



**Department for Culture, Media and Sport
Consultation on Product Placement on Television**

Contact Name: Nicola Evans, Food and Nutrition Programme Manager
Organisation: Heart of Mersey
Address: Burlington House, Crosby Road North, Liverpool L22 0QB
Tel: 0151 928 7820
Email: nicola.evans@heartofmersey.org.uk
Date: 8th January 2010

About Heart of Mersey

Heart of Mersey (HoM) is a cardiovascular disease (CVD) prevention charity primarily funded by the Primary Care Trusts and Local Authorities across Merseyside and Western Cheshire. HoM aims to co-ordinate a strategic approach to preventing the high rates of cardiovascular disease and associated inequalities in our region. Heart of Mersey is working to achieve its aim through advocacy, campaigns, information and research. HoM works in partnership with a wide range of partners to achieve its aims.

HoM focuses on improving nutrition and reducing the harm from tobacco as the key modifiable lifestyle factors in reducing not only CVD but other non-communicable diseases such as cancer, diabetes and chronic respiratory disease.

In comparison with the rest of England, Merseyside and Western Cheshire suffer disproportionately from CVD. CVD is the biggest contributor to the health inequalities the region suffers from.

Summary

Heart of Mersey (HoM) welcomes the opportunity to respond to this consultation on the future regulation of product placement on television in the UK. HoM would like to strongly express its concern on the negative impact this may have on children in particular. Children and young people need to be better protected from advertising and allowing product placement can be seen as an entirely retrograde step which completely ignores public health concerns with young people's lifestyles and health which have been picked up elsewhere by government.

Research into the health and wellbeing of children shows that their daily diets raise major concerns about their current and future health^{i, ii}. Currently in the UK children on average eat only 2.5 of the 5 portions of fruit and vegetables a day^{iii, iv}. According

to a national survey, children between 1 and 4 years in Britain obtain about 20% of energy from NME sugars, which is twice the current recommendation.^v Children are eating 40% more saturated fat than the maximum recommended levels for health. High intakes lead to raised LDL cholesterol levels and the development of plaques in children as young as three years old.^{vi} Taste preferences develop early on in childhood and are a major factor on people's consumption of foods high in saturated fat.

Nationally around 1 in 3 children are either overweight or obese^{vii}. In the North West region obesity affects 15% of all children under the age of 11 years slightly higher than the national average of 14.8%^{viii}. In Cheshire and Merseyside our children have some of the worst diets in the country for example up to 45% of children under 5 have experienced tooth decay compared with the national average of 39%^{ix}.

Hence HoM is very concerned about a possible policy reversal in relation to the discretionary implementation of the EU directive on Audio Visual Media and product placement. Potentially this could lead to high profile brands of HFSS (High Fat Sugar and Salt) foods and alcohol appearing in programmes popular with children. HoM strongly believes that children should be protected from the marketing of unhealthy food and drink products and supported by environments that promote healthy food practices. Providing environments supportive of improving children's diets will not only tackle high levels of cardiovascular disease but also the many risk factors associated such as type II diabetes and obesity.

Smoking remains the single greatest cause of preventable illness and death, killing more people than those due to alcohol, obesity, illegal drugs and road traffic accidents combined. The prevalence of smoking in the North West is higher than most other regions in England, with almost one in four (23%) of the population currently smoking. Currently, 63,000 children aged 8-15 years and 380,000 aged 14-17 years in the North West smoke. Two-thirds of regular smokers start before the age of 18, the legal minimum age for the purchase of tobacco, and two-fifths start before the age of 16^x. Young people are exposed to a mix of personal, social and environmental influences that serve to normalise the habit and encourage the onset of smoking, despite its addictiveness, expense and adverse consequences.

HoM appreciates the government's progress to date in supporting the above objectives however product placement in broadcast media is a form of advertising that will have an effect on increasing promotional messaging communicated to viewers/listeners over and above current levels created by spot advertising and sponsorship.

Studies show that children and adults are particularly susceptible to embedded brand messages and these operate at an unconscious level. A recent survey of 1,349 UK adults has found that the overwhelming majority of respondents, 91%, do not think it is right to influence children with product placement^{xi}. Claims that children will be protected because the ban will remain for children's programmes ignore the fact that around 70% of the television that children watch is outside the hours of dedicated children's programming particularly during early evening soaps and game shows.

HoM would therefore urge the government when considering any future review of the AVMS Directive to retain a ban on product placement in broadcast media.

Responses to Specific Questions

1. What if any, viewer and other safeguards should there be additional to those required by the AVMS Directive?

As previously stated HoM would urge the government that under the new AVMS directive product placement be prohibited in all British made Audio Visual Media. Proposed safeguards will not protect the public and children in particular from the effects of embedded brand messages operating at an unconscious level. If changes are to be made to the current AVMS Directive, at an absolute minimum Heart of Mersey would recommend product placement should not be permitted in any programmes appearing before the 9pm watershed.

Children

15. Should any or all product placement be restricted or prohibited in programmes with a disproportionately high child audience?

Heart of Mersey would strongly recommend that product placement be prohibited in any programmes with a disproportionately high child audience. International evidence from the US, Germany, Hong Kong and New Zealand^{xii-vi} has highlighted the pivotal role of tobacco placement in under 18 films as a primary recruiter of adolescents to smoking. Studies confirm that young people are three times more likely to start smoking if they see smoking in films and sixteen times more likely to develop positive feelings towards smoking if they see their favourite star light up on screen. A US longitudinal study of over 3,500 10 to 14 year olds^{xii} concluded that half of youth smoking (52%) could be attributable to exposure to smoking in films. Moreover a dose-response relationship was demonstrated; the greater the level of exposure, the higher the likelihood of smoking initiation. This was independent of other factors linked to adolescent take up including parental and peer group smoking behaviour.

70% of the television that children watch is outside the hours of dedicated children's programming particularly during early evening soaps and game shows. However prohibition of product placement before a 9pm watershed would be Heart of Mersey's preferred method of protecting children from the marketing effects of product placement.

18. Should there be restrictions on placing certain types of products in programmes with a disproportionately high child audience?

Studies have highlighted the impact of tobacco marketing in encouraging young people to take up smoking^{xviii}. Brand imagery is much more important to young people and they respond more effectively to it than older age groups. Similarly, advertising does affect children's dietary choices, we must use controls over

advertising to improve children's diets, and protect them from marketing of foods high in fat, salt and sugar. The current rationale used to prevent advertising of HFSS to children through television media should also be used to protect children from the marketing effects of product placement particularly in those programmes with a disproportionately high child audience including sports programmes and popular entertainment programmes. Children should not be subjected to advertising of unhealthy food while they are forming dietary habits for life.

19. If so, should those restrictions be the same as or greater than those which are currently in place for the scheduling of spot advertising of those products?

HoM believe that any restrictions should be greater than those which are currently in place for the scheduling of spot advertising and children protected by a 9pm watershed, before which all product placement is prohibited. Children's food promotion is known to be dominated by television and does have an influence over children's food preferences and their purchasing behaviour. The majority of the promotions are unhealthy foods, known as the 'big Five' e.g. pre-sugared breakfast cereals, soft drinks, confectionary, savoury snacks and fast food outlets^{xix}. If the UK is to tackle the current obesity epidemic and improve the health and well being of children, this type of advertising and product placement must be prohibited.

Undue prominence

20. How could 'undue prominence' be avoided, given the commercial imperative for audiences to recognise the products and services that have been placed?

The concept of 'undue prominence' appears to be a contradiction to a principle within the CAP code, that advertising should be clearly recognised as advertising, and distinguishable from editorial content^{xx}, product placement is clearly a form of advertising and it is important that people know when they are being advertised to. Heart of Mersey also wishes to express its concern that product placement in programming given 'undue prominence' is equally as powerful in influencing purchasing behaviour unconsciously as studies have shown^{xxi, xxii}.

Tobacco, alcohol, HFSS foods, gambling

23. Should television placement of smoking accessories such as cigarette papers and pipes be prohibited?

Yes, it should be totally prohibited. There is strong evidence that tobacco advertising and promotion encourages children to smoke, which was the justification for the Tobacco Advertising and Promotion Act (TAPA) in 2002. This introduced a comprehensive UK ban on tobacco advertising, promotion and sponsorship through print and visual media channels. There is therefore no reason to allow any type of advertising or promotion of tobacco-related products in any media, including television placement of smoking paraphernalia such as cigarette papers and pipes. Any such promotion is a clear endorsement of smoking, which defies the basis of the ban on tobacco advertising and promotion in this country and should not be allowed.

Smoking is still regularly depicted in a large number of early evening soaps e.g. EastEnders, which can be viewed by children and young people. This misleads adolescents into thinking that tobacco use is normal, socially acceptable and more common than it actually is. On a local level, Lime Productions in Merseyside has successfully chosen to remove smoking from their teen soap 'Hollyoaks' without adverse consequences to their viewing ratings. We would therefore support the complete removal of smoking images in television programmes that could be viewed by an under 18 audience before the 9pm watershed in order to decrease the number of young people exposed to smoking images and initiating tobacco use.

24. Should television placement of alcohol, HFSS foods or gambling be subject to an outright prohibition; or, if not prohibited, should it be subject to restrictions of some kind?

HoM firmly believes that placement of alcohol, HFSS foods or gambling are subject to an outright prohibition. At a minimum, controls should ensure that programmes

Monitoring

27. What methods of assessment and monitoring would be most effective in ensuring that there was accurate and reliable information about the actual effects of any introduction of product placement in these areas?

HoM is concerned that this would be a challenging concept and difficult in that product placement and particularly placement of products that are not 'unduly prominent' create an effect unconsciously on the viewer and therefore difficult to monitor.

Signalling Product placement to viewers

35. When should it be notified to viewers – should we go beyond the EU requirement for notification before and after the programme and after any ad breaks?

HoM is not aware of any evidence that indicates notification of product placement before or after programmes, which contain placed products, has an impact on this type of marketing. Signalling before and after the programme will not have any effect on those viewers who dip in and out of programmes.

36. Should notifications to viewers mention the product(s) which has or have been placed?

HoM is not in favour of notifications that mention the product as part of the signaling process as this will only further promote the product and contradict the concept of 'undue prominence'.

References

- i. Berenson 2002; Berenson G.S. Childhood Risk Factors predict adult risk associated with subclinical cardiovascular disease. The Bogalusa Heart Study. Am J Cardiol. 2002 Nov 21; 90 (10c): 3L – 7L.

-
- ii. Vilkkari JS, Niinikoski H, Juanda M, Raitakari OT, Lagstram H, Kaitosaari T, Ronnema T, Simell O. Risk Factors for Coronary Heart Disease in Children and Young Adults. *Acta Paediatr Suppl.* 2004; 93 (446): 34 -42.
 - iii. National Diet and Nutrition Survey: young people aged 4 to 18 years. Volume 1: Report of the diet and nutrition survey
 - iv. C. Deveril (2002). Fruit and vegetable consumption. In Health Survey for England 2002 report, The Health of Children and Young People. Chapter 3
 - v. Crawley, H. Eating Well for under 5's in Child Care. Caroline Walker Trust. 2006.
 - vi. Rogers S, Emmet M and ALSPAC Study Team. 2001. Fat content of the diet among preschool children in Southwest Britain: II. Relationship with growth, blood lipids and iron status. *Paediatrics* 108: 49.
 - vii. Health Survey for England. 2005.
 - viii. Obesity among children under 11, DH, 2006.
http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalassets/dh_065358.pdf
 - ix. The Dental Observatory, 2006. DMT data for Primary Care Trusts. www.dental-observatory.nhs.uk
 - x. Office for National Statistics, (2008) *General household survey, 2006*. London: The Stationary Office.
 - xi. Red Shift Research <http://www.redshiftresearch.co.uk/index.aspx?p=319>
 - xii. Dalton MA, Sargent JD et al. (2003) Effect of viewing smoking in movies on adolescent smoking initiation: A cohort study. *The Lancet* **362**;9380:281-285.
 - xiii. Goldberg ME. (2003) American media and the smoking-related behaviors of Asian adolescents. *Journal of Advertising Research* **43**:2-11.
 - xiv. Charlesworth A & Glantz S. (2006) Smoking in the Movies Increases Adolescent Smoking: A Review. *Pediatrics* **116**(6):1516-1528.
 - xv. Polansky J & Glantz S. (2007) *First-Run Smoking Presentations in U.S. Movies 1999-2006*. University of California Center for Tobacco Control Research and Education.
 - xvi. Hanewinkel R & Sergeant JD. (2007) Exposure to smoking in popular contemporary movies and youth smoking in Germany. *American Journal of Preventive Medicine* **32**:466-473.
 - xvii. Dalton MA, Sargent JD et al. (2003) Effect of viewing smoking in movies on adolescent smoking initiation: A cohort study. *The Lancet* **362**;9380:281-285.
 - xviii. Hastings, G et al (2008). *Point of Sale Display of Tobacco Products*. The Centre for Tobacco Control Research, University of Stirling.
 - xix. Review on research of the effects of food promotion to children, final report, prepared on behalf of the food standards agency 2003.
<http://www.food.gov.uk/multimedia/pdfs/foodpromotiontochildren1.pdf>
 - xx. http://www.asab.org.uk/asa/codes/tv_code/tv_codes/Section+2+-+Programmes+and+Advertising.htm

-
- xxi. Russell C.A. 2002. Investigating the effectiveness of product placement in television shows: The role of modality and plot connection congruence on brand memory and attitude. *Journal of Consumer Research*, 29, 306-318.
- xxii. Law S & Braun K.A 2000. I'll have what she's having: Gauging the impact of product placement on viewers. *Psychology & Marketing*, 17, 1059-1075.