

Improving dietary intake and achieving food product improvement

A workshop of “first mover” countries to exchange experience and identify wider policy implications for the WHO European Region

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Abbreviations

EU	European Union
FOP	front-of-pack
HFSS	high in fats, sugars and/or salt
NCD	noncommunicable disease
SDG	Sustainable Development Goal
VAT	value-added tax
WHO	World Health Organization



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BACKGROUND AND INTRODUCTION

The World Health Organization (WHO) European Region continues to be severely affected by diet-related noncommunicable diseases (NCDs), obesity and, in some countries, micronutrient deficiencies. More than 50% of the population is overweight or obese in 46 of the 53 countries in the Region, and overweight and obesity are highly prevalent among the Region's children and adolescents. Leading risk factors include excess body weight; excessive consumption of energy, saturated fats, trans fats, sugar and salt; and low consumption of vegetables, fruits and whole grains¹.

Implementation of key policies to promote healthy nutrition and prevent obesity has improved significantly in recent years in the WHO European Region². Substantial progress has been made on policies to improve food environments, including school food, food product reformulation and fiscal policies, but there has been insufficient progress in implementing front-of-pack (FOP) nutrition labelling and comprehensive restrictions on marketing of unhealthy foods to children². Furthermore, there are differences between countries, with some adopting much more ambitious approaches while others lag behind in implementing policy².

In order to drive further progress on improving dietary intake and food product improvement, the WHO Regional Office for Europe, Public Health England and the Royal Institute of International Affairs (Chatham House) co-convened a workshop of “first mover” countries in March 2019. The workshop brought together a number of countries that have been early implementers of policy action in this field or have been most ambitious in their approach, in order to share experiences, build on successes and find ways through challenges. The meeting sought to capture the learning from these first movers and explore new ways for countries to work together in order to scale up progress on implementing the priorities of the European Food and Nutrition Action Plan¹ and towards achievement of the Sustainable Development Goals (SDGs).

Representatives of nine countries participated, along with staff from the WHO Regional Office for Europe and Chatham House. The meeting was held under the Chatham House Rule, according to which comments are not attributed to participants, in order to facilitate full and frank exchange of views and experience.

2

DRIVING FOOD PRODUCT REFORMULATION

Three countries presented details of their programmes to drive food product reformulation and reduce the levels of salt, sugars, calories and saturated fats in food products. Several other participating countries were also able to share information on similar programmes. In some cases, these efforts had been ongoing and evolving over many years, while other countries reported very recently implemented programmes.

Several programmes have already produced real improvements in a wide range of food products, and some countries have been able to document measurable reductions in population intakes and even improvements in health outcomes (e.g. stepwise reductions in salt levels in foods of up to 50% with an 11% fall in average population sodium intakes over 10 years, contributing to a reduction in stroke and cardiovascular disease; overall 2% reduction in total sugars across eight food categories in the first year of a sugar reduction programme).

There are some key differences in the approaches adopted by countries in their efforts to drive reformulation. Approaches can differ in how they engage with the food industry on food product improvement – some governments, for example, talk directly to companies, while others only work with trade bodies.

Several common challenges were identified:

- The process of engagement on reformulation can be very time-consuming – for officials and for food companies – and requires considerable human resources. This is particularly challenging for small countries, which also have less leverage over companies because their markets are relatively small.
- Private sector stakeholders can sometimes appear to engage with the process while

- employing delaying tactics to impede real progress.

- Access to data is vital in order to set reformulation targets and to fully monitor progress and evaluate impact. Clear, transparent and independent monitoring of progress, rather than self-assessment by companies, is vital. Three different types of data are needed to fully evaluate progress: product composition, sales volume and population intakes.

- Some food product categories can prove particularly challenging, which may be due to technical issues or to industry resistance to change. For salt, the processed meats and cheese categories have proved particularly difficult. Bread can also be challenging in countries where an increase in use of imported frozen dough has seen reversal of some previous reductions in salt levels. Similarly, there are challenging areas in relation to sugar reduction, such as fruit nectars.

- It can be difficult to maintain momentum on reformulation, and countries can reach a plateau where further progress is challenging. It may be necessary to reach out repeatedly to resistant sectors of industry, to ratchet up political pressure and to keep the issue in the media spotlight.

- Improving the nutritional quality of food eaten out of the home (restaurants, cafés and other food service outlets) is increasingly important because of the sector's growing contribution to diets. However, it is challenging because there is no easy mechanism for monitoring current nutrient levels and any subsequent changes, particularly when no nutrition information is available. Anecdotal evidence from country

experience suggests that food bought in such outlets tends to be served in bigger portion sizes, and some authorities – such as those in Australia and New York City – are seeking to address this issue through limits on portion size and/or menu calorie labelling.

A number of learning points emerged from countries' collective experience of food product improvement:

- Setting targets based on sales-weighted figures is important to ensure that the bestselling products are covered, thereby facilitating bigger improvements in overall diets.
- It is important that processes are based on government definitions of portion sizes, which should be based on dietary survey data. Such estimates are likely to be more reflective of actual consumer behaviour than industry-defined serving sizes.
- Taxes, whether actual taxes or mooted possible taxes, and the potential for legislation on product standards and/or improvement are particularly strong levers to push reformulation. It is worth noting that, even if taxes or legislation have only been introduced for one product category (e.g. sugar-sweetened beverages), other sectors of industry may also be acutely aware that further taxes/regulations could be introduced in the future.
- Reformulation should be accompanied by efforts to reduce portion size and shift consumer behaviour, as part of a package of wider, complementary measures. In cases where reformulation is problematic (e.g. reducing sugars in fruit nectars), a focus on shifting

consumer behaviour to healthier choices and reducing portion sizes may be appropriate.

- It is important that there is transparency over progress with reformulation, so that governments and companies can be held to account. This means that governments should publish data, and when they negotiate access to data from data companies, it is advisable to include a condition that the right to publish the data is included in the contractual agreement.
- Mandatory nutrition labelling, including sodium, sugars, saturated and trans fats, is extremely important to facilitate monitoring, including of unpackaged foods. FOP nutrition labelling can be a useful lever to encourage reformulation. Nutrition information for food eaten outside the home is also important.
- In contexts where online food shopping is common, web-scraping technology can extract nutrition data from online retailers' websites. Smartphone apps have also been developed to crowdsource data.
- It is important not to neglect the quality of food in public institutions. It is possible to set nutrient criteria to drive improvement in public procurement and food served or sold in public institutions.
- Governments should be aware that there can be unintended consequences of reformulation. Sugar reduction, for example, could lead to increased use of non-sugar sweeteners, which are extremely difficult to monitor, especially since labels are usually required to declare only the presence, not the quantity, of such sweeteners.

Conclusions and further work | Food product improvement

It has become clear that reformulation programmes need to be very ambitious if they are to bring about overall improvements in diets. There is broad agreement, therefore, that food reformulation belongs as part of a wider package of measures. There are clear synergies between reformulation and other measures, and – in order to meet global NCD goals and SDGs – broader changes in European diets will be required. A comprehensive approach to dietary change and improvement of food environments is, therefore, essential.

While there are already examples of countries working together and learning from one another's experience on food product improvement, there remains scope for countries to work together more effectively on this

issue. Further work in a number of areas would be valuable:

- gathering data to establish an overall picture across countries of nutrient levels in foods and targets that have been established (and previously met);
- publishing data across countries to highlight the potential scope for improvement and using such data as a lever to achieve parity with the “best in category” products;
- developing proxy indicators for progress in food product improvement;
- identifying ways to drive improvement in public procurement/food in public institutions and the out-of-home sector.

3

FRONT-OF-PACK (FOP) LABELLING

The introduction of simplified nutrition labels on the front of food packages is recommended to enable consumers to make healthy food choices. This is particularly important because use and understanding of nutrient declarations on back-of-pack labels is low, especially among groups of lower socioeconomic status.

Several countries provided information on FOP nutrition labelling schemes that have been, or are in the process of being, implemented. They also described the research and nutrient profile models underpinning each system. The systems discussed included the Nutri-Score label that has been implemented in France and is being adopted in Spain, Belgium and the Netherlands; the United Kingdom multiple traffic lights system; and the health logos and warning labels for high levels of sugar, sodium and saturated fat that are being introduced in Israel.

Evidence suggests that mandatory schemes are likely to be more effective. Under European Union (EU) labelling rules, however, EU Member States are unable to introduce mandatory FOP labelling, although they are allowed to designate a voluntary scheme. The effectiveness of voluntary schemes can be enhanced by maximizing uptake and ensuring consistent application.

Independent monitoring and high-quality evaluation of the impact of introducing FOP labels is crucial. This is particularly important because several countries in the European Region are the first globally to implement particular types of labels (traffic lights, Nutri-Score and the combination of warning labels plus health logo). In order to assess the impact of FOP labels, monitoring should include uptake and use of FOP labelling and the nutritional quality of foods, both with and without FOP labels.

To date, FOP labelling has mainly been introduced for pre-packaged foods in retail environments. There is interest, however, in the potential to adapt FOP systems or other simplified nutrition information for use on menus or at point-of-sale in the out-of-home sector. There is a need for further research into the use of simplified nutrition information, including current FOP label systems, in this sector.

Some key lessons emerged from the collective experience of countries in implementing FOP labelling:

- Robust scientific evidence on the impact of labels on objective consumer understanding of the nutritional quality of foods has been an important factor in helping governments fend off industry pushback. Countries, however, do not need to repeat all the existing research. There is an extensive body of research on traffic light, Nutri-Score, Keyhole and warning labels; countries can draw on these research findings and, where needed, use the methods, protocols and resources from previous studies that may be available for use.
- When conducting consumer testing, it is advisable to do comparative tests to show whether different labelling systems improve objective understanding – i.e. to see if subjects can accurately identify healthier/less healthy products. Studies that only investigate consumer preference for labelling systems and ask whether people subjectively consider that certain types of label would enable them to identify healthier items are less useful.
- Mandatory back-of-pack nutrition declarations are an essential requirement for implementation of any FOP label. Ideally, it should be possible to

- verify the FOP label on the basis of the nutrient declaration on the back of the label.
- In order to ensure the maximum effect of a voluntary scheme, it is possible to attach some conditions of use to the label. For example, the Nutri-Score label is registered as a trademark and any company wishing to display the label on one product has to display it on all products within a specified period. Another condition of use is the requirement to send data on the nutrient levels to an independent monitoring body, thus allowing some tracking of the impact on product reformulation.
- FOP labels are a powerful lever to encourage manufacturers to reformulate their products and can be used as a benchmark for new product development. Gradual reduction of nutrient thresholds in the nutrient profile models underpinning labels has successfully been used to continually drive reformulation in the longer term.
- Retailers have also used the nutrient profile models that underpin FOP label systems as a basis for internal rules on promotions, e.g. to remove foods that are high in fats, sugars and/or salt (HFSS foods) from checkout areas.
- FOP labelling initiatives tend to have broad popular support. Following delays in implementation of Nutri-Score in France, for example, a citizens' movement emerged to demonstrate support for the labelling scheme and against the lobbying activities of industry actors³.

Conclusions and further work | FOP nutrition labelling

As with other food policy measures, FOP labelling belongs as part of a package of complementary measures that mutually reinforce one another (e.g. taxes, reformulation, and education). These should include information campaigns to reinforce the impact of FOP labels.

There is potential to expand the scope of FOP labels to include other criteria, such as sustainability or corporate social responsibility. This would be likely to have great appeal for younger consumers. It is important to recognize, however, that increasing the complexity of labelling systems, or a lack of research and development work on new elements, would probably lead to delays in implementation. This is an area for further research and development work, and there could be value in WHO engaging with those already doing research or working on indices (e.g. the Plating Up Progress project of the Food Foundation and the Food Climate Research Network; the Access to Nutrition Index) to further develop some of these concepts for the future.

A young child with dark hair, wearing a light-colored long-sleeved shirt and colorful striped pants, is sitting in a metal shopping cart. The cart has a green handle. The child is looking towards the camera. The background is a brightly lit toy store aisle with shelves filled with various colorful toys, including dolls and action figures. The lighting is warm and slightly dim, creating a soft atmosphere.

4

ENDING THE INAPPROPRIATE PROMOTION OF COMMERCIAL COMPLEMENTARY FOODS

In 2016 WHO issued guidance on ending the inappropriate promotion of foods for infants and young children⁴. There is a growing body of evidence, however, which shows that many commercial foods for infants and young children are of poor nutritional quality and are being inappropriately marketed. Many products are marketed as being suitable for introduction from 4+ months. There are particular concerns that fruit and vegetable purées have high free sugar and total sugar content; many products contain added sugars or sweetening agents; and sweet

flavours predominate, even in savoury foods, with fruit masking vegetable flavours. Other areas of concern relate to the texture (limited to fit through the spout of pouches), misleading health and nutrition claims, and the emergence of snacks and confectionery products.

To support Member States in the European Region in the implementation of the 2016 guidance, WHO has conducted some development work on a proposal for a nutrient profile model for infant and young child food and drink products.

Conclusions and further work | Foods for infants and young children

This is recognized as a very important issue and the proposed nutrient profile model could be a very useful tool for Member States. Given that opposition from baby food manufacturers and retailers can be anticipated, as well as from some parents, it would be useful to underline the importance of this work in the context of children's rights.



5

USING PRICE POLICIES

A number of countries are using, or are planning to use, price policies – namely, taxes, subsidies and controls on price promotions – to promote healthy diets. The impact of such policies can be threefold: to shift consumer purchasing and consumption habits; to prompt manufacturers to reformulate their products; and to send a strong health message to consumers about the relative healthiness of taxed/subsidized products. In the long term, changing product composition may lead to changing consumer preferences (e.g. for high sweetness levels in drinks).

5.1 Implementation of taxes on sugar-sweetened beverages

Most commonly, various forms of taxes on sugar-sweetened beverages have been implemented. A number of countries have implemented tiered, or banded, taxes, which create an added incentive for companies to reformulate to reduce sugar levels in order to meet conditions for a lower level of tax. There is a tension between simplicity and sensitivity of taxes – taxes with more tiers may be more finely tuned to promote reformulation and encourage behaviour change but are more complicated to implement.

Evaluations of the various sugar-sweetened beverage taxes are underway, but early signs in several countries already point to reduced purchase/consumption of drinks with higher sugar levels and extensive reformulation (in 25–50% of products) to lower sugar levels. There are also signs that public debate and media attention have led to reduced consumption in the run up to introduction of taxes.

Some manufacturers/distributors – such as the out-of-home sector and potentially some larger multinational brands – have large margins and are able to absorb price increases due to levies or taxes. In such cases, the

Despite progress in implementing taxes on sugar-sweetened beverages, it remains a challenge to build sufficient political will for taxes, since it requires politicians to expend their political capital advocating for a tax and fending off opposition. This is why broad public support for taxes is so important. Proposals may be rejected by parliamentarians during the legislative process or repealed as a result of persistent attacks. Vigorous opposition from manufacturers of products to be taxed should be expected.

main impact of a given measure (and perhaps of the public health message that it conveys) will be a drive to reformulate products. Some other companies, by contrast, have introduced additional price changes while giving the impression that the entire increase is due to the tax.

There are challenges associated with definition of the product categories to be covered by a tax, and there are differences in the approaches adopted. Sweetened milk-based drinks, for example, are sometimes exempt from the tax, while in other cases taxes cover sweetened milk-based drinks with lower levels of calcium; in yet other cases, it has been signalled that products may be brought under the tax if there is not sufficient progress with reformulation. Similarly, there are differing approaches to drinks sweetened with non-nutritive sweeteners.

5.2 Other taxes

Examples of other health-related taxes that have been introduced or proposed in the European Region include a public health product tax, a salt tax, a saturated fat tax, and a tax on certain categories of HFSS foods (e.g. ice cream, chocolates, sweets, frozen desserts). Such taxes have been much more challenging to implement and have yet to achieve the momentum that has gathered

5.3 Subsidies

Price policies also include subsidies to encourage consumption of healthier foods. Examples of subsidies in use include free school meals, subsidized student meals, the EU school fruit, vegetables and milk scheme, and food vouchers for low-income mothers. There has been considerable interest in the idea of subsidizing fruits and vegetables, and other nutrient-rich foods such as pulses. Such subsidies are likely to

5.4 Price promotions

There is also scope for action on price promotions, which have been identified as a major driver of purchase and consumption of unhealthy foods, particularly within a highly competitive retail market. Countries are exploring a variety of different approaches to restrict such promotions, and experience to date has found

5.5 Lessons from experience

A number of lessons can be learned from countries' experience in implementing price policies.

- Strategies to counter opposition to taxes are required. Countries can work together, in collaboration with WHO, to compile evidence of successful experiences in other countries, developing a playbook to address the arguments put forward by industry and learning from one another's experience when addressing these arguments.* As part of this, better data are needed to counteract common arguments used in opposition to taxes (e.g. smuggling, impact on jobs and local economies, competition distortion), and evaluations designed to capture such data should be conducted.
- Ministries of economy/finance can be strong allies, since they tend to be supportive of taxation to raise revenue, although this will depend on the projected impact on domestic industry interests. Care should be taken to be clear that revenue

generation will depend on the extent to which a successful tax reduces purchases and that such revenue generation is not the primary aim of taxation.

behind sugar-sweetened beverage taxes. Several (though not all) efforts to introduce other types of tax have been derailed by political opposition, even when public opinion has been supportive. It is clear that introducing new types of tax is more challenging, and some sectors of industry have drawn on the experience with soft drinks to better prepare their lobbying efforts.

have strong public support and may be very valuable when used in combination with taxes. Careful research prior to introducing subsidies is required, however, to fully assess the impact on overall diets and because – given the popularity of subsidies – it is likely to be extremely difficult, politically, to remove them, even if the results are disappointing.

- Public support for health-related taxes is both crucial and achievable; it may be fostered by earmarking tax revenue for health-related purposes and/or framing issues in relation to child health (particularly childhood obesity) and child rights. In countries with a longer history of health-related taxes on foods, such measures are readily accepted, suggesting that public acceptance may get stronger over time.
- Price policies are a powerful lever for reformulation of food products:
 - countries implementing tiered sugar-sweetened beverage taxes have seen dramatic results, with reformulation to reduce sugar levels in 25–50% of taxed products;

* See, as an example, the WHO Regional Office for Europe's Tobacco Control Playbook, which collates evidence-based arguments in different thematic areas to counter and succeed against the tobacco industry (<http://www.euro.who.int/en/health-topics/disease-prevention/tobacco/policy/tobacco-control-playbook>).

- in some cases, companies have reduced sugar levels in soft drinks further than expected;

- there is some evidence of reformulation of products that are exempt from taxes (e.g. fruit nectars, milk-based drinks), possibly because manufacturers are aware (or governments have signalled) that the scope of taxes could be extended to cover their products.

- In addition to impact on demand (sales), evaluation of the impact of taxes should, where possible, include monitoring of changes in supply (product composition), to help capture

- the impact on reformulation and other changes to products. This could include monitoring use of non-nutritive sweeteners, although under current European labelling rules it would be possible to monitor more frequent use of sweeteners but not any changes in the quantities of sweeteners added. Policy-makers should be aware that much of the reformulation may take place in advance of tax measures coming into force. Evaluation could also look at whether there are changes in public perception of the healthfulness of products following the imposition of taxes.

Conclusions and further work | Price policies

The increasing momentum for implementation of sugar-sweetened beverage taxes demonstrates that it is possible to generate sufficient political will and public acceptance for fiscal measures, and there are early signs that the impact of such measures is positive. Across the European Region there remains much further scope to implement sugary drink taxes and to introduce other taxes, subsidies or policies on price promotions.

Given the variety of potential effects of fiscal measures – reducing sales, encouraging reformulation, educating consumers – it is important to carefully define which objectives are being targeted and to design the policy appropriately.

A number of areas were identified where further work could be valuable.

- Documentation of country experience and challenges in implementing fiscal and price policies for use as a resource for other countries (WHO is already working on a manual for fiscal policies).

- Exploration of the scope for reforming existing tax regimes, such as value-added tax (VAT), to realign tax levels to reflect the healthiness of food products. Challenges such as potential political opposition to VAT changes and limited margins for manoeuvre for EU Member States would need to be addressed. Academic modelling of potential healthy taxation systems could provide a useful benchmark against which existing taxation systems could be compared.

- Further investigation of the relative merits of different types of tax. Excise taxes, for example, send a clear message to consumers, while health-aligned VAT would be a more integrated approach to incentivizing dietary change.

- Research on more sophisticated taxation instruments that take a more holistic approach to foods. Nutrient profile models, for example, could be used to identify discretionary HFSS foods. In the future, there could also be potential value in broadening the scope to incorporate other criteria, such as sustainability.

- Further investigation of the potential impact of fruit and vegetable subsidies on overall diets and the most effective way to implement such subsidies.

- Further work on the role of healthy food procurement and the application of nutrition standards and price policies in public institutions.

6

TACKLING MARKETING OF FOODS TO CHILDREN

Several countries shared their experiences in restricting marketing of unhealthy foods to children. Children are exposed to marketing for HFSS foods through a variety of channels (including print, broadcast, online and social media, as well as sponsorship), and this is known to influence the amount and types of food that children eat. Concern about the potential negative impact of such marketing on children led WHO to issue, in 2010, a Set of recommendations on the marketing of foods and non-alcoholic beverages to children to reduce the impact on children of marketing of HFSS foods⁵.

A variety of different approaches have been implemented in the European Region, including regulation, co-regulation, self-regulation, voluntary codes and a combination of these approaches. A previous emphasis on broadcast media is now being extended to introduce restrictions on digital marketing and other forms of marketing and promotion.

Some countries have found that the initial restrictions implemented have not been sufficiently comprehensive and that children are still exposed to marketing for HFSS foods through other media (e.g. online, social media) or during family viewing periods. In addition, in some cases the sanctions have not been sufficiently prohibitive. As a result, some countries have reviewed and amended the initial measures or are introducing supplementary measures.

Some common challenges were identified.

- Generating and sustaining political will. Generating and sustaining the political will to implement comprehensive restrictions may be particularly difficult because the vested interests affected comprise a powerful alliance of media companies, advertising agencies and food industry interests. Policy-makers may be

concerned about the potential for restrictions to result in falling advertising revenues. There are, however, contradictory predictions about how comprehensively restricting unhealthy food marketing to children would affect advertising spend; it has been suggested, for example, that if marketing for unhealthy foods is limited to the more competitive adult market, advertising expenditure might need to grow.

- Defining foods for which marketing should be restricted. Countries have tended to take well-established nutrient profile models (e.g. the United Kingdom's Ofcom model or the WHO Regional Office for Europe's model) and adapt them to their national context. Specific adaptations are sometimes introduced in response to lobbying and media pressure.
- Definition of a child. Attempts by authorities to define a child as being under 18 years old for these purposes have often been thwarted by vigorous opposition (e.g. from media, advertising companies and food industry interests). The existence of different definitions of a child with respect to marketing restrictions and data protection policies is extremely unhelpful, as it provides a loophole for industry to continue cross-border marketing, creates delays in policy action, and makes it difficult to enforce regulation across the European Region.
- Defining audiences for which marketing should be restricted. A key challenge with the most commonly used approach to defining audiences, which is based on the proportion of children viewing, is that broadcast marketing is not restricted during family programming, to which

large numbers of children are still exposed. Proposals to implement a “watershed” (i.e. a period during which no marketing of HFSS foods is permitted because of the possibility of children viewing) have been subject to fierce opposition from vested interests in a number of countries.

Increasing importance of digital marketing. Digital marketing and other forms of marketing (e.g. sponsorship of sports events) present particular challenges.

Definition of audiences and determining child exposure to media are even more challenging in the case of digital media. The technical guidance currently being produced by some countries will be very welcome.

Monitoring of digital marketing, which is highly targeted and personalized, is extremely challenging. WHO has developed some tools to support such monitoring.

Digital marketing can be cross-border and the technology companies that own digital media are not always headquartered within a Member State’s jurisdiction.

Social media influencers are an area of concern, although there has been some recent success in enforcement in this area.

Shift from product promotion to brand promotion. Companies may shift from promoting products to promoting brands, without featuring any specific products in order to get around the restrictions. When brands are closely associated with particular products, this can effectively be cross-promotion of HFSS foods. Similarly, product packaging can itself be a form of promotion, often particularly designed to appeal

to children. Such practices are often not covered by restrictions, although it is possible to include packaging within advertising regulation, as was the case in Chile.

A number of learning points can also be drawn from countries’ experiences in relation to marketing to children.

Restrictions need to be comprehensive to prevent children from being exposed to marketing for HFSS foods: they should include all types of media (including family viewing and other content not specifically aimed at children but which reaches child audiences) and all types of promotion, and they should define a child as being under 18 years old.

Countries can benefit greatly from involving people with different areas of expertise (e.g. from technology, social media and marketing) to inform their response.

Requiring preapproval or facilitating voluntary prescreening (before adverts are disseminated) can be effective in preventing marketing from reaching children.

If efforts to introduce a watershed are initially unsuccessful, they may be more successful when evidence has been accumulated that the approach to defining audiences based on the proportion of children viewing has not limited children’s exposure.

Significant sanctions, particularly in the case of repeat offenders, are essential for restrictions to be effective.

Conclusions and further work | Marketing to children

Despite efforts to restrict marketing of unhealthy foods to children, many children continue to be exposed to such marketing. The implementation of comprehensive, effective measures is technically challenging, and opposition from coalitions of powerful interests has often succeeded in weakening such measures. However, the evidence base is getting stronger, country approaches continue to evolve, and new tools and guidance are becoming available to overcome the challenges.

There are a number of areas where further work could be valuable.

Opportunities to learn lessons from, and/or combine forces with, other areas of public health and child protection facing the same or similar challenges could be explored. Such areas include

tobacco, alcohol, online harms to children and marketing of breastmilk substitutes.

Further methods could be pursued to obtain data from advertising companies about marketing campaigns and from tech companies on which companies pay for digital marketing and who is reached by such marketing. There may be lessons from other sectors – one country, for example, has obliged advertising companies to provide data on tobacco marketing.

Common, government-approved or certified measures for age verification could be introduced, as well as a common definition of a child in the European Region (or between groups of countries within the Region).

7

CONCLUSIONS: COMMON THEMES, CONTINUING COLLABORATION AND NEXT STEPS

For all areas of food policy, a key challenge is to create sufficient will among political leaders and policy decision-makers to take action. Robust scientific evidence, expert advice and credible, quantified economic arguments are essential for decision-makers. Competing policy priorities – such as, for example, the need to keep food prices low or to protect sectors of the food industry that are big contributors to national or local economies – can present barriers to political action that prioritizes public health. An additional challenge is maintaining political will and policy momentum in the run-up to, and during, election periods and when there are changes of government.

Policy-makers face vigorous opposition from vested interests using a variety of tactics, including (among others) political lobbying at the highest level, well-resourced social and mass media campaigns, and threats to reduce or cancel investment in countries. In addition, experience shows that some vested interests may appear to engage with a process while using delaying tactics (for example, they may pursue lengthy, detailed discussion on minor aspects, promise to provide data, and then refuse to do so at the last minute). One of the effects of such opposition can be to create a regulatory chill effect, whereby countries decide not to take measures because they fear having to mount a lengthy and costly response to legal challenges by industry. Implementation of an open and transparent approach to policy processes, covering all communications, can be helpful for policy-makers.

A whole-of-government approach is critical; health ministries can find important allies in other departments, such as finance, media and regional or local government. It is important to acknowledge,

however, that putting a whole-of-government approach into practice can be very challenging.

Public support for policies is also important, and the media (including media personalities) and civil society can be valuable allies to encourage such support. Consistent media attention and civil society advocacy have proved helpful to policy-makers and parliamentarians in resisting lobbying efforts. Such support can be strengthened by framing issues around children's health and child rights, or – in relation to taxes – earmarking revenue for health purposes.

It is recognized that a comprehensive package of synergistic, complementary measures is vital. This should include education and social marketing measures to support policy interventions.

It is important to acknowledge that implementation of these measures requires resources. Governments need to pursue programmes that are appropriate to their level of resources, and there is value in exploring how countries can ensure the most effective use of resources. There is also scope for national governments to work with regional and local government, especially on issues such as public procurement, schools, regulating the out-of-home sector and local marketing restrictions; a coordinated approach, however, is absolutely vital.

There is a lot of largely untapped potential for countries to work together in strategic ways. Such cooperation, which is highly pertinent given that food products and marketing communications cross national borders, is particularly important for smaller countries. For example, policy-makers require a strong evidence base for action, and much could be achieved by sharing, drawing on and building on work done in

other countries. Countries could also work together to overcome the barriers to action by highlighting co-

benefits with other areas of policy and minimizing the trade-offs associated with any measures.

Proposals for further work

Discussions at the meeting, convened under the Chatham House Rule, allowed very frank exchanges on how to improve dietary intakes and achieve food product improvement. A focus on the detail of processes and obstacles in relation to a small number of specific topics was particularly helpful. This approach could be seen as a first step towards further collaboration. Such collaboration could usefully provide health officials with concrete solutions for challenging issues and could also bolster the credibility of policy proposals in the national context.

Meeting participants proposed some options for further collaborative work.

- Further meetings of the small group, as a first movers reference group, could be organized by the WHO Regional Office for Europe, to brainstorm, exchange experience and develop concrete actions on particularly challenging issues.
- A WHO European Region action network on a specific theme, such as sugar reduction, could be established. Such a network would need to be proposed and led by a Member State, with support from the WHO Regional Office. Such an action network would need to collaborate with existing WHO action networks and take care to avoid any duplication of their work. * The conclusions of the first movers group would feed into the organization of such an action network.
- A preliminary longlist of issues was identified on which countries could work collaboratively, through the mechanism of the proposed action network and with support from WHO, in order to develop concrete actions:
 - establishing best practice and acceptable minimum standards for monitoring;
 - negotiating access to data for monitoring (food composition, sales volumes, marketing);
 - benchmarking across countries and development of indices/collaboration to improve existing indices;
 - identifying solutions to hold the out-of-home food sector to account;
 - developing case studies on winning the media debate;

- sharing lessons on how to build public support/engage citizen support;
- defining best practice on transparency and conflict of interest;
- building legal capacity in the European Region to support Member States (particularly through training lawyers to draft effective legislation and provide legal support to officials throughout the process);
- identifying how to anticipate and effectively respond to legal challenges;
- illustrating effective ways to frame policies and use policy language/terminology;
- discussing and defining important academic questions for further research;
- mapping networks of stakeholders in countries (using network theory) to identify areas that need strengthening and identifying existing or required tools;
- conducting further work on how to define healthy and unhealthy foods for different policy purposes.

* A global WHO action network on nutrition labelling already exists, while in the European Region there are action networks on salt reduction and reducing marketing pressure on children.

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The WHO Regional Office for Europe

The World Health Organization (WHO) is a specialized agency of the United Nations created in 1948 with the primary responsibility for international health matters and public health. The WHO Regional Office for Europe is one of six regional offices throughout the world, each with its own programme geared to the particular health conditions of the countries it serves.

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