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HEALTHIER ADVERTISING IN CARDIFF AND THE VALE OF GLAMORGAN

A co-produced mixed methods evaluation of High Fat Sugar Salt (HFSS) advertising

KEY FINDINGS

- There was a high level of awareness of advertising considered to be HFSS amongst residents of Cardiff and the Vale. Exposure to advertising was not limited to the areas where people lived, as people travelled across Cardiff and the Vale for both leisure and work.
- Children and young people demonstrated a higher awareness of perceived HFSS advertising in their environment than adults.
- Participants were generally supportive of a policy change to restrict the advertising of HFSS products on council owned and contracted sites.
- Positive impacts from the policy were perceived on food and drink purchasing behaviours, health, environment and wider policy expansion.
- The planned policy was perceived to be particularly impactful for children and young people, with some considering it to be a window of opportunity for life-long impact. It was also perceived to be impactful for those living in areas of higher deprivation.
- Factors that could help implement the planned policy included evidence, wider learning from areas that have implemented similar policies, and communication with advertising companies, the public and those involved in the process of implementing policy changes.

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Background

Levels of obesity have increased globally, with the United Kingdom (UK) experiencing the fourth highest rate of adult obesity in Europe (1). In Wales, children living in the lowest-income areas are twice as likely to be living with obesity compared to peers living in the most affluent areas (1). Tackling obesity is therefore a national cross-government priority in the UK, with Wales delivering its Healthy Weight Healthy Wales strategy (2). Within the strategy, advertising is recognised as an influential driver of behaviours and eating patterns, particularly High Fat Sugar Salt (HFSS) product advertising. Evidence suggests that people who are more aware of HFSS advertising, and those living in areas of higher deprivation who are exposed to higher levels of HFSS advertising, both consume a greater level of HFSS food and drinks (3,4). Additionally, children are believed to be particularly susceptible to the effects of HFSS advertising (5,6).

Cardiff and the Vale of Glamorgan University Health Board (UHB), Cardiff Council and the Vale of the Glamorgan Council are working collaboratively to progress action that restricts HFSS advertising. Planned policy changes would restrict HFSS advertising on council owned and contracted sites across the regions, increasing the space for healthier advertising alternatives.

This study aimed to evaluate public perceptions of HFSS advertising and of the planned policy changes. It also aimed to evaluate perceived barriers and facilitators to implementing the policy changes and potential impacts.

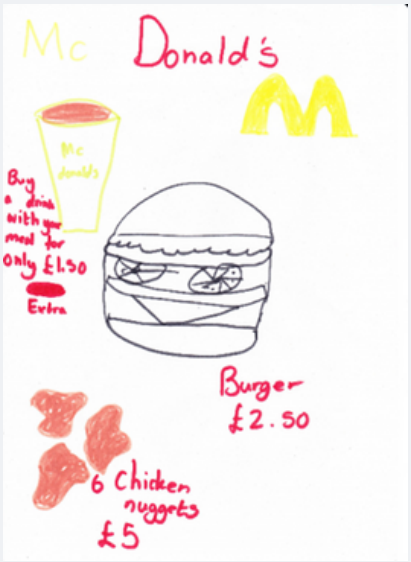
Methods

This was a 15-month co-produced mixed methods study in Cardiff and the Vale of Glamorgan. An online survey was completed by 311 residents, with 14 participating in a one-to-one follow-up interview. Seven focus groups took place with a total of 49 school learners (aged 9-14 years). One-to-one interviews were also conducted with 12 Stakeholders, including council, health board and advertising representatives, practitioners and policy makers. Finally, the study incorporated data collected during advertising mapping exercises conducted by the local authorities.

Public involvement was integrated throughout the study. A PHIRST Insight public representative was involved in all study stages as a member of the Study Management Group. Public Involvement sessions were undertaken with Primary School learners, members of a council youth group and with a public representative from the area. These sessions informed the study design, the development of study materials and dissemination plans and the identification of knowledge mobilisation champions.

Findings

Public awareness of HFSS advertising



Examples of advertising drawn during Primary School focus groups

The survey identified a high level of exposure to perceived HFSS bus stop advertising amongst adults. In the previous week, 74.2% of survey responders in Cardiff and 60.9% in the Vale reported seeing advertising they considered to be HFSS in their local area. This was also reflected in the interviews and focus groups.

Participants reported awareness of prominent advertisers and noted the content typically included deals, new products, and HFSS rather than non-HFSS products. It was highlighted by children and young people that advertisers often make the food look more appetising to encourage purchasing behaviour.

HFSS advertising was identified in local areas, city or town centres, and near fast food establishments. It was more concentrated in city centres and busy areas, with less reported in residential areas.

Exposure was not limited to the area where people lived, as people would frequently commute across Cardiff and the Vale for work or leisure. Children and young people also reported seeing advertising they considered to be HFSS on their journey to school.

Children and young people were more aware of advertising and could better describe specific advertising they had seen, including content, price and location, compared to adults.

> "In Cardiff there's these little screens that have pictures about stuff on and advertising and stuff, I normally see fast food and unhealthy eating places."
>
> **Learner**

Other sources of HFSS advertising often discussed concurrently with bus stop advertising, included:

- Other outdoor advertising sites such as billboards or posters in shops
- Social media and Influencers
- Television and radio.
- Food magazines
- YouTube.

As such, it is important to consider bus stop advertisements in the context of these wider exposures.

"I think everyone would like to believe that like they're not influenced by anything but you know, as it is for me, it's probably subconscious rather than deliberate."
Resident

Perceptions of the influence of HFSS advertising on purchasing behaviour was mixed:

Residents reported being influenced directly (purchasing the specific products or brands) or indirectly (purchasing similar products). Others believed it did not have any influence, however the unconscious influence of advertising on purchasing behaviour was acknowledged.

It was suggested that age groups may be influenced differently, with children considered more susceptible and with less effect on older adults.

Many children and young people reported that seeing HFSS advertising made them want to buy the products. Children also reported asking their parents for HFSS products they had seen in adverts.

Perceptions of an advertising policy change

Residents, children and young people were generally positive towards changes to HFSS advertising. However, a few children felt that some adverts for unhealthy food should still be allowed.

Stakeholders believed that attitudes towards the policy change would vary for different Stakeholders:

- **General public:** They may see this as a positive change and recognise the benefits or not consciously notice the changes unless they are informed. However, there may be some who view it negatively as the actions of a Nanny State.
- **Local authorities:** Despite being positive towards the policy in theory, there may be hesitation to implement the policy due to factors such as the financial climate.
- **Welsh government:** They may be positive towards the policy as it would fit with wider health and advertising related action. However, some believed they may not be aware of or engaged with the work being undertaken.
- **Health professionals:** They are likely to be supportive due to the potential health impacts.
- **Advertising companies:** It was felt that they may view the policy negatively due to the perceived negative financial implications. This was also recognised by residents, children and young people.

Factors influencing future HFSS policy implementation

Factors that Stakeholders felt may be a **barrier** to implementing the HFSS policy:

Society: Potential negative public perceptions of and pushback towards the policy.

Financial risks: Perceived risk of revenue loss for both advertising companies and local authorities, which is a concern in the current financial climate. However, many felt there was a lack of evidence to support this.

Business pushback: Negative reactions of advertising companies towards the policy and associated actions to prevent it or use loopholes to work around it. This may include lobbying from the food industry.

Stakeholders: Lack of policy engagement or misunderstanding amongst councils and policy decision makers.

Politics: Pushback or opposition from various political parties that could contribute towards a negative perception of the policy within local authorities and the general public.

"I think having Welsh government be supportive with the policy and legislation would definitely help. Otherwise we're trying to do this in isolation across Wales, so I think anything they can do to support it would be hugely beneficial."
Stakeholder

Factors Stakeholders believed would facilitate implementation of the HFSS policy:

Communication:

- Regular communication directly with policy makers to help prevent misinterpretation of information that is passed on.
- Improved communication between local authorities and advertising companies to directly address issues and misunderstandings.
- Communicating the positive benefits of the policy and creating a positive narrative with the general public, wider food industry and decision makers would counter negative perceptions and pushback.
- Clarification of what the policy entails to all Stakeholders to prevent misconceptions.

Evidence: Evidence of actual financial implications rather than perceived risk and evidence of wider positive impacts related to policy change.

Wider learning: Learning from others who have successfully implemented the policy to understand any financial implications, health benefits and how they overcame implementation barriers.

Stakeholder buy-in: Ensure any Stakeholders involved in the policy process are engaged and onboard with process.

Senior leadership support: The backing of senior leadership within the local authorities would help push through the policy.

Welsh Government backing: This may allow for a National policy that would ensure a consistent approach to HFSS advertising.

Perceived impacts

In general, participants believed that the policy had the potential for numerous short and longer term positive impacts:

Purchasing behaviour: It may encourage reduced purchasing of HFSS products and increased purchasing of healthier alternatives that people might not have considered previously. It may also lead to increased product choice.

Health: Improvements in healthy eating behaviours may lead to healthier weight in the population, a reduction in obesity-related illnesses, improved general physical and mental health and reduced pressure on the NHS.

Businesses: Increased revenue for smaller businesses and those selling healthier products, greater engagement and willingness to work with local authorities, offering more healthier product options and increased promotion of healthier products on sites not included in the policy.

Environment: Improvements to sustainability through a reduction of highly processed food production and improvements to the local streetscape.

Wider action: Policy success could lead to expansion to incorporate additional sites, event sponsorship or other undesirable advertising.

The impacts on the environment and wider action were largely recognised by Stakeholders.

This policy change was perceived to be of particular benefit to:

Children and young people: They are highly aware of advertising. It was considered to be a window of opportunity to create life long positive behaviours.

Parents: Through a reduction in pester power from their children.

Those living in areas of higher deprivation: Due to higher presence of advertising in these areas and possibility of reduced income for purchases.

"[In] The short term, hopefully less purchasing of these types of products, then in the long term what we're hoping is that would affect the obesity rate levels within South Wales and Cardiff and Vale area. It would then obviously reduce any pressures on the NHS."
Stakeholder

"The younger they start to eat healthy obviously and see healthier advertisements they would definitely kind of remain with those habits along the years."
Resident

"[It will] Make more people eat more healthier stuff than less healthy. It'll influence people, instead of eating this chicken sandwich burger thing they can eat more healthy foods, like pasta and pesto, pasta."
Learner

Negative, or unintended, impacts were also highlighted as a result of the policy change by all participants:

Revenue: Risk of loss of revenue to both businesses (advertising companies & retailers) and local authorities. However, it was believed that the evidence to support this has not been adequately provided.

Business pushback: There may be increased workload to change advertising practices, industry sponsored negative media coverage and use of loopholes in the policy to still advertise products considered to be unhealthy.

Society: It may lead to reduced choice for customers. There may also be negative public reactions from those who feel this reflects a Nanny State. Some children also felt it might lead to people being too healthy, or underweight.

Advertising alternatives: Replacement advertising might be equally undesirable from a public health or sustainability viewpoint.

"I think, depending on how it's pitched, the public would be more in support than less, if it was pitched around children."
Stakeholder

"There's a lack of knowledge of what the policy might be and the impact of that. That's within the council, colleagues and the officers within the council not fully knowing what this policy might do and what it would actually look like."
Stakeholder

Whilst the policy was generally perceived to be potentially impactful, some residents and Stakeholders believed the impact might be limited by various factors:

Society: There may be negative pushback from those who may feel this reflects a Nanny State. However, this may be limited by focussing the policy implementation towards children and young people.

Measurement: There are many policies, interventions and public interventions in place attempting to address outcomes such as obesity. It would be difficult to quantify and evidence the impacts of this policy, particularly in isolation.

Policy:

- It would be a small cog in a much larger complex system. Broader change and wider concurrent action may be required for full impact. It is, however, considered to be a positive shift in the right direction.
- Exposure to HFSS advertising in the wider environment will not be impacted.
- Localised action may be limiting. A wider national approach would provide consistency.
- Long term monitoring and momentum may be required to ensure advertising compliance and allow longer term impacts to occur.
- Exploitation of loopholes by companies, including increased advertising on private sites and product reformulation to meet Nutrient Profile Model requirements.
- Nutrient Profile Model weaknesses allow products considered to be unhealthy to be classified as non-HFSS.

Conclusions

There was a high level of awareness of advertising that was considered to be HFSS amongst children, young people and adults across Cardiff and the Vale. This was particularly true of children and young people, who were able to readily describe the content and location of numerous perceived HFSS advertisements that they had seen. Participants were generally positive towards a policy that would restrict the advertising of HFSS products across council owned and contracted sites. Overall, it was felt that this policy had the potential for positive impacts on areas including health, business and the environment. It was believed this would be particularly impactful on groups such as children and young people, parents and those living in areas of higher deprivation. Finally, factors that were considered important for the future implementation of the HFSS policy included the need for direct, regular communication and engagement with all Stakeholders in the policy process, clear evidence regarding financial risk and wider learning from areas who have successfully implemented HFSS policies.

"I suppose if companies aren't able to advertise unhealthy stuff, they'll have to advertise healthy stuff, then they will invest more in making that healthier stuff more appealing and making more healthy options available."

Resident

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