 39-41  
B-1000 Brussels – Belgium  
Tel: + 32 238 53 63  
Fax: + 32 2 238 53 61  
E-mail:

[florence.bereteletti@ersnet.org](mailto:florence.bereteletti@ersnet.org)  
Web: <http://www.ersnet.org>

## THE TELEVISION WITHOUT FRONTIERS: AN OPPORTUNITY TO PROTECT MINORS

### Suggestions from Health NGOs for a healthier media framework

Members of the European Parliament will start voting this week on the revision of the 'Television Without Frontiers Directive'. Despite much debate on this dossier, we are still far from implementing an audiovisual framework that would fully protect under age children.

From a public health perspective, the revision of this Directive is a key opportunity to impact on the consumption of the unhealthy foods, tobacco products and alcohol –three of the main causes of ill health and contributors to the chronic disease burden in Europe<sup>i</sup>.

Although regulation of advertising *alone* cannot solve the obesity epidemic or harmful alcohol consumption, legal limits on advertising are recommended by the World Health Organisation as among the least expensive and most efficient policy measures to protect minors<sup>ii</sup>.

**MEPs committed to protecting minors now have the opportunity to 'walk the talk' by putting in place a strong regulatory framework and minimum European standards of protection.**

In this document, a coalition of European health NGOs – the European Public Health Alliance, the European Heart Network, Eurocare, the Pharmaceutical Group of the EU, the European Respiratory Society – aims to clarify some crucial aspects of this dossier, destroy some myths that have arisen around it and suggest concrete actions to protect the most vulnerable citizens of Europe.

### Do we have evidence that advertising really influences children's smoking, eating and drinking patterns? - Yes

Research on tobacco policy shows clearly that tobacco advertising encourages young people to start smoking and serves to reinforce the social acceptability of the habit among adults and children alike. 30 years ago, Philip Morris had identified the importance of the young smokers' market to its Marlboro brand. In May 1975 in a document marked 'Confidential' Philip Morris states: "*The teenage years are also important because those are the years during which most smokers begin to smoke, the years in which initial brand selections are made and the period in the life-cycle in which conformity to peer-group norms is greatest*"<sup>iii</sup>.

**Young people constitute an important target group for the alcohol industry**<sup>iv</sup> because they represent the market of tomorrow. As with tobacco, alcohol advertisements portray drinking as being an important part of sociability, physical attractiveness, masculinity, romance, relaxation and adventure<sup>v</sup>. In addition, the fact that many of these ads use elements such as humour, rock music, animation, celebrities or animal characters increases their popularity with under-age television viewers. Unsurprisingly, alcohol commercials are among the most likely to be remembered by teenagers and the most frequently mentioned as their favourites<sup>vi</sup>!

A growing body of research shows that exposure to and enjoyment of such commercials causes minors to develop more positive expectancies and attitudes towards alcohol, which in turn influences drinking at an early age, as well as patterns and levels of alcohol consumption<sup>vii</sup>. This is even more of a concern as nearly all 15-16 year-old students have drunk alcohol at some point in their life, starting on average just after 12 ½ years of age<sup>viii</sup>.

In 2003, the Hastings<sup>ix</sup> review concluded that **food promotion affect children's food preferences, purchase behaviour and consumption** at both a brand level (eg which chocolate bar) and category level (e.g. fruits vs confectionery).

A considerable amount of money is spent by companies marketing unhealthy foods to children, with the great majority spent on TV advertisements. In Greece, the ad-spend on children's food marketing increased by 38% from 2002 to 2003, from €1.3 million to €1.8 million.

In other countries no distinction is made between overall food marketing and food marketing to children, but the figures are still impressive: in the UK £743 million was spent overall on food and drinks advertising in 2003, and some data show that the total amount spent on food marketing is increasing. In Germany, 87% of food advertising budgets is spent on television advertising. Advertising spending in the food industry as a whole in The Netherlands grew by 128% between 1994 and 2003<sup>x</sup>.

In 2006, almost 22 million children in the EU 25 are estimated to be overweight or obese (out of 71.5 million children), rising by 1.2 million per year. Of these children, 5.1 are obese, rising by 0.3 million per year<sup>xi</sup>.

**If commercial communication to minors is not effective at influencing consumption, creating brand loyalty and increasing sales, why is so much money being spent on it?**

### **The European Parliament can take a leading role to protect minors – How?**

MEPs can support amendments which establish the following objective parameters which are easy to monitor and implement.

- **There should be no audiovisual commercial communications for unhealthy food products (i.e. high in fat, sugar or salt) from 6.00 a.m. to 9.00 p.m. This becomes the standard watershed across Europe. Nutrient profiles will establish parameters for unhealthy food products.**
- **In addition to a ban on audiovisual commercial communications for alcoholic beverages aimed at minors, Article 15 needs a new rule setting a general 6am-9pm watershed and Article 3h to be expanded to include alcoholic beverages.**
- **Surreptitious advertising, sponsorship and product placement of unhealthy foods, alcohol, tobacco and medicinal products must be banned.**

### **How to ensure a proper implementation and enforcement of the Directive?**

We note that many amendments call for Member States to encourage self regulation in addition to co-regulatory regimes. We strongly urge you NOT to support these amendments for the following reasons:

- There is not a single normative, monitoring or enforcement approach to self-regulation in the EU. The Inter-Institutional Agreement has not adequately defined self regulatory or co-regulatory techniques.
- Almost none of the current self-regulatory approaches include monetary sanctions and suspension or expulsion of members for non-compliance in the EU.
- Although Article 10 of the EU Treaties states that Member States have the primary responsibility for the transposition, implementation and enforcement of EU legislation, it is the role of the **national courts** to ensure compliance with EU legislation. Self Regulatory Organisations (SRO) do not operate as part of the court system and are not linked to the court system at Member States level. In the case of failure of the SRO system to adequately interpret EU law where can consumers turn to? This puts into question the effectiveness of self-regulation because no appeal is possible.

- Last but not least, the primary purpose of self-regulation is to ensure that advertisements and other forms of marketing do not deceive, mislead or offend consumers, and, in so doing, promote trust in advertisers and advertising among consumers and government authorities. Self-regulation therefore exists to facilitate and promote advertising. However, it is the proliferation and the ubiquity of advertising for certain products (tobacco, unhealthy food, alcoholic beverages etc) which has a direct and negative effect on public health.

The new Audiovisual Directive will set the EU legal framework for commercial communications in the quickly evolving digital environment. As technology increasingly becomes central to our daily lives, public health concerns must be enshrined in this legal framework.

We sincerely hope that MEPs will not miss the opportunity to secure a healthy future for the European Union.

Lara Garrido Herrero  
Secretary General  
European Public Health  
Alliance

Andrew McNeill  
Director  
Eurocare

Fiona Godfrey  
EU Policy Advisor  
European Respiratory Society

Susanne Logstrup  
Director  
European Heart Network

John Chave  
Secretary General  
Pharmaceutical Group of the  
EU

**For more information:**

Anne Hoel,  
European Public Health Alliance  
anne@epha.org  
Tel: +32 2 233 38 89

<sup>i</sup> World Health Organisation Europe "The European health report 2005 - public health action for healthier children and populations", 2005

<sup>ii</sup> Making Choices in Health: WHO Guide to Cost-Effectiveness Analysis

<sup>iii</sup> Philip Morris memo, *The Decline in the Rate of Growth of Marlboro Red*, 1975 quoted in Tobacco Freedom, *The Seduction of American Youth*: <http://www.tobaccofreedom.org/issues/documents/advertising/index.html>

<sup>iv</sup> Eurocare report: Marketing alcohol to young people.

[http://www.eurocare.org/pdf/pubs/mkt\\_alcoholyp.pdf#search=%22eurocare%20marketing%20alcohol%20to%20young%20people%20%22](http://www.eurocare.org/pdf/pubs/mkt_alcoholyp.pdf#search=%22eurocare%20marketing%20alcohol%20to%20young%20people%20%22)

<sup>v</sup> M. J. Chen et al. Alcohol advertising: What makes it attractive to youth? *Journal Health Communications* 10 (2005)

<sup>vi</sup> Aitken, P.P. et al. (1988): Television advertisements for alcohol drinks do reinforce under-age drinking. *British Journal of Addiction* 83: 1399-1419; Aitken, P.P. et al. (1988): Ten to sixteen-year-olds' perceptions of advertisements for alcoholic drinks. *Alcohol and Alcoholism* 23: 491-500.

<sup>vii</sup> Martin, S.E. and Snyder, L.B. and Hamilton, M. and Fleming-Milici, F. and Slater, M.D. and Stacy, A. and Meng-Jinn, C. and Grube, J.W. (2002): Alcohol advertising and youth. *Alcoholism: Clinical and Experimental Research* 26: 900-906.

<sup>viii</sup> Anderson P. and Baumberg B, *Alcohol in Europe*, 2006, London: Institute of Alcohol Studies

<sup>ix</sup> Hastings, G., Stead, M., McDermott, L., Forsyth, A., MacKintosh, A.M., Rayner, M., Godfrey, C., Caraher, M. & Angus, K. (2003). *Review of the research on the effects of food promotion to children*. London: Food Standards Agency

<sup>x</sup> *The Marketing of Unhealthy food to children in Europe*, European Heart Network, 2005

<sup>xi</sup> Estimated burden of paediatric obesity and co-morbidities in Europe. Part 1. the Increase in the prevalence of child obesity in Europe is itself increasing; Rachel Jackson-Leach & Tim Lobstein, *International Journal of Paediatric Obesity*, 2006;1:26-32.