

Unhealthy food and beverage advertising in outdoor spaces and on publicly owned assets:

A scoping review of the literature



Prepared for Cancer Council Western Australia by Kathryn Backholer, Alexandra Chung, Christina Zorbas, Devorah Riesenberg and Ruby Brooks from the Global Obesity Centre, Institute for Health Transformation, Deakin University

TRANSFORMATION

13 November 2020









Acknowledgements: We would like to acknowledge the input and insights from Kelly Kennington and Ainslie Sartori from the Cancer Council Western Australia.

Contents

1.1 Executive Summary
2.1 Introduction
2.1.1 Overweight and obesity5
2.1.2 Unhealthy food and beverage marketing5
2.1.3 Regulation of food and beverage advertising in Australia6
2.1.4 Government policies restricting unhealthy food and beverage advertising on publicly owned assets7
2.1.5 The Western Australian context7
2.1.6 Objectives
3.1 Methods9
3.1.1 Overview
3.1.2 Part 1 Scoping review9
3.1.2.1 Overview and search strategy9
3.1.2.2 Eligibility criteria10
3.1.2.3 Article selection11
3.1.2.4 Data charting11
3.1.2.5 Critical appraisal12
3.1.2.6 Synthesis of results12
3.1.3 Part 2 Industry submissions analysis12
4.1 Results
4.1.1 Overview of included studies14
4.1.2 Synthesis of Findings15
4.1.2.1 Objective 1
4.1.2.2 Objective 2
4.1.2.3 Objective 3
4.1.2.4 Objective 4
5.1 Discussion
6.1 Conclusion
7.1 References
Appendix

1.1 Executive Summary

Unhealthy diets, overweight and obesity are the greatest risk factors for death and disease in Australia (1) and globally (2). In Western Australia, just over two in three adults, and one in four children are affected by overweight or obesity (3, 4). The social and economic implications for individuals, families, communities and societies are substantial - recent estimates suggest that in WA the cost of obesity will reach \$610m by 2026, if current trends continue (5). Yet the very foods and beverages that make us sick are incessantly marketed to us and our children in ways that influence attitudes, preferences, expectations and consumption of these products across the life-course (6), leading to excess weight gain, obesity, and positive social norms relating to unhealthy food consumption. Our children need to be protected from these harmful impacts of unhealthy food marketing, which requires Government action that puts health before profits. Western Australia is a leader in public health and now has an opportunity to make further investments in the future health of their children by leveraging state powers to enact legislation to ban unhealthy food advertising on state-owned assets (e.g public transport, billboards, sporting venues). These advertising mediums are highly visible and cannot be avoided as children go about their daily lives.

The aim of this report is to support the case for government policy in Western Australia by synthesising the international literature to 1) identify and describe existing government-led policies that restrict unhealthy food advertising in outdoor spaces and/or on publicly owned assets; 2) identify factors perceived to have influenced the adoption and/or implementation of these policies; 3) describe potential health and economic impacts of restricting unhealthy food advertising in outdoor spaces and to 4) identify key arguments used by food and advertising industries to oppose such policies and provide evidence-based counter-points.

Four jurisdictions were identified that have regulations in place that ban the advertising of unhealthy foods and beverages specifically on publicly owned assets. Three of these were targeted at public transport and/or stations (London, Australian Capital Territory and Amsterdam) and one targeted at Ministry of Health premises and entities (Brazil). An additional five jurisdictions were identified that had implemented broader-based policies, which inherently capture marketing in outdoor spaces or on publicly owned assets. None of these policies covered the full breadth of mediums and entities that enable unhealthy food advertising in outdoor spaces or on publicly owned assets or sufficiently covered all marketing to which children are exposed to in these spaces.

Common factors identified that ultimately enabled policy adoption and implementation included collaboration and coalitions among multi-sectoral actors and effective partnerships across levels of government, academia, and NGOs, backed by strong and influential political leadership and championing. Policy alignment and/or common policy agendas and long-

term visions, including clear policy objectives, were also identified as critical, particularly during changes of leadership. Industry opposition and political lobbying by the food, media and advertising industries was consistently identified as the biggest challenge to adopting and implementing policy to restrict unhealthy food advertising. This included the risk of legal threats and lawsuits, criticisms of regulatory design and negatively framing policy and public discourse. Ultimately, this appeared to have led to watering down of the policy scope and regulatory design in many jurisdictions.

No literature was identified that had directly and specifically evaluated the health or economic impacts of policies that restrict unhealthy food advertising in outdoor spaces or on publicly owned assets. However, the literature clearly and consistently demonstrated that unhealthy food advertising in outdoor spaces surrounding schools and on public transport is prolific in many countries around the world. Evidence also suggested a significant association between food advertisements on public transport or in outdoor spaces and confectionary (7), snack consumption (8) and obesity prevalence (9). There is no evidence to date to suggest that restricting unhealthy food advertising has negative financial impacts, as claimed by the food and beverage and advertising industries.

Other key arguments made by industry to oppose regulation included the need for people to take responsibility for their own health, a lack of evidence demonstrating that unhealthy food marketing influences diets or weight, that similar policies have been ineffective and claims of inadequate regulatory design. All key arguments have been rebutted in this report with evidence-based counter-points.

In summary, the findings from this report, when combined with the broader evidence-based literature on unhealthy food marketing, demonstrates that policies to restrict unhealthy food advertising in outdoor spaces and on publicly owned assets are feasible, likely to be effective at improving population diets and health and reducing health inequities, with minimal financial implications. The food and advertising industries will remain a formidable force against any proposed regulation and strong coalitions and leadership will be important to drive the policy agenda forward.

2.1 Introduction

2.1.1 Overweight and obesity

Overweight and obesity is a significant public health challenge. In Australia, overweight and obesity is a leading contributor to the national burden of disease, second only to tobacco use (1). In Western Australia (WA), just over two in three adults, and one in four children are affected by overweight or obesity (3, 4). Recent estimates suggest that in WA the cost of obesity will reach \$610m by 2026 if current trends continue (5).

Unhealthy diets are a key, modifiable risk factor for overweight and obesity (10) and are a leading risk factor for the burden of disease, globally (11). Australian children consume excessive quantities of unhealthy food and beverages compared to recommended national dietary guidelines. For example, among children aged 2-3 years, around 30% of daily energy comes from unhealthy, discretionary, food and beverages. This figure rises to 41% for teens aged 14-18 years (12). Not only does this pose serious health risks, but also violates children's rights to the highest attainable standard of health. This right to health, as outlined in the UN Convention on the Rights of the Child (ratified by Australia in 1990) states that parties should act appropriately to combat disease and malnutrition.

Increasing evidence also demonstrates that obesity is associated with a higher risk of COVID-19 complications and hospital admission (8), intensive care surveillance (8) and a need for invasive mechanical ventilation (9). Building resilient populations to the ongoing threat of COVID-19 and other future pandemics will require prioritisation and implementation of comprehensive obesity prevention policies.

2.1.2 Unhealthy food and beverage marketing

Unhealthy food marketing (foods and non-alcoholic beverages high in fat, salt and/or sugar) is ubiquitous around the world (13). Clear and consistent evidence demonstrates that marketing of unhealthy foods and beverages negatively influences dietary preferences and consumption among children and adults (6, 8, 14, 15). This occurs through increased awareness of products and brands (16, 17), increased brand loyalty (16, 18) and the reinforcement of positive societal and cultural norms around unhealthy foods (16, 19, 20). Not only does unhealthy food marketing increase unhealthy food consumption (6), but it increases total energy intake (16). This is important as excess energy intake ultimately leads to excess weight gain and obesity (21).

The food and beverage industry utilises a range of settings and mediums for marketing (22). Marketing in outdoor spaces is unique in that it is highly visible and, in most instances, cannot be avoided as one goes about their daily life. A large part of this outdoor marketing is by way of advertising, often on government owned land (e.g sporting venues or transport

hubs) or assets (e.g public transport), and is at odds with the public and preventive health imperatives of governments.

A 2020 audit of outdoor food advertising within 500 metres of Perth schools found that 74% of outdoor food advertising was for unhealthy food, with alcohol, fast food and sugary drinks the top three most frequently advertised products (23). This study also found a higher proportion of total food advertisements, unhealthy food advertisements and alcohol advertisements (but not healthy food advertisements) within 250m of schools located in disadvantaged neighbourhoods compared to schools located in more affluent areas (23). Another study conducted in Perth in 2019 found that 31% of advertisements on bus shelters within 500m of schools promoted unhealthy products (24). These findings are not unique to Western Australia. In Sydney, a 2017 study of food and beverage advertising on the metropolitan train network found one quarter of all advertisements were for food or beverages, and of those, almost 85% were promoting unhealthy food and beverages (22). Similarly, in 2019, 61% of food advertisements found on Melbourne's public transport network (displayed in and around train stations, tram stops, bus stops and near schools) were found to promote unhealthy food and drinks (25).

2.1.4 Existing controls for food and beverage advertising in Australia

Food and beverage advertising in Australia is largely governed by industry-led codes and practices. This includes the Australian Association of National Advertisers (AANA) Code of Ethics (26), the AANA Food & Beverages Advertising Code (27), and the AANA Children's Advertising Code (28). Specific to outdoor advertising, the Outdoor Media Association (OMA) administers a Code of Ethics (29) that requires members to adhere to the codes administered by the AANA. The OMA also recently introduced their National Health and Wellbeing Policy, restricting advertising of unhealthy food and drinks within 150 metres of a primary or secondary school (30). This policy came into effect in July 2020.

The Australian Food and Grocery Council (AFGC) represent manufacturers of food, beverage and grocery brands in Australia. The AFGC developed two codes that relate to food advertising to children: the Responsible Children's Marketing Initiative (RCMI), which applies to food and beverage advertising to children under 12 years of age (31), and the Quick Service Restaurant Initiative for Responsible Advertising and Marketing to Children (QSRI), which applies to fast food advertising to children under 14 years of age (32). Since June 2019 these initiatives have been incorporated into the AANA Food & Beverages Code, with AANA assuming responsibility for administering these codes in July 2020.

Public health organisations have expressed concern over the inadequacy of these voluntary codes of practice. The reasons for this include the limited definition of what is considered to

be 'directed to children', the limited forms of marketing covered under the codes (e.g. sports sponsorship and product packaging are not included), the inadequate classification of 'healthier' foods, which can be marketed to children (e.g. high sugar breakfast cereals and ice-creams are considered acceptable) and the lack of independent monitoring and enforcement (33).

Unsurprisingly, public health organisations in Australia are advocating for a comprehensive and enforceable legislative response to protect children from the harmful impacts of unhealthy food marketing (33, 34). This is supported by international public health experts and health and medical agencies including the World Health Organization, the World Cancer Research Fund and UNICEF (35-40).

2.1.5 Government policies restricting unhealthy food and beverage advertising on publicly owned assets

To date, governments in Australia, the United Kingdom and Brazil have introduced legislation to restrict unhealthy advertising on government owned assets. The Australian Capital Territory Government introduced a ban on unhealthy food advertising (as well as alcohol and gambling) on all government run bus services in 2015. This policy has since been extended to include light rail services. In London, a ban on unhealthy food advertising across London's entire public transport network, including underground and overground rail, buses and bus shelters was implemented in February 2019. In Brazil, a ban on advertising ultraprocessed food on all Ministry of Health premises and entities was introduced in 2016.

Unlike many other marketing mediums and settings (e.g TV, digital), unhealthy food advertising on publicly-owned assets is under the control of States and Territories in Australia.

2.1.6 The Western Australian context

Western Australia is a leader in public health, with existing policies banning alcohol advertising on buses and at train stations (41). There is now an opportunity to make further investments in the future health of Western Australian children and citizens by protecting them from the harmful impacts of unhealthy food marketing as they go about their daily lives. The removal of unhealthy food and drink advertising from government owned assets has been recommended in a number of key reports and has the support of the medical and public health sectors, and the broader community. These are as follows:

• A Joint Statement on Protecting Children from Unhealthy Food and Drink Advertising on State-owned Assets was made in September 2020, signed by numerous Western Australian public health and medical organisations (42).

- The Western Australian Health Promotion Strategic Framework 2017-2021 called for stronger controls across all levels of government to reduce exposure to the marketing and promotion of discretionary food and drinks, particularly for children (43).
- The removal of unhealthy food and drink promotions from state assets is a domain for action in the 2018 Western Australia Preventive Health Summit Summary Report (44).
- Banning unhealthy food and drink promotions from all State premises was included as one of the recommendations of the 2019 Sustainable Health Review Final Report (45).
- Removing unhealthy food and drink promotions from all State premises is a recommended action for Western Australia in the Food Policy Index, which tracks progress on policies for tackling obesity and creating healthier food environments progress update (2).
- There is public support in Western Australia for removing unhealthy food advertisements from public transport. A 2019 Cancer Council WA survey found that 72% of adults support removing unhealthy food ads from public transport (46, 47).

This report presents a review and synthesis of the international evidence to support the adoption and implementation of a Western Australian state-led policy to restrict unhealthy food and beverage advertising on publicly owned assets.

2.1.7 Objectives

- 1. Identify and describe existing government-led policies that restrict unhealthy food advertising in outdoor spaces or on publicly owned assets.
- 2. Identify factors perceived to have influenced the adoption and implementation of policies restricting unhealthy food advertising in outdoor advertising spaces or on publicly owned assets.
- 3. Describe the potential health and economic impacts of restricting unhealthy food advertising in outdoor spaces or on publicly owned assets.
- 4. Identify the key arguments used by food and marketing industries to oppose policy proposals to ban unhealthy food and beverage advertising in outdoor spaces or on publicly owned assets.

3.1 Methods

3.1.1 Overview

There are two parts to this report: Part 1 (objectives 1-3) consists of a scoping review to synthesise the current evidence regarding the adoption and implementation of government-led policies to ban unhealthy food advertising in outdoor spaces or on government owned assets. Part two (objective 4) consists of an analysis of industry submissions made to consultations regarding unhealthy food and beverage marketing in the Australian Capital Territory and London.

3.1.2 Part 1 Scoping review

3.1.2.1 Overview and search strategy

Academic and grey literature was systematically searched (see below). The academic literature was purposefully broad to capture literature addressing any of the three research objectives. The grey literature search was iterative, first identifying jurisdictions with relevant policies adopted and implemented, followed by a broad search to identify any grey literature related to each of these jurisdictional policies that met any of our three research objectives. Because we anticipated that there would be very little literature evaluating real-world policies, we included studies reporting the prevalence of, or exposure to, unhealthy food marketing in outdoor spaces or on publicly owned assets to identify the potential impacts on advertising as the first parameter along the policy-health pathway. We also included articles reporting on the association between unhealthy outdoor advertising and diet to understand the potential impacts on health.

Academic Literature search

We systematically searched five electronic databases covering a range of disciplines including health, public health and business. These included:

- Ovid MEDLINE
- Embase
- Web of Science
- Global Health (EBSCO)
- Business Source Complete (EBSCO).

Reference lists of all included articles were scanned for additional relevant studies.

Search terms were identified for each of the following concepts: 'food and beverage', 'advertising', 'outdoor/public assets' and combined using the operator 'AND'. See Table 1 for a list of search terms. Search terms were applied to title, abstract and keyword searches.

Subject headings were used where applicable, and the strategy was translated as necessary for each database. No date limits were set. The search was conducted in August 2020.

Food and beverage	Advertising	Outdoor
Food*	Advertis*	Outdoor
Beverage*	marketing	Public*
Drink*		train, subway, bus,

Table 1. Database search term	۱S
-------------------------------	----

Grey Literature search

As recommended for grey literature searches, we used a variety of methods to search for relevant grey literature (48-50). We manually searched the WCRF NOURISHING database (<u>www.policydatanase.wcrf.org;</u> an overview of implemented government policy actions implemented around the world); the WHO Global database on the Implementation of Nutrition Action (GINA) (<u>www.who.int/nutrition/gina</u>; a platform for information on nutrition policies and action around the world); and Australia's Obesity Evidence Hub (<u>www.obesityevidencehub.org.au</u>; a website that aims to identify, analyse and synthesise the evidence on obesity around the globe), to identify jurisdictions where government-led policies have been implemented to restrict advertising in outdoor spaces or on publicly owned assets and to obtain details of regulatory design.

Next, a focused search of government websites of jurisdictions where policies had been implemented was undertaken to identify further details of regulatory design and any details on policy evaluation (e.g. regulatory impact statements). Where we identified that a policy has been implemented in a jurisdiction but could not find further information relating to the policy on the government website, we contacted our known networks for additional information. Finally, Google Scholar was used to locate any additional relevant details for the policies and jurisdictions identified in the policy database searches, scanning the first 10 pages (100 entries) returned for each search.

3.1.2.2 Eligibility criteria

Academic literature

Inclusion criteria for this review was intentionally broad, designed to capture the objectives of the review (51). Articles were eligible for inclusion if they met the following criteria: (i) the study reported on the adoption or implementation (including barriers and enablers) or evaluation of government-led policy to restrict unhealthy food or beverage advertising in outdoor spaces or on publicly owned assets (ii) the study reported on the prevalence or impact of unhealthy food or beverage advertising in outdoor spaces or on publicly owned assets (including, but not limited to, billboards, digital billboards, posters, public transport and public transport waiting areas (bus shelters, train stations), shopping centre or building exteriors) on food consumption or health. Advertising was defined as material published that draws the attention of the public to promote a product, service, or organisation (27).

Articles were excluded for the following reasons: (i) the study examined unhealthy food and beverage marketing in mediums and settings outside the scope of this review (e.g. television, online, in schools or in retail stores); (ii) the study was not published in English; (iii) the article was a conference abstract, book, editorial, letter to the editor, news article or commentary.

Grey literature

Grey literature was deemed relevant if it reported on any aspects of a government-led policy to restrict unhealthy food and beverage marketing in outdoor spaces or on publicly owned assets, including policy implementation or evaluation. This included policy documents (i.e. policy proposals, implementation plans, or evaluations), academic articles, media releases, and reports from NGOs (e.g. the WHO, WCRF). Literature pertaining to industry-led codes was excluded.

3.1.2.3 Article selection

Academic literature

Following the search process and removal of duplicates, all titles and abstracts were each screened independently by two members of the research team. Each article deemed potentially relevant based on title and abstract was obtained, read in full, and assessed against the eligibility criteria by a member of the research team. The first 25% of full text articles were assessed in duplicate by a second member of the research team, with discrepancies discussed and resolved between authors. Because there was high concordance between authors (95%) all remaining articles were assessed by a single member of the team.

Grey literature

One author conducted the search and extracted the relevant data sources and information. Any queries (e.g., concerning the type and depth of information being retrieved) were iteratively discussed and resolved with other members of the research team.

3.1.2.4 Data charting

Charting tables were developed and piloted during the development of the review protocol. These tables were used to record key details of each included article from the academic and grey literature.

The following information was recorded from all academic literature (where available): authors, title, publication date, setting (country or town), type of study (descriptive / observational study, modelling study, evaluation), study aim, summary of policy design, advertising medium, key evidence used to support the policy, key findings or recommendations of the report or study.

From grey literature sources, the following information was extracted and recorded: characteristics of regulatory design, including the regulatory system (mandatory/voluntary), policy objective, food classification system, advertising content targeted, mediums included in the policy, regulatory exemptions and monitoring system. We also collected information related to policy evaluation, including the potential impact on advertising, health or economics. Factors perceived to have influenced policy adoption or implementation were also identified and extracted.

3.1.2.5 Critical appraisal

The purpose of this scoping review was to map and describe existing evidence across the academic and grey literature, therefore appraisal of the methodological quality of included evidence has not been conducted (52, 53).

3.1.2.6 Synthesis of results

Because the information sources for this review were drawn from a range of study designs and document types, across academic and grey literature, a narrative synthesis was considered the appropriate method to synthesise findings to answer our review objectives. To do this, evidence collated from academic and grey literature sources was presented in tables and subsequently mapped to each of the three review objectives.

3.1.3 Part 2 Industry submissions analysis

Submissions were obtained from the food and beverage and advertising industries to the 2015 community consultation on 'Food and Drink Marketing in the Australian Capital Territory (ACT)' (n=5) and to the consultation on the proposal to ban advertising of unhealthy food on Transport for London's estate in 2018 (n=31). The ACT consultation was focused on ways to increase the availability and promotion of healthy food and drinks and reduce the marketing of unhealthy food and drinks, particularly when aimed at children. This consultation led to a ban on unhealthy food advertising on ACT-owned buses and light

rail. The London consultation focussed specifically on a ban on the promotion (directly or indirectly) of food or non-alcoholic drinks that are high in fat, salt and/or sugar on services run or regulated by Transport for London, which was subsequently adopted and implemented (further details on these policies can be found in Table 3). All submissions to these consultations were read in full to identify key examples of industry tactics, categorised into the four main types outlined by the World Cancer Research Fund - 'delay', 'divide', 'deflect' or 'deny' (39) (see Box 1 for definitions of tactics). Key opposing arguments to regulate unhealthy food advertising by industry were also extracted and are presented alongside evidence-based counter arguments.

Box 1: Key industry tactics employed by industry to oppose regulatory action, adapted from the World Cancer Research Fund (54)

Delay: Delay tactics are used by industry to draw out the implementation of regulation. For example, industry may call for more research before decisions are made.

Divide: Divisive tactics aim to attack the proposed regulation, and present industry's desired alternative. Divisive tactics can include political lobbying or funding research that opposes the evidence of the effect of marketing restrictions.

Deflect: Deflection is a tactic used to try to shift the focus of the debate from the real problem to other issues. This includes reframing issues and drawing attention away from regulatory action.

Deny: Denial tactics are used to suggest that the problem doesn't exist, that evidence is lacking or inconclusive, or that government regulation won't work.

4.1 Results

The academic literature database search returned 11,936 potentially relevant citations. After removing duplicates and screening titles and abstracts for relevance, 295 full text articles were retrieved and reviewed in full, with 36 articles included in the review after assessment against the inclusion and exclusion criteria. The primary reason for exclusion was not reporting on advertising in outdoor spaces or on publicly owned assets. The article selection process is presented in Figure 1.



Figure 1: Search results and article selection for academic literature

Grey literature searching identified relevant policy information from the WCRF NOURISHING database (n=10), the WHO Global database on the Implementation of Nutrition Action (GINA; n=9) and Australia's Obesity Evidence Hub (n=3). A Google search revealed two further potentially relevant policies. After removing duplicates and assessing policies against our inclusion criteria, 11 jurisdictional policies were included for a focused search of relevant government websites to identify further details for each policy.

4.1.1 Overview of included studies

A detailed description of all included studies from the academic literature can be found in Appendix 1. A majority of studies reported on data obtained in the United States (n=11), Australia (n=10) and New Zealand (n= 6), with a further two studies from the United Kingdom, and one each from Canada, Sweden, Chile, Ghana, Jamaica and Indonesia, The Philippines and Mongolia (the latter two included in a single study). From the grey literature searching, we identified nine jurisdictions with relevant policies in place. Seven of these were statutory regulations and two government-led voluntary regulations.

All results are summarised below, according to the four research objectives.

4.1.2 Synthesis of Findings

4.1.2.1 Objective 1: Existing policies that restrict unhealthy food advertising in outdoor spaces or on publicly owned assets

Nine jurisdictions were identified with government-led policies that ban or restrict unhealthy food advertising in outdoor spaces or on publicly owned assets. These policies were diverse in policy objectives, the mediums and food groups covered, and the regulatory system used. London, Amsterdam and the Australian Capital Territory (ACT) have implemented policies to ban unhealthy food and beverage advertising on their public transport networks. In London the Transport for London (TfL) advertising policy was revised in 2019 to update standards such that the promotion (directly or indirectly) of food or nonalcoholic drink which is high in fat, salt and/or sugar (HFSS) can no longer be advertised on services run or regulated by TfL (55). In 2018, Amsterdam, as part of the Healthy Weight Program, banned advertisements for unhealthy food products targeted at children and teenagers (up to 18 years of age) across Amsterdam's 58 metro stations (56). In the ACT, as part of the ACTION bus services advertising policy, the promotion of junk food on government-run bus services and light rail has been banned since 2016 (57).

In 2016 Brazil implemented a specific policy that bans unhealthy food and beverage advertising across all Ministry of health premises and its entities (58). This is part of a broader Ordinance (No 1.274) on healthy food procurement to address overweight, obesity and non-communicable diseases and based on the right to adequate food (58).

Advertising of unhealthy foods and beverages in outdoor spaces and on publicly owned assets is also inherently captured in other broad-based laws, including the Chilean *Food Labelling and Advertising Law* where 'child-directed' marketing (to children under the age of 14 years) is banned across all mediums, and as part of the consumer protection legislation that Quebec has in place where commercial advertising, which is 'child-directed' (aimed at children <13 years), including for foods and beverages, is prohibited across all mediums (59).

In Latvia, under the *Law on the Handling of Energy Drinks*, the advertising (and sale) of energy drinks to children < 18 years is prohibited in educational establishments and on the buildings and structures of these establishments (60).

A further two government-led voluntary regulations were identified in Ireland and Finland. In Ireland, under the Government-led Voluntary Codes of Practice (2017) (the Codes) the marketing of foods high in fat, sugar and salt should not be marketed in non-broadcast media, including all forms of digital media, out-of-home media, print media and cinema. Out-of-home media includes billboards or hoardings, public transport stops or shelters, interiors and exteriors of buses or trains, or building banners. The Codes also stipulate that advertisements for HFSS foods will be restricted to placement at least 100 metres from the school gate for large roadside billboard formats. The Codes were co-developed with industry, with no statutory basis (61). The Finnish Consumer Protection Act regulates all marketing, including food marketing to children (<18years). Food advertisements should not be misleading and should not encourage unhealthy dietary habits in children. However, the guidelines supporting the implementation of the Act, which are not legally binding, do not provide guidance on food classification or what is considered as marketing to children (62).

Details on the regulatory design for each of these policies can be found in Table 3 and are briefly outlined below.

Table 3: Government policies restricting unhealthy food and beverage marketing in outdoor

 spaces

Jurisdiction	Policy	Food classification	Advertising content and	Monitoring system
	objective/scope	system	mediums	
Policies focussed on p	ublic assets - mandatory			
London (2019)	The TfL (Transport for	Public Health	Content: Graphics and text	The London School of
	London) advertising	England's Nutrient	promoting HFSS foods and	Hygiene and Tropical
	policy was revised in	Profiling Model used	drinks (visual content, in-text	Medicine is evaluating the
	2019 to update	to classify high fat,	references, brands,	impact of the regulation
	standards for approval	sugar and/or salt	incidental placement)	on sales of HFSS foods and
	of advertisements.	(HFSS) products (64).	Mediums: Includes London	drinks.
	Under this revision,		underground, rail, buses,	
	the promotion		overground, light railway,	
	(directly or indirectly)		roads (e.g. roundabouts and	
	of food or non-		bus stops owned by TfL),	
	alcoholic drink which		river services, tram, Emirates	
	is high in fat, salt		Air Line, Victoria coach	
	and/or sugar (HFSS)		station, Dial-a-Ride, Taxi and	
	cannot be advertised		private hire.	
	on services run or			
	regulated by TfL (55).		Exemptions: If an advertiser	
	The policy is		can show that the product	
	integrated with the		does not contribute to HFSS	
	London Food Strategy		diets; incidental features	
	(63).		that do not promote a HFSS	
			product.	
			Brands can be included if the	
			advertisement promotes	
			healthy products as the basis	
			of the advertisement (e.g	
			sugar free drink) (64).	
Australian Capital	Part of the ACTION	Unhealthy food and	Mediums: Government-run	n/a
Territory (2016)	bus services	drinks as defined by	buses and light rail	
	advertising policy,	the Australian		
	which includes	Dietary		
	restrictions on the	Guidelines and		
	promotion of	associated Australia		
	unhealthy food on	n Guide to Healthy		
	government-run bus	Eating (57).		

Jurisdiction	Policy	Food classification	Advertising content and	Monitoring system
	objective/scope	system	mediums	
	services and light rail			
	to ensure that the			
	promotion of products			
	is appropriate for the			
	broader population			
	and aligns with the			
	values of the			
	community and			
	Government			
	objectives (57). Stated			
	alignment with the			
	Towards Zero Growth:			
	Healthy Weight Action			
	Plan (65).			
Amsterdam (2018)	To ban billboard	National nutrition	Mediums: Billboards at	n/a
	advertisements for	guidelines from the	metro stations (n=58).	
	unhealthy products	Netherlands		
	targeted at children	Nutrition Centre		
	and teenagers (up to	(67).		
	18 years of age) in any			
	of Amsterdam's 58			
	metro stations as part			
	of the Amsterdam			
	Healthy Weight			
	Program (56, 66).			
Brazil (2016)	Part of a broader	Ultra-processed	Mediums: Ministry of Health	The Brazilian Ministry of
	Ordinance (No 1.274)	products defined by	premises and entities.	Health is responsible for
	on healthy food	the Pan American		monitoring and
	procurement to	Health Organization		evaluation.
	address overweight,	Nutrient Profiling		
	obesity and non-	Model: food mainly		
	communicable	produced from the		
	diseases and based on	processing of		
	the right to adequate	unprocessed food		
	food. Included in the	and/or other organic		
	Ordinance is the	matter, containing		
	prohibition of	≥1mg of sodium per		
	advertisements and	1kcal, ≥10% of total		
	sales promotions of	energy from free		
	ultra-processed food	sugars, ≥30% of total		
	products on the	energy from total		
	premises of the	fat, ≥10% of total		
	Ministry of Health and	energy from		
	its entities (58).	saturated fat and		
		≥1% of total energy		
		from trans fat (58).		
Broad policies (includ	ing outdoor advertising re	strictions) - Mandatory		
Chile (2016)	The Food Labelling	Foods and	Content and mediums: All	Monitored by an inter-
	and Advertising Law	beverages	forms of child-directed	sectoral network including
	aims to protect	considered to be	marketing techniques across	government agencies,
	children, promote	"High" in critical	any communication channel.	academia, NGOs,

Jurisdiction	Policy	Food classification	Advertising content and	Monitoring system
	objective/scope	system	mediums	
	informed selection of	nutrients cannot be	Exemptions: Brand or other	consumer associations
	food, and decrease	advertised.	kinds of food marketing is	food marketing and
	the consumption of	For solid foods,	permitted if it is not aimed at	consumers' rights
	food with excessive	"High" products	children and the amounts of	organisations (68).
	amounts of critical	contain energy >275	sugar, salt, fats, and calories	
	nutrients. The policy is	kcal/100g, sodium	are below the "High" criteria.	
	focused on child-	>400 mg/100g, total		
	directed advertising	sugar > 10g/100g,		
	(where children are	saturated fat		
	defined as <14 years)	>4g/100g.		
	(59). Outdoor spaces	For liquids, "High"		
	and publicly owned	products contain		
	assets inherently	energy >70		
	captured as part of	kcal/100g, sodium		
	the broad Food	>100 mg/100g, total		
	labelling and	sugar > 5g/100g,		
	Advertising Law.	saturated fat		
		>3g/100.		
Latvia (2016)	The purpose of the	Energy drinks	Content: Any association	
	Law on the Handling	containing >	with sports activities, energy	
	of Energy Drinks is to	150mg/l caffeine	drinks cannot be offered for	
	protect human health	and one or more	free to children <18 as a	
	from the adverse	other stimulants	promotion.	
	effects of energy	such as taurine and	Mediums: Educational	
	drinks on the body.	guarana.	establishments and on the	
	The government		buildings and structures of	
	regulated law aims to		these institutions.	
	restrict the marketing			
	of energy drinks as			
	well as prohibiting the			
	sale of energy drinks			
	to children < 18 years'			
	(60).			
Quebec (1980)	Quebec's Consumer	All foods and	Content: 3 criteria –	No formal monitoring
	Protection Act	beverages.	promotion that is intended	body; complaint and
	(Section 248) bans any		for children; the appeal of an	media reports are
	commercial		advertisement to children;	submitted to report non-
	advertising directed at		and whether children are	compliance.
	children < 13 years,		likely to be exposed to the	
	including food and		advertisement.	
	beverage marketing.		Mediums: Signage, use of	
	Food advertising in		promotional items.	
	outdoor spaces and		Exemptions: Children's	
	publicly owned assets		entertainment events, in-	
	are innerently		store windows, and on-pack	
	captured in this Act.		advertisement (if they meet	
Broad policies (includ	ing outdoor advartising re	strictions) Volunters	certain criteria).	
Ireland (2018)	The Voluntary Codes	Nutrient Profile	Content: No licensed	Government hody and
	of Practice aim to	model used by the	characters or celebrities that	monitoring framework
	reduce exposure of	Broadcasting	are popular with children	designated to monitor
	the Irish population to	Authority of Ireland.	promotions, competitions.	these Voluntary Codes of

Jurisdiction	Policy	Food classification	Advertising content and	Monitoring system
	objective/scope	system	mediums	
	marketing initiatives		Medium: non-broadcast	Practice.
	relating to foods that		media, including all forms of	
	are high in fat, sugar		digital media, out-of-home	
	and/or salt (HFSS		media, print media and	
	foods) (61).		cinema. Out-of-home media	
			includes billboards or	
			hoardings, public transport	
			stops or shelters, interiors	
			and exteriors of buses or	
			trains, or building banners	
			Exemptions: Corporate	
			social responsibility	
			initiatives, donations, or	
			patronage.	
Finland (1978;	The Finnish Consumer	The guidelines for	Content: Food	The voluntary guidelines
updated in 2016)	Protection Act	the implementation	advertisements must have	were developed to
	regulates all	of the Consumer	an explicit purpose;	consider examples of
	marketing, including	Protection Act does	advertising cannot be	cases where marketing
	food marketing to	provide guidance on	misleading or promote	was found to violate the
	children (<18years).	food classification or	unhealthy diets among	Consumer Protection Act.
	Food advertisements	what is considered	children. The	Over the last 10 years, the
	should not be	as marketing to	appropriateness of	Consumer Ombudsman
	misleading and should	children.	marketing to children is	has collaborated with the
	not encourage		examined on a case-by-case	food industry to ensure
	unhealthy dietary		basis.	marketing aligns with the
	habits in children (62).			guidelines and have not
			Mediums: All mediums	determined the need to
				take any case to court.

4.1.2.2 Objective 2: Factors perceived to have influenced the adoption or implementation of policies restricting unhealthy food advertising in outdoor advertising spaces or on publicly owned assets

The factors perceived to have influenced the adoption or implementation of policies restricting unhealthy food advertising in outdoor advertising spaces or on publicly owned assets are summarised below, in Table 4 (summary) and Appendix Table 2 (detailed data extraction) as those likely to have enabled policy adoption or implementation and those likely to have presented as a barrier.

Policy enablers

Common factors identified that ultimately enabled policy adoption included collaboration and coalitions among multi-sectoral actors and effective partnerships across levels of government, academia, and NGOs, backed by strong and influential political leadership and championing (69, 70). For example, in London, key stakeholders included the Mayor of London (political champion and chair of the Transport for London Board), Public Health England and other NGOs (public sector lobbying and advocacy), the Greater London Authority and Transport for London (drafting of policy and consultation), Transport for London (policy implementation), London boroughs and the London Food Board (general policy support) and local universities (policy evaluation).

Policy alignment and/or a common policy agenda were also identified as key enablers to policy adoption. For example, the ACT policy to restrict the promotion of unhealthy food on government-run bus services and light rail aligned with the 'Towards Zero Growth: Healthy Weight Action Plan', the Transport for London ban aligned with local government level policy on 'Sugar Reduction' and 'Healthier Foods' (hence gained the support of London boroughs) and the Amsterdam ban across 58 metro stations was implemented as part of their Healthy Weight Program. Embedding the policy in a long-term vision and including clear policy objectives were also identified as critical, particularly during changes of leadership (66, 70). Lastly, policy framing (e.g. using child or consumer rights and/or obesity prevention) was also reported to facilitate policy adoption and used in advocacy efforts.

Four additional studies examined public support and policy frameworks as potential enablers to policy adoption (but were not connected to any specific policy). Three of these, conducted in Australia cited support from government stakeholders and the general public as key enablers for policy adoption. In the first of these studies, more than 80% of surveyed Victorian government stakeholders indicated support to restrict non-broadcast marketing (internet, billboards, sport sponsorship) in 2009-2010 (71). Public support for government policy to restrict unhealthy food and beverage advertising in public spaces (e.g. bus stops and train stations) was also strong in a nationally representative sample of Australian adults, with 70% of participants agreeing that there should be at least some government regulation to protect the public (72). When framed as regulation for protecting children, the level of support increased to 78.9% (72). In the third study, 92% of sampled mothers supported restrictions on unhealthy food advertising in and around public transport (73). The fourth Australian study identified three legislative and three non-legislative government planning tools in the state of Queensland that could be used to limit unhealthy food advertising. Legislative tools include Corporate and Operational plans, local laws and State planning policies. Non-legislative tools were identified as able to complement legislative processes and included community public health planning, community renewal and health impact assessments (74).

Policy barriers

Political lobbying by the food, media and advertising industries was the most frequently identified challenge to adopting and implementing regulations to restrict unhealthy food advertising. Multiple forms of lobbying were identified, including the risk of legal threats and lawsuits, criticising regulatory design and negatively framing policy and public discourse.

Ultimately, this led to watering down of the policy scope and regulatory design in many jurisdictions. For example, the initial consultation on the promotion and marketing of unhealthy foods in Canberra, ACT, sought views and ideas on many different types of marketing, including at sporting venues and at government venues and events, however the adopted policy only included advertising restrictions on government-run buses, and later, light rail (57).

Other challenges identified included a perceived risk of reduced advertising revenue, potential policy loopholes, weak or unclear mechanisms for enforcement and monitoring of policies and inadequate public support.

Enablers	Barriers
Wide-spread support among stakeholders, including general public	Industry opposition, including legal challenges
Strong political will and a political champion with power	Disagreement over definitions including what age defines a child, choice of reference models to classify foods as unhealthy
Effective partnerships between key stakeholders	Perception of negative impact on revenue
Rights-based framing i.e. protecting children	Lack of political will
Policy alignment	Weak or unclear mechanisms for monitoring and enforcement
Policy capabilities / existing policy frameworks	Insufficient public support

Table 4: Summary of barriers and enablers to policy implementation

4.1.2.3 Objective 3: Potential health and economic impacts of restricting unhealthy food advertising in outdoor spaces or on publicly owned assets.

Prevalence of unhealthy food advertising in outdoor environments

Twenty seven studies reported on the prevalence of advertising in outdoor spaces or on publicly owned assets, with 15 of these reporting differences by an indicator of socioeconomic position. Among the studies focused on outdoor advertising, 10 focused specifically on areas surrounding schools. These studies consistently showed that unhealthy food and beverage advertising is prevalent in areas around schools across all jurisdictions included. For example, one Australian study found that non-core food was twice as likely to be advertised than healthy food in areas close to primary schools in Sydney and Wollongong

(75). Similar findings were found in another Australian study (76) and in New Zealand (77, 78), Canada (79), the USA (80, 81), Ghana and Asia (Manila, The Philippines & Ulaanbaatar, Mongolia) (82).

Seven studies specifically examined food and beverage advertising on public transport, including four from Australia. A Perth study analysed advertisements on every bus shelter within 500 m of a school within five local government areas and found 31.4% were promoting unhealthy products. Food represented the largest proportion of unhealthy advertisements, accounting for 56.5% of all advertisements in the unhealthy category (including fast food, ice-cream, confectionary and chocolate). Less than one per cent of advertisements (0.7%) promoted a healthy product (24). Another study in Sydney examined advertisements at 178 stations across the Sydney metro train network finding 27.6% of all identified advertisements, 84.3% were promoting unhealthy food (83). The remaining studies, across Australia, USA, UK, Jamaica, Sweden, and New Zealand focused on outdoor advertisements.

Studies from the US (80, 81, 84-88), UK (89, 90), Stockholm (91), Canada (79), Australia (83, 92) and New Zealand (93) demonstrated socioeconomic differences in unhealthy food advertising in outdoor areas, with unhealthy food marketing more prevalent in areas of lower socioeconomic position (SEP). Conversely, one study from Australia (76) and a study from the US (94) found no SEP differences in the prevalence of outdoor marketing of unhealthy food and beverages.

Potential impact of policies to ban unhealthy food advertising in outdoor environments or on publicly owned assets on diet or health outcomes

No studies were identified that specifically examined the impact of policies restricting unhealthy food advertisements in outdoors spaces or on publicly owned assets. Two studies, one each in Australia and Indonesia, reported a positive association between exposure to unhealthy food marketing (including on public transport) and consumption of unhealthy food, (7, 8). Another New Zealand study reported on the food environment, including food and beverage advertising surrounding schools and associations with the food environment within schools. Principals, teachers and parents from schools with a higher percentage of students passing food outlets and advertisements considered that their presence impacted efforts within their school to improve the food environment (93). A fourth study reported that census-tracts in the US (Los Angeles and Louisiana) with a higher proportion of outdoor advertisements promoting food or non-alcoholic beverages had a greater odds of obesity among its residents, controlling for age, race and educational status, compared to census-tracts with less food advertisements. For every 10% increase in food

advertising, there was a 1.05 (95% CI 1.003 - 1.093, p<0.03) greater odds of being overweight or obese (9).

Potential economic impacts of banning unhealthy food advertising in outdoor environments or on publicly owned assets

No literature was identified that specifically reported on the economic impacts of policies that ban unhealthy food advertising in outdoor environments or on publicly owned assets. However, relevant literature relating to the economic implications of banning unhealthy food advertising on public transport was identified in two documents. The first is the Annual Report and Statement of Accounts (2019/20) for the Transport for London, which reported an increase in commercial advertising income (2.8%) between 2019 and 2020 (policy implemented in February 2019) (95). The second is documentation from a Western Australian Parliamentary debate (Hansard) in February 2020 where, in response to a question to the Department of Transport, it was reported that the income paid to the Public Transport Authority from all food and drink advertising is in 2017-18 was \$1,006,050 and in 2018-19 was \$1,002,984 (96).

4.1.2.4 Objective 4: Industry arguments to oppose regulation of unhealthy food marketing in outdoor spaces or on publicly owned assets

Five submissions by the food and beverage industry and marketing industry to the 2015 'Food and Drink Marketing in the ACT' community consultation and 31 submissions to the 2018 consultation on the proposal to ban advertising of unhealthy food on Transport for London's estate were identified.

A summary of how the food and beverage and advertising industry is using the tactics of delay, divide, deflect and deny, to oppose government regulation of unhealthy food marketing in outdoor spaces or on publicly owned assets is summarised in Table 5. Key arguments opposing regulations to restrict unhealthy food marketing in outdoor spaces or on public assets are summarised with evidence-based counter-points in Table 6.

Table 5: How the food and beverage and advertising industry has used the delay, divide, deflect and deny tactics to oppose government regulation of unhealthy food marketing in outdoor spaces or on publicly owned assets: generalised statements used in food and beverage and marketing industry submissions to the five submissions made to the 2015 'Food and Drink Marketing in the ACT' community consultation and the 31 submissions made to the 2018 consultation on the proposal to ban advertising of unhealthy food on Transport for London's estate.

			Deny
Delevi	Divide	Deflect	Used to suggest that the problem
Delay	Aims to attack the proposed	Used to shift the focus of the	doesn't exist, that evidence is
	regulation, and present industry's	debate from the real problem to	lacking or inconclusive, or that
Implementation of regulation.	desired alternative.	other issues.	government regulation won't
			work.
Stating that it is premature to take	Claiming that self-regulation is	Claiming that Self-regulation is	Casting doubt on the evidence that
action ahead of current reviews of	already in place and there is no need	working / is effective at minimising	there is a direct link between food
other advertising restrictions	for further restrictions (ACT_London)	children's exposure to advertising	and drink marketing and childhood
(London)	Tor further restrictions (ACT, London)	(ACT)	obesity (ACT, London)
Arguing that regulation is too difficult to implement – with too great a burden on industry to have different regulations for different media, products or geographic locations (ACT)	Claiming that self-regulation can quickly respond and adapt to meet community expectations (compared to government regulations) (ACT, London)	Claims that there is a low level of complaints about food and beverage advertising to children (ACT)	Claiming that there is no evidence that regulating unhealthy food advertising will have an impact on obesity rates (ACT, London)
	Proposing further self-regulation - e.g. A ban on advertising of unhealthy foods and beverages within 200m of primary or secondary school (London) or health or nutritional information on advertisements (ACT, London)	Reframing the issue to highlight the importance of education via advertising to improve health and wellbeing, empower community and information provision (ACT, London)	Arguing that nutrition, price and taste are bigger influences on purchasing by parents than advertising (ACT)

Criticising regulatory scope or design		
 – e.g. outdoor advertisements are 		
not directed at children, brand only	Reframing the issue as one of	
advertisements should not be	personal responsibility, and that	Arguing that other measures are
subject to restriction (ACT, London),	marketing supports informed choice	more effective (London)
questioning the appropriateness of	(ACT, London)	
the nutrient profiling model		
(London)		
Claiming that advertising directed		
primarily to children and advertising	Highlighting the need to promote	
that may be seen by children, but is	increased physical activity and	Discrediting existing studies that
not directed primarily at them, are	healthier lifestyles (ACT, London)	demonstrate high prevalence of
different things. Marketing directed	and the need to focus initiatives in	unhealthy food advertising (ACT)
to adults should be allowed (ACT,	schools and communities (London)	
London)		
	Highlighting what industry has	
	already done to support healthy	
	eating, including food labelling and	
	product reformulation (ACT, London)	
	Claiming that there will be negative	
	economic impacts (e.g. on small	
	business and locations that rely on	
	advertising revenue) (ACT) and that	
	advertising revenue benefits	
	consumers and the wider	
	community (ACT, London)	

Table 6: Key industry arguments identified in submissions to London and ACT consultations on regulating unhealthy food and beverage advertising in outdoor spaces or on publicly owned assets

Industry Arguments	Evidence based counterpoints
Individuals have choices. We	Population diets are influenced by a wide range of determinants including
already provide nutrition	physical, economic, political, social and cultural factors (97, 98).
information and healthy	Strong and consistent evidence shows that information provision and
messages to support	education alone will not be sufficient to shift population diets and will
individual choice.	disproportionately benefit those with greater social and economic
	resources (99). Effective and equitable action will require change to the
	current food environment towards one that encourages healthy dietary
	choices and promotes the maintenance of healthy weight (35, 38).
Parents should take	Parents want to make healthy choices for their children, but many factors
responsibility for what their	beyond parents' control, including advertising and marketing to children,
children eat.	makes it difficult for them to do so (100).
	Adolescents have their own purchasing power and purchase and consume
	high volumes of unhealthy foods and drinks (22, 101). Adolescents are
	reward driven, impulsive, strongly influenced by their peers and are
	particularly vulnerable to marketing that promotes products which provide
	immediate gratification (102, 103).
Outdoor advertisements are	Clear evidence shows unhealthy food marketing negatively influences
not targeted towards children.	children's attitudes, preferences and consumption across the life-course
If children do see outdoor	(6). Children and adults share many of the same physical spaces, including
advertisements, they will	outdoor spaces, where advertising is a highly visible and cannot be
likely be with their parents.	avoided. Policies that are narrowly focused on marketing that is 'directed
	to children' can be difficult to enforce (and are therefore less effective)
	due to the complexities with different interpretations of the intended
	audience (104). As per WHO recommendations (38), marketing to children
	should be defined as all marketing to which children are <i>exposed</i> .
Obesity is a problem of	No single solution will solve the problem of obesity. A comprehensive
unhealthy lifestyles and	approach including a range of interventions will be essential to make a
inadequate physical activity.	meaningful impact on the population prevalence of obesity. These
	strategies will need to include policies that change the food environment
	(35).
There is no evidence that	Exposure to unhealthy food marketing influences children's attitudes,
advertising contributes to	preferences, expectations and consumption over the life-course, leading to
obesity.	excess weight gain and obesity (6, 105, 106).
The nutrient profiling models	National dietary guidelines provide a benchmark for national nutrition
and classifications of healthy /	policies and can be used as a reference point for determining which foods
unhealthy are inadequate.	are most appropriately covered in any food marketing restrictions (107).
	The COAG Health Council endorsed national interim guide for classifying
	foods and drinks not recommended for promotion and marketing is

	available for use by Australian governments and is consistent with the
	Australian Dietary Guidelines and the Australian Guide to Healthy Eating
	(108).
Brand-only advertisements	Brands are a critical element of marketing, with increased brand loyalty
should not be subject to	and brand awareness key consequences on unhealthy food marketing (16).
restriction.	Brand marketing (with or without food products) for brands that are
	strongly associated with unhealthy foods (e.g. for quick service restaurants
	or confectionary) has been shown to increase reward pathways in the
	brain and to increase selection and consumption of unhealthy products
	(109, 110).
Advertising encourages brand	Exposure to unhealthy food advertisements has been shown to lead to
preference or changes within	increased <i>total</i> energy intake among children (111, 112).
brands, but doesn't encourage	
consumption of more	
unhealthy food.	
There is no evidence to	Policies should have a clear stated objective of reducing population (or
suggest that regulating	children's) exposure to unhealthy food and beverage advertising on
unhealthy food advertising	publicly-owned assets (107).
will have any impact on	
obesity rates.	The effect of the policy on obesity rates should only be considered as a
	long-term objective and should be viewed in light of obesity being a
	complex problem, requiring a co-ordinated policy response including a
	range of interventions, to make a significant impact on population obesity
	rates.
Food advertising is already	Strong and consistent independent evaluations assessing the effectiveness
regulated by industry codes.	of both government-led voluntary regulation and industry-led self-
	regulation indicate that the impact of these approaches on reducing the
	exposure of marketing is limited (113). Research in Australia found that the
	frequency of food advertising and children's exposure to unhealthy food
	marketing remained unchanged despite the implementation of industry
	self-regulatory pledges (34, 114).
Government revenue will be	There is no evidence to date to suggest that such a policy will have
lost. Advertising revenue is	negative financial impacts. Transport for London reports no loss of revenue
beneficial to governments and	arising from the ban on unhealthy food advertising on the London
the wider community.	Underground. Healthier foods are being advertised instead, and revenue
	has reportedly increased slightly (115).
	Income paid to WA Public Transport Authority from all food and drink
	advertising is around \$1 million per year (\$1,006,050 in 2017-18 and
	\$1,002,984 in 2018-19) (96). This amount is insignificant when compared
	to the costs of obesity, which is estimated to reach \$610 million in Western
	Australia by 2026 if current trends continue (5), and considering that most
	advertising space will be replaced by alternative advertising.

Restrictions on marketing of unhealthy foods to children have been
evaluated as one of the most cost-effective interventions for obesity
prevention (116-120).

5.1 Discussion

The findings from this report, when combined with the broader evidence-based literature on unhealthy food marketing, demonstrates that policies to restrict unhealthy food advertising in outdoor spaces or on publicly owned assets are feasible, likely to be effective at improving population diets and health, with minimal financial implications. The food and advertising industries will remain a formidable force against any proposed regulation and strong coalitions and leadership will be important to drive the policy agenda forward.

Nine jurisdictions were identified that have adopted policies to restrict unhealthy food advertising in outdoor spaces or on publicly owned assets. Four of these specifically focus on publicly owned assets, of which three focused on public transport or stations (London, Australian Capital Territory and Amsterdam) and one focused on Ministry of Health premises and entities (Brazil). The remaining five jurisdictions have implemented broader-based policies (consumer protection law or broad-based advertising laws), which inherently capture marketing in outdoor spaces and on publicly owned assets. Whilst this precedent demonstrates the feasibility of enacting such policies, it also highlights several limitations with existing policies.

First, whilst restricting unhealthy food advertising on publicly owned transport is likely to have large reach, as evidenced by the large volumes of unhealthy food advertising identified in this scoping review, it does not capture the full range of government owned assets, which also include sports stadiums, billboards, and signage in public spaces and at public events. Second, a key limitation of the broader-based policies is the tendency to focus on marketing that is 'directed to children' (Chile, Quebec, Finland). Policies that are narrowly focused on marketing that is 'directed to children' can be difficult to enforce (and are therefore less effective) due to the complexities with different interpretations of the intended audience (59). Third, two of the policies identified were voluntary in nature. Strong and consistent independent evaluations assessing the effectiveness of both government-led voluntary regulation and industry-led self-regulation indicate that the impact of both approaches on reducing the exposure and power of marketing to children is limited (121). Research in Australia found that the frequency of food advertising and children's exposure to unhealthy food marketing on television remained unchanged despite the implementation of industry self-regulatory pledges (122). Mandatory regulation creates a level playing field for businesses, where compliance is not left to the voluntary commitment of industry. This removes any possibility of a company attempting to gain market advantage through non-compliance (an option that is still open to them under voluntary or self-regulation (54). Finally, several policies included exemptions for brand marketing or allowed brands to be marketed if the advertisement promotes healthy products. This is problematic as brand marketing (alone or with healthy options) for brands that are primarily associated with unhealthy products, has shown to increase reward pathways in the brain and to increase selection and consumption of unhealthy products (109, 110). It is recommended that policies that ban unhealthy food advertisements on publicly owned assets cover

all entities and assets owned by government and *all* marketing of unhealthy food *products* and *brands* to which children are exposed (regardless of whom the advertisement is directed to).

The findings of this report also highlight the global and ubiquitous nature of unhealthy food advertising in outdoor spaces or on publicly owned assets. This was particularly pertinent in locations surrounding schools or on children's routes to school, with a higher volume of unhealthy food advertising in neighbourhoods experiencing greater socioeconomic disadvantage. No studies were identified that evaluated existing policies that have banned unhealthy food advertising in outdoor spaces or on publicly owned assets. Further, only two studies that examined the association between this type of advertising and food consumption were identified, both of which reported a positive association between exposure to unhealthy food marketing (including on public transport) and consumption of unhealthy food, (7, 8). Nevertheless, when considered alongside the broader literature on unhealthy foods and beverages influences attitudes, preferences, expectations and consumption of these products across the life-course (6, 16). Evidence also shows that unhealthy food marketing not only increases unhealthy food consumption (6), but total energy intake (16). This is important as excess energy intake ultimately leads to excess weight gain and obesity (21).

Because of the lack of existing policy evaluations, firm conclusions on the financial impact of policies to ban unhealthy food advertising in outdoor spaces or on publicly owned assets were unable to be made. What can be concluded is that there is *no* evidence to date to suggest that such a policy will have negative financial impacts, as claimed by the food and beverage and advertising industries. In fact, the literature that was identified pointed in the opposite direction. Advertising revenue from Transport for London assets has slightly increased pre- and post- policy implementation. Of specific relevance to Western Australia, the Department of Transport reported that the Public Transport Authority received an income of approximately \$1 million per year in 2017-18 and 2018-19 from all food and drink advertising (96). When compared to current estimates on the costs of obesity, estimated to reach \$610 million in Western Australia by 2026 if current trends continue (5), and considering that most advertising space will be replaced by alternative advertising, this argument by industry is completely unfounded.

Political lobbying and arguments opposing regulation by the food, media and advertising industries was consistently identified as a key challenge to adopting and implementing regulations to restrict unhealthy food advertising. This included the risk of legal threats and lawsuits, criticisms of regulatory design and negatively framing policy and public discourse. Ultimately, this led to watering down of the policy scope and regulatory design in many jurisdictions. For example, the initial consultation on the promotion and marketing of unhealthy foods in Canberra, ACT, sought views and ideas on many different types of marketing, including at Government venues and events, however current policy restricting unhealthy food advertising on government owned assets is limited to government owned buses and light rail (57). This highlights the importance of the policy enablers identified in this review, particularly, cohesive and collective advocacy (123) by multi-sectoral actors including different levels of government, academia and NGOs, and the need for strong and influential leadership with a long-term vision.

As Western Australia and other jurisdictions around the world advocate for policies to protect children from unhealthy food advertising on publicly owned assets, they must be armed with strong and consistent evidence-based arguments that both justify the policy and counter opposing sentiments. This report presents these counterpoints and although they have been developed from an Australian perspective, these are likely to be transferable more generally across the world.

6.1 Conclusion

Unhealthy food advertising in outdoor spaces or on publicly owned assets is ubiquitous and cannot be avoided, making it impossible to protect children from its harmful impacts. Greater volumes of this type of advertising in disadvantaged neighbourhoods suggests that action to remove the advertising is likely to improve population diets and reduce inequalities in diet-related morbidity and mortality across the life-course. Although several jurisdictions have successfully implemented regulation that bans the advertising of unhealthy food and drinks on government-owned assets, none of these cover the full-breadth of government-owned assets or adequately cover all unhealthy food and brand advertisements that children are exposed to. The Western Australian government has the opportunity to step-up as a global leader in this regulatory space and invest in the future health of Western Australian people and children.

7.1 References

- 1. Australian Institute of Health and Welfare. Australian Burden of Disease Study: impact and causes of illness and death in Australia 2015. Canberra: AIHW; 2019.
- Afshin A, Sur P, Fay K, et al. Health effects of dietary risks in 195 countries, 1990-2017: a systematic analysis for the Global Burden of Disease Study 2017. The Lancet. 2019;393(10184):1958-72.
- 3. Radomiljac A, Davies C, Landrigan T. Health and Wellbeing of Adults in Western Australia 2018, Overview and Trends. Perth: Western Australian Department of Health; 2019.
- 4. Patterson C, Landrigan T, Radomiljac A. Health and Wellbeing of Children in Western Australia in 2018, Overview and Trends. Perth: Western Australian Department of Health; 2019.
- 5. Beswick A, Ambrosini G, Radomiljac A, et al. The burden and cost of excess body mass in Western Australian adults and children. Perth: Western Australian Department of Health; 2020.
- 6. Boyland EJ, Nolan S, Kelly B, et al. Advertising as a cue to consume: a systematic review and meta-analysis of the effects of acute exposure to unhealthy food and nonalcoholic beverage advertising on intake in children and adults. Am J Clin Nutr. 2016;103(2):519-33.
- 7. Fernandez MMY, Februhartanty J, Bardosono S. Association between food marketing exposure and consumption of confectioneries among pre-school children in Jakarta. Malaysian Journal of Nutrition. 2019;25(Suppl.):S63-S73.
- Scully M, Wakefield M, Niven P, et al. Association between food marketing exposure and adolescents food choices and eating behaviours. Appetite. 2012;58(1):1-5.
- 9. Lesser LI, Zimmerman FJ, Cohen DA. Outdoor advertising, obesity, and soda consumption: a cross-sectional study. BMC Public Health. 2013;13:20.
- 10. Mozaffarian D, Hao T, Rimm EB, Willett WC, Hu FB. Changes in diet and lifestyle and long-term weight gain in women and men. N Engl J Med. 2011;364(25):2392-404.
- 11. Forouzanfar MH, Alexander L, Anderson HR, et al. Global, regional, and national comparative risk assessment of 79 behavioural, environmental and occupational, and metabolic risks or clusters of risks in 188 countries, 1990-2013: a systematic analysis for the Global Burden of Disease Study 2013. Lancet. 2015;386(10010) :2287-323.
- 12. Australian Institute of Health and Welfare. Nutrition across the life stages. Canberra: Australian Institute of Health and Welfare; 2018. Cat. no. PHE 227.
- 13. World Health Oragnization. Monitoring and restricting digital marketing of unhealthy products to children and adolescents. 2019.
- 14. Zimmerman F, Shimoga S. The effects of food advertising and cognitive load on food choices. BMC Public Health. 2014;14(1):342.
- 15. Pettigrew S, Tarabashkina L, Roberts M, Quester P, Chapman K, Miller C. The effects of television and internet food advertising on parents and children. Public Health Nutrition. 2013;16(12):2205-12.
- Smith R, Kelly B, Yeatman H, Boyland E. Food Marketing Influences Children's Attitudes, Preferences and Consumption: A Systematic Critical Review. Nutrients. 2019;11(4).

- 17. Cairns. G., Angus. K., Hastings. G. The extent, nature and effects of food promotion to children: a review of the evidence to December 2008. Geneva: WHO Press; 2009.
- Harris. J.L, Webb. V., Sacco. S.J., Pomeranz. J.L. Marketing to Children in Supermarkets: An Opportunity for Public Policy to Improve Children's Diets. International Journal of Environmental Research and Public Health. 2020;17(1284).
- 19. Kelly B, Baur LA, Bauman AE, King L, Chapman K, Smith BJ. "Food company sponsors are kind, generous and cool": (mis)conceptions of junior sports players. Int J Behav Nutr Phys Act. 2011;8:95.
- 20. Murphy G, Corcoran C, Tatlow-Golden M, Boyland E, Rooney B. See, Like, Share, Remember: Adolescents' Responses to Unhealthy-, Healthy- and Non-Food Advertising in Social Media. Int J Environ Res Public Health. 2020;17(7).
- 21. World Cancer Research Fund. Diet, nutrition, physical activity, and cancer: a global perspective. Continuous update project expert report. 2018.
- 22. Sainsbury E, Colaguiri S, Magnusson R. An audit of food and beverage advertising on the Sydney metropolitan train network: regulation and policy implications. BMC Public Health. 2017;17:490.
- 23. Trapp G, Hooper P, Thornton L, Mandzufas J, Billingham W. Audit of outdoor food advertising near Perth schools; Building a local evidence base for chance. Telethon Kids Institute; 2020.
- 24. Parnell A, Edmunds M, Pierce H, Stoneham M. The volume and type of unhealthy bus shelter advertising around schools in Perth, Western Austalia: Results from an explorative study. Health Promotion Journal of Australia. 2019;30(1):88-93.
- The prevalence of junk food advertising on public transport, public transport infrastructure and near schools in Melbourne, Victoria. [press release]. Melbourne 2019.
- 26. Australian Association of National Advertisers. Code of ethics 2021 [Available from: https://aana.com.au/wp
 - content/uploads/2020/09/AANA_Code_of_Ethics_Effective_February_2021.pdf]
- 27. Australian Association of National Advertisers. Food and beverages advertising code 2019 [Available from:

http://aana.com.au/content/uploads/2018/11/AANA_FB-Code_2019-1.pdf]

- 28. Australian Association of National Advertisers. Children's Advertising Code 2020 [Available from: https://aana.com.au/self-regulation/codes-guidelines/aana-codefor-advertising-marketing-communications-to-children/]
- 29. Outdoor Media Association. Outdoor Media Association Code of Ethics 2020 [Available from: https://www.oma.org.au/resources/code-ethics]
- 30. Outdoor Media Association. OMA National Health and Wellbeing Policy 2020 [Available from: https://www.healthyoutdoor.org/the-policy]
- 31. Australian Food and Grocery Council. Responsible Children's Marketing Initiative 2018 [Available from: https://www.afgc.org.au/wpcontent/uploads/2019/06/Responsible-Childrens-Marketing-Initiative-March-2018.pdf]
- 32. Australian Food and Grocery Council. Quick service restaurant initiative for responsible advertising and marketing to children 2018 [Available from: https://www.afgc.org.au/wp-content/uploads/2019/06/QSR-Initiative-for-Responsible-Advertising-and-Marketing-to-Children-March-2018.pdf]

- 33. Hickey .K., Mandelbaum .J., Bloom .K., Martin .J. Overbranded, Underprotected. How industry self-regulation is failing to protect children from unhealthy food marketing. Melbourne; 2018.
- 34. Watson W, Johnston A, Hughes C, Wellard L, Chapman K. Children's health or corporate wealth? The battleground for kids' hearts, minds and tummies. Sydney: Cancer Council NSW; 2014.
- 35. Peeters A. Obesity and the future of food policies that promote healthy diets. Nature Reviews Endocrinology. 2018;14:430-7.
- 36. Vandevijere S, Swinburn B, International Network for Food and and Obesity / Non-Communicable Diseases Research MaASI. Pilot test of the Healthy Food Environment Policy Index (Food-EPI) to increase government actions for creating healthy food environments. BMJ Open 2015;5(1):e006194.
- 37. World Health Organization. Global action plan for the prevention and control of noncommunicable diseases 2013-2020. Geneva: World Health Organization; 2013.
- 38. World Health Organization. Set of recommendations on the marketing of foods and non-alcoholic beverages to children. Geneva: World Health Organization; 2010.
- 39. World Cancer Research Fund. Building momentum: Lessons on implementing robust restrictions of food and non-alcoholic beverage marketing to children. 2020.
- 40. United Nations Children's Fund (UNICEF). A child rights-based approach to food marketing: A guide for policy makers. 2018.
- 41. Foundation for Alcohol Research & Education, Public Health Advocacy Institute of Western Australia Alcohol Programs Team. Outdoor alcohol advertising in Australia: Snapshort of the current state of play. 2019.
- 42. Joint Statement on Protecting Children from Unhealthy Food and Drink Advertising on State-owned Assets [press release]. 2020.
- 43. Chronic Disease Prevention Directorate. Western Australian Health Promotion Strategic Framework 2017-2021. 2017.
- 44. WA Preventive Health Summit Summary Report. 2018.
- 45. Sustainable Health Review Final Report. 2019.
- 46. Cancer Council Western Australia. Calls for urgent State Government action following alarming new obesity report. 2020.
- 47. Nuss .T., Morley .B., Dixon .H., Wakefield .M. Evaluation of the Western Australia LiveLighter[®] Campaign: Mar-Jun 2019. In: Centre for Behavioural Research in Cancer Council Victoria, unpublished – report prepared for CCWA, editor. 2019.
- 48. Benzies K, Premji S, Hayden K, Serrett K. State-of-the-evidence reviews: advantages and challenges of including grey literature. Worldviews Evid Based Nurs. 2006;3(2):55-61.
- 49. Mahood Q, Van Eerd D, Irvin E. Searching for grey literature for systematic reviews: challenges and benefits. Research Synthesis Methods. 2014;5(3):221-34.
- 50. Adams J, Hillier-Brown F, Moore H, et al. Searching and synthesising 'grey literature' and 'grey information' in public health: critical reflections on three case studies. Systematic Reviews. 2016;5(164).
- 51. Glasziou P, Vandenbroucke J, Chalmers I. Assessing the quality of research. British Medical Journal. 2004;328(7430):39-41.
- 52. Arksey H, O'Malley L. Scoping studies: towards a methodological framework. International Journal of Social Research Methodology: Theory and Practice. 2005;8(1):19-32.

- 53. Peters MDJ, Godfrey CM, Khalil H, McInerney P, Parker D, Soares CB. Guidance for conducting systematic scoping reviews. International Journal of Evidence-Based Healthcare. 2015;13(3):141-46.
- 54. Garde. A., HJeffery. B., Rigby. N. Implementing the WHO recommendations whilst avoiding real, perceived or potential conflicts of interest. European Journal of Risk Regulation. 2017;8(2):237-50.
- 55. Transport for London. Transport for London Advertising Policy. 2019.
- 56. European Commission. Health Equity Pilot Program, Amsterdam Healthy Weight Programme Case Study. 2018.
- 57. ACT Government. Advertising on Transport Canberra buses and light rail 2020 [Available from: https://www.transport.act.gov.au/contact-us/advertise-with-us]
- 58. World Cancer Research Fund International. NOURISHING Policy Database [Available from: https://policydatabase.wcrf.org/level_one?page=nourishing-levelone#step2=3#step3=332]
- 59. Taillie L, Reyes M, Colchero M, Popkin P, Corvalán C. An evaluation of Chile's Law of Food Labeling and Advertising on sugar-sweetened beverage purchases from 2015 to 2017: A before-and-after study. PLoS Medicine. 2020;17(2):e1003015.
- 60. World Cancer Research Fund International. NOURISHING Policy Database [Available from: https://policydatabase.wcrf.org/level_one?page=nourishing-levelone#step2=3#step3=332]
- 61. World Cancer Research Fund International. NOURISHING Policy Database [Available from: https://policydatabase.wcrf.org/level_one?page=nourishing-levelone#step2=3#step3=354]
- 62. World Cancer Research Fund International. NOURISHING Policy Database [Available from: https://policydatabase.wcrf.org/level_one?page=nourishing-levelone#step2=3#step3=330]
- 63. Mayor of London. The London Food Strategy: Implementation plan 2018-2023. London: Greater London Authority; 2018.
- 64. Transport for London. TfL Ad Policy: Approval Guidance Food and Non-Alcoholic Drink Advertising.
- 65. ACT Government. Towards Zero Growth: Healthy weight action plan. Canberra2013.
- 66. Hawkes C, Russell S, Isaacs A, Rutter H, Viner R. What can be learned from the Amsterdam Healthy Weight programme to inform the policy response to obesity in England? : Obesity Policy Research Unit (OPRU): Rapid response briefing paper; 2017.
- 67. Netherlands Nutrition Centre. The Wheel of Five [Available from: https://www.voedingscentrum.nl/Assets/Uploads/voedingscentrum/Documents/S ervice/English/Wheel-of-five.pdf]
- 68. Pérez-Escamilla R, Lutter CK, Rabadan-Diehl C, et al. Prevention of childhood obesity and food policies in Latin America: from research to practice. Obesity Reviews. 2017;18(S2):28-38.
- 69. Halliday J, Platenkamp L, Nicolarea Y. A menu of actions to shape urban food environments for improved nutrition. GAIN, MUFPP and RUAF; 2019.
- Villalobos Dintrans P, Rodriguez L, Clingham-David J, Pizarro T. Why health reforms fail: lessons from the 2014 Chilean attempt to reform. Health Syst Reform. 2019;5(2):134-44.

- 71. Shill J, Mavoa H, Allender S, et al. Government regulation to promote healthy food environments--a view from inside state governments. Obesity reviews : an official journal of the International Association for the Study of Obesity. 2012;13(2):162-73.
- 72. Sainsbury E, Hendy C, Magnusson R, Colagiuri S. Public support for government regulatory interventions for overweight and obesity in Australia. BMC public health. 2018;18(1):513.
- Find the second s
- 74. Good E, Hammond M, Martin C, Burns C, Groos A. An audit of local government planning tools for their potential use in addressing community food and nutrition issues. Health promotion journal of Australia : official journal of Australian Association of Health Promotion Professionals. 2010;21(1):5-11.
- 75. Kelly B, Cretikos M, Rogers K, King L. The commercial food landscape: outdoor food advertising around primary schools in Australia. Australian and New Zealand Journal of Public Health. 2008;32(2):522-8.
- 76. Richmond KJ, Watson WL, Hughes C, Kelly B. Children's trips to school dominated by unhealthy food advertising in Sydney, Australia. Public Health Research & Practice. 2020;30(1).
- Figli V, Zinn C, Mackay L, et al. Viewing obesogenic advertising in children's neighbourhoods using Google Street View. Geographical Research. 2019;57(1):84–97.
- 78. Liu W, Barr M, Pearson AL, et al. Space-time analysis of unhealthy food advertising: New Zealand children's exposure and health policy options. Health promotion international. 2020; 1;35(4):812-820.
- Velazquez CE, Daepp MIG, Black JL. Assessing exposure to food and beverage advertisements surrounding schools in Vancouver, BC. Health & place. 2019; 58:102066.
- 80. Herrera AL, Pasch KE. Targeting Hispanic adolescents with outdoor food & beverage advertising around schools. Ethnicity & health. 2018;23(6):691-702.
- 81. Isgor Z, Powell L, Rimkus L, Chaloupka F. Associations between retail food store exterior advertisements and community demographic and socioeconomic composition. Health & place. 2016;39:43-50.
- 82. Kelly B, King L, Jamiyan B, et al. Density of outdoor food and beverage advertising around schools in Ulaanbaatar (Mongolia) and Manila (The Philippines) and implications for policy. Critical Public Health. 2015;25(3):280–90.
- 83. Sainsbury E, Colagiuri S, Magnusson R. An audit of food and beverage advertising on the Sydney metropolitan train network: regulation and policy implications. BMC public health. 2017;17(1):490.
- 84. Adjoian T, Dannefer R, Farley SM. Density of outdoor advertising of consumable products in NYC by neighborhood poverty level. BMC Public Health. 2019;19(1479).
- 85. Cassady DL, Liaw K, Miller LM. Disparities in Obesity-Related Outdoor Advertising by Neighborhood Income and Race. Journal of urban health : bulletin of the New York Academy of Medicine. 2015;92(5):835-42.
- 86. Dowling E, Roberts C, Adjoian T, Farley S, Dannefer R. Disparities in Sugary Drink Advertising on New York City Streets. Am J Prev Med.58(3):e87-e95.
- 87. Lucan SC, Maroko AR, Sanon OC, Schechter CB. Unhealthful Food-and-Beverage Advertising in Subway Stations: Targeted Marketing, Vulnerable Groups, Dietary Intake, and Poor Health. Journal of urban health : bulletin of the New York Academy of Medicine. 2017;94(2):220-32.
- Yancey AK, Cole BL, Brown R, et al. A Cross-Sectional Prevalence Study of Ethnically Targeted and General Audience Outdoor Obesity-Related Advertising. Milbank Quarterly. 2009;87(1):155-84.
- 89. Adams J, Ganiti E, White M. Socio-economic differences in outdoor food advertising in a city in Northern England. Public health nutrition. 2011;14(6):945-50.
- 90. Palmer G, Green M, Boyland E, Vasconcelos Y, Savani R, Singleton A. A deep learning approach to identify unhealthyadvertisements in street view images. ArXiv advanced view. 2020. [Available from https://arxiv.org/abs/2007.04611]
- 91. Fagerberg P, Langlet B, Oravsky A, Sandborg J, Löf M, Ioakimidis I. Ultra-processed food advertisements dominate the food advertising landscape in two Stockholm areas with low vs high socioeconomic status. is it time for regulatory action? BMC Public Health. 2019;19(1717).
- 92. Settle PJ, Cameron AJ, Thornton LE. Socioeconomic differences in outdoor food advertising at public transit stops across Melbourne suburbs. Australian and New Zealand journal of public health. 2014;38(5):414-8.
- 93. Walton M, Pearce J, Day P. Examining the interaction between food outlets and outdoor food advertisements with primary school food environments. Health & Place. 2009;15(3):841-8.
- 94. Basch CH, LeBlanc M, Ethan D, Basch CE. Sugar sweetened beverages on emerging outdoor advertising in New York City. Public health. 2019;167:38-40.
- 95. Transport for London. Annual Report and Statement of Accounts. London, UK; 2020.
- 96. Western Australia Parliament. Hansard Parliamentary Debates. Legislative Council.
 2020. [Available from https://www.parliament.wa.gov.au/Hansard/hansard.nsf/0/FD89042AFD48DCDD4 8258511001E8A59/\$File/C40%20S1%202020213%20All.pdf]
- 97. Egger G, Swinburn B. An "ecological" approach to the obesity epidemic. BMJ. 1997;315:477-80.
- 98. Swinburn B, Egger G, Raza F. Dissecting Obesogenic Environments: The Development and Application of a Framework for Identifying and Prioritizing Environmental Interventions for Obesity. Prev Med. 1999;29(6):563-70.
- 99. Backholer K, Beauchamp A, Turrell G, et al. A framework for evaluating the impact of obesity prevention strategies on socio-economic inequalities in weight. Am J Public Health. 2014;104(10):e43-50.
- 100. Chung A, Backholer K, Zorbas C, Hanna L, Peeters A. Factors influencing sweet drink consumption among preschool-age children: A qualitative analysis. Health Promotion Journal of Australia. 2019.
- 101. Borraccino A, Lemma P, Berchialla P, et al. Unhealthy food consumption in adolescence: role of sedentary behaviours and modifiers in 11-, 13- and 15-year-old Italians. Eur J Public Health. 2016;26(4):650-6.
- 102. Freeman B, Kelly B, Vandevijvere S, Baur L. Young adults: beloved by food and drink marketers and forgotten by public health? . Health Promot International. 2016;31(4):954-61.

- Pechmann C, Levine L, Loughlin S, Leslie F. Impulsive and Self-Conscious: Adolescents' Vulnerability to Advertising and Promotion. American Marketing Association. 2005;24(2):202-21.
- 104. Dillman Carpentier F, Correa T, Reyes M, Taillie L. Evaluating the impact of Chile's marketing regulation of unhealthy foods and beverages: pre-school and adolescent children's changes in exposure to food advertising on television. Public Health Nutriton. 2020;23(4):747-55.
- 105. Cairns G, Angus K, Hastings G, al e. Systematic reviews of the evidence on the nature, extent and effects of food marketing to children. A retrospective summary. Appetite. 2013;62:209-15.
- 106. Norman J, Kelly B, Boyland E, McMahon A-T. The impact of marketing and advertising on food behaviours: evaluating the evidence for a causal relationship. Curr Nutr Rep. 2016;5(3):139-49.
- 107. World Health Organization. A framework for implementing the set of recommendations on the marketing of foods and non-alcoholic beverages to children. World Health Organization; 2012.
- 108. COAG Health Council. Promoting and supporting healthy food and drink choices. National intermin guide to reduce children's exposure to unhealthy food and drink promotion 2018 [Available from: https://www.coaghealthcouncil.gov.au/Portals/0/National%20Interim%20Guide%2 Oto%20Reduce%20Children%27s%20Exposure%20to%20Unhealthy%20Food%20an d%20Drink%20Promotion.pdf]
- 109. Boyland E, Kavanagh-Safran M, Halford J. Exposure to 'healthy' fast food meal bundles in television advertisements promotes liking for fast food but not healthier choices in children. . British Journal of Nutrition. 2015;113(6):1012-8.
- 110. Masterson T, Stein W, Beidler E, Bermudez M, English L, Keller K. Brain response to food brands correlates with increased intake from branded meals in children: an fMRI study. . Brain Imaging Behav. 2019;13(4):1035-48.
- 111. Halford J, Boyland E, Hughes G, Stacey L, McKean S, Dovey T. Beyond brand effect of television advertisements in children: the effects of weight status. Public Health Nutr. 2008;11(9):897-904.
- 112. Sadeghirad B, Duhaney T, Motaghipisheh S, Campbell NR, Johnston BC. Influence of unhealthy food and beverage marketing on children's dietary intake and preference: a systematic review and meta-analysis of randomized trials. Obes Rev. 2016;17(10):945-59.
- 113. Chambers S, Freeman R, Anderson AS, MacGillivray S. Reducing the volume, exposure and negative impacts of advertising for foods high in fat, sugar and salt to children: A systematic review of the evidence from statutory and self-regulatory actions and educational measures. Prev Med. 2015;75:32-43.
- 114. Hebden L, King L, Grunseit A, Kelly B, Chapman K. Advertising of fast food to children on Australian television: the impact of industry self-regulation. MJA. 2013;195(1):20-4.
- 115. House of Commons. Oral evidence: Childhood Obesity follow-up. Health and Social Care Committee. 2019. [Available from http://data.parliament.uk/writtenevidence/committeeevidence.svc/evidencedocu ment/health-and-social-care-committee/childhood-obesity-followup-2019/oral/106851.html]

- 116. Carter R, Moodie M, Markwick A, et al. Assessing cost effectiveness in obesity (ACEobesity): an overview of the ACE approach, economic methods and cost results. BMC Public Health. 2009;9:419.
- Cecchini M, Sassi F, Lauer J, Lee Y, Guajardo-Barron V, Chisholm D. Tackling of unhealthy diets, physical inactivity, and obesity: health effects and costeffectiveness. Lancet. 2010;376(9754):1775-84.
- 118. Harvard School of Public Health. CHOICES: Childhood Obesity Intervention Cost Effectiveness Study 2014 [Available from: https://choicesproject.org/]
- 119. Magnus A, Haby M, Carter R, Swinburn B. The cost-effectiveness of removing television advertising of high-fat and/or high-sugar food and beverages to Australian children. Int J Obesity. 2009;33(10):1094-102.
- 120. Brown V, Ananthapavan J, Veerman L, et al. The Potential Cost-Effectiveness and Equity Impacts of Restricting Television Advertising of Unhealthy Food and Beverages to Australian Children. Nutrients. 2018;10(5):622.
- 121. Ronit K, Jensen JD. Obesity and industry self-regulation of food and beverage marketing: a literature review. Eur J Clin Nutr. 2014;68(7):753-9.
- 122. Watson WL, Lau V, Wellard L, Hughes C, Chapman K. Advertising to children initiatives have not reduced unhealthy food advertising on Australian television. J Public Health (Oxf). 2017;39(4):787-92.
- Watson WL, Martin J. Countering commercial interests: building advocacy campaigns to protect children from food marketing. Public Health Res Pract. 2019;29(3).

Appendix

Advertising medium Author and Jurisdiction Study aim Study design and methods Advertising content Main results vear of publication Adams et al. Newcastle upon To explore Cross-sectional. 1371 Food and beverage Outdoor. Total advertising and total food (2011) Tyne, England differences in the advertisements. advertisements. advertising space was significantly higher prevalence of in the least affluent, compared with the outdoor food middle and most affluent, tertiles. The advertising, and type proportion of (all) advertisement space and nutritional devoted to HFSS foods was significantly content of advertised higher in middle vs least affluent tertiles foods, according to (but absolute HFSS advertisement space SEP. was greatest in least affluent areas). Adjoian et New York City, To determine if Non-alcoholic Cross-sectional study. Outdoor, street-level Within the food category, the most al. (2019) USA outdoor advertising 16,305 advertisements beverages; food stationary signs prevalent subcategories of product density for nonacross 15 strata (5 (healthy / unhealthy / including posters, images were "other" food (31%), followed alcoholic drinks, food, fast food); tobacco; fresh produce (14%) and sweets (9%). boroughs × 3 poverty stickers, decals, digital tobacco products, levels). alcoholic beverages; Within the non-alcoholic beverage signs. and branded products, with category, sugary drinks comprised more alcohol, is associated familiar and widely than two-thirds of product images (16%; n with neighbourhood recognized logos; child-= 8197), while low calorie drinks and water/seltzer combined accounted for 9% poverty or other directed marketing. Census-level (n = 1035). Unsweetened coffee, "other" characteristics in New drinks, and unknown drinks made up the York City (NYC). remaining 24% (n = 2893).

Table 1: Scoping review summary of academic literature

Advertising content	Advertising medium	Main results
Beverage advertisements.	Outdoor, LinkNYC kiosks.	A total of 2025 advertisements were observed, including 347 (17.1%) for non- alcoholic beverages at 64 kiosks. 60% of non-alcoholic beverage ads featured beverages with added sugar. No significant differences in frequency of sweet drink ads by area-level median income.
Food: candy/dessert;	Outdoor, including	30% of ads featured food and/or
snack/processed foods	signs, front-of-store	beverage products. 67% of all beverage
(e.g. granola bars);	displays and	ads were for SSBs. 51% of food ads
fruits; vegetables; fast	billboards.	promoted fast food. 9% of food ads were
food / restaurants;		for fruit, 0.9% for vegetables.
Beverages: SSBs, fruit		
beverages (e.g.		
smootnies), coconut		
water, brewed tea,		
etimic beverage (e.g.		
coffee and milk		
F = 2 F = 2	Advertising content Beverage advertisements. Food: candy/dessert; snack/processed foods e.g. granola bars); ruits; vegetables; fast food / restaurants; Beverages: SSBs, fruit beverages (e.g. smoothies), coconut water, brewed tea, ethnic beverage (e.g. blum drink), alcohol, coffee and milk.	Advertising contentAdvertising mediumBeverage advertisements.Outdoor, LinkNYC kiosks.Food: candy/dessert; snack/processed foods (e.g. granola bars);Outdoor, including signs, front-of-store displays and billboards.Food / restaurants; Beverages (e.g. smoothies), coconut water, brewed tea, ethnic beverage (e.g. polum drink), alcohol, coffee and milk.Outdoor, LinkNYC kiosks.

Author and	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
year of						
publication						
Bragg et al.	Accra, Ghana	Assess the marketing	Cross-sectional. 77	Non-alcoholic	Outdoor, including	73% of ads featured SSBs. 13% of ads
(2016)		themes and sugar	advertisements across a 4.7	beverages, classified as	billboards and front-	featured children and 5.2% were located
		content of beverages	km2 area of Accra and a	SSB or non-SSB and the	of-store displays.	near schools or playgrounds. 9% of ads
		promoted in outdoor	151 km region along the	presence of child-		contained a reference to health and 8%
		advertisements	highway.	targeted marketing,		referenced fitness/strength/sport. Along
		within a portion of		cultural relevance and		the Accra-Cape Coast Highway, Coca-Cola
		Accra, Ghana and to		health or fitness		accounted for 60% of branded ads.
		quantify the types of		references.		
		ads that appeared				
		along the Accra-Cape				
		Coast Highway.				

Author and year of	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
year of publication Cassady et al. (2015)	Sacramento County, CA, United States	Assess obesity- related (diet and physical activity) advertisements, in an economically and racially diverse urban area in Northern California and investigate whether there are disparities in the distribution of	Cross sectional. 171 ads across 16 randomly selected zip codes from income strata above and below California median household income.	Food and beverage advertisements, coded as healthy if they promoted a food or beverage encouraged by the Dietary Guidelines for Americans and unhealthy if they promoted high-calorie, low-nutrition foods and	Outdoor, including billboards, bus shelters, bus benches, and posters on storefronts large enough to be seen from the street.	171 health-related outdoor advertisements. 40% of ads were on billboards and 60 % on bus shelters or benches. One half of the ads were obesity related and addressed physical activity or food and beverages. Billboards were more likely to have ads classified as unhealthy for food or physical activity (51 %) compared to bus shelters (7 %) or bus benches (0 %).
		ads by neighbourhood income and race.		beverages such as sugary beverages and fast food.		Unhealthy food ad space was most dense in low-income Latino and African American neighbourhoods, which had five times the unhealthy food ad space compared to high-income white neighbourhoods and six times that of low- income white neighbourhoods. Unhealthy beverage ads were denser in low-income neighbour hoods and in multiracial neighbourhoods.

Author and year of publication	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
Dowling et al. (2019)	New York City, United States	Estimate the density of street level sugary drink advertisements across the 5 boroughs of NYC and describe variation by neighbourhood.	Cross-sectional. 4,356 advertisements across 953 retail-dense street segments in low-, medium-, and high-poverty neighbourhoods.	Sugary drinks advertisements.	Outdoor, including street-level advertisements including stationary signs (posters, digital signs, stickers, and decals) on outdoor structures, such as newsstands, bus shelters, and payphones.	Overall, 4,356 advertisements were featuring sugary drinks with 8,197 sugary drink images observed in the sample. Between 2.72 (Staten Island) and 29.91 (Bronx) ads for sugary drinks observed per 1,000 feet of retail-dense street segment, meaning someone walking the length of 3 city blocks in a retail-dense area would encounter anywhere from about 3 to 30 ads (7–48 images), depending on the neighbourhood. In unadjusted analyses for NYC, sugary drink ad density was 1.54 (95% CI=1.16, 2.04) times as high for medium- versus low-poverty neighbourhoods and 1.66 (95% CI=1.26, 2.19) times as great for high- versus low-poverty neighbourhoods.

Author and year of	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
publication						
Egli et al. (2018)	Auckland, New Zealand	Explore the use of Google Street View to examine outdoor food and beverage advertising within 800m buffer zones around schools.	Cross-sectional. 2474 advertisements across 19 school zones (800m buffer zones).	Food and beverage advertisements classified as healthy or unhealthy and categorised according to target audience. (Defined by WHO guidelines for classifying marketing to children).	Outdoor, including all billboards, signs, flags, banners, balloons, neon signs, stickers, and bus shelter advertisements, that were large enough to be seen on a 15-inch computer screen, with an identifiable logo or text; and located completely or partially on public land.	Of the advertisements that could be identified (n=1,747, 70.6%), the most frequent category of advertising was "non-food other" (41%), followed by "non-food residential" (12.2%), "food other" (5.6%), and "food unhealthy" (5.4%). The majority of food and beverage advertising was marketed to "adults only" (54%), with remaining 46% marketed to "children and adults." No advertisements were coded as marketed to "children only". Of the food and beverage ads marketed to both children and adults, there were significantly more advertisements for unhealthy food and beverages than for other food and beverages.

Author and year of publication	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
Esdaile et al. (2019)	Australia	Investigate the level of support for state government health promotion policies among mothers with infants and its associated factors.	1155 mothers in NSW, participating in the Communicating Healthy Beginnings Advice by Telephone (CHAT) Trial.	Six policy options posed t about number of fast foo Restricting unhealthy foo around public transport; connected walkways and Requirements for childca policies around nutrition, sleep which meet a set st programs for healthy eati Develop a standard for ch be routinely taken at hea feedback on child growth	o mothers: Zoning laws d restaurants in an area; d advertising in and Building a network of bike paths; re services to have play, screen time and andard; Support ing and active living; hild height and weight to Ith appointments, and provided to parents.	There was very high support for a broad range of childhood obesity prevention policy options available to the NSW government. The proportion of mothers who felt these policy options were 'about the right amount' (56%-68%) or 'not going far enough' (24%-36%), collectively represented 89%-95% approval of government intervention. Regarding policy restricting unhealthy food advertising in and around public transport, 56% thought about the right amount' and 36% thought 'not going far enough', indicating 92% of participants supported that policy.
Fagerberg et al. (2019)	Stockholm, Sweden	Explore the proportion of ultra- processed food advertisements in two districts of Stockholm, Sweden with low vs. high socioeconomic status.	Cross-sectional. Two districts: Skarholmen (1935 advertisements); Ostermalm (2157 advertisements).	Food, beverage and fast food advertisements, classified in accordance with the Group 4 of the NOVA classification system for ultraprocessed foods.	Public transport including all advertisements in the subway station and in streets outside of the entrances to the subway station (50m to the left and the right of the streets outside the entrance) as well as inside and outside the shopping mall-located within 100m of the subway station.	 32.8% of ads promoted food products. 65.4% of all food ads promoted ultraprocessed food products. A significantly higher proportion of ultraprocessed food advertisements of all food advertisements was identified in the low SES area, irrespective of the researcher taking the pictures (74.6% vs. 61.8%, p < 0.001 and 70.4% vs. 54.8%, p = 0.001). There was no significant difference in the proportion of food advertisements when expressed as a proportion of all advertisements.

Author and year of publication	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
Fernandez et al. (2019)	Indonesia	Assess the association between food marketing exposure and children's consumption of confectioneries at home.	Cross-sectional, survey design. 240 caregivers of children aged 3-5 years attending 25 early childhood education centres in Central Jakarta. Structured Food Frequency Questionnaire (FFQ) to ascertain child's frequency intake of confectioneries at home.	Confectionary	Multiple mediums, including advertisements (i) seen on public transport, (ii) seen in a magazine/ newspaper, (iii) received via email, social media, and television, (iv) seen at school, and (v) received via SMS and from supermarket promotions.	Among the most common food marketing practices were advertisements on public transport, print and electronic media. The five most common food marketing practices were also found to have significant association with the consumption of several of the popular types of confectioneries.
Good et al. (2010)	Australia	Identify how local government planning tools could be used to influence physical and policy environments to support healthy eating behaviours in communities.	An audit of Queensland's legislative and non- legislative local government planning tools to assess potential use in strategies to achieve positive nutrition outcomes.	Relevant strategy: Modify outdoor food advertising to increase healthy food promotion and decrease unhealthy food promotion.		Three legislative frameworks and three non-legislative processes identified across Local and State Government as opportunities to address outdoor food advertising.

Author and year of publication	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
Herrera & Pasch (2018)	Central Texas, United States	Determine if the prevalence of outdoor food and beverage advertising was greater around middle and high schools with a majority Hispanic population as compared to schools with a lower Hispanic population.	Cross-sectional. All 47 schools in Central Texas (Schools with 60% or more Hispanic students had an average of 76% Hispanic students out of their total student population).	Food and beverage advertisements, coded for theme including "Price" or "Deals or Value meals".	Outdoor, including freestanding signs on gas pumps, sidewalks, A-frames, banners, billboards, and advertisements on the exterior windows or walls of establishments within a half-mile (800m) radius of each school.	Outdoor food and beverage advertisements were more prevalent around schools with a higher Hispanic population. A majority of these advertisements were for calorie-dense, high-fat, low-nutrient food or beverage products (e.g. fast food and sugar sweetened beverages). Schools with 60% or more Hispanic students had significantly greater numbers of establishment, price promotion and total FB advertisements around their schools within the half-mile radius.
Huang et al. (2020)	Auckland, New Zealand	Quantify the amount of food and beverage ads that children are exposed to from bus stops around all schools in the Auckland region.	Cross-sectional. 573 schools; 842 advertisements.	Food, beverage and fast food advertisements, coded as "core" and "non-core" based on the WHO Regional Office for Europe Nutrient Profiling Model.	Bus stops within in a 500m radius of each school.	12.8% of all bus stop advertisements were promoting non-core food or beverages. A greater number of total and food and beverage ads per 100 m were identified as the distance from the school increased.

Author and year of	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
publication						
Isgor et al. (2016)	Nationwide sample of communities in the United States	Examine the prevalence of outdoor food and beverage advertisements on the exterior of retail food outlets in relation to community demographic and socioeconomic characteristics in a nationwide sample of communities in the	Cross-sectional. 8021 stores within school enrolment zones (1634 supermarkets/grocery stores and 6337 limited service stores); 69% of stores located in non- Hispanic White neighbourhoods.	Food and beverage advertisements and food and beverage price promotion advertisements.	Retail exterior, including all ads on store buildings' exterior and/or store properties.	Higher prevalence of any food and beverage advertisement (OR=1.70, 95% CI 1.11, 2.61), food and beverage price promotion advertisements (OR=1.92, 95%CI 1.22, 3.01), and regular soda advertisements (OR=2.14, 95% CI 1.32, 3.47) in low-income compared to high- income community supermarkets / grocery stores.
Kelly et al. (2007)	Sydney & Wollongong, Australia	U.S. To describe the volume and nature of outdoor food advertisements and factors associated with outdoor food advertising in the area surrounding primary schools.	Cross-sectional. The area within a 500m radius of each school n=40 primary schools, 9,151 advertisements.	Food and beverage advertisements, classified by the Australian Guide to Healthy Eating as core / discretionary / miscellaneous (tea coffee, supplements, brand-only ads).	Outdoor, including billboards, posters, outdoor furniture, signs on buildings, temporary ads for special events.	25% of all identified ads were for food. Of these, 80% classified as non-core. Non- core food twice as likely to be advertised close to a primary school. 95 non-core food ads per 2km within 250m of school vs. 46 ads per 2km within 250-500m of school.

Author and year of	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
publication						
Kelly et al. (2015)	Manila, The Philippines & Ulaanbaatar, Mongolia	Identify, describe and quantify the volume of food and beverage advertisements	Cross-sectional. The area within 250m or 500m from the centre of the school for 30 primary schools in each	Food and drink advertisements, classified as core/healthy, non-	Outdoor, including billboards, posters, free standing signs, neon signs, stickers,	The density of food advertising in the immediate area of schools, within 250 m, was almost double that in the area further away from schools (.9 vs5 in
		around schools; within two demographically and	of the cities (n=60 primary schools); 1459 food and beverage advertisements.	core/unhealthy and miscellaneous.	electronic boards, banners, bus shelter signs and signs on	Ulaanbaatar and 6.5 vs. 3.3 advertisements per 100 m2 in Manila).
		culturally disparate cities in Asia.			outdoor furniture, bridge/awning signs and painted buildings.	Mongolia: Most advertised products were non-core food/drinks (92%). Philippines: The majority of advertised foods/drinks were non-core (85%).

Author and	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
year of						
publication						
Lesser et al.	Los Angeles &	To test the	During the same time	Food and/or	Outdoor, including	The average number of outdoor
(2013)	Louisiana, United	association between	period and in the same	restaurants; alcohol;	billboards, posters,	advertisements in each census tract was
	States	outdoor food	census tracts in which the	tobacco; and other	flyers, flags, banners,	10.2 (SD=17.3, median=4). 67 (30.6%) had
		advertising and	outdoor advertisements	products. Did not	and transit shelters	no outdoor advertisements, and 122
		obesity.	were surveyed, telephone	distinguish between	and benches.	(55.7%) had no food advertisements. On
			interviews were conducted	healthy and unhealthy		average 10.4% of advertisements related
			with a systematic sample of	food ads, as <5% of ads		to food or beverages was 10.4%.
			adults from geographically	were for vegetables or		
			referenced telephone-listed	fruit.		Black or Latino low-income census tracts
			households. In Louisiana			had significantly greater odds of having
			the average response rate			any food advertisements compared to
			per census tract was 37.9%;			high-income white census tracts. No
			in Los Angeles, it was			significant relationship between census
			34.4%. Analytic sample			tract characteristics and percent of
			comprised 2589			outdoor advertisements promoting food.
			participants without			
			missing data. 25% of adults			Census-tracts with a higher proportion of
			were obese, 35%			outdoor advertisements promoting food or
			overweight and 40%			obesity among its residents, controlling for
			normal weight. Adults			age, race and educational status, compared to
			drank, on average, 1.3 (sd			For every 10% increase in food advertising,
			1.9) 12-ounce sodas per			there was a 1.05 (95% CI 1.003 - 1.093,
			day.			obese.

Author and year of publication	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
Liu et al. (2019)	Wellington, New Zealand	Measure children's space-time exposures to unhealthy food advertising in public outdoor spaces, using GPS and wearable cameras; and test effectiveness of banning options.	Cross-sectional. 138 12- year-old children in Wellington, New Zealand, using wearable cameras and GPS devices worn over 4 days.	Food and beverage advertisements, classified as core or non-core based on the WHO Regional Office for Europe Nutrient Profiling Model.	Outdoor.	Children were exposed to a mean of 8.3 (95% Cl 7.9–8.7) food advertisements for every hour they spent in outdoor public areas. Of these, 89.2% were for unhealthy and 0.8 (95% Cl 0.7–1.0) or 9.6% were for healthy food products. Banning outdoor advertising of unhealthy foods within 400 m of playgrounds would reduce estimated exposure by 33%, followed by residential areas (27%), and 400 m of schools (25%). Banning advertising in residential areas and within 400 m of both schools and playgrounds would reduce estimated exposure by 50%.

Author and year of	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
publication						
Lowery et	Los Angeles,	To examine	Cross-sectional. 585	"Harmful" outdoor	Outdoor.	In all communities, harmful content
al. (2014)	California, United	associations between	advertisements. 7 regions;	advertisements that		represented at least 24% of outdoor
	States	the content of	One African American	encourage (1) addictive		advertising space. Harmful
		outdoor advertising	neighbourhood, one Asian	behaviours such as		advertisements included unhealthy foods
		and neighbourhood	American neighbourhood,	alcohol use, tobacco		but was part of a larger analysis included
		ethnic and	one White neighbourhood,	use, and gambling; (2)		addictive behaviour, violence, unsafe
		socioeconomic	one Latino American, one	violence through the		environment for women, inappropriate
		composition.	Latino American Youths	depiction of weapons		content for young children. There was a
			neighbourhood, one Latino	or crime; (3) unhealthy		disproportionate number of
			American Poverty Risk	eating by promoting		advertisements promoting negative
			neighbourhood, and one	high-calorie, low-		messages in non-White, lower-income
			Latino American	nutrition food; (4)		communities.
			neighbourhood with	unsafe environments		
			Multiple Risks.	for women through		Advertisements featuring unhealthy food
				misogynistic portrayals		options, depicting foods that are high-
				and advertisements for		calorie and of questionable nutritional
				strip clubs; and (5)		value, were most prevalent in the African
				content that has been		American community in Baldwin Hills
				deemed inappropriate		(18.6%) and the Latino community denser
				for young children such		with young people (12.7%). Most
				as the mature themes		frequent among these were ads that
				of R-rated movies.		promoted fast food options (e.g.
						hamburgers, fried foods) and ads for soft
						drinks, flavoured beverages, and candy.

Author and year of	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
publication						
Lucan et al. (2017)	Bronx, NY, United States	To determine how placement of advertisements for foods and beverages related to subway ridership and to the demographics, dietary intake, and prevalence's of diet- related conditions.	Cross-sectional. 1586 print advertisements on Subway in Bronx, NY.	Food and beverage advertisements.	Public transport, Subway ads in Bronx, NY.	Advertisements for foods and beverages were more common in stations located in areas characterized by greater poverty, lower levels of educational attainment, and greater percentages of Hispanic residents.
Maher et al. (2015)	New Zealand	Examine the extent and content of outdoor food advertisements and food availability from outlets in the vicinity of secondary schools.	Cross-sectional. 1408 outdoor advertisements in 1km zone surrounding 10 schools (6 urban, 4 rural and evenly split across low and high socioeconomic areas).	Food and beverage advertisements.	Outdoor, including billboards, neon signs, posters, stickers, free- standing signs, banners, painted buildings, bus shelter advertisements, flags, and images in shop windows designed for viewing from outside.	Out of 1408 outdoor advertisements for products, 61.5% were for food. Major categories were soft drinks (21.6%), frozen confectionary (16.2%), savoury snacks (11.4%), and alcohol (8.1%). Overall, 70.2% of food advertisements were for foods classified as 'unhealthy' (i.e. inconsistent with the national nutritional guidelines for adolescents). Average of 87 outdoor food advertisements per 1-km radius surrounding a school (28 food ads per km2).

Author and	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
publication						
Nelson et al. (2019)	Kingston, Jamaica	Examine the prevalence of food and beverage advertising and analyse the content (healthier or less healthy) of advertisements.	Cross-sectional. 484 advertisements across four major transportation hubs / arteries in Kingston (Liguanea, Papine, Cross Roads and Half Way Tree).	Food and beverage advertisements, including fast food. Classified as everyday, select carefully or occasionally, according to Healthy Canteen Kit (Victoria, Australia).	Outdoor, including billboards, posters and transit advertising.	One in four outdoor ads was for food and beverages. The percentage of less healthy food advertisements was higher (70.4% 'occasional' choice) than healthy food advertisements (14.5% 'everyday' choice). 35% of ads were promoting fast-food franchises and 13% were promoting soft drink brands.
Palmer et	Liverpool, United	Automatically extract	Cross-sectional. 10,106	Food, alcohol,	Outdoor, street level /	Less deprived areas have fewer
al. (2020)	Kingdom	and classify unhealthy advertisements from street-level images (collected via GoPro camera) to understand who is exposed to unhealthy advertising.	advertisements across three areas of Liverpool (1) City Centre; (2) North Liverpool; (3) South Liverpool. Health outcomes include measured child obesity.	gambling, other (food not classified as healthy / unhealthy).	street view images.	advertisements compared to the more deprived areas e.g. larger proportions of food advertisements are found within deciles 1 to 6. Large proportions of food advertisements found within areas populated by students (Students Around Campus (4.62%), 2b- Inner-City Students (11.8%)). Also observed larger exposure of food advertisements within areas with higher percentages of school age children carrying excess weight.

Author and year of	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
publication						
Parnell et al. (2017)	Perth, Australia	Assess the volume and type of unhealthy bus shelter advertisements near schools in five local government areas in Perth, Western Australia and to monitor whether the volume of unhealthy advertisements	Cross-sectional. 293 advertisements across five high SES local government areas. Bus shelters with advertisements within 500m of school n =37. Schools n = 16 (within 500 m of advertising bus shelter).	Food and beverage advertisements, coded as healthy, moderate or unhealthy by a nutritionist, as well as alcohol and gambling advertisements (coded as unhealthy).	Public transport, every bus shelter within 500 m of a school.	Of 293 advertisements viewed over four audits, 31.4% were promoting unhealthy products. Food represented the largest proportion of unhealthy advertisements, accounting for 56.5% of all advertisements in the unhealthy category. Products classified as being moderate represented 3.1% of total advertisements. Less than one per cent of advertisements (0.7%) promoted a healthy product.
Richmond et al. (2020)	Sydney, Australia	varied seasonally. Examine the number and type of food advertisements to which children are exposed when using public transport or walking to school in Sydney, Australia.	Cross-sectional. 21 schools (high and mid/low decile SEP and various geographic locations); 53 school routes; 763 advertisements. Theoretical train, bus and walking routes were planned for a one-way trip to each school using Google maps.	Food and beverage advertisements, categorised as 'core' (recommended to meet daily nutrient requirements), 'discretionary' (foods that are surplus to daily nutrient requirements) or 'miscellaneous' (tea, coffee, supplements, meal delivery apps).	Outdoor, including train stations (vending and billboards), and on buses, bus shelters and telephone posts.	Almost one-third (32%) of advertisements were for foods or beverages and of those, 75% promoted discretionary products. Core food and miscellaneous advertisements contributed to 11% and 14% of total food and beverage advertisements, respectively. On average, there were significantly more advertisements per trip for discretionary foods on train routes compared with bus and walking routes. There were no significant differences in the rate of discretionary and core food advertisements per trip between primary and secondary schools, or across schools in high and mid/low decile socioeconomic areas.

Author and	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
year of publication						
Sainsbury et al. (2018)	Australia	Determine the level of public support for food-related regulations for obesity, and to assess the determinants of support.	Cross-sectional survey. Nationally representative sample of Australian adults (n = 2011).	Survey questions included: Government regulations should restrict advertising of unhealthy foods and beverages in public spaces (e.g. bus stops, train stations, roadside).		70.3% participants agreed that Government regulations should restrict advertising of unhealthy foods and beverages in public spaces (e.g. bus stops, train stations, roadside). 90% felt there should be at least some government regulation to protect the public. Respondents agreed that the government should regulate food and beverage advertising (generally) (69.5%), with strongest support for restricting unhealthy food advertising to children
Sainsbury et al. (2017)	Sydney, Australia	Determine the level of public exposure to unhealthy food and beverage advertising on train stations, and if the amount and type of food and beverage advertising varies by SEP.	Cross-sectional. 178 stations on Sydney metro train network; 6,931 advertisements, 36% low SEP.	Food and beverage advertisements, classified as core / discretionary / miscellaneous (tea coffee, supplements, brand-only ads) according to Australian Guide to Healthy Eating.	Public transport, on and immediately surrounding metro train stations. Including commercial billboards, poster, flyers, branded furniture, vending machines, experiential displays promoting product, service or brand.	 (78.9% agreed). 27.6% of all identified ads were for food or beverage. Of those 84.3% classified as discretionary, 8% core, 7.6% miscellaneous. No difference in the mean number of food and beverage advertisements by area, but proportion of advertising for discretionary foods highest in low (41.9%) compared to medium (18.4%) and high (25.2%) SEP areas (p < 0.001).

Author and year of publication	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
Scully et al (2012)	Australia	Examine associations between food marketing exposure and adolescents' food choices and reported consumption of energy-dense and nutrient-poor foods.	Cross-sectional survey. 12,188 Australian secondary students aged 12–17 years. Students indicated whether they had seen a special offer, competition or giveaway for a food or drink product (i) in a magazine, (ii) on public transport or (iii) at school in the last month. Self-reported consumption of fast food, sugary drinks and sweet and salty snacks, and whether they had tried a product seen advertised.		Multiple mediums, including commercial television, print/transport/school food marketing and digital food marketing.	Over two-thirds were exposed to at least one source of print, public transport or school food marketing in the last month. Greater exposure to commercial television, print/transport/school food marketing and digital food marketing were all independently associated with students' food choices. Students exposed to two or three print, public transport or school food marketing reported higher consumption of sweet snacks than those with no exposure.

Author and year of publication	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
Settle et al. (2013)	Australia	To examine the prevalence of outdoor food advertising at tram, bus and train public transit stops across the least and most socioeconomically disadvantaged areas.	Cross-sectional. 233 food advertisements at 558 public transit stops, audited across 20 sampled suburbs; 10 suburbs of least disadvantage, 10 of most disadvantage.	Food, beverage and food store advertisements.	Public transport stops including train stations, bus and tram shelters.	On average, 30% transit stops displayed food advertisements. 66% of train stations, 40% of tram shelters and 24% of bus shelters had at least one food ad. Similar proportion of transit stops in the least and most-disadvantaged suburbs displayed food advertisements (total n=203). However, some differences in the type of advertisements across suburbs were noted with advertisements for fast food restaurants, flavoured milk and fruit juice more common in the most- disadvantaged neighbourhoods (all p<0.05) and advertisements for diet soft drink, tea, coffee and convenience stores more common in the least-disadvantaged neighbourhoods (all p<0.05).

Author and	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
publication						
Shill et al. (2012)	Australia	Identify regulatory interventions targeting the food environment, and barriers/facilitators to their implementation at the Australian state government level.	45 interviews with 47 senior representatives from state and territory government departments, NGOs and statutory authorities.	Restrict (non-TV) marketing of unhealthy foods/beverages to children, e.g. Internet, billboards, sports sponsorship was included as a pre- selected intervention put to participants.		Participants suggested four main approaches to promote healthier food environments, one of which was regulating unhealthy food marketing. Pre- selected interventions e.g. restricting non- TV marketing (internet, billboards, sport sponsorship) was supported by >80% respondents. Marketing restrictions were seen to face substantial implementation barriers including a push for deregulation and private sector opposition, and
						marketing restrictions were seen to require national leadership (rather than state-level action).

Author and vear of	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
publication						
Signal et al.	Wellington, New	Examine the	Cross-sectional. 168	Food and beverage	Multiple mediums	Children were exposed to non-core food
(2017)	Zealand	frequency and nature	children (mean age=12.6	advertisements	including home,	marketing 27.3 times a day (95% CI 24.8,
		of everyday exposure	years).	classified as	school, food venues,	30.1) across all settings, in public spaces
		to food marketing		recommended (core) or	recreation venues and	0.9 (core) vs 8.3 (non- core foods). 30% of
		across multiple media		not recommended	other public spaces.	all non-core food exposure was in public
		and settings.		(non-core).	Public spaces	spaces, compared with 7% of core-food
					included: Street, Shop	marketing exposure in public spaces.
					front, Shopping mall,	
					Private transport,	The rate of exposure for non-core foods
					Public transport	was higher than for core foods in all
					facility, Public	strata. Compared to middle-decile
					transport (on-board),	children, children at higher decile schools
					and Other Retail.	had higher exposure to core foods (RR =
						1.60, 95% CI 1.03, 2.48); while children at
						lower decile schools had non-significantly
						higher rates of such exposure (RR = 1.18;
						95% CI 0.80, 1.73; reference is middle
						decile group). Ethnic differences in non-
						core exposures showed non-significantly
						higher rates of exposure to non-core
						foods for Māori children relative to NZE
						(RR = 1.18, 95% Cl 0.90, 1.55) but not for
						Pacific children (RR = 0.99, 95% Cl 0.84,
						1.16). There was reasonably strong
						evidence for ethnic differences in the
						lowest school decile group (Māori RR =
						1.20, 95% CI 0.97, 1.47; Pacific RR = 1.50,
						95% CI 1.19, 1.89; both relative to NZE).

Author and year of publication	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
Taillie et al. (2020)	Chile	Evaluate the impact of Chile's Law of Food Labelling and Advertising on household beverage purchases.	Monthly longitudinal data on packaged beverage purchases were collected from urban-dwelling households (n = 2,383) participating in the Kantar Word- Panel Chile Survey from January 1, 2015, to December 31, 2017. Beverage purchases were linked to nutritional information and categorized as "high-in" or "not high-in" nutrients of concern (i.e., sugars, sodium, saturated fat, or energy) according to Chilean nutrient thresholds.	2016 Law of Food Labelling and Advertising: jointly mandate front-of- package warning labels, restrict child-directed marketing, and ban sales in schools of all foods and beverages containing added sugars, sodium, or saturated fats that exceed set nutrient or calorie thresholds.		Purchases of high-in beverages significantly declined following implementation of Chile's Law of Food Labelling and Advertising; these reductions were larger than those observed from single, standalone policies, including sugar-sweetened-beverage taxes previously implemented in Latin America. Compared to the counterfactual, the volume of high-in beverage purchases decreased 22.8 mL/capita/day, post- regulation (95% confidence interval [CI] -22.9 to -22.7; p < 0.001), or 23.7% (95% CI -23.8% to -23.7%). High-educated and low-educated households showed similar absolute reductions in high-in beverage purchases (approximately 27mL/capita/day; p < 0.001).

Author and year of publication	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
Velazquez et al. (2019)	Vancouver, Canada	Describe the prevalence and characteristics of food and beverage advertisements surrounding public schools in a large Canadian city, and examine whether advertising differed by neighbourhood socio-economic deprivation, school type (elementary versus secondary), and—for advertisements located on store exteriors— store type.	Cross-sectional. 26 geographically and socioeconomically diverse schools (20 elementary and 6 secondary) in Vancouver, Canada. 653 advertisements.	Food and beverage advertisements, classified as "sell most", "sell sometimes" and "do not sell" using a modified version of the Guidelines for Food and Beverage Sales in BC schools.	Outdoor, including posters or other physical materials with branded or non- branded information, images related to food, or logos for provincially or nationally recognizable food or beverage retailers in areas surrounding each school (reported on 400m line-based buffers surrounding each school).	Four schools were exposed to > 25 advertisements for items categorized as "do not sell" by provincial guidelines for the sale of food in schools. 22/24schools had at least one food- or beverage-related advertisement within 400m (median: 18, range: 0–96) and approximately 90% of food or beverage advertisements were for items not recommended for frequent consumption by provincial school food guidelines. Most frequently depicted products were pizza or burgers (20.7%), soft drinks or energy drinks (19.4%), and milk and alternatives (19.0%). Of the 44 advertisements featuring fruits and vegetables, 21 were classified as "sell sometimes" or "do not sell" (e.g. fruit juices or smoothies containing added sugars). Overall, just 6.7% of advertisements were for "sell most" items, whereas 24.0% and 45.6% were for "sell sometimes" and "do not sell" items, respectively. In comparison with less deprived neighbourhoods, the most deprived neighbourhoods had proportionally more branded advertisements (56.2% versus 41.9%) and food pictures (30.1% versus 22.2%) and fewer logos or non-branded advertisements. Neighbourhoods with high deprivation scores also had a higher proportion of "sell most" advertisements (n=23, 7.9%) in comparison with the least of deprived neighbourhoods (n=6, 3.6%).

Author and year of publication	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
Walton et	Wellington, New	Document	Cross sectional. 79	Food and beverage	Outdoor, including	The buffer zones surrounding schools that
al. (2009)	Zealand	community food	advertisements, 4 schools	advertising. Classified	advertising on food	had the highest number of food outlets
		environment	(varied by SEP), 792	into 'everyday',	outlets in	also had the highest number of food
		surrounding case	students; 35% highest	'sometimes' and	neighbourhoods	advertisements. The majority of food and
		study primary schools	deprivation groups, 35%	'occasional', based on	surrounding primary	beverage advertised was considered
		and to consider	Maori ethnicity. For each	energy, fat and sodium	schools. Data	'occasional'. The schools with a higher
		whether aspects of	school, interviews were	levels according to the	collected by driving	percentage of students passing food
		the community food	conducted with school	Food and Beverage	and walking the	outlets and advertisements considered
		environment impact	management (principals,	Classification System	streets surrounding	that their presence impacted on efforts
		on the food	teachers and parents on	for Schools (FBCS).	each school with a	within schools to improve the food
		environment within	the governance board or	Food outlets were	2km Euclidean buffer.	environment.
		schools.	involved in lunch	categorised as cafe;		
			programmes).	local fast food;		The school with the highest social
				multinational fast food;		deprivation characteristics had a greater
				petrol station or		number of food advertisements classified
				convenience store.		unhealthy (foods for 'occasional
						consumption') within a 2km buffer zone
						of the school (20 advertisements)
						compared to the school classified as mid-
						low deprivation (0 advertisements).

Author and	Jurisdiction	Study aim	Study design and methods	Advertising content	Advertising medium	Main results
year of						
publication						
Yancey et	United States	Content analysis of	Cross sectional. Selected	Advertised content in	Outdoor, including	The density of advertising varied by zip
al. (2009)		advertising to	zip-codes across four cities:	one of the following	billboards, bus bench	code area race/ethnicity, with African
		examine whether	Los Angeles, Austin, New	categories: Food; Non-	and shelter	American zip code areas having the
		African Americans,	York City, and Philadelphia.	alcoholic beverages;	advertisements,	highest advertising densities, Latino zip
		Latinos, and people		Alcoholic beverages;	sidewalk "sandwich"	code areas having slightly lower densities,
		living in low-income		Physical activity;	signs, murals painted	and white zip code areas having the
		neighbourhoods are		Sporting goods (not	on the sides of	lowest densities.
		disproportionately		clothing); Sporting	buildings, and large	
		exposed to		goods (clothing); Screen	store window posters.	Low income Latino zip code areas had the
		advertisements for		entertainment (i.e.,		highest prevalence of advertisements
		high-calorie, low		movies, television,		featuring high-calorie/low-nutrient
		nutrient-dense foods		video games); Other		products, which included ads for fast
		and beverages and		health-related topics		foods, alcoholic beverages, and sugary
		for sedentary		(e.g., obesity		beverages like sodas and sweetened
		entertainment and		prevention public		juices.
		transportation.		service		
				announcements).		

Note: SEP - Socioeconomic Position; NGO – Non-government Organisation; SD – standard deviation

Table 2: Extracted data pertaining to the factors that have influenced the adoption or implementation of government-led policies to restrict unhealthy food advertising in public spaces or on government owned assets

Jurisdiction	Barriers and challenges	Enablers
MANDATORY		•
London ¹ (2019)	 Perceived decreased revenue for Transport for London (especially given existing financial pressures and the need to maintain the affordability of transport). Belief that the Nutrient Profiling Model is inappropriate and will contravene the policy. Risk of legal threats. Removal of a clause preventing the logos of food businesses associated with HFSS foods, such as fast-food chains, from appearing in advertisements (i.e. policy watered down). 	 Multi-sectoral actors: Public sector lobbying (Mayor of London, Public Health England), Greater London Authority and Transport for London (drafting of policy and consultation), TfL (implementation), general support from London boroughs, public health organisations and the London Food Board, private sector (TfL agents to provide support to advertisers), NGOs (advocacy), and university (evaluation on HFSS sales). Leadership: Strong political will from the Mayor of London who also chairs TfL's board and has the power to direct its policies. Effective government partnerships between the Greater London Authority and TfL. Public health lobbying. Support by Boroughs and policy alignment with local government level policy on Sugar Reduction and Healthier Foods.
Amsterdam ² (2018)	• N/A	 Policy implemented under the broader Healthy Weight Program. Policy leadership and multi-sector actors: Mayor acted as a champion and responsibility originally belonged to the Department for Social Development (not Health).

Jurisdiction	Barriers and challenges	Enablers
		 Strategic use of power: Prioritise action according to feasibility and need. Long-term focus and clear milestones enable ongoing buy-in even during changes in leadership. Evidence and monitoring. Creativity to address barriers (e.g. industry influence addressed by building the business case for action).
Australian Capital Territory ³ (2016)	 Strong industry opposition in submissions to consultation. 	 NGO support: The Heart Foundation prepared a report for ACT Health. This report outlined an audit of marketing to children across 61 sites in the ACT (with a focus on mediums that can be influenced by the ACT government). This report was endorsed by the ACT Minister of Health in 2015. Policy alignment: Stated alignment the 2013 Towards Zero Growth: Healthy Weight Action Plan.
Chile ⁴⁻⁶ (2016)	 Industry opposition to Nutrient Profile Model and through arguments that the policy could be a barrier to trade practices. Application of marketing definitions of 'child-directed advertising' – difficult to monitor compliance given ongoing changes and innovations in marketing. Policy loopholes: Only includes marketing to children <13 years of age, excludes universities and other tertiary education settings, marketing adaptations to other unregulated platforms, and use of labelling as a 	 The President, Parliament, Ministry of Health, and university sector set a common agenda, with political consensus achieved on the need to reduce population weight (especially among children) and the prevalence of diet-related NCDs. Broad regulatory approach: the need for a comprehensive approach to address obesity was recognised, allowing for coherent discussions concerning trade-offs, negotiations, and technical consensus. Policy leadership (Senator Guido Girard) backed by influential academic support (Professor Ricardo Uauy).

Jurisdiction	Barriers and challenges	Enablers
	marketing tool.	• Time given to develop an evidence-based implementation
	•	plan.
		Political timing
		• Multi-sectoral actors: academia and health advocacy groups
		advocacy for and compilation of evidence-based regulatory
		measures; ongoing involvement of the Ministries of Health,
		Education, Economy, Treasury, Social Development,
		Agriculture and Foreign Affairs; and other government bodies
		(The National Institute of Industrial Property, The National
		Council of Television and the National Consumers Service) to
		define compliance measures.
		Nutrient Profiling System and regulation designed by scientific
		and media experts without industry interference.
		• Industry given time to adapt to the regulation and convinced
		to support it by being early adopters.
		• Public debates and framing (i.e. reduce child obesity,
		consumer rights to nutrition information).
Brazil ⁷⁻⁹	• Food, beverage, and media industries lobbying against	Counter-advertising.
(2016)	marketing restrictions: regulation is framed as restricting	Public campaigns.
	citizens and enacted policy is a watered-down version of	• Lawsuits by NGOs and public health advocates to target
	the more comprehensive draft that aimed to restrict all	inappropriate marketing of unhealthy products.
	marketing to children.	Reduced marketing power.
	• Legal threats by industry: Efforts by the Ministry of	Comprehensive approach to reduce obesity.
	Health and National Health Surveillance Agency to	• Framing: describe the psychological issues that arise from

Jurisdiction	Barriers and challenges	Enablers	
	restrict marketing of HFSS food and beverages to	childhood obesity (e.g. distress, low self-esteem, social	
	children were suspended in 2006 after being challenged	discrimination, and stigmatization).	
	in federal court by the food industry.		
	• Inadequate public support for marketing regulations		
	(because of limited public awareness about the extent		
	and drivers of obesity and public health issues).		
	Weak enforcement.		
Latvia ¹⁰	• Industry lobbying resulting in watered-down policy	• N/A	
(2016)	actions (i.e. self-regulatory measures) concerning		
	restricting the marketing of unhealthy foods and		
	beverages since 2006.		
Canada ^{9,10,12}	• Loopholes: Cross-border spill over effects and	• Comprehensive, mandatory, rights-based policy approach to	
(1980)	exemptions.	protect children (includes all mediums).	
	• Industry opposition/legal threats: In 1989, industry	• Public support: 85% agree that children are exposed to too	
	argued that the regulation restricted the freedom of	much junk food advertising and 86% support government	
	expression that is supported by the Charter of Rights.	actions to restrict advertising to children.	
	The regulations were upheld with the court ruling that a		
	democratic society can enact measures to protect		
	children from seductive and manipulative techniques		
	that are used by advertisers.		
VOLUNTARY			
Ireland ¹³	Voluntary	Comprehensive approach/multi-sector actors: complement	
(2018)		other advertising codes.	
MARKETING RESTRICTIONS OVERALL ^{14,15}			

Jurisdiction	Barriers and challenges	Enablers
	Lobbying through legal threats/lawsuits	• Protect policymaking processes from industry interference (i.e.
	• Lobbyists arguments: "statutory regulation is	remove conflicts of interest).
	unnecessary because self-regulation works" and "there	• Counter industry lobbying by being prepared for industry
	is insufficient evidence for statutory regulations".	push-back with new and emerging evidence and ethics-based
	• Industry influence on policymaking: delay and water	arguments (policies can be enacted to restrict freedom of
	down scope and potential impact of regulations.	expression for public interest).
	• Four industry tactics to interfere with policy efforts to	• Be strategic : understand the local context and ensure there is
	regulate the marketing of unhealthy foods and	broad support for policy action.
	beverages: delay, divide, deflect and deny.	Critically appraise the policy design.
		• Learn from other countries that have defended marketing
		restrictions.

*N/A: information not available

Appendix References

- 1. Halliday J, Platenkamp L, Nicolarea Y. A menu of actions to shape urban food environments for improved nutrition. GAIN, MUFPP and RUAF; 2019.
- Hawkes C, Russell S, Isaacs A, Rutter H, Viner R. What can be learned from the Amsterdam Healthy Weight programme to inform the policy response to obesity in England? : Obesity Policy Research Unit (OPRU): Rapid response briefing paper; 2017.
- ACT Government. Report highlights impact of marketing unhealthy food and drinks to children [media release]. 2015. [Available from: https://www.cmtedd.act.gov.au/open_government/inform/act_government_media_rel eases/corbell/2015/report-highlights-impact-of-marketing-unhealthy-food-and-drinksto-children]
- 4. Villalobos Dintrans P, Rodriguez L, Clingham-David J, Pizarro T. Why health reforms fail: lessons from the 2014 Chilean attempt to reform. Health Syst Reform. 2019;5(2):134-44.
- 5. Developing Ideas. Chile's Law on Food Labelling and Advertising: A Replicable Model for Latin America? Santiago; 2016. [Available from: https://ideas.llorenteycuenca.com/wp-content/uploads/sites/5/2016/05/160504_DI_report_food_chile_ENG.pdf]
- 6. Uribe .R., Fuentes-Garcia .A. Food marketing, children, and obesity in Chile: evidence and challenges for regulation. 2013.
- Henriques .P., Sally .E.O., Burlandy .L. Regulamentação da propaganda de alimentos infantis como estratégia para a promoção da saúde. Ciênc Saúde Coletiva. 2012; 17(2):481-90
- Pelegrini M, Schiavo SF. Participação popular na mídia é censura? In: Sousa H, Pinto M, Fidalgo J, Jedrzejewski S, Costa e Silva E, Melo A, et al. Media policy and regulation: activating voices, illuminating silences. Minho: Centro de Estudos de Comunicação e Sociedade; 2013. p. 378-87.
- 9. WHO Forum on the Marketing of Food and Non-alcoholic Beverages to Children (2006: Oslo, Norway) Marketing of food and non-alcoholic beverages to children: Report of a WHO forum and technical meeting, Oslo, Norway, 2-5 May 2006.
- 10. Marketing of foods high in fat, salt and sugar to children: update 2012-2013. WHO Regional Office for Europe. Copenhagen, Denmark. 2014.
- 11. Fraser B. Latin American countries crack down on junk food. The Lancet. 2013:382 (9890); 385-386.
- 12. A review of food advertising to children in Quebec. Quebec Coalition on Weight-Related Problems. Montreal, Quebec. 2019. [Available from: https://cqpp.qc.ca/app/uploads/2019/10/A-review-of-food-advertising-to-children-in-Quebec-1.pdf]

- 13. Non-broadcast media advertising and marketing of food and non-alcoholic beverages, including sponsorship and retail product placement: Voluntary codes of practice. Department of Health. 2018 (updated 13 June 2019). [Available from: https://cqpp.qc.ca/app/uploads/2019/10/A-review-of-food-advertising-to-children-in-Quebec-1.pdf]
- 14. Hawkes C. Regulating Food Marketing to Young People Worldwide: Trends and Policy Drivers. American Journal of Public Health. 2007; 97(11):1962-1973.
- 15. World Cancer Research Fund International (2020). Building Momentum: lessons on implementing robust restrictions of food and non-alcoholic beverage marketing to children. [Available from: wcrf.org/buildingmomentum]